

Welcome to the full transcript of Marie France Leblanc's enlightening speech on homelessness, delivered at the recent community forum. As CEO of the North End Community Health Center (NECHC), Leblanc offers a profound insight into the multifaceted nature of homelessness, challenging outdated stereotypes and advocating for a compassionate, systemic approach to solving this crisis. Through her address, she emphasizes the importance of community involvement and the need to view homelessness with a lens of dignity and respect.

This transcript captures her compelling call to action and the heartfelt stories she shares about the individuals and families affected by homelessness in Halifax. It serves as a valuable resource for anyone looking to understand the depth of this issue and the collective efforts required to address it.

[0:00:04] Marie France Leblanc, CEO of NEC: "I'm going to ask Marie France Leblanc, the CEO of NEC, to come up now and share some thoughts on how we as a community need to rethink how we view homelessness and how we can be part of the solution."

[0:00:21] Marie France Leblanc: "Good morning. I didn't really think this through—I didn't realize I was going to be the moderator of that video and then I was going to come up here and speak, so I apologize up front. But welcome everyone. I see a lot of faces that I know here, some of you are our partners and do the work with us in this community, and for that, we thank you. Others of you are supporters that we've known for a very long time and we're so grateful—we couldn't do this without you. And there's a lot of new faces too, so welcome."

[0:01:00] "I hope that you learned a little bit about us there. I am not going to speak at great length about what we do today because I think that pretty much said it all, but I'm always happy to talk about it later. Today I want to do something a little bit different. I would like to talk about the issue that's on everybody's mind—or should be—as you were driving in here today as you look across the street: the homelessness crisis in this city."

[0:01:22] "In order to have a conversation about homelessness, though, I think we really need to have context first. We need to put the context out there. So right off the top, I think

it's important to know that the old stereotypes about homelessness really no longer hold. As an organization, as the North End Community Health Center, we work with the traditional face of homelessness—those most vulnerable, those that have addictions and mental health issues, but that is only a small percentage of those that are experiencing homelessness."

[0:02:01] "We know from our experience and the experience across Canada that people living in Canadian cities and in Halifax are varied. You know, when you live rough—either living in a tent, living in your car, living on the street, going to school, while you are trying to raise a family, while you're going to work—those are the people that are out there. That cohort, which would be a student, a single parent, families, those that are rent-evicted, those that are homeless... those people are all the people that are living in the shelters, and they're very resilient."

[0:03:00] "And you have to be resilient because when you get up in the morning and you're not and you're living on the street, you have to figure out, 'Where am I going to go to the washroom? Where am I going to go get some food? How am I going to stay warm?' If I don't happen to be one of the people working or going to school, that's almost a full-time job. How am I going to meet an organization like ours or many of the organizations that help people in this situation to get some of the services that we need?"

[0:04:00] "So what else do we know about those experiencing homelessness? Well, we know that it's been going on for a long time. This is not a new problem. As an organization, the North End Community Health Center has been supporting people who experience homelessness and deep poverty for 52 years. What is new, however, is that it's visible now. It's everywhere you can see it."

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[0:04:20] "Whereas before it might have been more hidden in little nooks and crannies, today we count over 1,000 people on the by-name list who are experiencing homelessness. The by-name list is the list of people that experience homelessness that our housing

support navigators go out, they do points in time, they go to all the shelters, all the encampments, and find out who is living rough."

[0:05:00] "Now, if we have a thousand on the list, we know from experience that there's probably double that number that are experiencing homelessness. To put that into context—because that's what we're talking about—three or four years ago, there were 130 people on that list. That is huge. Now, how did that happen? Who's to blame? Well, those are great questions and they're questions that everybody is obviously asking."

[0:05:30] "So let's look at that for a minute. If you see the media or social media, they try to answer these questions. Well, population growth in the city has out-driven housing supply—true. The cost of accommodations have gone sky-high—well, that's true. The Globe and Mail had an article just last month about how we're at historic highs on rent, and just last week, we found out that Nova Scotia is outpacing everybody else across the country."

[0:06:00] "But at the same time, as those questions and those answers are true, they don't really tell the story of homelessness. Do we really want the story of homelessness to be told by a math equation of supply and demand?"

[0:06:30] "So what I want to talk about today is perspective and how we might approach this crisis in a better way if we looked at it through a different lens. What does that mean? Our view, or perspective, at the North End Community Health Center, and all of those of us that work here and all of our partners here, is very different than those of you who don't work in that sector."

[0:07:00] "We work directly with people that are experiencing homelessness. We develop relationships with them. We hear their stories. We see their strength and resilience every single day. Our staff have a much closer relationship than others. Some of you today work in the medical field, in housing development, business, private sector of another kind. All of our perspectives are based on our experiences and our view."

[0:08:00] "I suspect everyone in this room is pulled in a bunch of different directions when they think about homelessness—the desire to help, a temptation to blame, how did this happen, a genuine empathy probably sprinkled with a little bit of, 'But I don't want it in my neighborhood. Not in my backyard.' But that's okay. That's human nature. There's some good and there's some bad. But having recognized that perspective exists, I think it's fair to ask how are we as an overall community reacting to this crisis?"

[0:09:00] "Snapshots from daily life, you know, the headlines, social media, would say that there's good news stories and there's bad news stories when we're responding to the homelessness crisis. I'm going to share a few of them from my experience."

[0:10:00] "In one neighborhood in this city, there were tents everywhere, and one day when there was nobody in the tents, one of the people who is housed in that neighborhood went and destroyed all the tents, put them in the garbage, and then went on the community Facebook page and said, 'You can thank me later for having solved our problem.' And in a neighborhood not too far away, there was one tent in a park where everybody walks their dog, and one of the dog walkers started befriending this person, saying good morning every morning, asking him how he was, asking him if he needed anything..."

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[0:10:30] "...and the person living in the tent said, 'No thank you, I'm good. I live in a tent, but I'm good.' Eventually, they struck a morning relationship, and on Thanksgiving, this man said, 'Would you like to come for Thanksgiving dinner with my family?' After having said no for weeks to offers of help or food or whatever, the gentleman said, 'That'd be nice.' So he came for Thanksgiving dinner."

[0:11:00] "And again at Thanksgiving dinner with an extended family, everybody was saying, 'Well, can I get you this, can I get you that, do you need this, do you need that?' He kept saying, 'No, I'm good but thank you.' It got a little cold so one morning, when this person who was walking the dog—and some of you might know this story because he posted it on LinkedIn—when he was there, the gentleman said, 'You know what, I might take some help,

I'm cold.' So this gentleman now lives in his basement, and he's looking for a job and all this sort of stuff."

[0:12:00] "But that was a relationship. It took a long time to get there and there's versions of this throughout the city every day, every week. On the housing side, which is some of the work that we do, there's also good news and bad news. Good news: The Waverley Inn, everybody probably saw it in the newspaper last week, the owners of the Waverley Inn have come to an agreement with the YWCA to lease back the building before they do their development, and they're going to be there for five years, and they're house families that would otherwise be homeless, providing the supported housing until they can move on to something else."

[0:13:00] "That's great news. At the North End Community Health Center, we have great relationships with real estate agents, which I see here, with developers, leasers, lenders, but more often than not when we go down the path of trying to get a building, we don't get it when they find out who's going to be living there. It's just what happens."

[0:14:00] "So, in my work, I also hear about individuals and, you know, the other day, or more than the other day a while ago, I heard of one person who said, 'I just had dinner on Spring Garden Road, it was a great dinner, and I had some leftovers. So, I walked over to Victoria Park and tried to give my leftovers and they were ungrateful, nobody wanted them.' Well, think about that. Do you want somebody else's leftovers that you don't know? Of course, you don't."

[0:15:00] "So that brings us back to perspective. Why do we as an overall community view people living in a tent through a different lens? Or more bluntly, why do we choose a lens that allows us to treat them with less dignity and respect than we would treat somebody that was housed?"

[0:16:00] "So, no matter how any of us feel about homelessness and the crisis, regardless of who's at fault, how did we get there, or how it should be fixed, I'd encourage us to, in choosing how we approach the issue personally, from a business perspective, from a

policy perspective, that we look at it by asking ourselves this one question: Do those experiencing homelessness deserve less respect and dignity than those that are housed?"

[0:17:00] "So let's talk about that for a sec. I suspect everybody in this room said that they don't; that they do deserve the same respect and dignity unless you happen to be in the wrong breakfast. Like I'm assuming that everybody said yes. Um, that's not the hard part to answer. The hard part is whether your thoughts reflect your actions around the homelessness."

[0:18:00] "If we as an HRM community can get to a 'yes' and use that yes to guide our actions, then I think we have gone a long way towards making a difference in the homelessness crisis. And this is the same step that the founding physicians of the North End Community Health Center, who you heard about in our video a few minutes ago, took 52 years ago when they chose to move a clinic to the north end so that they could provide equitable health care to those most in need."

[0:19:00] "And not just health care, but collaborative health care that would allow for social services to be included. So now, 50 plus years later— and I wasn't there then, just for the record— 50 plus years later, we use that same perspective in everything that we do. And in particular, because of the conversation we're having today, we use that perspective when we talk about housing and we talk about caring for those experiencing homelessness."

[0:20:00] "Over the past three years, and we alluded to it in the video, I'm just going to expand on it a little bit. Over the last three years, the North End Community Health Center started buying buildings to house people who experience homelessness and who need support—the most vulnerable. Now we now manage or support or own 16 buildings that's a few of them across HRM, and each one is a community of its own."

[0:21:00] "We have a very specific lens in the housing that we provide. Other service providers across the city have a different lens. Some support victims of abuse, some support those that don't need as many supports as we do. Ours is very much supportive housing for the most vulnerable. And I'm not here to romanticize our residences, especially in a room like this."

[0:22:00] "We need to acknowledge that there's good things that happen there, and there are bad things that happen there. When I read in the media all the nice, heartwarming stories— I mean, they're great, they get the issue out there, but they're not realistic. And we know that. And we know that. So we have to acknowledge it."

[0:23:00] "By caring for the most vulnerable, you acknowledge and you embrace the fact that they're fragile. But that's the work that we do, and that's how we support those individuals. Just because they may be more difficult doesn't mean that they have to be outside. They have a right to be in a house."

[0:24:00] "So by assuring them a dignified and respectful housing, we really are making a difference in everyone's lives. So I want to tell you a story. This is the Overlook. It was in the news a lot about a year ago. It was an old Travel Lodge motel that we turned into supportive housing."

[0:25:00] "Lots of partners here that were part of that. And it is supportive housing for those with most needs—chronic homelessness, mental health, and addiction issues. So about a year and a half ago, I was in Victoria Park with a street navigator, and I can't even remember why I was there, but I was there."

[0:26:00] "And a gentleman found out what I do, where I worked—probably because I told him. And he said, 'I'd like to live in The Overlook.' This was before we were open, and I think we were out there talking to people about what were some of the things that they'd like to see in The Overlook."

[0:27:00] "And I said, 'Well, I have nothing to do with that. I'm an administrator, I'm not a service provider. I've got people in our organization that do that way better than I do.' But, you know, 'You should get your name on the by-name list, and hopefully, it'll work out for you.' Well, sure enough, it worked out for him."

[0:28:00] "So I show up at The Overlook a few months after we're open, and there's someone walking into the room. He's got pressed pants, a pressed shirt, a vest. It's 8:00

a.m., and he's on his way to what we call the library, which is where people sit to receive their treatments in the morning."

[0:28:26] "Many of our residents need treatment every morning, so we have a pop-up pharmacy, we have nurses, we have physicians that come in to provide the supports. We have a managed alcohol program, safe supply. And he sits there and he starts greeting everybody and asking them what they not paid to do this, but it's his community, and that's his role. We call him the mayor of The Overlook, or I call him the mayor of The Overlook. And that is community, and that is what everybody should have the ability to have, whether you're housed or not, whether you live in a building or if you live in a neighborhood."

[0:29:00] "I'm sure you all live in neighborhoods; we know who we can call, who's going to set up the Christmas street party, who's going to call and that is what we're building at The Overlook. So now, getting back to our homelessness crisis, imagine if as citizens of HRM, we approached all issues or policies touching on homelessness with open consideration for the dignity and respect of those experiencing homelessness, but of all people."

[0:30:00] "But I would say that we probably do that for those that are housed. But what if we extended that beyond there? Now I keep going to this because I feel disregard for dignity is almost always present when we're talking about the homelessness crisis, and it can be conscious or unconscious."

[0:31:00] "I'm not saying that anybody gets up in the morning and says, 'I'm going to deny dignity to those that are living in homelessness.' Of course not. But the subconscious unless we call it out, is going to stop us from getting to the right solutions, the better solutions."

[0:32:00] "So as I said earlier, we struggle to get buildings. You wouldn't think so because we have 16 now, but we do. We have 16, we could use another 16, that's how many people we have on our list that we support. So we struggle to get buildings, and when we meet with developers, when we meet with landlords, we have good relationships, they like talking to us, it goes well."

[0:33:00] "Until they find out who is going to live there. It's a business decision, make no mistake. I can't fault them for it, the way the market is right now, it's competitive. If you own a building, you've got to do what's right for your business. But it's a business decision, and we've arrived at that because as a community, we've allowed that to be the market force."

[0:34:00] "So what if we changed our perspective and our attitudes, and as a community, providing buildings for those that are experiencing homelessness is the market advantage?"

I want to tell you a story that didn't hit the media because, to be clear, these perceptions aren't only in the housing industry; they're across the board."

[0:35:00] "So the story that didn't hit the media, and I cleared it with all my board members to share it, is that about three weeks ago, the Emergency Response Team of the Halifax Regional Police showed up at our building, The Overlook. When I say showed up, they showed up with full gear, shields, batons, dogs, machine guns."

[0:36:00] "And they were looking for information. There had been a string of robberies, and they thought that The Overlook was housing this person. Well, we weren't, and they wanted video footage. So my staff, no warrant, and my staff intimidated by this, showed them the video footage, the minutes that they wanted, and they didn't find what they were looking for."

[0:37:00] "So then they started saying, 'Well, we want the whole footage for the last three days.' On and on. Well, that's when I got involved and I called the lawyer, and that lawyer called another lawyer, and the two of them were there within 30 minutes, pro bono, to help support the dignity and the rights of the individuals living in The Overlook."

[0:38:00] "But it didn't end there. They kept everyone there for 11 hours. And when I say everyone, I mean nobody could get in or out, including my staff. They wouldn't let my staff in or out. We couldn't give them relief. Now think about this: We've got 52 people living there now, they weren't all there, half of them were out because it was sort of 10:00 in the morning, 11:00 in the morning."

[0:39:00] "But we've got 52 individuals that are the most vulnerable, that need to have their medication on a regular basis, that need to have their supports, that have been traumatized in a variety of ways their whole lives. And now they're being held hostage. Their animals are being held hostage. They weren't allowing animals to come out to go to the washroom."

[0:39:30] "We have dogs, nobody. So I made a quick phone call to somebody in this room, and he got me a city bus so that those that weren't in the building could at least stay warm. And then our physicians and our social workers and our housing support workers all congregated to that bus to provide those supports."

[0:40:00] "And we negotiated, meaning the lawyer negotiated, that we could get some medicine in, some emergency medicine in, and we tried to do all this for 11 hours, for one individual that didn't live there, that might have been in there. And he was, to be clear, he was in there, but just imagine if that individual had decided to hide at Parkland or at the Trillium."

[0:41:00] "Parkland's a supportive housing just like we are, Trillium's an apartment building just like we are. These people are tenants, they pay rent, they have leases. Do you think the whole ERT, which I keep calling SWAT, which is wrong, would show up there? I don't think so."

[0:42:00] "And let's be clear, there's not a whole lot of difference between Parkland and The Overlook in terms of age. We have a whole lot of seniors there, and that's perspective. And it was the perspective that these were people that were previously homeless, so we better gear up. And police work is hard, and we accept that there's criminalization in the work that we do."

[0:43:00] "And we have great relationships with the community police, but for solutions to homelessness to work and to be effective, the people that we're providing the solutions for need to trust that we're going to support them, and that we're going to respect them, and that we're going to follow the law and show up with a warrant."

[0:44:00] "So I'm not here to vilify the police. That's a community perspective that we've allowed to happen in our city, and it's not just the police. It's everywhere. A person who's experiencing homelessness, we give out gift cards so that they can go get food. More often than not, when they show up at the restaurant, they're not allowed in."

[0:45:00] "They have gift cards, they're going to pay, you're not allowed in. So that's another form. Now, I kind of got stuck with not moving my slides along here, so I could go on. There's lots of those healthcare same thing, and I'm not picking on healthcare, but if you have a person who looks homeless or is homeless and they're experiencing strange behaviors..."

[0:46:00] "They're experiencing the behaviors that they are ill, and that exhibits these behaviors, and they show up for support, they're denied support because of their behaviors which are caused by a medical problem. I understand it's how our community, it's how we have now built our systems."

[0:47:00] "So I would suggest that as a collective, we need to do better. So this weekend, most of you probably saw this, the Globe and Mail, but their list of 100 top cities to live within Canada, Halifax was 106. Now I disagree with that, I think Halifax is the best place to live."

[0:48:00] "But Halifax was 106 on this list, and all the criteria were based on people that want to move and that the right fit and the supports that they need, and all that sort of stuff. I would argue that we could help our cause if we consistently showed as a city, as a community, that we considered the best interest of all of our citizens when making our decisions."

[0:49:00] "Those of us who work in this field and who know the issue of homelessness better than most know that this took a long time to develop. Homelessness didn't just happen, which means that it's not just going to end. I often say it's a marathon, not a sprint."

[0:50:00] "For those runners in here, um, so take a second about this then, the news of the pallets this week. The Province purchased those pallets, uh, they were supposed to be done by December, that it's been postponed. But I hope everybody took the time to find out why they were postponed because we're pleased that they were postponed for the right reasons."

[0:51:00] "You need to have the systems in place, you need to be able to have the supports in place, so taking time to do that is showing respect and giving dignity to the people that are going to live there. Putting those up and not having any of that stuff, you're just trading one problem for another."

[0:52:00] "And again, back to my beginning, you can put blame, you can say we should have started before, we're on a treadmill, we need to slow down, and that's what we're doing because that is what is needed in order to have efficient solutions to our crisis. So how we respond, as I've said, is really based on public attitudes, which is perspective."

[0:53:00] "And I hope that some of what I've said today kind of made you think about things in a different way. Like I said, I know this is not going to change overnight, but if as a collective, we can start to change the perceptions, talk about this issue in a different way, I think we would go a very long way to making a difference in this crisis."

[0:54:00] "And this has been our mission for 52 years, and I can say that on the healthcare front, we've moved the needle a very long way. Collaborative practice, health without barriers, are now the buzzwords that are used in healthcare. So now, we've got to start with housing and the issue of homelessness, and we have to take a little less time than the 52 years it took us with healthcare."

[0:55:00] "Thank you very much for supporting us and being here today, and to listening to our view at the North End Community Health Center on the issue of homelessness."

[0:55:13] [Applause]

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