

**“Let’s talk supportive housing”: a critical discourse  
analysis of responses to homelessness in Maple  
Ridge, BC**

**by  
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## **Abstract**

The Royal Crescent and Garibaldi Ridge supportive housing projects in Maple Ridge, BC generated significant opposition from local residents, and conflict between provincial government actors, people experiencing homelessness, and housed Maple Ridge residents. Through an adapted version of Critical Discourse Analysis and informant interviews I identified how provincial government actors and opponents to supportive housing framed the issue of homelessness and poverty in Maple Ridge. My study found that provincial government actors both challenged and reproduced stigma toward people experiencing homelessness, maintaining power inequities between people experiencing homelessness, housed residents of Maple Ridge, and provincial government actors. My findings identified three prominent points of tension between provincial government actor and opponent framing: (1) safety and security; (2) support services and treatment, and (3) social control and reform. These points of tension demonstrate the complexities in discursive and policy responses to homelessness, and how stigma can become normalized in these responses.

**Keywords:** supportive housing; housing first; critical discourse analysis; stigma, homelessness; poverty

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## List of Acronyms

BC	British Columbia
CDA	Critical Discourse Analysis
MLA	Member of the Legislative Assembly
NDP	New Democratic Party

# Chapter 1.

## Introduction

On October 18th, 2018, the controversial Royal Crescent supportive housing project opened in Maple Ridge, British Columbia. The project was the first of two supportive housing projects built between 2017 and 2019 to house people experiencing homelessness in Maple Ridge. The changing socio-spatial distribution of poverty in Metro Vancouver has seen homelessness become an increasing concern in suburban municipalities like Maple Ridge. Between 2014 and 2020 the Metro Vancouver Homeless Count found a 58% increase in homelessness in municipalities outside the City of Vancouver (B.C. Non-Profit Housing Association & M.Thomson Consulting, 2017; B.C. Non-Profit Housing Association, 2020). In the Maple Ridge – Pitt Meadows region homelessness increased 36% between 2014 and 2020 (B.C. Non-Profit Housing Association & M.Thomson Consulting, 2017; B.C. Non-Profit Housing Association, 2020). This increase in suburban homelessness has frequently manifested in the form of tent cities, which has made poverty and homelessness more visible in the communities in which they arise. This has often led to conflict between housed and unhoused residents, local businesses, and different levels of government. The City of Maple Ridge has seen several different tent cities arise in recent years, but the most prominent was Anita Place, named in honour of Anita Hauck, a woman experiencing homelessness in Maple Ridge who died in 2015 (Brend, 2017). Anita Place formed after the only low barrier shelter in Maple Ridge closed when funding was cut off in May 2017 (Johnston, 2017). Anita Place then became not only housing of last resort, but also what many of its residents perceived as a space of safety, solidarity, and community for displaced residents of the shelter and others experiencing homelessness in Maple Ridge (Bernhardt, 2018) as well as a protest to draw attention to broader inaction on affordable housing in British Columbia (Brend, 2017).

In response to the Anita Place tent city and a province-wide housing crisis, the newly formed BC New Democratic Party (NDP) provincial government put forward proposals for two new supportive housing projects in Maple Ridge. Supportive housing is a form of low-income housing that falls under the housing first housing model and policy framework. Housing first is both a specific housing policy as well as an overarching

approach to addressing homelessness, which at its core believes that stable housing is a necessary precondition to improving other health and social conditions. Supportive housing in BC is communicated by provincial government actors as a housing first program and contains many of key housing first characteristics: there are no restrictions on substance use by residents; it contains a broad range of services including mental health, addictions, counselling, employment, and finance skills training, and has an eligibility requirement of being at-risk or experiencing homelessness.

Supportive housing gained prominence in BC in 2017. While supportive housing was built in BC prior to this time, there was a significant increase in funding and construction through the BC NDP government's Rapid Response to Homelessness Program, which responded to the increased need for immediate housing for the growing number of people at risk of or experiencing homelessness in communities across BC (BC Housing, 2017a). The program provided \$291 million to build over 2,000 supportive housing units in communities across BC (BC Housing, 2017a). Supportive housing received additional funding through the Building BC: Supportive Housing Fund in 2018 (BC Housing, 2018a). This housing has typically been deployed in partnership with local governments, whereby the provincial government has provided the funding and management through BC Housing and the municipality has provided the land (BC Housing, 2017a). While the Government of Canada is often involved in housing first programs, they were not a partner in these supportive housing projects. The current supportive housing program has also been referred to as temporary modular housing, since many supportive housing buildings have been built using a modular container design which makes it cheaper and quicker to construct. This housing is referred to as "temporary" because the land leased by municipalities is typically only for a few years (BC Housing, 2017a).

Despite the urgent need to address emerging homelessness in the community, supportive housing proposals were met with significant opposition from Maple Ridge residents and some elected officials at the municipal level. While low-income housing projects often face questions and concerns from the public, in this case opposition was particularly hostile. The level of opposition in Maple Ridge was unique and quite different from other communities in Metro Vancouver, according to Jason Payne who oversees social housing for Fraser Valley Coast Mental Health (Li & Winter, 2019). This included multiple large protests at the proposed projects sites, and physical and verbal abuse

toward residents of the Anita Place tent city (Corbett, 2019; Li & Winter, 2019). The public discourse was, in particular, very toxic. In April 2019, a group of housing organizations, the BC Non-Profit Housing Association, LandlordBC, the Homelessness Services Association of BC and the Urban Development Institute, signed an open letter of support for new supportive housing in Maple Ridge calling out “inflammatory and discriminatory” language that “contributes to an ongoing, negative stigma of people experiencing homelessness” (Little, 2019, para.3). Despite this significant opposition, the provincial government approved and built two supportive housing projects, the Royal Crescent and Garibaldi Ridge projects in 2018 and 2019, funded through the Rapid Response to Homelessness Program and Building BC: Supportive Housing Fund, respectively.

This research analyzes how provincial government actors responded to opponents of supportive housing in order to justify approving controversial projects, and whether their framing of the issue challenged or reproduced stigma toward people experiencing homelessness, and the associated power inequities between people experiencing homelessness, supportive housing opponents, and provincial government actors. Stigma, conceptualized by Link and Phelan (2001) as occurring when human difference is labeled and stereotyped and the labeled group is constructed as existing outside societal norms, leading to status loss and exclusion, is best understood as a symptom of unequal power relations (Belcher & DeForge, 2012; Jacobs & Flanagan, 2013; Link & Phelan, 2001). In the Maple Ridge case, there were considerable power differences between people experiencing homelessness, housed community members, and provincial government actors. In this project, I take a social constructivist approach. I argue that opposition to supportive housing and the response of provincial government actors were based on their conceptualization of poverty and homelessness. Jacobs and Flanagan (2013) maintain that social constructions associated with certain groups of people have become so normalized that they may not be perceived as problematic or harmful. Thus, I am conducting this research through the lens of power inequities because even though provincial government actors sought to increase support for new housing projects, how it was done may still have contributed to stigma towards people experiencing homelessness and maintained power inequities.

This study is necessary because as poverty and homelessness continue to increase within suburban communities like Maple Ridge, opposition may continue to be

a barrier to advancing solutions if people experiencing homelessness remain stigmatized. As homelessness is still a relatively new, emerging, and significant issue in communities like Maple Ridge, identifying and reframing opposition to new housing and the associated stigma early on is important before these perceptions are too deeply ingrained in public discourse. Further, since the supportive housing model discussed in this research continues to be a prominent solution to homelessness in BC, it is important to investigate how the framing of this model may inadvertently perpetuate and normalize stigma and influence future housing and social policies. Finally, much of the academic literature on homelessness in Canada has focused on large urban centres, and in Metro Vancouver, Vancouver's Downtown Eastside. Thus, this study contributes to the much-needed research on emerging homelessness and poverty in suburban communities (Walmsley & Kading, 2018).

## 1.1. Research context

### 1.1.1. The City of Maple Ridge

Maple Ridge is a suburban municipality located on the unceded and traditional territories of the ḱíçəy̓ (Katzie) and ḱʷɑ:ḱʷəḱ (Kwantlen) Nations. in the northeastern corner of the Metro Vancouver Regional District, approximately 45 kilometers east of the City of Vancouver (Figure 1).

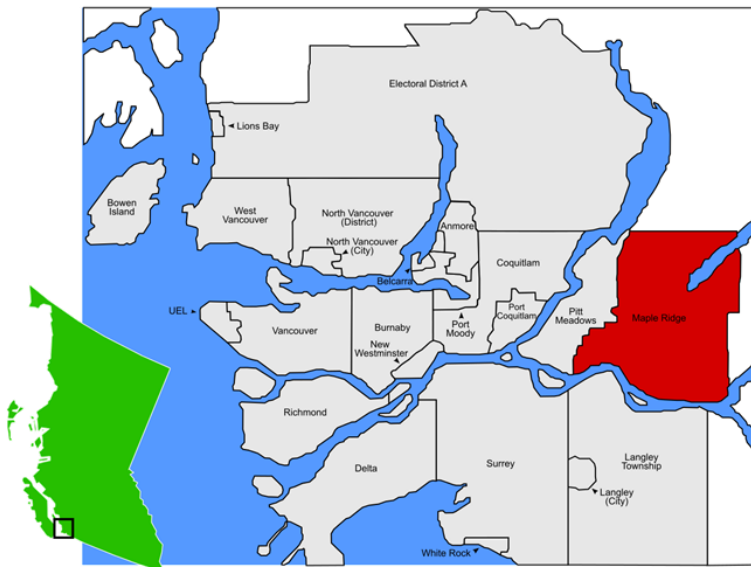


Figure 1: Map of Maple Ridge within the Metro Vancouver Regional District (Source: Wikipedia, 2023)

Present day Maple Ridge is working- and middle-class community where the median individual income in 2021 was \$44,800 (Statistics Canada, 2023). In 2021, the most common occupations for Maple Ridge residents were in sales and service (23.5%) and trades (23.2%) (Statistics Canada, 2023). While Maple Ridge has historically been a semi-rural community, it has been rapidly growing in recent years with a 2021 population of 90,990 residents, constituting a 10.6% increase since 2016 (Statistics Canada, 2023). This is greater than BC's (7.6%) and Vancouver's (4.9%) population growth during the same period (Statistics Canada, 2023).

### **1.1.2. The rise in suburban homelessness**

Between 2014 and 2020 the Metro Vancouver Homeless Count found a 58% increase in homelessness in municipalities outside the City of Vancouver (B.C. Non-Profit Housing Association & M.Thomson Consulting, 2017; B.C. Non-Profit Housing Association, 2020). Homelessness is clearly no longer just a big city, or city of Vancouver problem, and has become scattered throughout many suburban and rural municipalities in Metro Vancouver (Metro Vancouver Housing Corporation, 2017). In the face of this emerging issue smaller cities find themselves with several unique barriers to adequately addressing the issue (BC Housing, 2017b; Walmsley & Kading, 2018). With limited budgets and less options for generating revenue, small municipalities have been left with difficult choices on what to prioritize their resources (BC Housing, 2017b). Smaller municipalities may also lack institutional knowledge and capacity on housing and social policy (BC Housing, 2017b).

Suburban homelessness and poverty are a result of a confluence of forces including deindustrialization, neoliberalism, and gentrification (Ley & Lynch, 2012; Walmsley & Kading, 2018). Until the mid-20th century the dominant model of Canadian cities was characterized by a distinct structure of a working class and industrial core surrounded by middle class suburban communities (Ley, 2006). However, during the late 20<sup>th</sup> century, this dominant pattern began to change as the cities began to deindustrialize and new forms of employment in white collar and service industry replaced industry (Ley & Lynch, 2012). In Vancouver, this restructuring of employment and the residential gentrification of formerly industrial sites in the city core slowly began the displacement of lower income families and workers from downtown Vancouver further east and ultimately into the suburbs.

Homelessness and poverty in Metro Vancouver has been further accentuated by local and global neoliberal governing and restructuring beginning in the 1980's (Harvey, 2007; Walmsley & Kading, 2018). Prior to the 1980's the federal government funded most of the new social housing in the country, however, in 1993 they eliminated this funding and downloaded the responsibility to provinces and municipalities (Suttor, 2016). In 2001, the centre-right BC Liberal party was elected in BC and continued the global trend of neoliberal governance and introduced significant cuts to government spending and social services and froze the minimum wage between 2001 to 2011 (Walmsley & Kading, 2018).

### **1.1.3. Political context**

This research is situated in and influenced by the provincial and municipal political contexts during the study period. In 2017, after 16 years of governing by the centre-right BC Liberal party, the centre-left BC New Democratic Party (NDP) won a minority government supported by 3 Green Party MLAs. The two Maple Ridge electoral districts were among the tightest races in the election, with the BC NDP winning both by small margins. These districts are known as “swing” seats, meaning they have historically changed back and forth between the BC NDP and the BC Liberals at the provincial level, and Conservative and Liberal parties at the federal level. After years of underinvestment in low-income housing programs from the provincial and federal governments, the new provincial government inherited a province-wide housing crisis including increasing levels of homelessness in Maple Ridge. This placed the new minority provincial government in a challenging political situation. Housing issues were arguably the most prominent issue of the 2017 election and the BC NDP in particular ran a campaign focused on housing affordability. At the same time, there was pressure to appease local opposition to supportive housing in the two Maple Ridge ridings the BC NDP required to form and remain in government.

The challenges in addressing homelessness in Maple Ridge were exacerbated by changes in the political leadership of British Columbia and the City of Maple Ridge in 2017 and 2018, respectively. Former mayor of Maple Ridge Nicole Read was elected in 2014 on a platform to end homelessness in the city in 2 years and pressure the then-BC Liberal government to help fund solutions (Martins, 2014). During her tenure she advocated to the province for new housing and co-chaired the Metro Vancouver



Regional Homelessness Task Force with former Vancouver mayor Gregor Robertson (Melnychuk, 2016). Her advocacy was controversial in the community and she faced significant online harassment and threats related to her support for people experiencing homelessness, requiring her to temporarily cancel all public appearances while the RCMP investigated threats to her personal safety (Nair, 2017). There were also tensions between her and the then-BC Liberal government over building new shelters and housing, both claiming the other was not co-operating to address the problem (Corbett, 2017). Ultimately, two shelters proposed by the former BC Liberal government in Maple Ridge were cancelled by the province, which cited significant public opposition as the reason (Larsen 2016; Johnston, 2017).

When the BC NDP government formed government in 2017, the City of Maple Ridge and the province were more aligned in their goals for addressing homelessness in the city. In 2018, the province purchased the land for the Royal Crescent supportive housing project which did not require local government approval through a re-zoning process due to the temporary nature of the housing. Mayor Read supported the purchase, stating that “as a city...we wanted the province to step up, take responsibility and tell us where they would like to build something” (Britten, 2018a, para.10). Around the same time, the province purchased another parcel of land on Burnett Street for permanent supportive housing, which was required to go through a municipal re-zoning process, of which Mayor Read was initially supportive (Britten, 2018b). Both purchases resulted in very vocal opposition from some Maple Ridge residents, particularly around the re-zoning for the proposed Burnett Street project (Burnett St. modular housing application to Maple Ridge council, 2018). In May 2018, Maple Ridge council voted against the re-zoning, including an opposing vote from Mayor Read citing concerns around the health outcomes for residents (Hall, 2018). Mayor Read did not run for re-election in October 2018, and supportive housing opponents began organizing not only against new housing proposals, but also in support of a new mayoral candidate, Mike Morden, and city council candidates who opposed supportive housing. In advance of the October 2018 municipal election, Mike Morden campaigned against supportive housing and was elected as mayor in October 2018. This change in municipal political leadership created new tensions and challenges for provincial government actors in their efforts to gain support for and build new supportive housing. In March 2019, after unsuccessful conversations around building new supportive housing with the City of Maple Ridge, the

province moved ahead with supportive housing at the Burnett Street site, despite lack of municipal support (Little & Boynton, 2019). The supportive housing project opened and began housing residents in October 2019.

## **1.2. Research Question**

Given the stigmatizing discourse surrounding supportive housing projects in Maple Ridge and the emergence of homelessness in suburban communities across British Columbia, the processes and consequences of responding to opposition deserves further study.

Therefore, my research question is: how did provincial government actors respond to opposition to supportive housing in Maple Ridge between 2017 and 2019, and how did this response challenge or reproduce stigma toward people experiencing homelessness and its associated power inequities?

To contextualize the central research question, I will also ask: how did supportive housing opponents in Maple Ridge frame their position?

## **Chapter 2. Conceptual Framework**

The three bodies of literature that I have chosen to frame my research question are: housing first as a solution to homelessness, policy framing, and social constructivism, stigma, and power. Discussing the literature on housing first as a solution to homelessness will provide a description of the policy, its main characteristics, and context for the history of its development. This is important because I argue that the nature of housing first policy makes it malleable to strategic framing. The literature on policy framing functions to outline how the way policies and issues are talked about, or framed, matters, and can influence public opinion and policy outcomes. This leads to my third body of literature, social constructivism, stigma, and power. Social constructivist theory is at the heart of this research and ties together the other bodies of research. Social constructivism argues that the symbolic world affects the material world (Gusfield, 1996). In other words, local opposition to housing first is not self-evident, and did not materialize out of nowhere, but is rather a product of certain ideas, values, and meanings that have become associated with housing first and homelessness. This is important because once certain social constructions of a group of people or policy become normalized in public discourse, they can be challenging to change. This can be a barrier to advancing policies like housing first, as well as reinforcing power inequities and stigma toward people experiencing homelessness.

### **2.1. Housing first as a solution to homelessness**

Over the last two decades, the housing first model has become a prominent solution to homelessness and mental health concerns in Canada and many countries around the world (Goering et al. 2011; Worton et al. 2018). The model is based on the principle that stable, supportive housing is a necessary precondition for improved mental health and quality of life for people experiencing homelessness (Infrastructure Canada, 2022a). The target population for housing first is usually ‘chronically homeless’ individuals, defined by Infrastructure Canada as people experiencing homelessness who “have a total of at least 6 months of homelessness over the past year” or “have recurrent experiences of homelessness over the past 3 years, with a cumulative duration of at least 18 months (546 days)” (Infrastructure Canada, 2022b, definitions section). The housing first model is typically considered to be a more compassionate solution to

homelessness in contrast with the ‘treatment first’ model, which typically mandates client sobriety and being ‘treated’ for mental health and addiction issues prior to being housed. While many scholars have emphasized the progressive elements of the housing first model, others argue that it also shares many values of neoliberal urban renewal programs and contains similar assumptions as treatment first programs (Baker & Evans, 2016; Hennigan, 2017; Hennigan & Speer, 2019; Stanhope & Dunn, 2011). For example, Baker and Evans (2016) discuss the “ambivalent politics” of housing first, arguing that the program melds various aspects of progressive and neoliberal ideas “around which diverse actors convene to advance their interests and agendas” (p. 28). Hennigan (2017) argues that while housing first programs are based on the important ideal that housing is a human right, it is a program with “serious limits” and contradictions. On the one hand, the low-barrier, harm reduction approach of housing first is considered a welcome shift from the punitive goals of the treatment first model (Baker & Evans, 2016; Hennigan, 2017). On the other hand, housing first projects typically have a narrow eligibility criterion of ‘chronic homelessness’ that defines its causes in terms of individual attributes like mental health and addictions which situates its politics closer to neoliberalism (Baker & Evans, 2016; Hennigan, 2017). The confluence of different political principles makes housing first programs adaptable for use by governments and organizations of varying ideologies. Therefore, I argue that the policy can be particularly receptive to strategic framing by social actors, who are able to emphasize certain aspects over another to suit different objectives and contexts.

The “ambivalent politics” (Baker & Evans, 2016) of housing first is well demonstrated by how it was introduced in Canada. In 2008, under the leadership of Conservative Prime Minister Stephen Harper, the government of Canada launched the “At Home/Chez Soi” demonstration project, the largest mental health service trial in Canada (Macnaughton et al., 2013). Despite the neoliberal politics and moral conservatism of the federal government, Health Canada funded a nation-wide project studying the mental health and lifestyle outcomes of housing first vs. treatment first clients across five Canadian cities (Goering et al., 2011). The initiative was conceived in the context of the upcoming 2010 Winter Olympics in Vancouver and a growing consensus on the need to address homelessness (Macnaughton et al., 2013). To make the initiative compatible with the conservative political philosophy of the federal government, the project was managed by a non-governmental, third-party organization,

the Mental Health Commission of Canada, and framed in terms of the association between homelessness and mental health rather than poverty or structural issues (Macnaughton et al., 2013). This placed the emphasis of At Home/Chez Soi on individual pathologies instead of structural pathways into homelessness and created the association between people experiencing homelessness and mental illness. As Macnaughton et al. (2013) discuss, this framing was very intentional based on the political ideology of the federal government at the time. By framing the causes of homelessness on individual mental health, it drew attention away from institutional and collective solutions that would have required more government intervention and funding.

The housing first model has been critiqued as reinforcing the association between homelessness and mental illness and oversimplifying the causes and solutions to homelessness (Katz et al., 2017; Stanhope & Dunn, 2011). Katz et al. (2017) discuss how discourses related to housing first programs may unintentionally compromise efforts to reduce homelessness by focusing on a narrow selection of ‘chronically homeless’ people, pathologizing the causes of homelessness, and implying that it is a “silver bullet solution” (p. 141) disconnected from other social services and broader socio-political conditions. However, I argue these representations of housing first programs and their participants are not inevitable. Alternatively, social actors can frame housing first in a way that does not undermine long term efforts to reduce homelessness and challenges stigmatizing depictions of people experiencing homelessness (Nguyen et al., 2013).

## **2.2. Policy Framing**

How a policy is communicated, or framed, has the power to influence the audience’s perception of an issue. Framing can be defined in several different ways. For this research, I will be using Entman’s definition: “to frame or framing refers to the process of selecting and highlighting some aspects of perceived reality and enhancing the salience of an interpretation and evaluation of that reality” (Entman, 1993, p. 52). Entman further presents a practical and concise outline for understanding what framing does; according to him, frames define problems, make moral judgements, and suggest solutions (Entman, 1993). By highlighting or omitting certain aspects of an issue, framing filters what information the audience receives and can influence their opinion (Chong & Druckman, 2007; Entman, 1993; Gross, 2008). Framing research argues that the public

is not usually well-informed on social and political issues, and therefore can be deeply influenced by strategic framing by decision makers and others in a position of power (Chong & Druckman, 2007; Entman, 1993; Gross, 2008). Strategic framing can be used to increase support for a particular policy and other political objectives such as re-election (Arapoglou, 2004; Goetz, 2008; White & Nandedkar, 2021). Policy framing is often applied to studies about housing and poverty. In particular, it has been used to understand the justification for policy interventions that are controversial or lack public support. Arapoglou (2004) studied the discourse of policy texts and interviews to reveal how the municipal government of Athens, Greece used philanthropic and managerial framing to justify increased spending on services for people experiencing homelessness. Goetz (2008) found that using the term 'lifecycle housing' rather than 'affordable housing' significantly increased support for controversial social housing projects in suburban Minneapolis. These findings were presumed to be based on greater public acceptance of age-based financial needs (i.e. seniors or young families with lower incomes) than financial need based on poverty more broadly (Goetz, 2008). Klodawsky et al. (2002) studied media reporting on homelessness in *The Ottawa Citizen* to investigate how public support for anti-homeless by-laws may have been shaped, finding that the media positioned people experiencing homelessness in simplistic terms that ignored the complexities of their circumstances and as being difficult to help. As such, the influence of strategic policy framing on public opinion is important for decision-makers and housing advocates who wish to increase support for supportive housing or change the narrative surrounding it.

My research is primarily focused on the use of counterframing by provincial government actors. Counterframing is an attempt to influence public opinion by framing an issue in a different direction than the original frame. Chong and Druckman (2013) outline the key characteristics of counterframes: they are introduced after an initial frame, they advocate for a different position than the initial frame, and there is motivation to counterframe due to the success of the initial frame at influencing opinion. Most relevant to this research is the third characteristic. There are several reasons why provincial government actors had an incentive to counterframe the public narrative (the initial frame) surrounding supportive housing and homelessness in Maple Ridge. Elected officials are motivated by several factors when making policy decisions. Schneider and Ingram (1993) argue that the most important considerations are: what will help win re-

election; and what will be the most effective means to address an issue. In this research, provincial government actors appeared to have caught between these two goals when they tried to counterframe opposition to justify approving controversial supportive housing projects.

While counterframing can be used to intentionally change the narrative surrounding an issue or increase support for a particular policy, it can also influence stigma toward certain groups of people and policies that benefit them (Bandara et al., 2020; Nguyen et al., 2013; Vyncke & van Gorp, 2018). The influence of framing on stigmatization may be intentional or not. Fairclough (2001) asserts that discourse can legitimize stigma and the associated power relations without being aware of it. This is because some representations of groups of people have become so normalized in public discourse that they may not be perceived as harmful (Fairclough, 2001; Jacobs & Flanagan, 2013). The stigmatization of vulnerable groups can also be perpetuated in discourse because it may not be viewed by society as problematic (Jacobs & Flanagan, 2013). Counterframing with the goal of de-stigmatization may also have adverse effects. For example, studies have found that sympathetic framing, such as stories about people experiencing poverty, can have the unintended consequence of shifting the blame and responsibility of poverty onto the individual (Gross, 2008; Iyengar, 1990). Vyncke & van Gorp (2018) found that counterframes that were unpersuasive or did not resonate with the public unintentionally increased stigma toward people with mental illness. However, if counterframing is thoughtful and strategic, it can reduce stigma and increase support for policies to address social problems. For example, Bandara et al. (2020) found that 'social justice' and 'impact on children' frames reduced stigma toward people with prior drug convictions and increased public support for new policies to assist them. In this case study, I am asking how provincial government actors counter-framed opposition to supportive housing and whether it challenged or reproduced stigma toward people experiencing homelessness and the associated power inequities.

### **2.3. Social constructivism, stigma, and power**

Social constructivist studies have been used in social science research to understand how and why social issues are defined as they are (Gusfield, 1996). This approach is at the foundation of my inquiry on how provincial government actors responded to opposition to supportive housing. Social constructivists would argue that

opposition to supportive housing is based on the social and cultural meaning that opponents associate with homelessness and poverty, and not necessarily reality (Van Gorp, 2007). Social constructions can have a significant impact on policy for marginalized people. Schneider and Ingram (1993) argue that there are strong pressures for decision-makers to provide policies that are beneficial to powerful, positively constructed constituents and to devise punitive, punishment-oriented policy for negatively constructed groups. They also discuss how decision-makers anticipate the reaction of more powerful, positively constructed constituents about whether the “target groups”, or recipients of a policy, should be the beneficiary of a particular policy proposal and their relative power (Schneider & Ingram, 1993).

Stigma associated with people experiencing homelessness is based on social constructions because attributes like drug use or mental illness only incite fear because society has created that association (Major & O'Brien, 2005; Vyncke & van Gorp, 2018). Link and Phelan (2001) conceptualize stigma as occurring when human difference is labeled and stereotyped and the labeled group is constructed as existing outside societal norms, leading to status loss and exclusion. Stigma can manifest in different ways. My research is focused on public stigma, which refers to negative attitudes and beliefs held by the general public (Belcher & DeForge, 2012; Corrigan & Watson, 2002; Vyncke & van Gorp, 2018) and structural stigma, which is stigma embedded in public policy, law, and institutions (Sukhera et al., 2022). The focus on these two types of stigma is not meant to dismiss the existence and experience of self-stigma which is internalized beliefs about oneself held by a person who experiences public and structural stigma (Corrigan & Watson, 2002). An investigation into self-stigma would have been beyond the scope of this research project and may have been ethically challenging to conduct.

Stigma is best understood in the context of and as a symptom of unequal power relations (Belcher & DeForge, 2012; Jacobs & Flanagan, 2013; Link & Phelan, 2001). The impact of stigma depends on the power of the group stigma is applied to relative to the dominant culture (Jacobs & Flanagan, 2013). A social constructivist lens helps understand how and why different groups are considered to have more power over another. In *Project Inclusion*, a report by Pivot Legal Society about stigma related to poverty and homelessness, Bennett and Larkin (2018) provides a concise example of how differences in power determine if stigma is occurring:



If during a city council meeting a property developer who wants to redevelop an old building is personally named as part of an anti-gentrification campaign and targeted with a label they find unfair or hurtful based on their class position, it is unlikely that stigma would be at play. If, at that same meeting, residents of the low-income housing that would be torn down to make way for the project are also targeted with labels rooted in stereotypes linked to their socio-economic status, there may well be stigma at work. (p. 123)

In this case study, I am interested in the intersection between social constructions, stigma, and the power inequities between people experiencing homelessness, supportive housing opponents and provincial government actors.

Due to the focus of the housing first model on housing the 'chronically homeless' and the low-barrier approach, identifying how this 'target population' is constructed and their status in Maple Ridge is important in understanding how provincial government actors responded to supportive housing opponents. As previously mentioned, the emphasis of housing first on 'chronic homelessness' has faced critique. Targeted resident policies shape the social construction of the image of housing first residents and contribute to stigmatizing residents and people experiencing homelessness in general by creating an association between homelessness and individual characteristics like drug use and mental illness. This social construction of homelessness may help explain why there was such strong local opposition to housing first ideas in Maple Ridge (Nguyen et al., 2013). Through analyzing how provincial government actors framed supportive housing and homelessness I seek to uncover if provincial government actors challenged or reproduced stigma toward people experiencing homelessness and the associated power inequities. Schneider and Ingram (1993) would argue that there would have been intense pressure to appease the interests of the more powerful constituents who opposed supportive housing projects. At the same time, there was a critical need for supportive housing in Maple Ridge, and a broader mandate to address homelessness across the province. This tension may limit the amount of social change decision-makers are willing to make based on the need to compromise between different interest groups in the context of social stigma (Shonfield, 1963 as cited in Belcher and DeForge, 2012).

## **Chapter 3. Methodology**

This research employed a mixed-method approach which included data collection through an adapted version of Critical Discourse Analysis (CDA) and semi-structured interviews with key informants. The core data to answer my research question was collected from provincial government actor communication and policy documents related to the two supportive housing projects that were built in Maple Ridge during the study period: the Royal Crescent and Garibaldi Ridge projects, completed in October 2018 and October 2019, respectively. CDA was complemented by 4 key informant interviews to enrich the core data by confirming and building upon themes identified through CDA and provided additional context and background to the case study. Both the CDA and interview data were used to understand how provincial government actors responded to opposition to supportive housing and how it challenged or reproduced stigma toward people experiencing homelessness and the associated power inequities.

How opponents of supportive housing framed their position was important context to under the response of provincial government actors. Thus, while provincial government actor documents provided the primary data to answer my research question, I began my data collection by identifying the dominant opponent narrative through CDA.

### **3.1. Background on Critical Discourse Analysis**

Provincial government actor and supportive housing opponent data were collected and analyzed through an adapted version of CDA. This framework is used to understand how language is used to legitimize policy action, how it maintains or challenges existing power structures, and whose interests it serves (Jacobs, 2006). CDA can also provide an understanding of how the identities of different groups of people are socially constructed and the potential avenues to change these social constructions and status quo power structures (Marston, 2002). CDA was first developed by Fairclough (1992, 1995) and has become a prominent method in urban public policy research to investigate policy discourse and power (Jacobs, 2006). This includes several studies on homelessness and housing (Arapoglou, 2004; Klodawsky et al., 2002; Kuskoff, 2018; White & Nandedkar, 2021). Arapoglou (2004) used CDA of policy texts and interviews to

reveal how the municipal government of Athens, Greece used philanthropic and managerial framing to justify increased spending on services for people experiencing homelessness. White and Nandedkar (2019) analyzed transcripts of Hansard speeches in New Zealand Parliament to understand the emergence and use of 'housing crisis' framing by Members of Parliament, how it favoured different interest groups, and the policy outcomes associated with 'crisis' framing.

There are several different approaches to CDA and the framework is adaptable to different research projects and objectives. For this research I adapted Fairclough's (1992, 1995) CDA framework which consists of three levels of analysis textual analysis, contextual analysis, and interpretive analysis. (Janks, 1997) argues that these three levels of analysis are interrelated and have "multiple points of analytic entry" (p. 329), meaning they do not need to occur in sequential order. For the sake of clarity, I have described these levels of analysis as distinct categories in the following section, however in practice I conducted this analysis in an ongoing, iterative process, rather than a linear one.

## **3.2. Data Collection and Analysis**

### **3.2.1. Textual analysis**

Textual analysis refers to micro-level study of vocabulary, lexicon, and style (Fairclough, 1992, 1995; Jacobs, 2006; Ruiz, 2009). This level of analysis considers discourse as an object with the goal of characterizing or describing the discourse (Ruiz, 2009). It also provides more empirical and objective evidence that complements the more subjective contextual and interpretive levels of analysis. Textual analysis can be done in different ways, depending on the goals of the research. In this research, textual analysis looked at the use of attributes and labels used to describe and form the identity of supportive housing and people experiencing homelessness. Analysing attributes and labels aligns with the framework of social constructivism and stigma which is at the foundation of this research. As Link and Phelan (2001) outline, stigma occurs when human difference is distinguished, labelled, and connected with stereotypes or undesirable attributes. Based on this conceptualization, attributes are linked to labels which socially construct the identity and stereotypes of the labelled person. For example, Goetz (2008) found that using the term 'lifecycle housing' rather than 'affordable

housing' significantly increased support for social housing projects in suburban Minneapolis. This reframing had the effect of increasing public support for social housing and reducing the stigma associated with the term 'affordable' (Goetz, 2008). Specific words can also label people in a way that the label becomes integral to a person's identity and is stigmatizing based on the meaning attached to it (Belcher & DeForge, 2012; Bennett & Larkin, 2018). For example, people experiencing homelessness are often referred to by the label "homeless" which is dehumanizing and connected with other characteristics like being dangerous or unproductive (Takahashi, 1997).

Attributes and labels were first coded in NVivo as broadly falling into either category. Attributes were identified through the following definition: "a quality, character, or characteristic ascribed to someone or something." Labels were identified as terms that are used to separate people into a distinct category from mainstream society, and that become central to their identity (Bennett & Larkin, 2018). Next, I inductively created sub-codes within these two categories (attributes or labels), refining the sub-codes as needed. For example, "drug related" and "the homeless" were identified as sub-codes under the label category. I applied this same coding process to sources from both supportive housing opponents and provincial government actors. Finally, I looked at the relative difference in quantity of attributes and labels used by supportive housing opponents and provincial government actors, as well as any differences in the use of attributes and labels between supportive housing and people experiencing homelessness. For example, I found that supportive housing opponents used a great quantity of labels for people experiencing homelessness than provincial government actors.

### **3.2.2. Frame Analysis**

Fairclough (1992, 1995) outlines the second level of CDA as contextual analysis, which is a meso-level of analysis of how texts are framed and the context in which statements are made and feed into other debates (Fairclough 1992, 1995; Jacobs, 2006). Contextual analysis was the central component of my research and can be done in different ways depending on the goals of the research. In this research contextual analysis was done in two ways: frame analysis and intertextual analysis. Frame analysis, sometimes referred to as conversation analysis, looks at discourse as a process of negotiating meaning (Ruiz, 2009). Intertextual analysis is described by Fairclough (1995,

as cited in Ruiz, 2009, p. 14) as “seeking the presence of features from other discourses in the discourse to be analyzed” and Foucault (1973, as cited in Ruiz, 2009, p. 14) as “the meaning of discourse that emerges in reference to other discourses with which it engages in dialogue, be it in an explicit or implicit manner.” This research is aligned with these understandings and takes the position that meaning is derived from the similarities and differences between opponent and provincial government actor discourses, and that this holds significant consequences for how stigma and social constructions of homelessness and poverty are maintained and challenged.

For my research, I structured frame analysis based on Gowan's (2010) summary of the Euro-American constructions of poverty and homelessness as well as Entman's (1993, 2004) definition of policy framing to build a framework that was suitable for this research. Gowan (2010) presents three main discourses on homelessness that are made up of the following components: central causes of poverty/homelessness; fundamental strategies for managing poverty/homelessness; focus of causal narrative; and notion of agency. As described in my conceptual framework, Entman (1993) definition of framing outlines that frames define problems, make moral judgements, and suggest solutions. As such, my frame analysis contains the following components: problem definition, causes of homelessness, level of causes, solutions to homelessness, agency of people experiencing homelessness. I have added the problem definition component to Gowan's (2010) framework because analysing how social problems are defined is crucial to understanding how the speakers negotiate the meaning of a situation (Bacchi, 2009; Ruiz, 2009). Significantly, a clearly defined problem is used to diagnose and justify the associated causes, solutions, and whose interests they serve. In this case study I argue that the way homelessness and poverty are defined, as part of broader framing of the issue, has significant effects on the stigmatization of people experiencing homelessness as well as the policy responses. First, I used NVivo to code statements that broadly fell into each of the frame categories and then inductively created sub-codes within each category, modifying the sub-codes as needed. Many statements clearly fell solely into one of the code categories, while others fell into more than one and were coded as such. I then compared similarities and differences between opponent and provincial government actors frame analysis.

### **3.2.3. Interpretive analysis**

Fairclough's (1992, 1995) final level of analysis is interpretive analysis. This is a macro-level of analysis that involves interpreting discourse in relation to the broader socio-political context and reality (Fairclough 1992, 1995; Jacobs, 2006). This research interprets the data with the view that discourse is a product that reflects the socio-political conditions and power structures under which they are produced (Ruiz, 2009). While this level of analysis is often considered the 'final' level of analysis, interpretation occurs at all three levels in an iterative manner (Ruiz, 2009). In this thesis interpretive analysis occurs in the discussion and conclusion chapters.

## **3.3. Data Sources**

### **3.3.1. Opponents**

I identified supportive housing opponents as any resident of Maple Ridge who clearly expressed opposition to either or both of the Royal Crescent and Garibaldi Ridge supportive housing projects. I solely and intentionally collected data that was in opposition to supportive housing. I also exclusively used opponent data sources that were publicly available. As such, the data is not a comprehensive representation of public opinion surrounding supportive housing in Maple Ridge. There were likely many divergent opinions about supportive housing beyond what I present here. However, as this research is specifically looking at how provincial government actors responded to the dominant opposition that existed in the public realm, it was not relevant or appropriate to explore private opinions or the perspective of community members who supported supportive housing.

Opponent data was collected from public sources related to the Royal Crescent and Garibaldi Ridge supportive housing projects between December 2017 and December 2019. This timeframe is consistent with data collection from provincial government actor sources. Data was collected from BC Housing public engagement documents, letters to the editor in the *Maple Ridge – Pitt Meadows News*, and transcribed videos of two public rallies against supportive housing (Table 1).

Data Source	Date	Description
Letters to the Editor - Maple Ridge – Pitt Meadows News	December 2017 – December 2019	18 Letters to the Editor containing opposition messaging from Maple Ridge residents published in the Maple Ridge – Pitt Meadows News.
Video footage of a rally against supportive housing in Maple Ridge	January 20th, 2018	23 minutes in length with 5 speakers
BC Housing Public Engagement Summary Report – Supportive housing in Maple Ridge	January 2018	Summary report of 274 public comments received at an open house on supportive housing on January 29 <sup>th</sup> , 2018.
BC Housing Public Engagement Summary Report – Supportive housing in Maple Ridge	March 2018	Summary report of 279 public comments received at an open house on supportive housing on March 15 <sup>th</sup> , 2018.
Video footage of a rally against supportive housing in Maple Ridge	March 30th, 2019	1 hour and 9 minutes in length with 13 speakers
Video of a Facebook Live Q&A on supportive housing in Maple Ridge	April 19th, 2019	Online Q & A hosted by BC Housing on April 15 <sup>th</sup> , 2019 consisting of a panel of representatives from BC Housing, Coast Mental Health, and Fraser Health. Members of the public submitted 57 questions online that were read aloud and answered live.
Maple Ridge Summary Report for Supportive Housing at 11749 Burnett Street	June 2019	Summary report of all public comments about the Burnett Street project including the online Q&A and 8 small group discussions.

*Table 1: Summary of supportive housing opponent data sources*

### 3.3.2. Provincial government actors

I identified provincial government actors as the proponents of supportive housing in a decision-making role with the Government of BC, or a project partner with the Government of BC on either the Royal Crescent or Garibaldi Ridge project. In the early stages of planning, the Garibaldi Ridge Project was referred to as the Burnett Street project, therefore several of the documents cited use the name Burnett Street in reference to the Garibaldi Ridge project. The main provincial government actors included in this project are: staff from BC Housing, the Crown Corporation that is accountable to and receives policy direction from the Minister Responsible for Housing; staff from Coast Mental Health, the non-profit housing provider; and provincially elected officials including Bob D’Eith, Member of the Legislative Assembly (MLA) for Maple Ridge - Mission, Lisa

Beare, MLA for Maple Ridge - Pitt Meadows, and Selina Robinson, MLA for Coquitlam - Maillardville, and Minister Responsible for Housing during the study period. My interview with Susan Hancock from Coast Mental Health explained that communication is aligned between project partners and is approved by the Minister Responsible for Housing. While each of these actors had different roles and responsibilities related to advancing supportive housing in Maple Ridge, they all were ultimately accountable to the Minister Responsible for Housing who leads the policy and communication direction. Therefore, communication from these different provincial government actors created the dominant framing from official project partners in the public realm. Further, examining the differences in framing between the individual provincial government actors would have been beyond the scope of this project. As such, I refer to and consider all project partners as a whole - "provincial government actors" - in this thesis, while indicating specifically which actor produced a document I refer to, or which actor is being directly quoted.

Data on provincial government actor framing was collected from BC Housing public engagement and policy documents and Government of BC press releases related to the Royal Crescent and Garibaldi Ridge projects. BC Housing documents include videos of presentations given at public open house events, project fact sheets, and public engagement summary reports. Relevant Government of BC press releases were identified on <https://news.gov.bc.ca/> and searched by keyword, date, and Ministry. All BC Housing and Government of BC documents used in this research are summarized in Table 2.



Data Source	Date	Description
Government of British Columbia Press Releases	January 2018 – September 2019	12 press releases related to the Royal Crescent and Burnett Street projects.
Poster boards presented at two open houses about supportive housing in Maple Ridge	January and March 2018	BC Housing poster boards used at open houses in Maple Ridge at the beginning of public engagement efforts.
Project fact sheet about supportive housing in Maple Ridge distributed at community open houses	January and March 2018	BC Housing project fact sheet given out to attendees at the open houses, as well as distributed online.
Summary Report of Feedback on Proposed Temporary Modular Supportive Housing – Community Open House #1	January 29, 2018	BC Housing Summary report of the online and open house public engagement activities for the January 2018 engagement activities.
Summary Report of Feedback on Proposed Temporary Modular Supportive Housing – Community Open House #2	March 15, 2018	BC Housing Summary report of March 2018 public engagement activities, including online and in person open houses.
Eight Myths about Homelessness in Maple Ridge and the Burnett Street Development	Spring 2019	BC Housing document which responds to key “myths” about homelessness in Maple Ridge that were identified during engagement activities.
Video of a Facebook Live Q&A on supportive housing in Maple Ridge	April 19th, 2019	Online Q & A hosted by BC Housing on April 15 <sup>th</sup> , 2019 consisting of a panel of representatives from BC Housing, Coast Mental Health, and Fraser Health. Members of the public submitted 57 questions online that were read aloud and answered live.
Presentation delivered at small group discussions – Burnett Street project	May 2019	BC Housing powerpoint presentation used at small group discussions about the Burnett Street project in Spring 2019.
Project fact sheet distributed at small groups discussions – Burnett Street project	May 2019	BC Housing fact sheet distributed at small group discussion for Maple Ridge residents in spring 2019.
Maple Ridge Summary Report for Supportive Housing at 11749 Burnett Street	June 2019	Summary report of all public comments about the Burnett Street project including from the Q&A and 8 small group discussions.

Table 2: Summary of provincial government actor data sources

### 3.3.3. Interviews

To supplement the core data collection from CDA, I interviewed four people who had a connection with the supportive housing conflict in Maple Ridge. The following people were interviewed:

- Anna Cooper, Homelessness Lawyer, Pivot Legal Society
- Ivan Drury, Organizer, Anita Place Tent City
- Kiersten Duncan, Former Maple Ridge City Councillor
- Susan Hancock, Senior Manager of Communications & Community Development, Coast Mental Health

Anna Cooper and Ivan Drury provided their perspectives as advocates for people experiencing homelessness in Maple Ridge, both having worked directly with residents of Anita Place tent city and supportive housing. Kiersten Duncan shared background information and context for my case study and her experiences working with the public and provincial government actors as a Maple Ridge City Councillor. Susan Hancock provided the perspective of a communications professional for Coast Mental Health, the non-profit housing provider for both supportive housing buildings in this case study. I conducted all interviews on Zoom each lasting between 45 and 90 minutes. Each interview was digitally recorded and transcribed. The interviews were semi-structured, and I prepared a few pre-determined questions and topics for each participant, while also allowing questions and conversation to be free flowing. All participants gave consent for the interview to be digitally recorded and for their identity to be disclosed in my thesis.

I also contacted several BC Housing employees whom I knew worked directly on either the Garibaldi Ridge or Royal Crescent projects or homelessness initiatives in general but received no response from any of them. The timing of my data collection may have influenced the lack of response as I did most of my data collection in spring 2021, during which BC Housing was undertaking a significant and controversial effort to relocate the Strathcona Park encampment to a variety of supportive housing buildings and temporary hotels and shelters. I also contacted Bob D'Eith, MLA for Maple Ridge-

Mission, whose office responded saying that it was not appropriate for the MLA to participate as my research topic was still an active and ongoing issue in their constituency.

### **3.4. Influence of COVID-19 on research design**

The COVID-19 pandemic had a significant influence on the conceptualization and design of this research project. Due to a high degree of uncertainty around restrictions related to travel and in-person gatherings my research project was designed for data collection that could be done from home with no in-person contact. Indeed, most of my data was collected during winter and spring 2021 during which there were significant restrictions on travel and in-person gatherings.

## Chapter 4. Findings

### 4.1. Textual Analysis

#### 4.1.1. Supportive housing opponents

As outlined in Chapter 3, textual analysis is a key component of this research because the use of specific words or phrases over others can significantly impact the acceptance of a policy like supportive housing, and the degree to which people experiencing homelessness in Maple Ridge were stigmatized (Goetz, 2008; Jacobs & Flanagan, 2013) Textual analysis also provides the foundation for interpreting the data, providing evidence to triangulate results and support key arguments and conclusions. In this research, I analyzed the use of attributes and labels based on Link and Phelan's (2001) conceptualization of stigma, which I have previously outlined.

#### **Attributes**

Attributes were considered to be “a quality, character, or characteristic ascribed to someone or something” (Merriam-Webster, n.d.). Opponents to supportive housing predominantly used negative attributes to describe it, such as “devastating”, “cheap”, “filthy”, “bad”, “oversized”, and “disruptive”. These attributes paint a picture of supportive housing as an undesirable feature in the community, one that is not only visually unappealing, but also a threat to the status quo or the way public life *should* be, according to opponents, in Maple Ridge. As a Facebook post promoting a rally against supportive housing in April 2019 states, Maple Ridge is described as a “community under siege” (Maple Ridge Truth, 2019, para. 1). Fittingly, many public opponents voiced the concern that visible homelessness and supportive housing would change or has already changed the community in an unwanted way. Opponents used very different attributes to describe Maple Ridge, which were in stark contrast to supportive housing. For example, some opponents stated that Maple Ridge “used to be a quiet, idyllic neighbourhood” (Lineham, 2019, para.19) and that supportive housing was a threat to keeping the “downtown center strong, healthy, united, and safe” (Action Maple Ridge, 2018, 20:36). Others argued that they chose to live in Maple Ridge because it “seemed like a beautiful city and the perfect place to invest in and raise our family in” (Maple Ridge – Pitt Meadows News, 2019, 3:32) and that now they were living in “a city torn

apart by addiction” (Maple Ridge – Pitt Meadows News, 2019, 3:40). Ultimately, many opponents believed that visible homelessness and supportive housing threatened the identity of Maple Ridge; as one speaker at the April 2019 rally asserted: “I love my city and I just want it back” (Maple Ridge – Pitt Meadows News, 2019, 25:58).

Opponents also described supportive housing using attributes that associated it with drug use and as an inadequate solution to homelessness. The association with drug use was framed by opponents predominantly by using the attribute “low barrier”. This was the most common attribute used to describe supportive housing, with opponents using the term 53 times across all documents I consulted. Low barrier housing can have different meanings but is broadly considered to be low-income housing that has minimal entry requirements and expectations placed on its residents (BC Housing, n.d.). This housing typically subscribes to a harm reduction philosophy with no requirement of resident sobriety, but can also include minimal background checks, income verifications, and other rules such as curfews (BC Housing, n.d.; Quan, 2014). The supportive housing projects in this case study contain multiple elements typically associated with “low barrier” housing; however, their harm reduction aspect was the biggest concern of opponents. Across all opposition data sources, the term “low barrier” was used as a coded term for drug use. For example, an op-ed written by Yvonne McDonald in the *Maple Ridge – Pitt Meadows News* published on March 27<sup>th</sup>, 2018 used the term low barrier to critique the housing as follows:

Let's face it, a mother with a couple of small children or teens is not going to go into these low-barrier homeless shelters, with druggies bringing their drugs in. These are for the drug users. (McDonald, 2018, para. 9)

As this quote demonstrates, low barrier housing is viewed by opponents as being directly associated with “drug users” who are considered a distinct category of less deserving and more dangerous homeless people than more deserving single mothers and children. Following Link and Phelan’s (2001) conceptualization of stigma, the main distinguishing difference between these groups is the assumption of drug abuse, which is considered by opponents as an undesirable and undeserving characteristic. The use of “low barrier” in this context is significant because the low barrier model was used by opponents as a central argument against supportive housing due to its association with drug use, and more specifically, people who use drugs. As a result, the perceptions that influenced the drug -user-associated language used to describe supportive housing also

influenced how the identity of homeless people was constructed by opponents. People experiencing homelessness were described by opponents through attributes associated with drug use like “drug dependent,” “drug addicted,” and “drug - addled.” As Ahmed, a speaker at a January 2018 rally against supportive housing stated, he was concerned with the “impact of facilities housing *drug dependent residents* on neighborhoods and communities” (Action Maple Ridge, 2018, 14:03). This language is problematic because it creates a negative association between homelessness and drug use which contributes to the ongoing stigma toward people experiencing homelessness. Consequently, this stigma is used to make the case for exclusionary and punitive policy solutions such as mandatory treatment and rehabilitation.

In presenting their alternative solutions to supportive housing, opponents described supportive housing as a “band aid,” “temporary,” or “failed solution”, as exemplified in the following quote from Wendy, a speaker at a rally against supportive housing in January 2018:

I have to wonder why the money is not being spent to get these needy people into rehab treatment center beds, which would then, I think, reduce the need for homeless shelters dramatically. The proposed band aid solution is just that, a temporary solution for people who need access to rehab, rather than making it easier for drug dealers to find their customers. (Action Maple Ridge, 2018, 16:34)

This quote outlines an alternative and preferable solution to homelessness prevalent among opponents to be drug rehabilitation or treatment facilities. This solution reinforces the association of homelessness with drug use and further develops the association between supportive housing residents and drug use.

While most opponents of supportive housing framed their position through unquestioning use of this stigmatizing language, others explained themselves. The following quote from a rally against supportive housing in April 2019 demonstrates this point:

Let's be clear on what a low barrier shelter is...It's a shelter where you're allowed to go in and still use. It's a shelter where an addict is put in a box and warehoused and the government can say, “look what we're doing isn't it wonderful.” Your tax dollars hard at work. It's a shelter with no path to detox, no of path to rehabilitation, no second stage treatment, no options, and no hope. That's what a low barrier facility is. (Maple Ridge – Pitt Meadows News, 2019, 48:33)

This quote presents a more sympathetic position than other opponents by arguing for more services for residents. It also questions whether the housing model is more about the optics of addressing homelessness, rather than being the best solution for residents. Interestingly, this nuanced position, whether the speaker knows it or not, shares some of critiques that progressive scholars and organizations have expressed about supportive housing and the housing first model. For example, the housing first model is often critiqued as only addressing the most visible manifestations of homelessness, with the goal of street clearance rather than providing the most dignified housing (Baker & Evans, 2016; Stanhope & Dunn, 2011).

### ***Labels***

Labeling occurs when the ideas and values used to describe a person or place become understood as fundamental to their identity and is used to separate them into a distinct category from mainstream society (Belcher & Deforge, 2021; Bennett & Larkin, 2018). Labels are connected to attributes that are used to stereotype, stigmatize, and exclude those to which they are assigned (Link & Phelan, 2001). While labeling is typically associated with groups of people, it also occurs with places or objects that are deeply stigmatized. Supportive housing and other forms of subsidized, low-income housing are often the subject of stigmatizing labels. This case study found that supportive housing was labeled as a “facility” or “shelter”. While on their own these terms may appear to be innocuous names of a particular housing form, they are problematic based on the meaning attached them by opponents.

The label “facility” is impersonal and has an institutional implication that serves to dehumanize supportive housing and its residents. This language contributes to the idea that people experiencing homelessness are a separate category of people, who do not deserve to live in a home, but rather a distinct type of housing that serves an institutional or clinical purpose. For example, opponents identify supportive housing as a “facility for our addicted population” (Maple Ridge – Pitt Meadows News, 2019, 50:20) and “facilities housing drug dependent residents” (Action Maple Ridge, 2018, 14:03), specifying that they believe residents would be addicts. The “facility” label has important local context that shaped the debate around homelessness in Maple Ridge. “Facility” was often used in reference to Riverview Hospital, a former psychiatric hospital in the nearby municipality of Coquitlam that was closed down in stages during the early 21<sup>st</sup> century.

According to opponents, people experiencing homelessness in Maple Ridge “need to be in an institution such as Riverview.” Opened in 1913, Riverview represents the institutional approach to mental health care that was dominant for much of the 19<sup>th</sup> and 20<sup>th</sup> centuries (Ronquillo, 2009). This approach relocated people living with mental illness from mainstream society with the belief that social isolation was required for treatment and recovery from mental illness (Ronquillo, 2009). After criticism about overcrowding, human rights, and social alienation, a movement towards deinstitutionalization and community-based mental health care occurred in the latter half of the 20<sup>th</sup> century, ultimately leading to the closure of Riverview (Ronquillo, 2009). Studies have found that deinstitutionalization can have positive outcomes for supporting people living with mental illness when it is properly planned and resourced (Petersen et al., 2013) however the transition to community-based care in BC has been widely criticized across the political spectrum as being underfunded and poorly managed (Morrow et al., 2010; Ronquillo, 2009).

Many opponents of supportive housing perceived the increase in visible homelessness in Maple Ridge as a result of the failure of deinstitutionalization, specifically the closure of Riverview, and expressed a desire to return to this model. This position was framed by some opponents to call for the exclusion of people experiencing homelessness from Maple Ridge: “There is a place for them and that is Riverview and into detox first. They are then welcome in the community” (McDonald, 2018, para. 13). These arguments stigmatize people experiencing homelessness and identify “them” as not being considered members of the community or not being allowed to be until they have been treated in a clinical setting like Riverview. Other opponents called for the re-opening of Riverview based on a more sympathetic position of the shortcomings of community-based care in BC, as outlined in an op-ed in the *Maple Ridge – Pitt Meadows News* about the proposal to open supportive housing in Maple Ridge. Instead, the author Mike Boileau advocated “for the re-opening of the Riverview facilities,” asserting that “it should have never been shut down by the NDP of the 1990s” (Boileau, 2018, para. 1). He concluded, “‘Closer to home’ provided no support for those who have struggled to fit in to society” (Boileau, 2018, para. 2). Another op-ed author, Steve Hegedus, argued that the closure of Riverview “downloaded the resulting consequences and costs to first responders, hospitals and the various health agencies throughout the province” (Hegedus, 2018, para. 5). These two quotes provide a more compassionate and critical



position that recognized the need for public social services and the inadequate funding and support they have received in the past. These are other examples of instances whereby opponents shared some critiques with progressive scholars and organizations on how homelessness has been addressed, which leaves them skeptical to new programs like supportive housing.

The label “shelter” was also widely used by opponents in reference to supportive housing, even though provincial government actors exclusively referred to it as supportive or modular housing. Both the “shelter” and “facility” label were used in association with other stigmatizing language and arguments. They were frequently used alongside the term “low barrier” to specify that drug use would be permitted. They were also tied directly to stigmatizing labels for people experiencing homelessness to make the distinction of who would be living in these “shelters” or “facilities.” Accordingly, opponents used drug related labels for discussing people experiencing homelessness such as “addict,” “drug user,” “drug dealer,” and “druggies.” In Link and Phelan’s (2001) conceptualization of stigma, labels such as “drug user” are used to separate “us” from “them”. By applying the label “addict” or “drug user” the label becomes central to their identity, rather than a characteristic or behaviour a person happens to possess. This is different than drug related attributes that opponents used to describe people experiencing homelessness, as those attributes are the characteristics that forms the associations and stereotypes that lead to the label “addict” or “drug user”. Link and Phelan (2001) provide the example that people with schizophrenia are often called a schizophrenic, whereas with other illnesses such as cancer, a person *has* cancer. This inconsistency in labelling indicates when stigma is applied to a group of people. For example, the term “drug user” has become a label that is typically applied to marginalized people experiencing homelessness who may or may not use drugs, but not typically toward more advantaged people who use drugs (Bennett and Larkin, 2018). The type of drugs people are perceived to consume are stigmatized to differing degrees. For example, cannabis, alcohol, and caffeine, and people that consume them, are stigmatized less than those who consume cocaine, methamphetamine, and opioids (Ahern et al., 2007).

Non-drug related labels such as “street people” and “the homeless” were also used and performed a similar function to separate people experiencing homelessness into a distinct category to make the case for treatment and exclusion. For example, a

speaker at a rally against supportive housing in January 2018 asserted “we cannot address the needs of the homeless without also addressing the needs of our community” (Action Maple Ridge, 2018, 9:36). This quote indicates that opponents do not view “the homeless” as part of the community in Maple Ridge. Another example from an op-ed in the *Maple Ridge – Pitt Meadows News* re-enforced the separation between “us” and them”: “people are not against the homeless. They want these folks into detox, then have them into the community” (McDonald, 2018, para. 1).

#### **4.1.2. Provincial government actors**

##### ***Attributes***

Provincial government actors primarily described supportive housing with attributes that emphasized its safety and security. The most frequently used attributes were “safe” and “stable,” as well as “secure” and “warm.” For example, they described supportive housing as a “warm and safe place to call home” for people experiencing homelessness to “work towards living a healthy, stable life.” Further, they framed supportive housing as not only safe for its residents, but also for the surrounding community. For example, the Burnett Street project fact sheet included a section on “community safety” that outlined the agency’s commitment to “building a safe community both inside and outside the housing” (BC Housing, 2019a, p. 2). BC Housing provided this document to participants at small group discussions about the project in spring 2019 and online on the BC Housing public engagement website. The document further described features of supportive housing that were designed to enhance community safety for supportive housing residents and the broader community including experienced onsite staff, design features, property maintenance, and surveillance measures. This document included descriptions of how the experience of the non-profit operator, Coast Mental Health, would provide residents with onsite 24/7 support to address any concerns and connect them with support services, and how the use of optimized lighting, security cameras, fob access, and sweeps of the property would enhance safety and security for residents and the broader community. Similarly, poster boards utilized at the March 15, 2018 community open house run by BC Housing about supportive housing contained a section titled “Addressing Concerns around Safety and Security” (BC Housing, 2018d, Addressing Concerns around Safety and Security section). This poster board outlined BC Housing’s commitment to providing “safe, secure

housing for the community, the surrounding neighbours, and our tenants” (BC Housing, 2018d, Addressing Concerns around Safety and Security section) including many of the features outlined in the Burnett Street project fact sheet, as well measures like communicating with the neighbourhood, working with the tenants to foster good community relations, and creating a Community Advisory Committee to facilitate two-way dialogue between tenants and the neighbourhood. This language emphasized both inclusive and community-based and treatment and security focused approaches to housing, which suggests a nuanced, careful, and balanced consideration of the different interests of supportive housing residents, local businesses, and supportive housing residents.

Provincial government actors did not use many attributes to describe people experiencing homelessness or residents of supportive housing. In the few instances when they used attributes explicitly, people experiencing homelessness were described as “vulnerable”. The vulnerability of people experiencing homelessness was used by provincial government actors to make the case for the urgency of building supportive housing and to justify moving forward with projects in the face of significant opposition. For example, in May 2018 members of the public who opposed the Royal Crescent project set up a protest camp blocking the forthcoming construction on the site. In response to the protest, the province sought an injunction to remove the protestors and move forward with construction. In a press release from May 15th, 2018, then Minister of Municipal Affairs and Housing Selina Robinson asserts that the protest “threatens to delay homes for vulnerable people with an urgent need for housing and support to stabilize and move on” (Government of BC, 2018, para. 3).

While attributes associated with people experiencing homelessness were not often used by provincial government actors, the characteristics of supportive housing residents was offered in other ways across multiple documents. For example, poster boards from the BC Housing community open houses in January and March 2018 outline that supportive housing residents must be “experiencing problematic substance use”, be facing “complex health, health, housing, and/or poverty challenges”, and have “unmet health and housing needs despite available health care services” (BC Housing, 2018c; 2018d, Maple Ridge & Pitt Meadows Intensive Case Management (ICM) Team section). The emphasis on a narrow selection of people experiencing homelessness in housing first programs has often been critiqued as restricting the access to this type of

housing and creating an association between homelessness and drug use and mental illness. There is an important difference in the quantity and emphasis of attributes used between provincial government actors and supportive housing opponents. While opponents focused on describing and labeling the people who would live in supportive housing, and provincial government actors focused on describing the supportive nature of the housing, my findings indicate that provincial government actors intended supportive housing as housing the same kind of people that opponents did. This confluence between supportive housing opponents and provincial government actors reproduces stigma associated with people experiencing homelessness, even though it was framed in a different way.

### **Labels**

Provincial government actors did not use stigmatizing labels when referring to supportive housing. Across all documents analyzed, supportive housing was primarily referred to as a “home”. The following quote by Selina Robinson, then Minister Responsible for Housing, in a Government of BC press release on September 10th, 2019 provides an example of how the concept of “home” was used to refer to supportive housing:

When people have a place to call home, surrounded by the care and supports they need, they feel the dignity, confidence and hope needed to be able to make positive change in their lives. (Government of BC, 2019, para. 3)

This quote also associated supportive housing and with positive and compassionate attributes such as “dignity”, “care”, and “hope”. Provincial government actors also used the concept of “home” to argue that people experiencing homelessness were deserving of supportive housing in Maple Ridge, asserting that “everyone deserves a safe place to call home.” The reframing of supportive housing by provincial government actors as a “home” rather than a “shelter” was especially notable. For example, one slide from the spring 2019 small group discussions led by BC Housing is titled “Supportive Housing - A Home with Supports (Not a Shelter)” (BC Housing, 2019e, Supportive Housing - A Home with Supports (Not a Shelter) section). This slide contains a photo of a supportive housing room with plants, books, and other personal items, and describes various living features such as a private bathroom and kitchen. In another BC Housing document “Eight Myths about Homelessness in Maple Ridge and the Burnett

Street Development”, one of the myths is listed as “the Burnett Street development is a shelter” under which the development is described as a “home to 51 individuals living on the streets and/or shelters in Maple Ridge” (BC Housing, 2019c, The Burnett Street development is a shelter section). It also described some of the differences between supportive housing and shelter such as rental rates and time periods of being open. BC Housing’s Community Acceptance of Non-Market Housing Toolkit suggests the use of “homes” rather than “units” or “projects” to personalize non-market housing and reduce the negative association with the term “project” (BC Housing, 2019b). According to BC Housing, referring to supportive housing as a “home” humanized the housing form and could help the public understand that it was more than a shelter, or a roof and four walls, but a place where real people live their lives (BC Housing, 2019b).

Similarly, provincial government actors did not use stigmatizing or exclusionary labels when referring to people experiencing homelessness. Instead, the government used language that put people first, such as “people experiencing homelessness,” “people at risk of homelessness,” and “people living on the street,” thereby avoiding labels that made homelessness as central to their identity. The absence of labelling by provincial government actors suggests an intentional effort to challenge the opposition’s exclusion of people experiencing homelessness and reframed them as being as members of the community. This re-framing was evident during an online Q&A about supportive housing in Maple Ridge hosted by BC Housing in April 2019. During the 90-minute event, members of public were given the opportunity to submit questions online to a panel of supportive housing proponents from BC Housing, Coast Mental Health, and Fraser Health, which were answered live. During the Q&A Dominic Flanagan, Strategic Advisor on Homelessness for BC Housing made the following statement:

We really want the supportive housing to be part of the integration of people who are homeless because I think it’s so often, when we’re talking about people who are homeless, we see the population as a distinct and separate population. (BC Housing, 2019d, 59:36).

During the Q&A panelists promoting supportive housing also made arguments aligned with the philosophy of community-based care (as opposed to institutionalization) demonstrated by a statement by Naomi Brunemeyer, Director, Regional Development, Lower Mainland for BC Housing:

We actually do want to embed housing within residential communities because we believe that the best way for people to move forward with their lives is to live in residential communities. (BC Housing, 2019d, 58:39)

By arguing for the inclusion of people experiencing homelessness in Maple Ridge, provincial government actors tried to re-frame the image of supportive housing residents. One way this was communicated was through personal stories of people who had lived in supportive housing. The Burnett Street Supportive Housing Fact Sheet presents stories from residents of the Royal Crescent supportive housing. This included personal anecdotes about residents enjoying cooking, watching tv, and organizing a tenants’ council, activities that paint a picture of residents engaging in daily tasks that one would perform in their home. Another example of this re-framing was presented in the Maple Ridge Supportive Housing Fact Sheet, where supportive housing residents were described as being able to provide “another level of street security and scrutiny, keeping an eye out on the neighbourhood, reporting suspicious activities to staff or neighbours” (BC Housing, 2018b, p. 2). This reframed supportive housing residents as “responsible citizens,” actually enhancing neighbourhood safety.

## 4.2. Frame Analysis

### 4.2.1. Opponents

To answer the primary research question, it is essential to have a clear understanding of public opposition to supportive housing and how its position was framed. Thus, this section presents the findings of the frame analysis of the dominant public opposition, influenced by the structure used in Entman (1993) and Gowan (2010) as summarized in Table 3.

Problem definition of homelessness/poverty	Drug and addiction problem, mental illness
Causes of homelessness/poverty	Individual deficiencies, drug use, harm reduction policies
Level of causes of homelessness/poverty	Individual
Solutions to homelessness/poverty	Exclusion from Maple Ridge, treatment for drug addiction and mental illness, more individualized services
Agency of people experiencing homelessness	Weak or modest

Table 3: Summary of supportive housing opponent framing

### **Problem Definition**

In this analysis I found that opponents primarily defined the essence of the problem of homelessness in terms of drug use and addiction, which were constructed as negative behaviours that are immoral and violating of social norms. Opponents were often very explicit and deliberate about defining the problem in this way, as illustrated by Cassandra, a speaker at rally against supportive housing in April 2019:

...I'm now a mom to three children that we're raising in a city torn apart by addiction. I have a sister with a drug addiction that is homeless. My kids never get to see their auntie. My grandfather died as a result of his long-term addiction. This is not a homeless problem. This is a drug problem... I want to teach my children that abusing drugs is wrong. And I want the government to say that abusing drugs is wrong. Not tell my kids to use fentanyl with a friend. (Maple Ridge – Pitt Meadows News, 2019, 3:36)

This quote takes a clear moral position - “abusing drugs is wrong” - against drug use and defined it, not homelessness, as the core problem to be addressed. Another speaker at this rally, Jessie, also defined the problem of homelessness and poverty in terms of drug use and addiction as follows:

Kiersten Duncan (former Maple Ridge City Councilor) will make believe that people don't do drugs in these places. John Horgan and Selena Robinson will make believe...we can house our way out of an addiction crisis. Like we can house our way out of cancer. (Maple Ridge – Pitt Meadows News, 2019, 57:33)

Defining the problem in this way cemented the identity of people experiencing homelessness in Maple Ridge, shaping the opposition to supportive housing. My textual analysis, as discussed in section 4.1.1, demonstrates this social construction with abundant data in which opponents used descriptive language such as “drug addicted” “addicted population” and “drug dependent” and labels such as “addict”, “drug user” and “druggie” as synonyms for people experiencing homelessness. This language is significant due to the stigma and stereotypes associated with it and was a central component of how opponents crafted the problem definition. These social constructions were evident in the April 2019 online Q&A. The following question submitted during the event demonstrates just how much homelessness and supportive housing was associated by opponents with the “deviancy” of drug use:

Will the drug use be limited to inside their units? Is there a plan to keep neighbouring houses and elementary school children safe from exposure to this? And will staff be checking that individuals are not leaving the premises with drugs? (BC Housing, 2019d, 37:47)

Opponents sometimes framed drug use and addiction as intersecting with mental illness. In these instances, drug use and mental illness were perceived as directly related attributes at the core of the problem and attached to the identity of people experiencing homelessness. The following quote from Francis, a speaker at a rally against supportive housing in April 2019, clearly demonstrated the intersection of drug use and mental health problem definition framing:

I see this issue that's happening in Maple Ridge as a three-tier problem. One is homelessness. One is addiction, and one is mental health. And unfortunately, that three tier problem is being solved with one solution. And yeah, if the problem was homelessness, then low barrier shelters would be the solution, or a shelter would be the solution to homelessness. A home would be the solution to homelessness, but that's not the problem. The problem is addiction and mental health. (Maple Ridge – Pitt Meadows News, 2019, 15:17)

Like the previously referenced quote, there appears to have been a deliberate attempt to define the problem in terms of addiction and mental health as a direct response to the proposed supportive housing. The following op-ed published on April 26<sup>th</sup>, 2018 by Roy Josephson in the *Maple Ridge – Pitt Meadows New* provides another example of how the relationship between drug use and mental illness was framed by opponents:

I've also listened to a veteran police officer comment that unless the problem of homelessness is properly named, money will be wasted on attempts to deal with the problem. Namely, he believed issues of longstanding homelessness primarily resulted from addiction and mental health difficulties for the persons involved. I went to B.C. Housing's website, which confirmed what the policeman said. Its statistics showed 62 per cent of homeless in our community have addictions, 51 per cent have mental illnesses, and nine per cent have other medical conditions. (Josephson, 2018, para. 3-4)

This example demonstrates how mental illness and addiction were viewed by opponents on the level of the individual, which established how opponents framed the causes of homelessness.



## **Cause**

Overall, opponents emphasised their alternative solutions to homelessness with less discussion of the causes than the other frame elements. Nevertheless, the causes of homelessness were at times addressed directly, as demonstrated in the following quote from an op-ed by Willem Van der Bom in the *Maple Ridge-Pitt Meadows News* published on March 21<sup>st</sup>, 2018:

Offer the homeless housing after they commit to dealing with their addiction or mental health issues first. Make it more attractive to maybe do something about the cause first, and fair for the money spent on behalf of the community. (Van der Bom, 2018, para. 4-5)

Other times, the causes of homelessness were referred to less directly, such as in the following quote from an op-ed by Steve Hegedus in the *Maple Ridge-Pitt Meadows News* published on November 6<sup>th</sup>, 2018:

You cannot address these issues by simply providing housing without life-skills and jobs training, and most importantly a desire to leave their drug using past behind them...Granted, there are a few members of the homeless community who are not drug-addled or mentally ill. They have hit some bad luck and need a hand up not a handout. Social services should concentrate on eliminating this number and getting them back on their feet. (Hegedus, 2018, para. 8-10)

Both quotes suggested that homelessness was caused by drug use and mental illness, and that these are negative attributes that individual people should have the personal desire or commitment to change. The latter quote also creates a distinction between perceived categories of people experiencing homelessness, the “drug-addled or mentally ill” and others who have become homeless due to “bad luck,” implying the latter category is more deserving of support from social services. This is a critical point as it demonstrates the stigma tied specifically to people who use drugs or have a mental illness, as opposed to those who do not. Those who were perceived to have become homeless due to “bad luck” were positioned as more deserving of social services than those who are perceived to have inflicted it upon themselves due to drug use or individual deficiencies. Notably, both causality frames are at the level of the individual and do not consider structural conditions that can lead to homelessness or drug use. While the randomness of bad luck also ascribed to cause some people to become homeless was not blamed on individual deficiencies, it was also not framed to be caused by broader systemic conditions or public policy. Consequently, by framing the causes of

homelessness at an individual level, opponent framing lays the foundation for proposed solutions that treat or manage individual behaviours.

While opponents primarily framed the causes of homelessness at an individual level, I also identified a causality frame related to harm reduction policy and government inaction. In this framing, harm reduction approaches were perceived as enabling drug use and as a failed policy solution. This framing argued that the proposed supportive housing was an inadequate solution because it did not address the main causes of homelessness: drug use and personal deficiencies. In this framing, harm reduction approaches (such as low-barrier housing) were seen as “enabling” (Hegedus, 2018, para. 1; Lineham, 2019, para. 20; Shields, 2018, para. 1) residents and not adequately addressing the opponents' perceived causes of homelessness. While this framing took a slightly more structural view, acknowledging the role that government policies had in addressing or maintaining social problems, none-the-less it still stigmatized people who use drugs and made the case for solutions that exclude them. In other instances, opponents argued that homelessness was caused by senior levels of government, specifically decisions to close Riverview Hospital and the transition to community-based care as discussed in section 4.1.1. The following quote from an op-ed written by Kathy Mang in the *Maple Ridge and Pitt – Meadows News* published on April 19<sup>th</sup>, 2019 demonstrates this framing:

Putting a recovering addict in housing close to buddies and access to drugs is like being an alcoholic trying to recover, living with other alcoholics above a bar. Since they closed Riverview, this is what we have come to expect to see, and this is the treatment addicts and mental health sufferers can expect to get...I believe it is not the people, but the way things are being addressed that has made this an intolerable situation. Housing is a wonderful thing for these people to aspire to, but not to start with. (Mang, 2019, para. 4-5)

## **Solution**

Opponents primarily framed solutions to homelessness based on the exclusion and treatment of people experiencing homelessness in Maple Ridge. The themes of exclusion and treatment shared many of the positions of the ‘treatment-first’ model, which argues that people experiencing homelessness should be treated for individual pathologies and behaviours *first*, before being housed. The following quote from an op-ed in the *Maple Ridge-Pitt Meadows News* written by Ed Lineham on March 26<sup>th</sup>, 2018

demonstrates how opponents argued for the exclusion of people experiencing homelessness from Maple Ridge:

Yes, there is a definite need to help the homeless. However, I strongly feel that placing these people and the problems associated with them in the middle of the downtown core of Maple Ridge is a drastic mistake that the community will not quickly recover from. (Lineham, 2018, para. 6-7)

In this quote, exclusion was argued for due to the perceived “problems associated with them” that will have negative consequences for the Maple Ridge community. At other times, exclusion was framed through a more sympathetic lens, arguing that it would be beneficial for people experiencing homelessness to be located outside of Maple Ridge:

I read that Riverview is opening up again. That area is perfect for modular housing. Tons of room, green space, fresh air, room to walk and reflect and get well...I feel that these individuals do not need to be around public transport or malls –they need to be housed in places where they can get the help and support they need and perhaps many of them can be reintroduced to society, find work, and become active, healthy, caring, taxpaying individuals in order to live out their lives in some peaceable way. (Tochkin, 2017, para. 11-12)

As this quote from an op-ed in the *Maple Ridge – Pitt Meadows News* written by P. Tochkin on December 4<sup>th</sup>, 2017 demonstrates, opponents often argued that Riverview Hospital was the preferred destination for people experiencing homelessness in Maple Ridge. As discussed in section 4.1.1, the idea of Riverview Hospital and historical institutional approaches to mental health care were idealized in the minds of opponents and closely linked to arguments for the treatment of people experiencing homelessness before they returned to Maple Ridge. The argument for treatment was also established through the framing of homelessness as a problem caused by individual behaviours and attributes and labelling of supportive housing residents as “drug users”, as demonstrated by Wendy, a speaker at an anti-supportive housing rally in January 2018:

I have to wonder why the money is not being spent to get these needy people into rehab treatment center beds, which would then, I think, reduce the need for homeless shelters dramatically. The proposed band-aid solution is just that, a temporary solution for people who need access to rehab, rather than making it easier for drug dealers to find their customers. (Action Maple Ridge, 2018, 16:34)

Opponents expanded on arguments for “detox” or “rehab” with other forms of “treatment” such as services that will re-socialize people experiencing homelessness. Examples of

re-socialization argued by opponents included life skills training, career and financial counselling with the goal of becoming “productive members of society.” This framing argued that people experiencing homelessness deviate from acceptable social norms and need to be taught morally correct ways of living. Sometimes opponents argued for more services for people experiencing homelessness, contradicting the dominant framing that they were undeserving of assistance:

I'd like to see the people in the camps get out from the black holes they're in and brought into the light as productive members of society. But this will take multiple services. Housing is merely one and without detox, treatment, support and life skills, it's just a temporary bandaid that will not improve the situation. (Maple Ridge – Pitt Meadows News, 2019, 9:36)

This quote by Darren, a speaker at the anti-supportive housing rally in April 2019, critiques the supportive housing model arguing that there are not enough services available to residents. This concern was echoed by Brian Slade in a December 11<sup>th</sup>, 2017 op-ed:

They need more resources to turn their lives around than just giving them a place to live without access to government support, such as rehab, mental health resources, career training, basic financial training and a host of other counseling services. (Slade, 2017, para. 3)

While the critique by opponents of inadequate support services contradicts some of their other arguments, the position still largely views solutions through an individual lens, and frames homelessness as an issue that can be solved through reforms to service provision that treats and manages individual pathologies and behaviours.

### **Agency**

Opponents framed the agency of people experiencing homelessness in different ways, depending on what they viewed the causes of homelessness to be, and depending on how deserving opponents viewed them as. Often, opponents framed people experiencing homelessness as having a high degree of agency and control over their circumstances. This framing was largely based on the belief that homelessness is caused by individual behaviours and choices that one can and should make the decision to change. The first two quotations discussed in the ‘causality’ section above demonstrate how opponents viewed drug use as a choice, arguing that housing should be provided to someone experiencing homelessness after they have committed to

changing this behaviour. In another example from an op-ed in the *Maple Ridge – Pitt Meadows News* on October 30<sup>th</sup>, 2018, writer Mike Shields demonstrates how many opponents view drug use in this way:

...given a limited number of modular housing units becoming available, priority should be given to potential residents who at least voice the words that they want to attend addiction counselling. (Shields, 2018, para. 6)

This argument also demonstrates how people who were believed to be able to make a choice to reduce drug use were more deserving of housing, due to the limited supply. In another example from an op-ed written by Walter Verwoerd, the “able-bodied” (Verwoerd, 2017, para. 9) people experiencing homelessness “need to find employment, which is available to those that genuinely want to better themselves” (Verwoerd, 2017, para. 9). In this argument an unemployed person was viewed as having the agency to find employment if they wanted to and to make that choice for themselves. Different levels of deservedness influenced the perceived agency of people experiencing homelessness in other ways, for example the down-on-their-luck single mothers and seniors were framed as having more capacity to change their circumstances with a “hand up not a handout” (Hegedus, 2018, para. 10) from government. By framing people experiencing homelessness as having a high degree of agency in this way places blame on individual decisions and morality and does not address broader, structural conditions that lead to homelessness and poverty.

There were some variations to this framing, particularly in arguments for exclusionary solutions to homelessness such as being placed in an institutional setting. In these examples, people experiencing homelessness were framed as possessing a low degree of agency and were viewed as living so far outside of socially accepted norms that their only hope for redemption was mandatory treatment and exclusion from the community. In the same op-ed written by Walter Verwoerd discussed above, the author argued that “we must wake up to the fact and acknowledge that there are those who just cannot take care of themselves and need to be in an institution such as Riverview” (Verwoerd, 2017, para. 6). In these types of arguments, people experiencing homelessness were heavily pathologized, and viewed as having serious health and drug use issues that would negatively impact the broader Maple Ridge community. This framing is problematic as it positions people experiencing homelessness as living outside of acceptable social norms, leading to deeper stigmatization and exclusion.

## 4.2.2. Provincial government actors

This section presents the findings of the frame analysis of provincial government actors using the structure outlined in Chapter 3, summarized in Table 4.

Problem definition of homelessness/poverty	Housing problem
Causes of homelessness/poverty	Mixed poverty/systemic causes and mental illness and addiction
Level of causes of homelessness/poverty	Systemic and individual
Solutions to homelessness/poverty	“Housing First.” Housing with mental health and addictions support services
Agency of people experiencing homelessness	Low or high

Table 4: Summary of provincial government actor framing

### **Problem Definition**

Provincial government actors primarily framed homelessness as a housing problem. Homelessness was positioned as being directly associated with a lack of affordable housing, as well as a lack of affordable housing with support services for marginalized people. This framing was consistent across all documents analyzed and is exemplified in the following quote from a Government of BC press release on January 11<sup>th</sup>, 2018:

People who are struggling with housing affordability and homelessness in Maple Ridge will soon have access to new supportive housing, affordable rental housing and expanded mental-health and addictions support to help them maintain stable housing. (Government of British Columbia, 2018, para. 1)

This quote clearly outlined the problem in terms of housing affordability and its direct connection to homelessness. In this framing people were “struggling with housing affordability” rather than struggling with drug addiction and/or mental illness (as was argued by supportive housing opponents) which functioned to justify the proposed solution of supportive housing. At the same time, this framing also presented the need for affordable housing that included mental-health and addictions support services. This coupling of housing with support services was very much in line with the ‘housing first’ approach to addressing homelessness and was frequently referred to as such, as

demonstrated in the BC Housing Summary Report of Feedback on Proposed Temporary Modular Supportive Housing in January 2018:

The approach for the proposed housing is Housing First. Our experience is that having a home reduces mental health and addiction issues. People are better able to move forward with their lives if they are first housed. Housing is provided first and then supports are provided including physical and mental health, education, employment, substance abuse and community connections. (BC Housing, 2018e, p. 3)

The results from textual analysis support this problem definition framing through provincial government actors framing and conceptualization of supportive housing as a “home”, in sharp contrast with opponents labelling of supportive housing as a “shelter” or “facility.” As such, on the surface opponents and provincial government actors framed the problem definition in very different ways, aligning closely with the “treatment first” and “housing first” binary, respectively. While these two frameworks are typically thought of as ideological opposites, I found that provincial government framing was more nuanced than this binary suggests. While the need for affordable housing was presented by provincial government actors as being at the core of the problem, it was not “housing only” (BC Housing, 2019d, 14:12) as described by Dominic Flanagan, Strategic Advisor on Homelessness for BC Housing during the online Q&A. This point was emphasized repeatedly during the event in response to questions about drug use and mental health of prospective supportive housing residents. This emphasis on the coupling of housing and treatment elements of supportive housing outlines a narrow selection of people that the housing is designed for, which excludes people who fall outside of these parameters. This may have the effect of socially constructing the image of people experiencing homelessness as being addicted to drugs or having a mental illness, and that these conditions are associated with being homeless. It also demonstrated a careful balance of interests between the ideals of inclusive affordable housing and more exclusionary treatment-based approaches by supporting the view by opponents that people experiencing homelessness have pathologies or deficiencies that need to be treated, while also arguing that they deserve housing and support. This point is further demonstrated by exploring how the causes of homelessness were framed by provincial government actors.

## **Cause**

Like opponents, provincial government actors presented less explanation of the causes of homelessness relative to the other frame elements. When causes were directly discussed, provincial government actors simultaneously framed homelessness as a product of structural factors such as low incomes, high rents, and lack of affordable housing, as well as individual factors of drug use and mental illness. They continually balanced these different explanations, at times speaking from a structural perspective, and other times a more individual one. For example, during the online Q & A, Dominic Flanagan from BC Housing provided a more structural explanation on the causes of homelessness:

It's always important though, we're talking a lot about addictions, to remember there's a range of reasons why people become homeless. That might be related to structural issues around poverty, it may be related to lack of access to affordable rental housing, it could be a traumatic event, it could be a health need around addictions, mental health. But it's usually the result of a cumulative impact rather than one simple cause that causes a person to become homeless. (BC Housing, 2019d, 59:46)

This quote is an example of how provincial government actors actively tried to re-frame the dominant opponent framing related to drug use and addiction and provide a more complex, alternative explanation for the presence of homelessness in Maple Ridge. By framing the causes of homelessness in a more structural way, they challenged the stigmatizing explanations used by supportive housing opponents and put forward a different perspective. Provincial government actors also responded directly to concerns around drug use and addictions as outlined in the BC Housing Summary Report of Feedback on Proposed Temporary Modular Supportive Housing from January 2018:

It's important to note that not all homeless people have addictions and not all people with addictions are homeless. The 2017 Homeless Count found that 53% of people experiencing homelessness report having addiction issues. A recent study shows that 80% of people with mental health and addiction issues developed these issues after becoming homeless, not before becoming homeless. (BC Housing, 2018e, p. 3)

This quote acknowledged that mental health and addictions could be a concern for people experiencing homelessness, but that it was often housing insecurity that caused mental illness or drug use, and not only the other way around. While provincial government actors appeared to actively try to create a different image of homelessness



and its causes, these explanations were presented as more of a footnote than a focus. These arguments were often overshadowed by provincial government actors' need to defend their position in response to questions and concerns about support services and drug use in supportive housing. As the next section will discuss, provincial government actors placed the greatest emphasis on the solutions to homelessness through their framing of the issue, with a particular focus on the treatment and support services available in supportive housing.

### ***Solution***

Like opponents, provincial government actors placed most of their emphasis on their proposed solutions to homelessness in Maple Ridge. Consistent with the problem definition framing, solutions to homelessness were predominantly positioned within the 'housing first' policy framework as a direct response to the dominant 'treatment first' position of opponents. Thus, provincial government actors made the case for supportive housing with "housing and treatment and health combined all in one spot." An example of this framing is presented in the following quote, which was used in both the January and March 2018 Summary Reports of Feedback on Proposed Temporary Modular Supportive Housing:

Housing is provided first and then supports are provided including physical and mental health, education, employment, substance abuse and community connections. We want to work with people on their issues, but it is difficult to do this until they have a home. (BC Housing, 2018e, p. 3; BC Housing, 2018f, p. 3)

In framing solutions to homelessness, provincial government actors placed the strongest emphasis on the treatment and support services offered through supportive housing. This is especially noteworthy in comparison to opponent frame analysis which strongly criticized supportive housing for not having enough support services, as previously discussed. Based on these findings in opponent frame analysis, one might conclude that provincial government communications material was not adequately describing the services in supportive housing. However, this was far from the case. All provincial government actor documents presented detailed descriptions of the treatment and support services offered in the supportive housing. It appears that the emphasis on the treatment and services offered in supportive housing was directly in response to concerns by opponents. At times this was communicated quite directly; for example, one

slide from the small group discussion for the Burnett Street project was titled: “Supportive housing - A Home with Supports (Not a Shelter)” (BC Housing, 2019e, slide 7). Two of the ‘myths’ in the Eight Myths about Homelessness in Maple Ridge document are: “the Province’s plan is to ‘warehouse’ people without providing health services,” and “the Burnett Street development is a shelter.” This was also a common theme highlighted and responded to in all three public engagement summary reports. This tension was apparent during the April 2019 online Q & A as demonstrated by the following response from Dominic Flanagan from BC Housing to a question about mandatory treatment:

Again, as we said previously it's (treatment) not a separation from housing, just four walls, the roof, and nothing happening. This is the type of housing where people can and do get clean. (BC Housing, 2019d, 45:02)

There were several other instances during the Q & A in which provincial government actors sought to defend themselves about the services offered in supportive housing, which ended up dominating much of the discussion. In doing so, provincial government actor framing focused on the goal of moving people experiencing homelessness through a system to “get clean” and emphasized treatment-based solutions over housing-based ones. The shared focus of opponents and provincial government actors on support services individualized homelessness and emphasized the behaviour of people experiencing homelessness. This may have had the effect of creating a greater divide between people experiencing homelessness and other community members, reproducing the perception that people experiencing homelessness needed to be changed and re-socialized, with similar implications as the opponents’ framing of the problem.

Provincial government actors also framed solutions to homelessness in terms of public safety and street clearance objectives that remove visible homelessness from the community. This framing presented the benefits of supportive housing not just for its future tenants, but also for the broader community. For example, both the January and March 2018 Summary Report of Feedback on Proposed Temporary Modular Supportive Housing by BC Housing argued that “if we leave them on the streets, nothing will change for them or the community” (BC Housing, 2018e, p. 4; BC Housing 2018f, p. 3). Often, supportive housing was positioned as being able to remove visible drug use from the public realm. The notion that “when homeless people are housed, they will no longer use

substances in public areas” (BC Housing, 2019c, p. 2; was repeated across multiple BC Housing documents and was also used as a response by a Coast Mental Health representative to a question about drug use in the online Q & A. This framing may reproduce the stigma around drug use and the people that use drugs and position them as undesirable or unsafe to people around them. Notably, this response prompted an alternative response from Dr. Ingrid Tyler, a Medical Health Officer with Fraser Health, who firmly countered that “actually using drugs alone behind a closed door by yourself is a significant risk factor for overdose” (BC Housing, 2019d, 38:25) which suggests a deeper understanding of drug use and harm reduction that contradicts some of the other messaging by provincial government actors that are aligned with the treatment and abstinence values of opponents.

### ***Agency***

Provincial government actors framed people experiencing homelessness as both having the agency to change their circumstances and as passive victims of complex structural factors they had little control over. Personal “success stories” of supportive housing residents from existing projects were frequently used to communicate agency. The Burnett Street Fact Sheet contained several vignettes, characterized as “success stories,” from the Royal Crescent project which highlighted the positive changes that had occurred, for residents and the community, since its opening. These stories highlighted the enhanced agency and well-being of residents after moving into supportive housing, such as one resident who organized a tenants’ council for the building, and another who reported enjoyment in having the ability to cook regular meals and watch football. The enhanced agency of supportive housing residents was described as not only beneficial for the residents themselves, but also for the safety, security, and cleanliness of the surrounding community. These stories contain several of the core assumptions about people experiencing homelessness from supportive housing opponents and presented an image of reformed supportive housing residents in new, socially acceptable roles. For instance, one story described how five residents joined the building Clean Team which was tasked with picking up garbage and “paraphernalia” (BC Housing, 2019a, p. 3) in the surrounding neighbourhood, as well as cleaning floors and sanitizing tables. In this story, the work of the Clean Team was reported as having had “a positive impact on the overall cleanliness of the site” (BC Housing, 2019a, p. 3). However, other representations of the program suggest its goals extended far beyond basic property

maintenance. For instance, when the Clean Team was discussed in the April 2019 online Q & A it was positioned by Coast Mental Health CEO Darrell Burnham as “a way of encouraging people to be appropriate...to take care of their community” (BC Housing, 2019d, 41:07). The Clean Team was also framed to demonstrate that residents could make a positive contribution to the community. During my interview with Susan Hancock from Coast Mental Health, she expanded on this point by affirming that the Clean Team helped to “provide a visual context for the neighbourhood that the individuals living in our facilities have a purpose” (S. Hancock, personal communication, May 5, 2021). While this could be viewed as an approach to help humanize supportive housing residents, it also supported the idea that they only had value if they served the interests of more powerful community members. While this framing may have helped appease opposition, it also maintained the power of housed community members over those who were experiencing homelessness. In another example from the BC Housing Supportive Housing Fact Sheet, the agency of supportive housing residents was positioned as “providing another level of street security and scrutiny, keeping an eye out on the neighbourhood, reporting suspicious activities to staff or neighbours” (BC Housing, 2018b, p. 2). While this example framed tenants as having agency over their circumstances, it is through the lens and goals of supportive housing opponents and fears related to crime and public safety.

There was some variation in the framing of agency by provincial government actors. In some instances, people experiencing homelessness were framed as being passive victims of structural conditions largely out of their control. The ability to change their circumstances, whether that be their health, drug use, or housing status was largely framed as requiring supportive housing and was used to justify the urgency of building this housing, especially in the face of vocal opposition. Supportive housing was positioned as necessary and needed immediately due to the vulnerability of people experiencing homelessness and low agency to change their immediate situation without it.

## **Chapter 5. Discussion & Conclusion**

This study found that provincial government actors responded to opposition to supportive housing with a careful balance of interests that resulted in a convergence in the social construction of homelessness between the two sides. On the surface, provincial government actors and opponents appeared to be on opposite sides of the debate along the ‘treatment first’ and ‘housing first’ binary; however, the findings of textual and frame analysis indicate that while framed in different ways, both upheld similar assumptions and social constructions of people experiencing homelessness. By reproducing similar social constructions of people experiencing homelessness as opponents, provincial government actors stigmatized people experiencing homelessness, revealing three prominent points of tension between opponent and provincial government actor framing: (1) safety and security; (2) support services and treatment; and (3) social control and reform. I argue that these points of tension may have considerable effects on the type of low-income housing and social programs made available in the future as well as who is able to access them. The following section discusses each of these points of tension separately, however, they often overlapped in the data, complementing and reinforcing each other.

### **5.1. Points of tension**

#### **5.1.1. Safety and security**

Provincial government actors positioned themes of safety and security through the lens of “community safety,” that is, the ability of supportive housing to enhance safety for all residents of Maple Ridge. This framing was noteworthy because notions of public safety have often been invoked to mask repressive and exclusionary policy directed at low-income people. For example, in 1999 the Government of Ontario introduced the Safe Streets Act, which forbids “aggressive” solicitation, or panhandling, in certain public spaces (Safe Streets Act, 1999). The Act has been critiqued as unfairly regulating survival strategies, such as panhandling and squeegeeing, of people who are homeless or low-income (Chesnay et al., 2013). In 2004, BC followed suite and introduced its own Safe Streets Act which similarly regulates solicitation in public spaces. In both provinces, the law was first brought in amid public concern over the

increased presence of visible poverty in the downtown cores of Toronto and Vancouver and were based on the construction of homeless and low-income people as a dangerous or undesirable (Chesnay et al 2013). The BC Safe Streets Act allows municipalities to create additional local bylaws which includes the “Safer Streets” bylaw in Maple Ridge enacted in 2019 in response to increases in visible homelessness which even further restrict panhandling in the city, imposing \$100 fines for by law violation (McElroy, 2019). Critics point out these laws assume that people experiencing homelessness pose a threat to public safety, while simultaneously compromising the safety and survival of people who rely on public space to meet their basic human needs. By framing these laws in terms of public safety, they stigmatize low-income people by implying that they are not considered members of the “public” or deserving of public safety measures (Gaetz, 2004).

Given the precedent of punitive public safety laws and policy it is important to question whose interests are being prioritized, and whose interests should be prioritized, with regards community safety in Maple Ridge. While everyone deserves to be safe in their community, not everyone’s safety is treated equally under law, and not everyone has equal access to that safety. While my data has shown that like other places in BC and North America there is a common perception in Maple Ridge that people experiencing homelessness are a threat to public safety, multiple studies have found that people experiencing homelessness have been and are more often the targets of violent acts than the perpetrators (Gaetz 2004; Garland et al. 2010; Lee & Schreck, 2005). For example, Gaetz (2004) found that despite common depictions of their deviance and social threat, homeless youth in Canada are among the most victimized group in society. In addition, fleeing domestic violence is one of the leading causes of homelessness for women and youth (Baker et al., 2010; Milaney et al., 2019). Indeed, in Maple Ridge there were multiple public reports of harassment and violence directed at people experiencing homelessness during the period I’m studying (Li and Winter, 2019). This included harassment and displacement from local police and bylaw officers leading to constant relocation and stress for people experiencing homelessness. According to Anita Place organizer Ivan Drury, the collective safety and security of people experiencing homelessness was one of the driving forces behind the creation of the tent city. Drury explained, “people were like, we need a place where we can protect ourselves because we need unity and numbers” and, “we also need a place where we

can tell a different story...because we can't organize, we can't do anything on the street because we are constantly harassed by bylaw officers and cops" (I. Drury, personal communication, May 11, 2021).

Despite these realities, public discourse and policy often perpetuates the idea that people experiencing homelessness should be feared, which serves to further stigmatize and exclude them (Bennett and Larkin, 2019). In this case study, while provincial government actors tried to balance the safety needs of different community members, their framing still implied that people experiencing homelessness posed a threat to the safety of housed community members that needed to be managed. Supportive housing is thus positioned as a solution to the "unsafe" visible manifestations of poverty, as well as a "safe and warm home" for people on the street. This framing was demonstrated in the following quote by Maple Ridge MLA Bob D'Eith in a BC Matters blog post on October 25th, 2018:

When we get people off the streets, into housing, and into mental health and addictions treatment, it's not only these people whose lives are changed – our entire society benefits from cleaner and safer neighbourhoods. (D'Eith, 2018, para. 24)

These tensions and convergences were further demonstrated through the framing of support services and treatment available in supportive housing.

### **5.1.2. Support services**

The emphasis on support services is a prime example of how provincial government actors framing of homelessness converged with opponents and extended beyond the 'treatment first' and 'housing first' binary. Discursively, in-house support services were presented as a softer alternative to the mandatory treatment and detox desired by supportive housing opponents. Despite this difference, provincial government actors' framing had the effect of pathologizing people experiencing homelessness, implying that they "need and deserve assistance in the form of housing because they are sick" (Katz et al. 2017, p. 142). This reproduced the association between homelessness and mental illness and addiction, which is stigmatizing as it suggests that their situation was caused by individual factors or failures, rather than structural conditions. Further, the philosophy behind supportive housing – that chronically homeless individuals need be specifically targeted for additional support services – suggests that that these

services should be “selective rather than universal” (Stanhope and Dunn, 2011, p. 279). Consequently, this may have the material effect of narrowing the scope of responses to homelessness and poverty to “focus on redesigning, reforming, and improving services, rather than on structural change” (Jacobs & Flanagan, 2013, p. 325).

Support services were also used as a rhetorical device to re-construct the image of supportive housing residents through the ability of support services to change the lifestyle, health, and behaviour of its residents. Most of the time this was communicated indirectly as the goal of helping residents “move forward with their lives” (BC Housing, 2019a, p. 2). At other times it was expressed more explicitly; for instance, during the April 2019 online Q&A a Coast Mental Health representative assured attendees that after a few months of living in supportive housing residents would start to “look different” (BC Housing, 2019d, 1:02:13). This demonstrates the balance and tension between different social constructions of homelessness, suggesting both that people experiencing homelessness are deserving of assistance, and that they need to be changed to align with mainstream social norms.

Closely tied to the framing of support services, was a carefully balanced position on drug use. On the one hand, provincial government actors worked to uncouple the association between drug use and homelessness. On the other, they championed the ability of supportive housing to treat drug use or remove it from the public eye. For example, supportive housing was sometimes positioned as having “a mix of tenants with a wide range of needs” (BC Housing, 2019c, p. 3) noting that “not all homeless people have addictions and not all people with addictions are homeless” (BC Housing, 2018c, p. 3). This was often presented using facts and numbers, such as “53% of people experiencing homelessness report having addiction issues” and “80% of people with mental health and addiction issues developed these issues after becoming homeless, not before becoming homeless” (BC Housing, 2018e, p. 3; BC Housing, 2018f, p. 2-3). At other times they argued for the ability of supportive housing to treat drug use or remove it from public sight. For example, in a video titled “Rocco’s story: From Homeless to Housed to Hopeful.” shared on BC Housing social media accounts and the “Let’s Talk Housing” engagement website, Royal Crescent resident Rocco shares his experience living in supportive housing, while the following text scrolls across the video: “Rocco enrolled in treatment 3 months after moving into Royal Crescent” (BC Housing, 2019x, 0:30) and “Rocco is 67 days sober at the time of this interview and is making plans for



his future” (BC Housing, 2019f, 0:50). These outcomes aligned with the goals of the treatment-based framing of opponents and demonstrated the potential outcomes of support services. These tangible treatment-based outcomes were a particular priority for opposing voices in Maple Ridge. Susan Hancock from Coast Mental Health confirmed that the housing provider and the provincial government were aware of this priority and that it was important to communicate the goals of “moving people through the process and getting them better and not just housing people who are ill” (S. Hancock, personal communication, May 5, 2021). Hancock also acknowledged that recovery is often a more complex concept than some members of the public understand, and that many people will never fully “recover” so to speak and continue to live healthy lives while using drugs or having a mental illness (S. Hancock, personal communication, May 5, 2021). I argue this framing of support services is problematic as the more compassionate discourse of provincial government actors was used to mask the shared goals with the opposition of controlling and reforming supportive housing residents.

### **5.1.3. Social control and reform**

Ultimately, while provincial government actors framed people experiencing homelessness through a more sympathetic and deserving lens than opponents, they were still presented as a distinct group that needed to be controlled and reformed. Supportive housing was positioned by provincial government actors as the means to control and reform residents through security and surveillance features that restrict behaviour, and support services to treat pathologies like mental illness and addiction. At the same time, these features were described by provincial government actors as able to provide comfort, safety, and an avenue to help residents make positive changes in their lives. This supports Hennigan and Spear’s (2019) findings that shelters and low-income housing often exhibit a melding of care and control, a concept they refer to as “compassionate revanchism”, which are often difficult to untangle and operate co-currently. Through ethnographic research on supportive housing in Vancouver, Boyd et al. (2016) found that surveillance and control features in this housing undermined harm reduction efforts and compromised the well-being of residents. Discursively, Hennigan and Spear (2019) and Boyd et al. (2016) argue that features of control in low-income housing are often masked behind or intertwined with more compassionate and inclusive language, as often occurred in this case study. For example, provincial government

actors put a lot of effort into framing supportive housing as a “safe and warm home”, but what kind of a “home” is it when residents are subject to considerable surveillance and restriction in their day-to-day life?

Given that opposition to supportive housing was shaped more by fear and stigma associated with people experiencing homelessness than by the housing form itself, provincial government actors tried to re-frame supportive housing residents to fit a more socially acceptable image. This was most clearly articulated in the “success stories” described in section 4.2.2. and “Rocco’s story” described in the previous section. By framing these stories as a “success”, the image of a model supportive housing resident is produced by provincial government actors, which may oversimplify and omit the varied life experiences of people experiencing homelessness. As discussed in the previous section, support services were often discussed as being able to reform residents to meet goals like sobriety and drug treatment. Outlining this image of the “successful” or model supportive housing resident, implies that anyone who is not able to meet these expectations is not deserving of assistance, or that only a narrow range of outcomes for supportive housing residents is considered socially acceptable. This may increase the divide between housed and unhoused community members, reinforcing the idea that people experiencing homelessness are a threat to mainstream social norms.

## **5.2. The role of structural stigma**

During conflicts between the public and governments trying to build low-income housing much attention is typically placed on the stigmatizing discourse of opposing voices and the barrier this presents to building new housing. Indeed, media coverage of this case study highlighted the particularly toxic and stigmatizing opposition to these projects and the difficult position in which it put provincial government actors in. While this representation of the conflict is valid, it overlooks the role that government policy, or lack of policy, has in causing the stigma associated with poverty and homelessness. This is what is referred to as structural stigma, meaning stigma that is embedded in law, policy, and society more broadly (Sukhera, 2022). *Project Inclusion* is a report by Pivot Legal Society that studies how law and policy in BC can both be shaped by stigma as well as serve to reproduce it. The report argues that stigmatizing beliefs are often so normalized in society that they may not be considered problematic to policy makers and the public (Bennett and Larkin, 2019). As such, policy based on misinformation and

knowledge gaps may serve to reproduce stigma by continuing to normalize these ideas. Further, while it is typically assumed that policy solves social problems, inadequate or lacking policy is often the cause of them (Bacchi, 2009). In terms of stigma related to homelessness and low-income housing, Jacobs and Flanagan (2013) argue that there are two main policy causes: first, the historical underinvestment in low-income housing, and second, targeted eligibility requirements that reduce access to low-income housing. In this case study, the City of Maple Ridge experienced a large increase in homelessness between 2014 and 2017 after decades of underinvestment in social housing and services, creating a situation in which the city did not have the resources to properly respond to emerging homelessness. As such, in introducing supportive housing to the community, provincial government actors focused the priority for the new supportive housing on the most visible manifestations of homelessness, primarily residents of Anita Place Tent City, and those considered “chronically homeless” or “hard to house.” The historic underinvestment in low-income housing in Maple Ridge developed the idea that this housing is not a priority, is inferior to other housing forms and tenures, which may have helped shape the stigma and opposition to it and created a situation in which the limited housing spaces needed to be targeted to a select group (Jacobs & Flanagan, 2013). At the same time, the decades of low investment in social housing and services overlapped with the transition from the institutionalization of health services to community-based care in BC in the 1990’s and 2000’s. As discussed in Chapter 4, this led to a situation in which many members of the public in Maple Ridge do not trust that community-based services like supportive housing will be successful in addressing homelessness, as they have witnessed visible increases since the closure of Riverview Hospital in the nearby City of Coquitlam.

The lens of structural stigma raises the question of how much supportive housing opponents highlighted existing stigma related to poverty and homelessness, rather than the causes of it. For example, negative attitudes toward illegal drugs and the people that use them are not unique to Maple Ridge residents; public opinion polling conducted by Research Co. in 2021 found that 81% of Canadians believe that using illegal drugs is morally wrong (Canseco, 2021). At the same time, government inaction on poisoned drugs, safe supply, and decriminalization is considered a significant policy failure that has caused considerable harm to people and society (Carter & Macpherson, 2013). In BC critics have argued that drug policy has largely focused on treating the symptoms of

drug use and addiction instead of the causes. For example, the 2022 BC Budget included no new spending on safe supply programs but expanded funding for treatment and recovery programs (Wyton, 2022). By continuing to underfund safe supply programs, policymakers signal that drugs and the people that use them are not deserving of assistance and that drug use is not acceptable in mainstream society.

The findings of this study suggest that while provincial government actors sought to challenge the public stigma associated with homelessness in Maple Ridge, their framing of the issue, intentionally or not, undermined these efforts. Anna Cooper articulated this contradiction well:

On the one hand, they're trying to encourage communities to accept supportive housing projects. And so, there is this level of caring about people. But in the same breath you're saying these people cannot be trusted and need to be carefully watched and controlled. And so, their own rhetoric reinforces a lot of the stigma that they are supposedly pushing back against when they're trying to create these projects. (A. Cooper, personal communication, July 5, 2021)

As such, through policy and how it is framed, provincial government actors have an important role and responsibility to challenge stigma related to poverty and homelessness and what is considered to be socially “normal” and “acceptable” (Tam, 2019). These findings are supported by several housing scholars including Katz et al. (2017) who argues that housing first discourse have the potential to unintentionally compromise efforts to address homelessness. With this perspective in mind the following section discusses potential consequences of provincial government actor framing.

### **5.3. Potential consequences**

The findings of this study are significant because the effects of framing strategies extend beyond individual housing projects or communities (Katz et al., 2017). While provincial government actor framing may have helped soften the opposition to supportive housing, it came at the cost of reproducing stigmatizing attitudes and beliefs about people experiencing homelessness. How people experiencing homelessness are represented by both the public and government actors can have considerable effects on the type of housing and social programs that are made available to them (Boyd et al., 2015). There may also be adverse effects produced by highlighting the individual needs and vulnerability of people experiencing homelessness that individualizes the causes of

homelessness and inadvertently increases stigmatization. For example, there are different views on the effectiveness of individual storytelling such as the success stories and lived experiences of supportive housing residents. On the one hand, storytelling is a common approach used by organizations working on housing and poverty causes, usually with the goal of humanizing marginalized people. My interview with Susan Hancock from Coast Mental Health confirmed the housing provider's goal of humanizing people experiencing homelessness through different communications strategies such as sharing stories about people with lived experience of homelessness (S. Hancock, personal communication, May 5, 2021). On the other hand, an emphasis on individual stories may "give credence to explanations of stigma that focus on individual choices and behaviour rather than those that emphasis structural barriers" (Jacobs & Flanagan, 2013, p. 328). Consequently, if people experiencing homelessness continue to be presented as violating social norms and possessing individual deficiencies, then housing that monitors and controls their behaviour will continue to be normalized (Boyd et al. 2015). Ivan Drury echoed this concern, asserting that "to transition from social housing to supportive housing is to transition from a model that treats poverty to a model that treats pathology" (I. Drury, personal communication, May 11, 2021). This may have the effect of focusing on responding to perceived individual pathologies rather than preventing homeless through structural programs that address the root causes of poverty. At the same time, by focusing on a narrow selection of chronically homeless people, supportive housing restricts the diversity of people able to access it (Yates, 2013).

Parallel to this point is the focus that supportive housing in BC has had on communities with the most visible manifestations of homelessness, typically in the form of tent cities. In the roll out of supportive housing since 2017 multiple projects were built in close proximity to tent cities, with the stated goal of dismantling them and housing their residents. This goal has typically been framed as a win by provincial government actors; for example, in a BC Matters blog post Maple Ridge MLA Bob D' Eith recounts how the provincial government and City of Surrey were able to clear the Whalley Strip tent city "in just three days" (D'Eith, 2018, para. 11) as an argument for supportive housing in Maple Ridge. However, not everyone agrees that this is the most dignified approach. Anna Cooper reflected on this practise as an indication that the provincial government is "more concerned with addressing the concerns of property owners over

visible homelessness than they are over getting this right and doing it in the way that's most dignified" (A. Cooper, personal communication, July 5, 2021). Cooper suggested that a more appropriate and rights-based approach would be to prioritise housing based on who has the greatest need or who would best fit that housing, rather than evicting people from "the only space where people can have any continuity in their living circumstances" (A. Cooper, personal communication, July 5, 2021). This tension between street clearance objectives and providing low-income housing a common feature and critique of the housing first model. Baker and Evans (2016) argue that this aspect of housing first aligns the model with the neoliberal renewal strategies of removing the most visible, but not necessarily the most in need, homeless residents from the public realm. As such, housing first programs frame the clearance of encampments as win-win outcome, despite the questionable motivations it may be based on, and most importantly the outcomes for people experiencing homelessness.

### **5.3.1. What is left unproblematic?**

One of the questions in Bacchi's (2009) framework on policy analysis is "what is left unproblematic" about the assumptions of a particular problem definition. As previously discussed, certain assumptions and social constructions of homelessness can become so normalized in public discourse and policy that they may not be viewed as problematic. In this case study, while provincial government actors challenged some of the stigma associated with homelessness, they also reinforced some ideas about people experiencing homelessness and what sort of housing and services they deserve.

I argue that provincial government actors normalized the amount of control and restrictions placed on supportive housing residents. This is particularly clear in comparison to traditional social housing or market housing. In interviews with Anna Cooper and Ivan Drury they both questioned why supportive residents had to undergo comprehensive background checks, regular and mandatory inspections of their units, and significant restrictions on visitors (A. Cooper, personal communication, July 5, 2021; I. Drury, personal communication, May 11, 2021). Of particular interest and concern was the "program agreement", also referred to as a "good neighbour agreement", a document outlining various rules and restrictions that supportive housing tenants are required to sign before they move in. Cooper expressed concerns about this practice as follows:

Your average person in the private market doesn't have to sign a “good neighbour agreement” to move in next to somebody else. And what is that? That's about people who are able to afford the private market, somehow having greater rights to how the people around them can behave...just because they're poor. (A. Cooper, personal communication, July 5, 2021)

Even though provincial government actors positioned supportive housing as low – barrier housing, because there was no requirement for resident sobriety, there are still several other barriers or restrictions placed on residents. The program agreement replaces the standard tenancy agreement that applies to most other forms of housing in BC. The most problematic aspect of the program agreement is that it excludes supportive housing residents' rights under the Residential Tenancy Act. This makes it easier for the housing provider, Coast Mental Health, to evict tenants and leaves tenants with no recourse to challenge an eviction.

Some unexpected findings of this study also indicate what may have been “left unproblematic” by provincial government actor framing and supportive housing policy more broadly. In addition to the convergence in framing between opponents and provincial government actors, there was also some convergence between opponents and progressive scholars and organizations. While opponents primarily framed supportive housing and people experiencing homelessness in a negative and stigmatizing way, in some instances opponents made similar critiques of supportive housing as progressive scholars and advocates. These critiques were primarily about the need for universal access to services and housing, and not only housing for a small, but targeted group of people experiencing homelessness. Although this point was often hidden beneath distinctions between the deserving and undeserving poor, it shares critiques from scholars like Stanhope and Dunn (2011), who argue everyone should have access to social housing and not only a select group of people.

## **5.4. Conclusion**

*My study asks: how did provincial government actors respond to opposition to supportive housing in Maple Ridge between 2017 and 2019, and how did this response challenge or reproduce stigma toward people experiencing homelessness and its associated power inequities?*

My study applied an adapted version of Critical Discourse Analysis from a social constructivist perspective, which recognizes the relationship between the discursive world and the material world (Fairclough, 2013). Specifically, I maintain that the discursive world both reflects the material world, as well as shapes it. As such, I argue that how provincial government actors responded to opposition to supportive housing has important implications for stigma associated with people experiencing homelessness, and future housing and social policies that support them (Bacchi, 2009; Kuskoff, 2018).

My study found that while provincial government actors strove to increase support for supportive housing and challenge stigma toward people experiencing homelessness, they also reproduced this stigma, and upheld power inequities between people experiencing homelessness, housed residents of Maple Ridge, and provincial government actors. This was demonstrated by three main points of tension between supportive housing opponents and provincial government actor framing. First, themes safety and security were used by provincial government actors to try and balance the safety needs of all Maple Ridge residents, through the notion of “community safety”. However, while the province’s safety and security framing acknowledged the safety needs of people experiencing homelessness, provincial government actors perpetuated the idea that visible homelessness is unsafe and a threat to other residents of Maple Ridge. Second, the support services offered in supportive housing were framed by provincial government actors as being able to provide needed assistance to supportive housing residents, while also pathologizing them and reproducing the association between homelessness and mental illness and addiction. Finally, people experiencing homelessness were positioned as needing to be controlled and reformed in order to fit into mainstream society and “move forward with their lives.”

These points of tension provide an account of the complex realities in discursive and policy responses to homelessness. Recent research on homelessness has typically framed homelessness policy as either punitive or compassionate, but as Hennigan and Spear (2019) and DeVerteuil et al. (2009) argue, responses to homelessness rarely fall into these distinct categories and are more ambiguous. Similarly, housing first and treatment first policies are often framed in the literature and by social actors as being opposites. These binaries are also replicated in the media during conflicts to build new low-income housing, including in this case study. My findings support Baker and Evan’s



(2016) position on the “ambivalent politics” of housing first; that is, that the goals of housing first programs tend to combine the values of both socially progressive and neoliberal politics. They also contribute to studies of the “messy middle ground” (May & Cloke, 2014, p. 895) that challenge the binary analysis of compassionate v.s. punitive responses to homelessness (Hennigan & Spear, 2019; DeVerteuil et al., 2009).

My study maintains that discourse relates to material outcomes, both in terms of stigma associated with homelessness and future housing and social policy. Based on my findings, I argue that provincial government actor framing may narrow responses to homelessness to solutions based on individual pathologies and services and target only the most visible forms of homelessness. Provincial government actor framing also normalizes the control and power that housing providers have over supportive housing residents through strict rules and expectations. Ultimately, this focus may limit who has access to new supportive housing and exclude people with diverse needs and housing situations, as well as shifting the focus of policy responses to the most proximate solutions, at the expense of structural solutions that address root causes.

#### **5.4.1. Research Limitations**

As I have argued previously, stigmatizing beliefs can become so normalized in society that they may not be perceived as harmful. While my study identified how stigma toward people experiencing homelessness was challenged and reproduced by provincial government actors, my own interpretations and analysis may have unintentionally contributed to this stigma. Link and Phelan (2001) discuss how many stigma researchers do not belong to the stigmatized groups they study, and therefore may have knowledge gaps that influence their research. Similarly, Katz et al. (2017) discuss how due to their backgrounds as health researchers, they may have used some the medical framing of homelessness they critique in their study. My own positionality as a middle class, housed, government worker may have similarly biased the analysis, and unintentionally contributed to the framing that I have critiqued in this study. Further, while CDA is frequently used by social science researchers to study the relationship between language, power, and policy, there are weaknesses to this approach. CDA can be vulnerable to confirmation bias by the researcher, in that they select documents and evidence that confirm their point of view (Jacobs, 2006). To help reduce potential bias I outlined clearly the criteria for selecting my data sources and the approach for analysis.

While I only interviewed four people, these key informant interviews complemented CDA and helped reduce potential bias by triangulating the data from document analysis.

Finally, while my research analyzed a comprehensive selection of data sources, some of the complexities and broader socio-political context underpinning this study were beyond the scope of this study and the limits of a solo researcher. As such, there are further avenues of research that could deepen the understanding of the relationship between discourses surrounding stigma, homelessness, and housing policy in BC.

#### **5.4.2. Further research**

While conducting this research, new questions and avenues of inquiry emerged that warrant further research. Through studying *how* stigma was challenged and reproduced by provincial government actors, I often speculated and desired to know more about *why* this occurred. In particular, I wanted to know more about any barriers that provincial government actors faced in challenging stigma, and any real or perceived limits the decision-makers face in advancing low-income housing. Further, as my study focused on discourses surrounding supportive housing and homelessness in Maple Ridge, there is also a need for more research on some of the potential materials consequences of provincial government actor framing that I have outlined. As the supportive housing model discussed in this research is a relatively new policy in BC, research on the long-term outcomes for residents are needed, and, in particular, research that is inclusive of diverse lived experiences, and considers a broad range of outcomes as being “successful”.

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