

PRESENTED BY

 **Cochrane District System of Care**
Systeme de soins du district de Cochrane

ON BEHALF OF THE COCHRANE DISTRICT SERVICES BOARD

EVERYONE COUNTS

Cochrane District 2024 Enumeration

2024+

FEBRUARY 2025

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“ While homelessness in smaller communities may not be as visible as in larger communities, the reality is that homelessness is increasing greatly. It is a complex issue that requires a multidisciplinary team to address effectively. My team and I visited places that I described as 'heart-breaking'. We had seen places that seemed uninhabitable, but were being used as shelter. Homelessness is a result of failing infrastructure in society, which includes a lack of adequate resources across the board, and, of course, the lack of appropriate, affordable housing. While working in the field of homelessness, addictions, and mental health means that I work with this regularly, the PiT count was a whole other level of intensity.

– Surveyor

LAND ACKNOWLEDGEMENT

The Cochrane District Services Board acknowledges that we are on the traditional territories of many First Nations, including the Moose Cree First Nation, Flying Post First Nation, Constance Lake First Nation, Mattagami First Nation, Apitipi Anicipnapek Nation, and the Taykwa Tagamou Nation, covered by the James Bay Treaty No. 9. These lands have been long home to Indigenous Peoples who have stewarded them with care since time immemorial. We also acknowledge that the impacts of colonization, including displacement and the erasure of Indigenous governance and ways of life, continue to be felt toward – particularly in the disproportionate experiences of homelessness among Indigenous Peoples. As we work, gather, and live here, we recognize that housing is not just about shelter but the right to home, land, and belonging. We commit to honoring Indigenous leaderships in addressing these injustices, and to working toward reconciliation that is rooted in action, relationship-building, and a shared responsibility for the well-being of this land and all who seek safety upon it.

ACKNOWLEDGEMENTS

This report was prepared by KayLee Morissette and reflects the collective efforts of community partners, service providers, frontline staff, and volunteers who supported the Cochrane District Services Board in carrying out the Everyone Counts 2024 Point-in-Time Count in the fall of 2024. The success of this initiative was made possible through months of careful planning led by KayLee Morissette, Natalie Hallok, and the System of Care team at the Cochrane District Services Board. Their work was further informed by valuable input from community partners who participated in advisory committee meetings throughout the planning process.

We want to extend our heartfelt gratitude to the dedicated individuals who took their time to engage with people experiencing homelessness – listening to their stories, understanding their realities, and ensuring that their voices are heard. Most importantly, we want to acknowledge and thank those who shared their lived experience with us. Your stories matter, and they shape the way we work toward a most just and compassionate society. **Thank you. Merci. Miigwetch.**

ABOUT

THE COCHRANE DISTRICT SYSTEM OF CARE

The Cochrane District System of Care is a program managed by the Cochrane District Services Board.

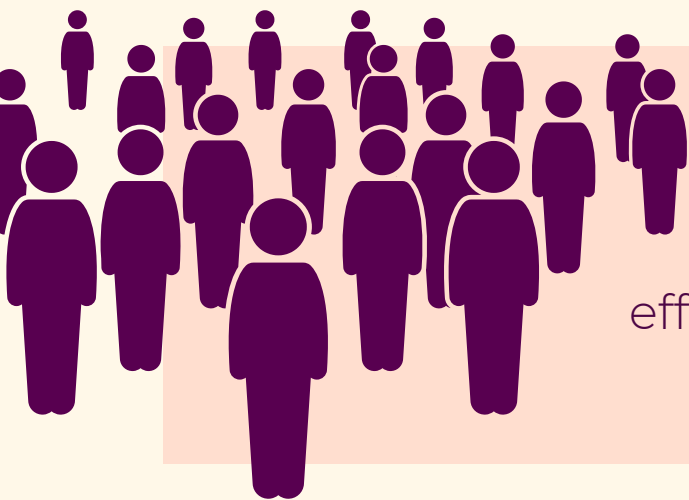
The Cochrane District System of Care refers to our regional coordinated access system. In practical terms, the System of Care is a mechanism that allows various agencies to work together to best support people who are trying to secure and maintain housing.

The System of Care provides a transparent, fair and streamlined approach to access to housing and services for people experiencing homelessness in the community.

The System of Care is committed to eliminating chronic homelessness and building a District where everyone has a safe and affordable home in a neighbourhood they choose to live in.



INTRODUCTION



The Everyone Counts 2024 Point-in-Time (PiT) Count is a nationally coordinated effort to measure homelessness at the community level.

It provides a snapshot of homelessness, capturing an estimate of the number of individuals experiencing homelessness in emergency shelters, transitional housing, unsheltered locations, and other temporary accommodations, using a nationally recognized methodology. The Point-in-Time count serves as a critical tool to help communities, policymakers, and service providers better understand homelessness trends, identify priority areas for intervention, and improve service delivery.

A Point-in-Time Count is **not meant to be perfect or an exhaustive count of homelessness** – rather, it serves as an important tool to understand trends, identify service gaps, and inform policy decisions. It is widely accepted that Point-in-Time Counts are undercounts, as not everyone experiencing homelessness can be reached in a given short period of time, particularly in rural and remote areas where homelessness is less visible. Some people will inevitably be missed, and some double counting may occur. However, the goal of the Point-in-Time Count is to provide the best possible estimate of homelessness based on this methodology, while capturing key demographic and experiential data from those surveyed. Furthermore, a Point-in-Time

Count is anonymous and non-identifying. This means the information discovered in a Point-in-Time Count cannot be traced back to individuals within the community. The Point-in-Time Count is one tool used to measure and track homelessness in the community, and along with the Cochrane District By-Name List, can be used toward making informed choices about how the community can end homelessness. A By-Name List collects real-time information on an-ongoing basis as people enter and exit homelessness. The data included on a By-Name List is collected over time, as needed, to provide the right amount of service to people experiencing homelessness at the right time based on progressive engagement. It is also updated in real-time using a database called Homeless Individuals and Families Information System (HIFIS), to ensure that the aggregate level data produced by the By-Name List reflects the dynamic nature of the homelessness response system and the people that use it. The By-Name List provides actionable household level data needed for the homeless service system to offer housing support and can snapshot and measure trends monthly (or more often as needed) to understand system effectiveness and support real-time system improvements. A By-Name List is not meant to replace a Point-in-Time Count.

Why is the Point-in-Time Count Important?

By gathering data on who is experiencing homelessness, where they are staying, and their lived experience, the Point-in-Time Count helps service providers, government agencies, and community organizations make informed decisions about resource allocation, service provision, and housing interventions. The findings also contribute to national efforts to end homelessness by tracking progress over time and supporting evidence-based policy making.

The value of the Point-in-Time Count lies in its ability to provide:



A **baseline** measurement of homelessness in the community, allowing for future comparison



Insights into trends, including the number of individuals experiencing chronic homelessness, overrepresented populations, and service utilization patterns



A **starting point for community discussions** on homelessness prevention, policy development, and service planning

The 2024 Point-in-Time Count included two distinct components:

01

A 24-hour Enumeration (October 10th, 2024):

The enumeration recorded the number of individuals confirmed to be experiencing homelessness on a single night, including those staying in shelters, unsheltered locations and transitional housing. While Point-in-Time Counts are not designed to capture hidden homelessness (i.e. couch surfing), the count did capture a number of individuals who were temporarily couch surfing, self-funding motels, or were otherwise in very precarious or temporary housing accommodations.

02

A Survey component (October 11th – November 9th 2024):

The survey component was conducted over a 30-day period to gather additional demographic information and personal experience from individuals experiencing homelessness.

“ At first, some people were hesitant to participate, but once they realized we were there to listen—not judge—they opened up. Many shared deeply personal stories about how they ended up homeless, and you could see the relief when they felt heard. This data is more than just numbers; it’s a reflection of real lives, struggles, and the gaps in our system that need to be addressed.

– Surveyor

Reaching Home

Reaching Home: Canada's Homeless Strategy is a community-based program that aims to prevent and reduce homelessness by providing direct support and funding to specific communities across Canada. As a Designated Community, the Cochrane District was required to participate in the Nationally Coordinated Point-in-Time Count, which occurred across the country in the fall of 2024. As part of this process, the Cochrane District has adopted standard terms to describe homelessness. As per Reaching Home, "Homelessness is the situation of an individual or family who does not have a permanent address or residence, and does not have the immediate prospect, means, and ability of acquiring it."

This report represents an essential step in understanding and addressing homelessness within the Cochrane District. Throughout the report, we will contrast the results of the Point-in-Time Count with results from the 2021 Point-in-Time Count, October 2024 By-Name-List Data from the Cochrane District and the Everyone Counts 2020-2022 -Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada. As you review the information in this report, it is important to remember that homelessness is not just about individual choices or circumstances, rather it is a structural issue, shaped by economic inequality, systemic discrimination, and policy failures at multiple levels of government, and that the evidence suggests that housing unaffordability, precarious employment, and inadequate social safety nets are among the primary drivers of homelessness (Falvo, Ch. 1: What causes homelessness, 2022) (Jong, 2019).

POINT-IN-TIME COUNT 2024 AT A GLANCE

Enumeration

390

individuals were experiencing homelessness in the Cochrane District on October 10th, 2024.

Survey Administration

381

individuals participated in the survey between October 11th, 2024 and November 9th, 2024.

Summary of Enumeration Findings

36%



Encampments

21%



Transitional housing programs

16%



Emergency & extreme weather shelters

15%



Unsheltered
excluding encampments

8%



Violence Against Women (VAW) Shelters

4%



Systems
Health and/or corrections

Summary of Survey Findings

67%



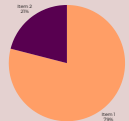
have been homeless for more than 18 months

10%



of respondents were youth experiencing homelessness, with 65% having prior involvement in the child welfare or foster care system

79%



of homeless were Indigenous

35%



of homeless became homeless before the age of 19

55%



increase in survey number compared to 2021 survey administration

METHODOLOGY

The Point-in-Time Count provides two sources of data:

01

A one-night enumeration of how many people experience homelessness in the community

02

Survey responses from people experiencing homelessness.

The Point-in-Time Count followed the methodology as outlined in the “Everyone Counts: A Guide to Point-in-Time Counts in Canada, 4th edition” toolkit developed by the Government of Canada while adhering to the Standards for Participation.

While the goal was to count as many people as possible, homelessness is often **hidden**—especially in a region as vast and sparsely populated as the Cochrane District. It is important to recognize that some individuals inevitably **go uncounted**, and some locations are harder to access than others.

01

Enumeration – How the Count was Conducted

For the **sheltered count**, agencies that operate emergency shelters, transitional housing programs, Violence Against Women (VAW) shelters and institutional treatment centers were asked to report their occupancy on the night of October 10th, 2024. This included individuals staying in hotels funded by service agencies and using other short-term programs. The numbers were provided by shelter staff and reflected occupancy as of 4:00AM on October 11th to ensure consistency across reporting.

Transitional shelter capacity can be fluid and difficult to measure accurately. Some programs do not have fixed bed counts but rather expand or contract based on funding availability and need. Others, such as VAW shelters, have dedicated spaces but house families rather than individuals, meaning the number of beds in use does not always reflect the number of people staying there. These nuances complicate the data and must be considered when interpreting the results.

The **unsheltered count** was conducted through street outreach and direct engagement with individuals sleeping in public spaces. This included locations such as parks, trails, ravines, encampments, sidewalks, and makeshift shelters such as cars. Partner agencies signalled to clients they knew who were experiencing hidden homelessness to make themselves visible on the night of the count. It is important to note that while the statistics submitted to the federal government do not include data on hidden homelessness, this report does incorporate findings on individuals experiencing hidden homelessness, such as those couch-surfing or staying in temporary, insecure accommodations.

This distinction ensures a more comprehensive understanding of homelessness in the Cochrane District, capturing the full scope of housing precarity beyond just those in shelters and unsheltered locations.

Given the vastness of the Cochrane District and the rural nature of many of its communities, outreach teams faced significant challenges in reaching all possible locations across the district. Encampments in deep forested areas, for example, were difficult to access due to weather conditions and the presence of wildlife. In addition, not all communities had teams of outreach staff to conduct enumeration on the night of the count. An effort was made to count individuals at risk of homelessness within correctional facilities and hospitals; however, data from these settings was not available.

The unsheltered coverage was determined using a combination of local knowledge, service provider insights, and past Point-in-Time Count data, specifically:



Mapping known locations: We identified areas where unsheltered individuals frequently stay, including encampments, high-traffic public spaces, and informal settlements.



Pre-engagement with people with lived experience: Insights from those who have experienced homelessness helped refine our strategy, ensuring we prioritized locations that were most relevant.



Service provider input: Agencies with direct relationships to people experiencing homelessness were consulted to identify hidden homelessness, including individuals staying in vehicles, tents, or couch-surfing.



Table 1: Results from enumeration

	Confirmed	Observed
Unsheltered	41	19
Encampment	75	66
Shelter	64	0
VAW	30	0
Transitional	81	0
Systems	14	0
SUBTOTAL	305	85
GRAND TOTAL		390

The category “Unsheltered” includes people who are uncertain about where they are staying, those living in RVs/vehicles/tents outside of encampments, and individuals identifying as couch surfing.

The “Shelter” category in this table includes individuals staying in emergency shelters or hotels, whether self-funded or funded by agencies, provided these arrangements are not part of a transitional housing program, whereas in Table 2, the “Shelter” category refers to Emergency Shelters only.

Table 2: Aggregate information on shelters for the Cochrane District

	Number of Facilities	Number of Beds	Number of Beds Occupied on Enumeration Night
Shelter	1	63	41
Extreme Weather	0	0	0
VAW	4	45	30
Transitional	10	depends	81
Shelter (hotel or other programs)			23

The numbers reported for shelter, transitional housing, domestic violence shelters, and emergency weather shelters are based on the information provided to us by service providers. It is important to note that transitional shelter bed availability can fluctuate due to a variety of factors, including budgetary constraints, funding availability, and operational challenges. Additionally, infrastructure limitations, such as the number of rooms or beds available and how they are utilized (e.g., family units versus individuals), can further impact the reported capacity. These variables mean that the reported numbers represent a snapshot in time rather than a static or definitive total.

02

Survey Administration and Data Collection

Conducting a Point-in-Time Count is about more than just numbers—it's about meeting people where they are, building trust, and making space for their voices to be heard. Recognizing that a clipboard and a list of questions are rarely enough to encourage participation, we approached survey administration with a commitment to community engagement, accessibility, and relationship-building.

From **October 11th to November 9th, 2024**, surveys were conducted in Timmins, Cochrane, Matheson, Iroquois Falls, Hearst, Kapuskasing, Smooth Rock Falls, and Moosonee. These surveys helped capture not just the scale of homelessness in the region but also the lived experiences, barriers, and resilience of those facing housing precarity.



“*Participating in the PiT Count was an eye-opening experience. It gave us a clearer understanding of the needs in our community and how we can better support those facing hardship. This kind of outreach is essential for meaningful change.*”

– Surveyor

A Community-Led Approach to Engagement

To encourage participation and ensure that no one was left out, we took intentional steps to bring the survey to the places people already gather—reducing barriers and making the process feel less clinical and more like an opportunity for genuine conversation.



Showing Up in Community Spaces: Surveys were administered at food banks, soup kitchens, encampments, and drop-in programs, ensuring that we reached people in ways that felt natural and accessible.



Creating Welcoming Spaces: When survey booths were set up, we often had hot meals, snacks, and drinks available alongside the honoraria, creating a space where participation felt less like an obligation and more like an opportunity to be heard.



Hosting Community Events: In some locations, we hosted BBQs and community meals to foster connection, reduce stigma, and create a setting where people felt comfortable sharing their experiences.

To encourage participation and ensure that no one was left out, we took intentional steps to bring the survey to the places people already gather—reducing barriers and making the process feel less clinical and more like an opportunity for genuine conversation.

Partnering with Indigenous Organizations: Centering Community Knowledge and Leadership

The Point-in-Time Count would not have been possible without the leadership, guidance, and participation of Indigenous organizations across the Cochrane District. Indigenous communities are disproportionately impacted by homelessness, and any effort to understand and address this issue must be deeply informed by those with lived experience and cultural expertise.

To ensure meaningful engagement, we worked closely with Indigenous organizations throughout the planning and implementation of the count. These partnerships helped shape where and how surveys were administered, ensuring that Indigenous community members felt safe, respected, and heard. Indigenous service providers played a crucial role in outreach and survey facilitation, helping to build trust and reduce barriers for those hesitant to participate.

In some communities, Indigenous organizations led the survey administration process, hosting survey sites, conducting outreach, and ensuring that the count was reflective of the realities of Indigenous homelessness, including hidden homelessness and rural displacement. Their insights were also instrumental in identifying locations where people were staying, beyond shelters and visible encampments, ensuring that individuals experiencing homelessness in more isolated or precarious conditions were not overlooked.



Challenges in Survey Administration and Data Collection

The process of survey administration and data collection presented several challenges. These obstacles highlight the complexities of conducting a comprehensive count, particularly in a geographically vast and rural region with a diverse population.

One of the more delicate challenges we faced was navigating anti-homeless rhetoric within certain communities. While public awareness is often a key component of any large-scale data collection effort, we made the intentional decision not to overly advertise the Point-in-Time Count to the broader community. This approach was taken to protect the dignity and privacy of individuals experiencing homelessness, ensuring that they would not face additional stigma, harassment, or unwanted scrutiny.

In some areas, public discourse around homelessness remains deeply polarized, with narratives that either dismiss the presence of homelessness altogether or portray those experiencing it in a negative light. Rather than risk exacerbating these attitudes—or discouraging participation from those who might fear judgment—we focused our outreach efforts on direct engagement with service providers, Indigenous organizations, and frontline workers who had existing relationships with the population we were trying to reach.

While this decision ultimately helped to safeguard the safety and trust of participants, it also meant that our reach was constrained by the limitations of service-based enumeration. People experiencing hidden homelessness or who avoid services due to stigma may not have been fully captured in the count. Moving forward, finding ways to balance community engagement with the need for privacy and respect will be an ongoing consideration in future Point-in-Time Counts.

The survey itself, while comprehensive, presented challenges in administration. Some questions led to inconsistent responses, particularly those related to geographic movement. For example, individuals were asked where they were currently living, but the wording of the question left room for interpretation, leading to discrepancies in data. In some cases, surveys were incomplete, either because respondents declined to answer certain questions or because surveyors unintentionally skipped sections. Additionally, some surveyors recorded information inconsistently, leading to minor data entry challenges that required additional follow-up. Other survey questions presented challenges include difficulty recalling timelines, unclear distinction between police interactions and arrests, and confusion around the definitions of permanent and transitional housing, which required additional clarification from survey administrations to ensure accurate responses.

“ One of the biggest challenges was helping people recall timelines—homelessness isn’t something you track with a calendar. Some participants moved between different types of unstable housing, making it hard to document their experiences. This process really showed me how complex and fluid homelessness can be, and why one-size-fits-all solutions won’t work. The data we’re collecting will help paint a clearer picture of what’s actually happening on the ground.

– Surveyor

Given the high volume of surveys collected, data entry was a time-intensive process, requiring careful review to eliminate duplicates, address inconsistencies, and ensure accuracy. Approximately 70 surveys were excluded from the final analysis because they were either incomplete, submitted multiple times, or contained responses indicating that the respondent was permanently housed. In contrast, over 20 surveys were initially flagged for exclusion but were later reintroduced after a more thorough review of their responses. Ensuring the integrity of the data required significant time and effort, particularly given the nuanced and complex nature of homelessness data.

Participants were not required to answer every question on the survey, but surveys that contained only the screening question with no additional responses were removed from the final dataset. As a result, because respondents could skip questions, the total number of responses for each question varies, meaning that in the analysis, answers do not always add up to a perfect 100%.

CONTEXTUALIZING THE FINDINGS

COMPARISONS ACROSS THE DATA SOURCES

Table 3: Comparisons across the data sources

	Age			Gender			Indigenous Status		Total
	Youth	Adult	Senior	Male	Female	Diverse	Yes	No	
Canada PiT 2022	8%	87%	5%	64%	33%	3%	31%	69%	
BNL 2024	8%	89%	3%	56%	43%	1%	55%	45%	437
Survey 2021	7%	90%	2%	62%	37%	1%	82%	18%	242
Survey 2024	10% ↑	89%	2%	57%	38%	4% ↑	79%	21% ↑	381 ↑

The 2024 survey shows an increase in youth representation, gender diversity, and non-Indigenous participation compared to the previous survey in 2021.

Compared to the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada report (Canada PIT 2022) and the By-Name List October 2024 snapshot (BNL 2024), age distribution remains relatively consistent, with adults comprising the majority (87-90%) across all surveys. The 2024 survey shows a slight increase in youth representation (10%) compared to previous survey.

Gender distribution varies, with males consistently representing the majority (56-64%). The 2024 survey indicates a notable increase in gender-diverse individuals (4%) compared to previous years. Indigenous representation fluctuates significantly between surveys. The 2021 survey shows the highest Indigenous representation (82%). The total number of respondents in the 2024 survey (381) increased compared to the 2021 survey (242), indicating a growth in the homeless population.

RESULTS

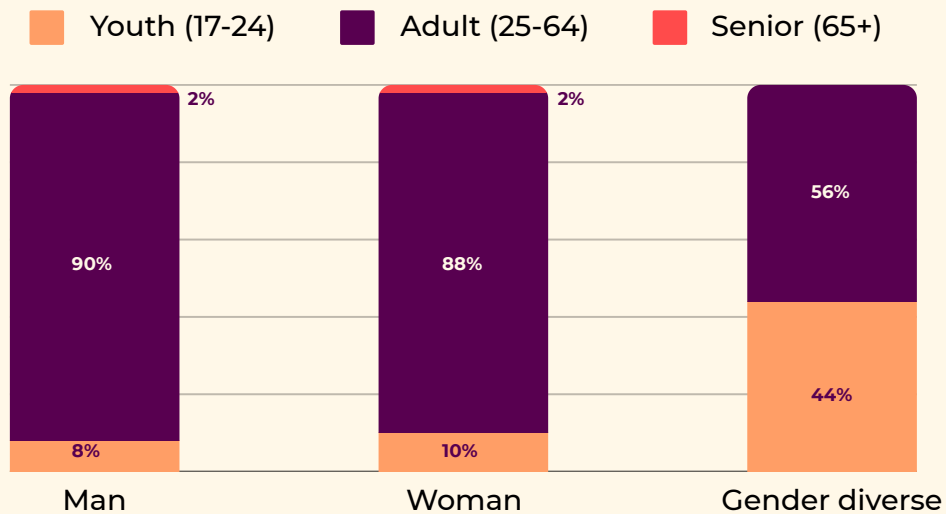
FROM THE POINT-IN-TIME COUNT SURVEY

Findings from the survey includes data from 381 surveys conducted across the Timmins, Cochrane, Hearst, Iroquois Falls, Matheson, Moosonee, Smooth Rock Falls, and Kapuskasing communities.

Demographic Characteristics

The majority of respondents were adults aged 25 to 64 (88%), followed by youth aged 17 to 24 (10%), and older adults aged 64 and above (2%). Most respondents identified as men (58%), while 39% identified as women and 2% as gender diverse, this finding is similar to the By-Names List captured in October 2024.

Figure 1. Gender and age of respondents



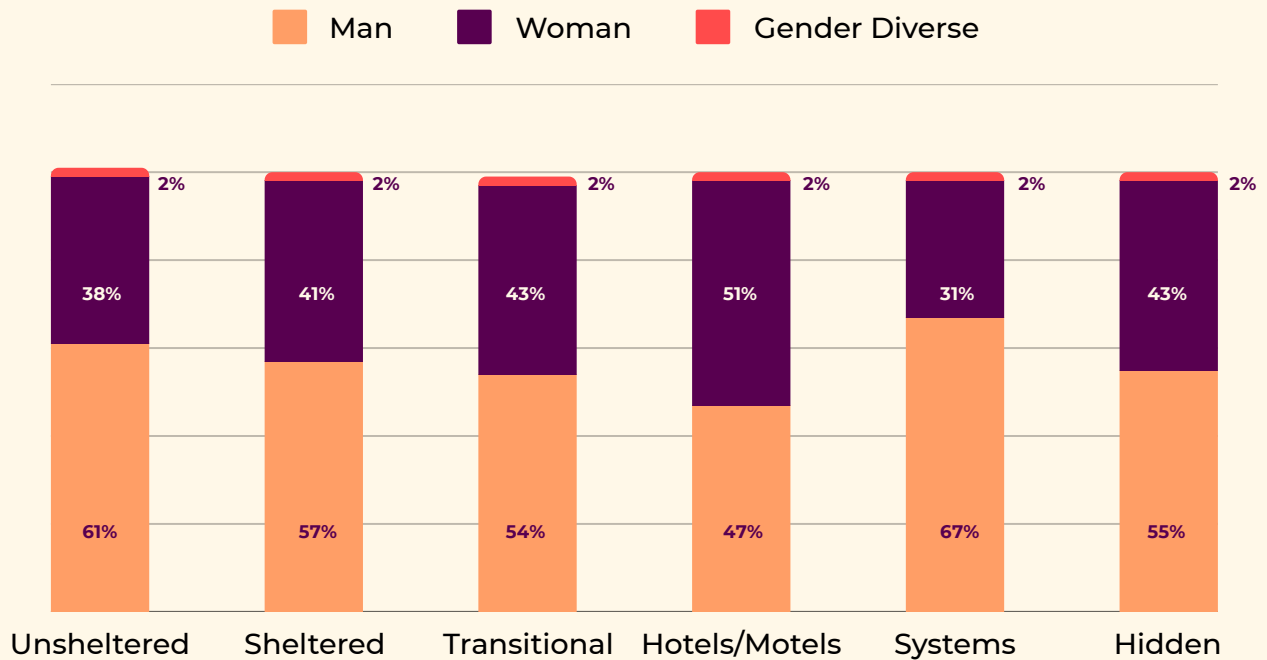
A larger proportion of homelessness is in the adult age band, for the homeless gender diverse population, homelessness is prevalent in the youth age group (44%). In contrast, the general population has minimal differences between men and women for most age groups. In total, 9 individuals identified as being gender diverse within the Cochrane District.

Overnight Location

Respondents were asked about their overnight location during the survey. By comparing the demographics within each overnight location, it is possible to identify what services may be accessed by specific populations, and what populations may be underserved.

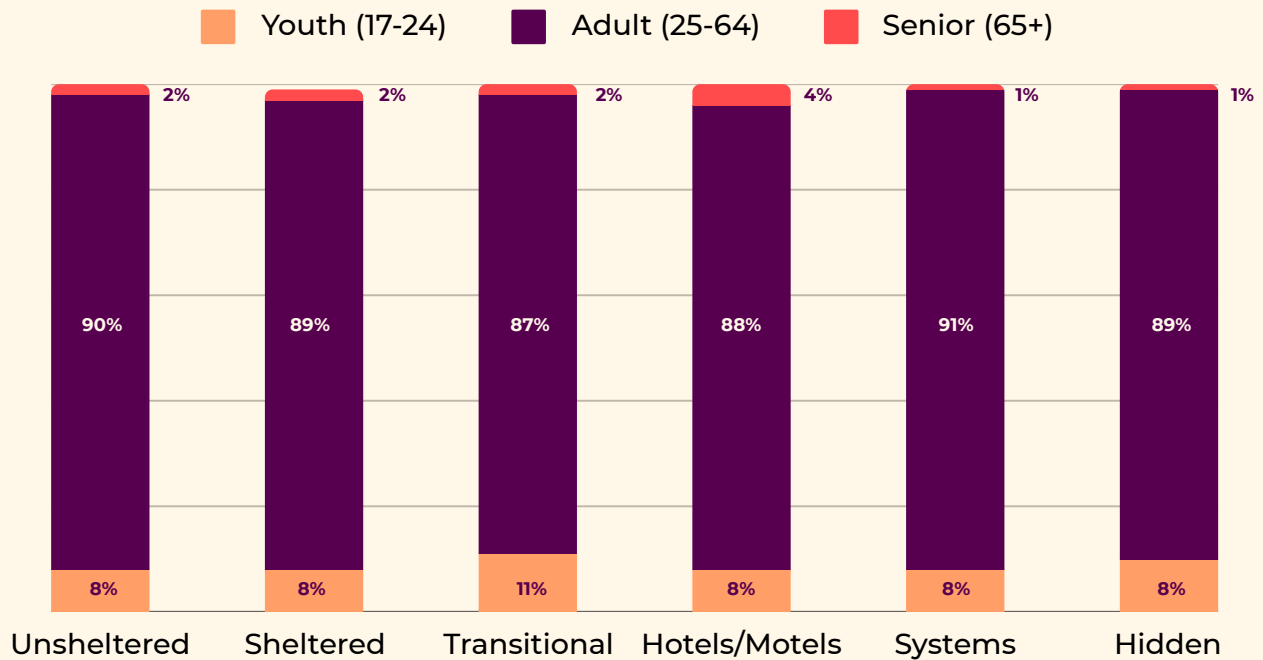
The majority of respondents in all overnight locations identified as men. Representation of women was higher in hotels/motels (51%) than men (47%). The largest gender gap is found in the systems overnight category which includes hospitals, and jails, and prisons where the population is overrepresented by men (67%) compared to woman (31%), this is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada . The percentage of men in systems are overrepresented in the By-Names List (86%) and underrepresented for transitional (33%) locations.

Figure 2. Overnight location and gender identity



From an age group perspective, adult (25 -64) respondents were most prevalent across all overnight locations, with the highest proportions seen in systems (90%) and in unsheltered locations (89%). The highest proportions of youth were among those provisionally accommodated in transitional housing (11%) and experiencing hidden homelessness (10%), this is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada .

Figure 3. Age and overnight location

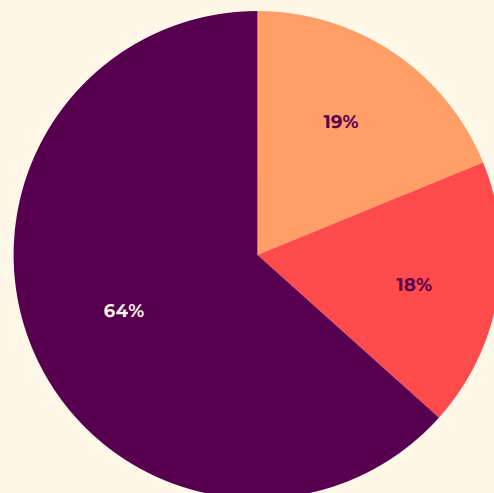


Duration of Homelessness

Among communities that had participated in the 2024 Point-in-Time Count, about two-thirds of respondents (64%) reported experiencing homelessness for the entirety of the previous 12 months. Eighteen percent (18%) of respondents reported experiencing homelessness in the 8 out of the previous 12 months, and the rest of the respondents (16%) that provided an answer have experienced homelessness for up to 4 months. This is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada, and the By-Name List taken from the October 2024 snapshot.

Figure 4.
Duration of homelessness
over the past 12 months

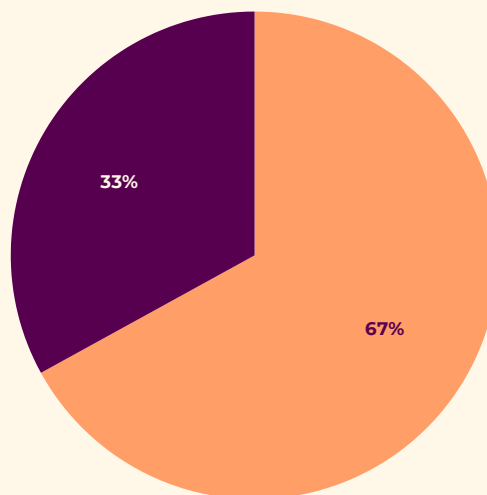
4 Months 8 Months Full Year



Approximately 67% of the survey respondents reported experiencing homelessness over half of the past three (3) years, this number is higher than the reported value in the By-Names List in the October 2024 snapshot (49%).

Figure 5.
Duration of homelessness
over the past 3 Years

- About Half or More
- Less than Half

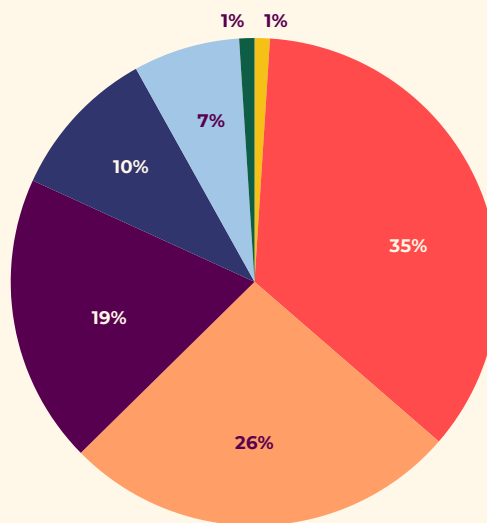


Age of First Homelessness Experience

Survey respondents were asked about the age at which they first experienced homelessness. Many respondents (61%) experienced homelessness for the first time before the age of 29, with the predominant age range between 10 and 19 (35%).

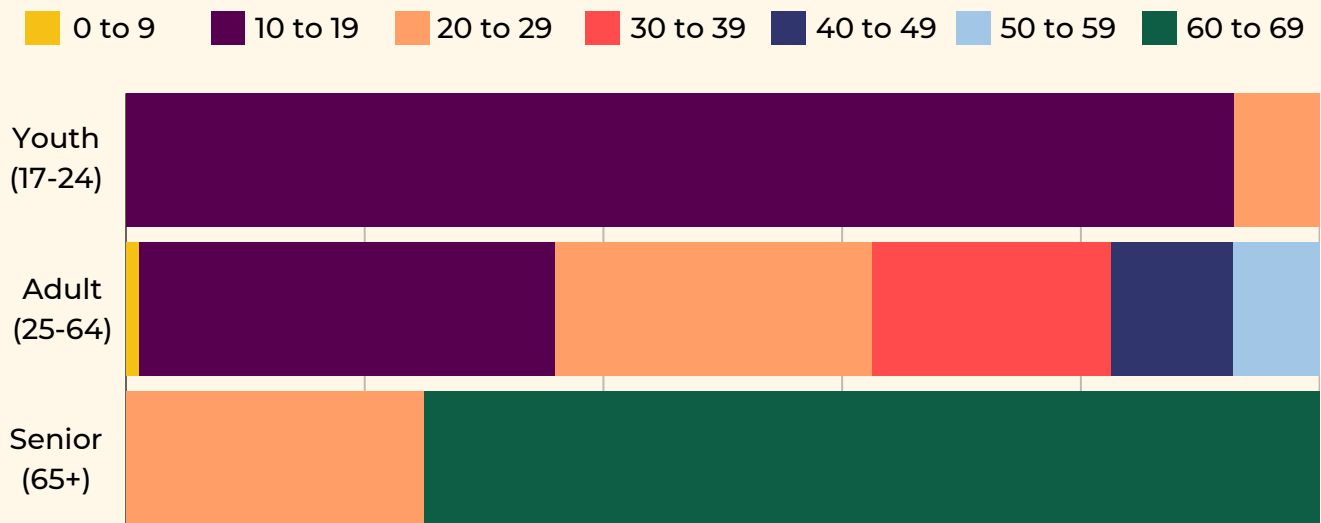
**Figure 6. Percentage of Age
of First Homelessness**

- 0 to 9
- 10 to 19
- 20 to 29
- 30 to 39
- 40 to 49
- 50 to 59
- 60 to 69



Similar peaks within this age range were seen for youth and adults. Among seniors, three quarters of the surveys (75%) reported having their first experience of homelessness at the age of 60 or above, this is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada .

Figure 7. Age of first homelessness by current age group



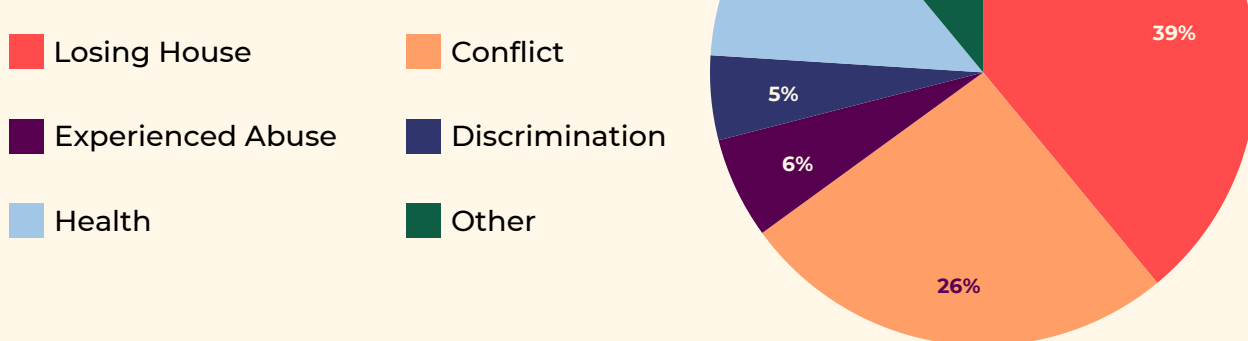
“Participating in the PiT Count was an eye-opening experience. It gave us a clearer understanding of the needs in our community and how we can better support those facing hardship. This kind of outreach is essential for meaningful change.”

– Surveyor

Current Episode of Homelessness and Reasons for Housing Loss

When asked about their current episode of homelessness, a large subset (39%) of respondents reported the cause is due to losing their house, this number is lower than the number reported in the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada (57%). The house loss category is further nuanced to the subcategories of not enough income, unfit/unsafe housing, buildings were sold or renovated, or owners moved back in.

Figure 8. Cause of Current Episode of Homelessness



Survey respondents were also asked about the reasons for their most recent housing loss (respondents could indicate more than one). The most frequently identified response was not having enough income (29%), followed by conflict with spouse or partner (16%) and unfit/unsafe housing conditions (8%), in the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada , the second most frequently identified response was substance use issues (18%), then conflict with spouse or partner (14%).

Reasons for housing loss also differed by age. For the youth (17-24) respondents, conflict with parents was the second most common reason for housing loss (28%), Conflict with spouse and partners is the second most common reason for adults (16%). The third highest reason for senior homelessness was due to leaving their community (17%). The most common reason for housing loss across all age groups was due to insufficient income, this is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada .

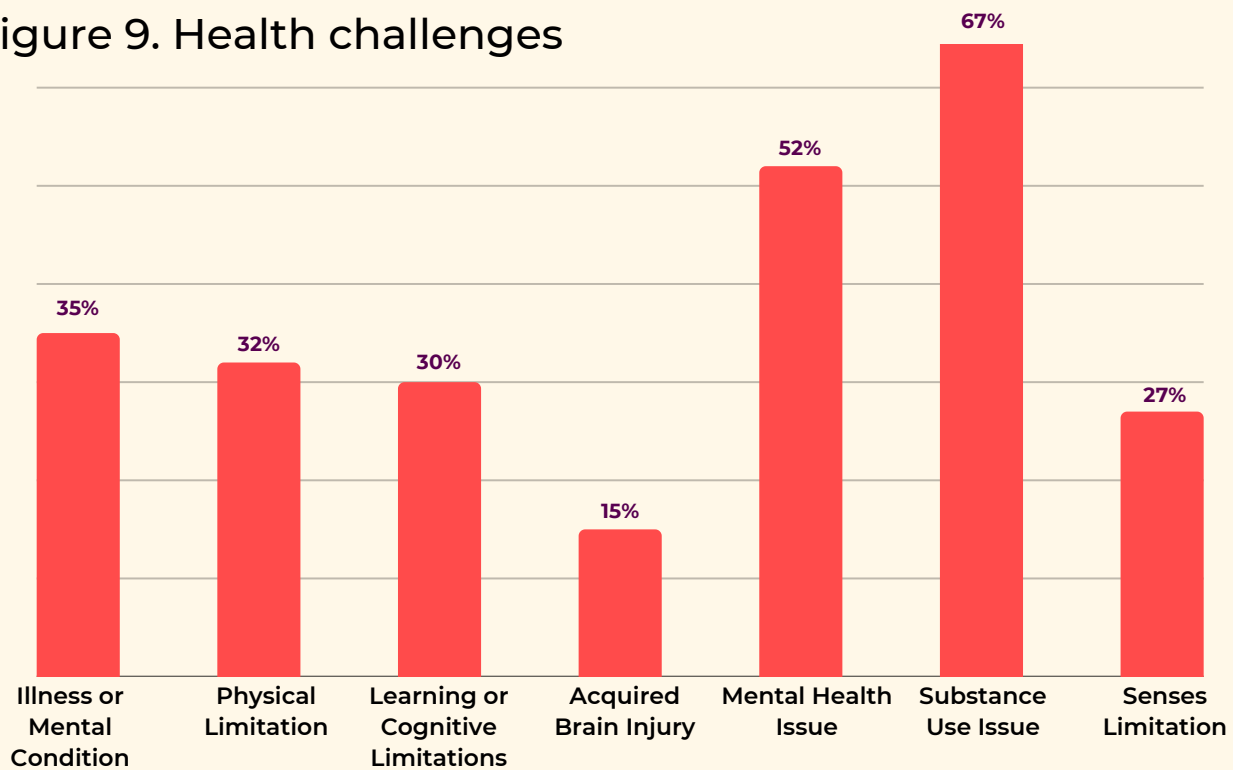
Table 4: Reasons for housing loss and age

Reason for Housing Loss	Youth (17-24)	Adult (25-64)	Seniors (65+)
1st	Insufficient income for housing (33%)	Insufficient income for housing (26%)	Insufficient income for housing (50%)
2nd	Conflict with parents (28%)	Conflict with spouse or partner (16%)	Unfit/unsafe housing Condition (17%)
3rd	Unfit/unsafe housing condition (15%)	Unfit/unsafe housing condition (10%)	Left community / relocated (17%)

Health Challenges

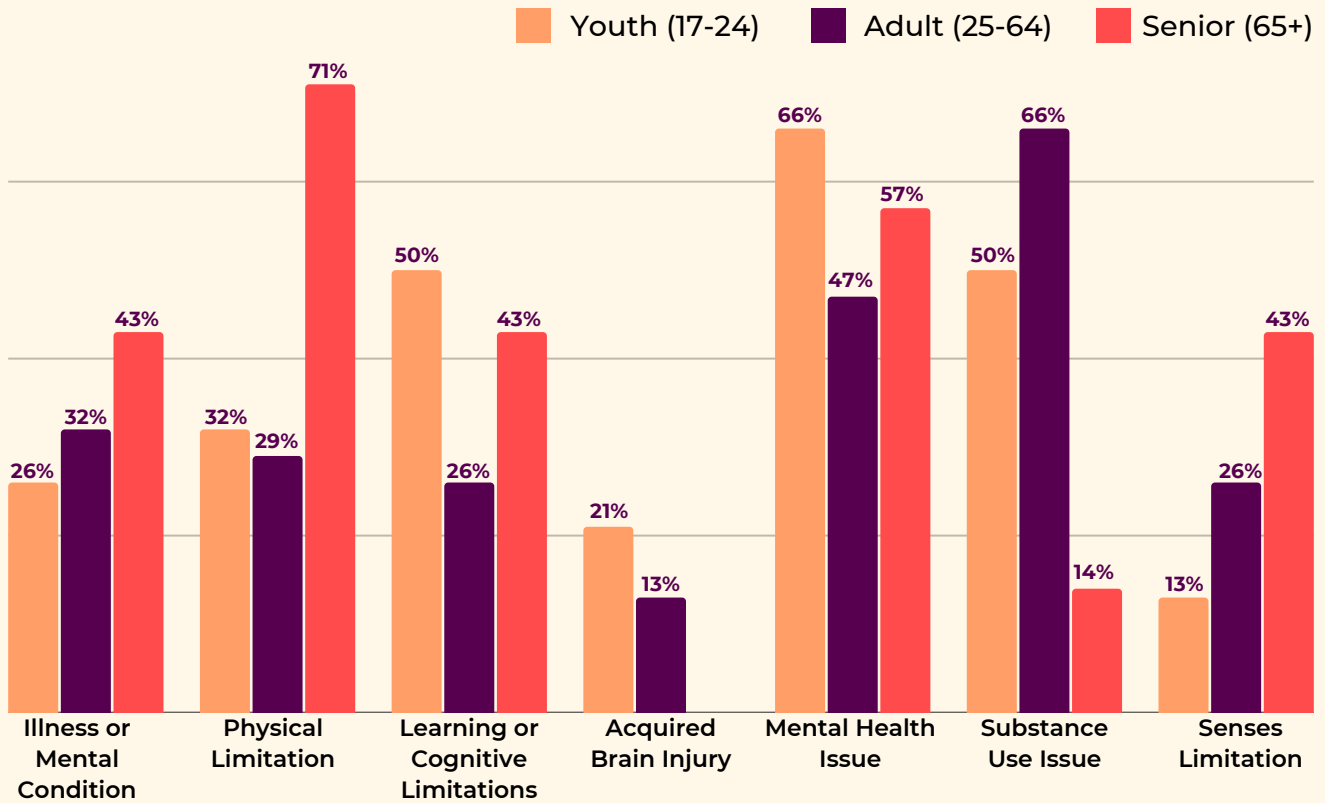
Information about health challenges was collected during the 2024 Point-in-Time Count. A large majority (91%) of respondents reported having at least one health challenge. Substance use (67%) and mental health (52%) issues were the most prevalent responses, this is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada. Only mental, physical health and substance use is tracked in the By-Name List, and mental and physical health challenges are reported similarly as the Point-in-Time findings, however the October 2024 By-Name List snapshot shows a smaller population of substance use challenge (41%).

Figure 9. Health challenges



The type of health challenge varied across different age groups. The prevalence of substance use issues and brain injury conditions tended to decrease with age, whereas illnesses or medical conditions and physical limitations, sensory limitations increased. The prevalence of substance use issues was highest among adults (66%) and lowest among seniors (15%). Physical limitation (71%) and senses limitation (43%) was highest amongst seniors and learning or cognitive limitations (50%) and mental health issue (66%) was highest in youths, this is similar to the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada.

Figure 10. Health challenges and age



Experience as a Youth in Care

Respondents were asked to report if they had experiences of staying in foster care, a youth group home, or other child welfare program. This was reported by 44% of survey respondents, this number is higher the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada (31%).

Figure 11.
Experience as youth in care

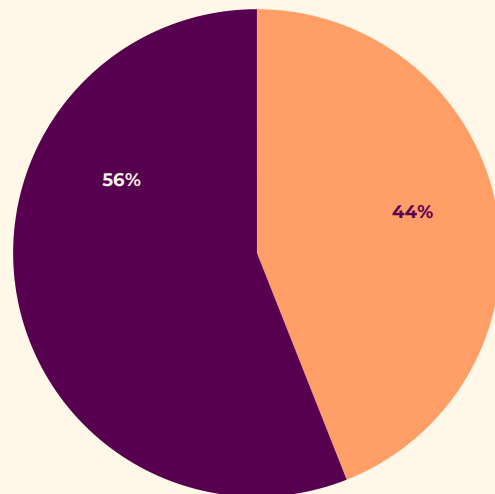
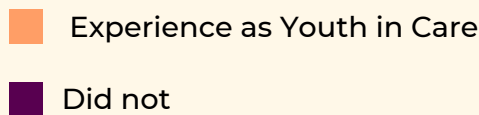
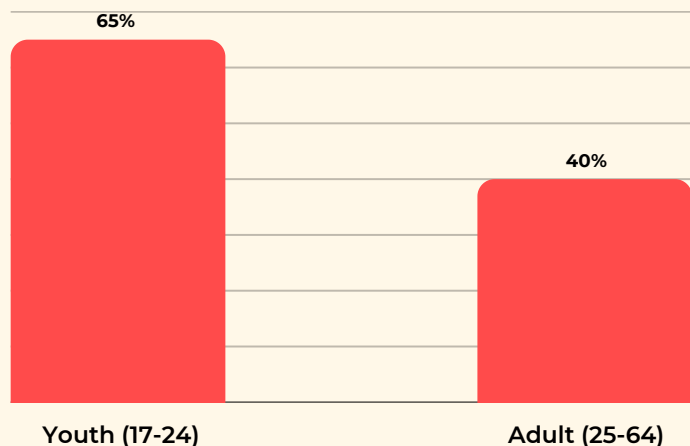
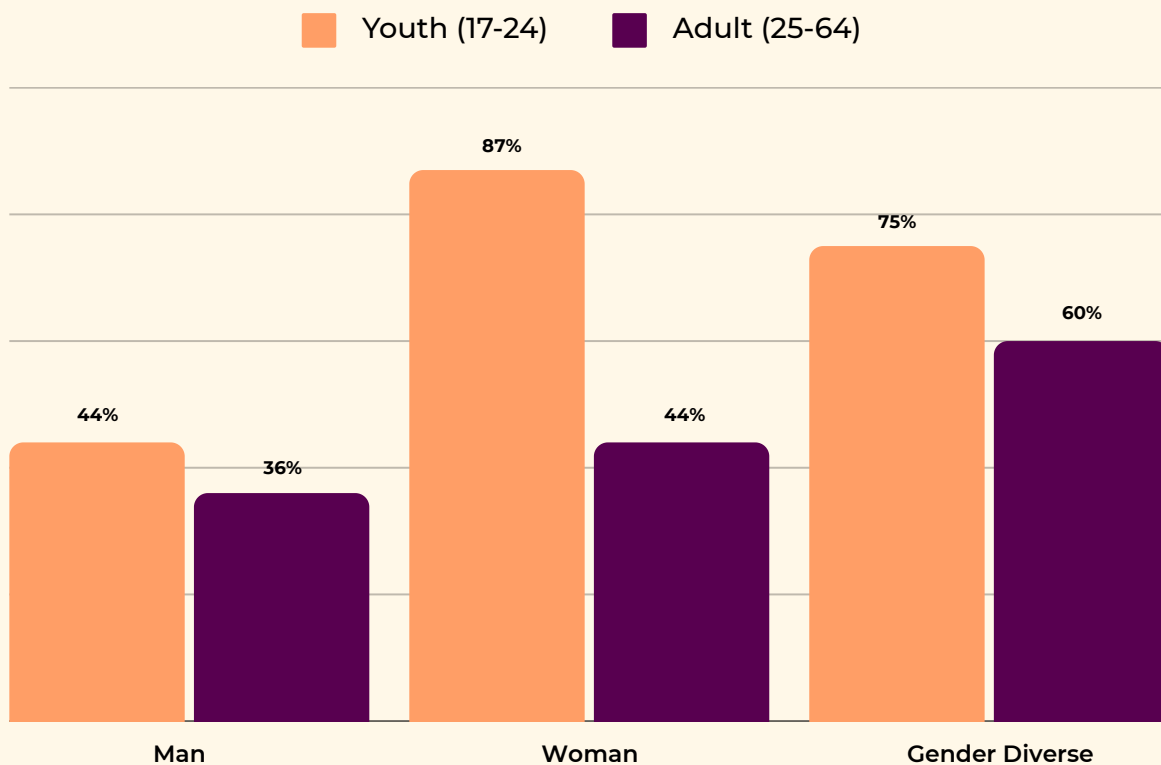


Figure 12. Youth and Adults who had experience as being youth in care



Experiences of youth in care were most common among youth, reported by over half (65%) of respondents. The percentage decreased with age, reported by 40% of adults, and 0% of seniors.

Figure 13. Experience as youth in care and gender and age



Sources of Income

Respondents were asked about their current sources of income (respondents could indicate more than one). The majority (62%) reported having welfare/ social assistance as a source of income, while the second most common source of income is disability benefits (20%). Seven percent (7%) of the respondents reported having zero source of income. The third most frequent responded sources of income in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada was through employment income (12%) and is higher than the findings in the 2024 Point-in-Time Count survey (2%).

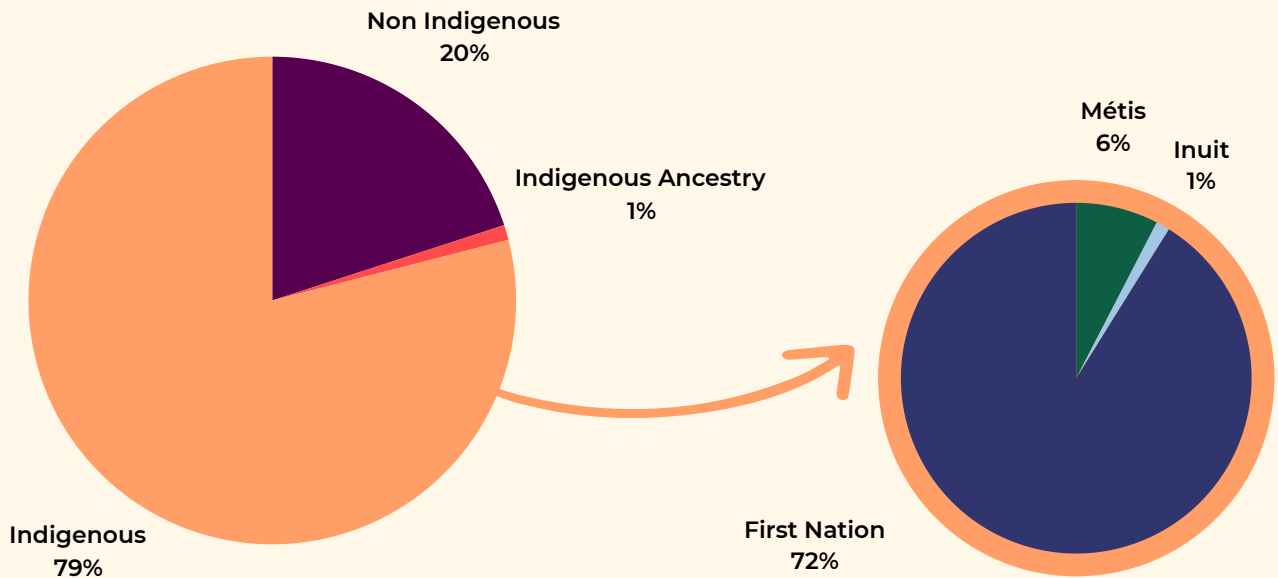
Table 5: Principle sources of income and age

Principle sources of income	Youth (13-24)	Adult (25-64)	Seniors (65+)
1st	Social assistance (53%)	Social assistance (64%)	Social assistance (57%)
2nd	Disability benefits (21%)	Disability benefits (20%)	Disability benefits (29%)
3rd	Child and family benefits (8%)	GST/HST refund (6%)	Social assistance (14%)

Indigenous Peoples

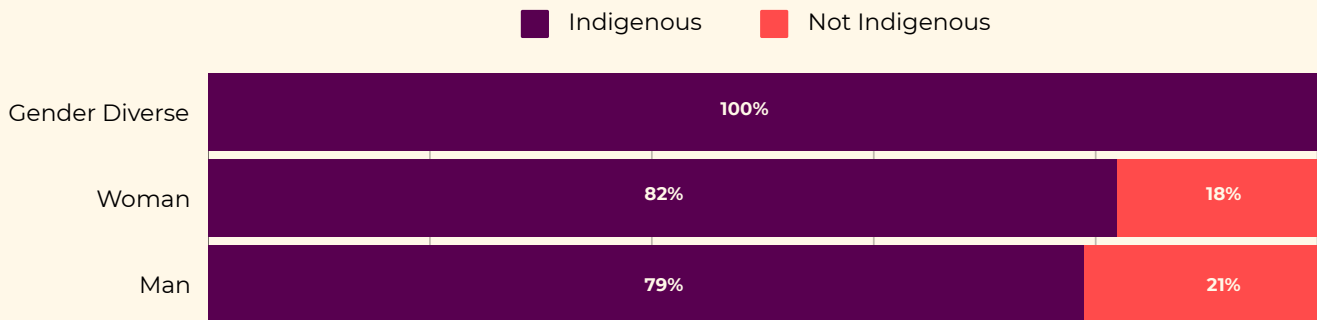
Respondents were asked if they identified as First Nations, Métis, Inuit, or if they had Indigenous ancestry. Seventy-nine percent (79%) of respondents identified as Indigenous, including 72% who identified as First Nations, 6% as Métis and 1% Inuit. The percentage of Indigenous population is considerably higher than the findings in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada (31%) and the By-Name List snapshot in October 2024 (55%), however this number is similar to the findings in the Point-in-Time Count completed in 2021 (81%). Data from the Canadian Census also show that approximately 5% of Canadians identified as Indigenous, suggesting an overrepresentation of Indigenous Peoples experiencing homelessness.

Figure 14. Proportion of Indigenous respondents



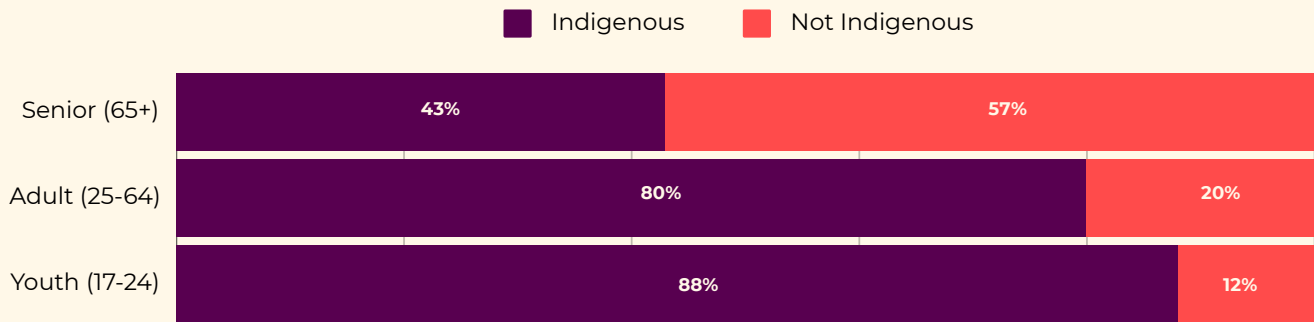
Indigenous respondents were more likely to identify as women (82%) compared to men respondents (79%), while 100% of Gender Diverse respondents identified as Indigenous.

Figure 15: Indigenous identity and gender identity



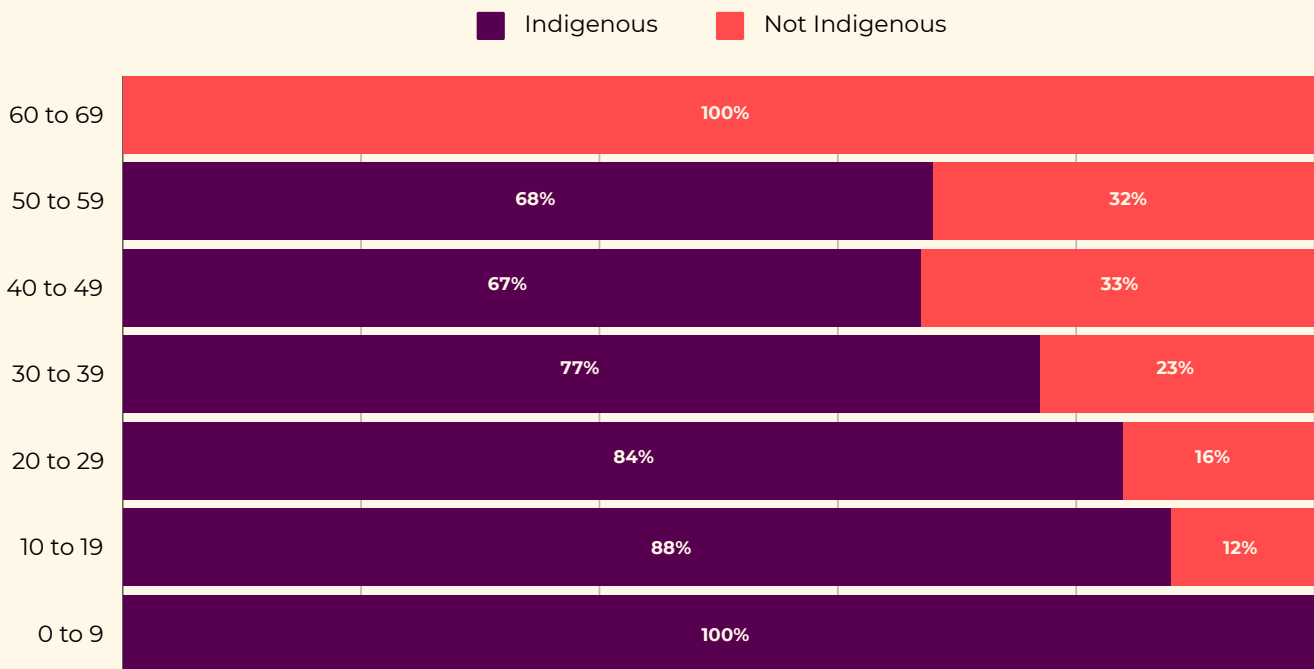
Approximately 80% of adult respondents were Indigenous, which exceeded the percentage observed among non-Indigenous participants at 20%. Conversely, Indigenous respondents had a lower likelihood of being older adults or seniors (43%) compared to their non-Indigenous counterparts (57%).

Figure 16. Indigenous identity and age



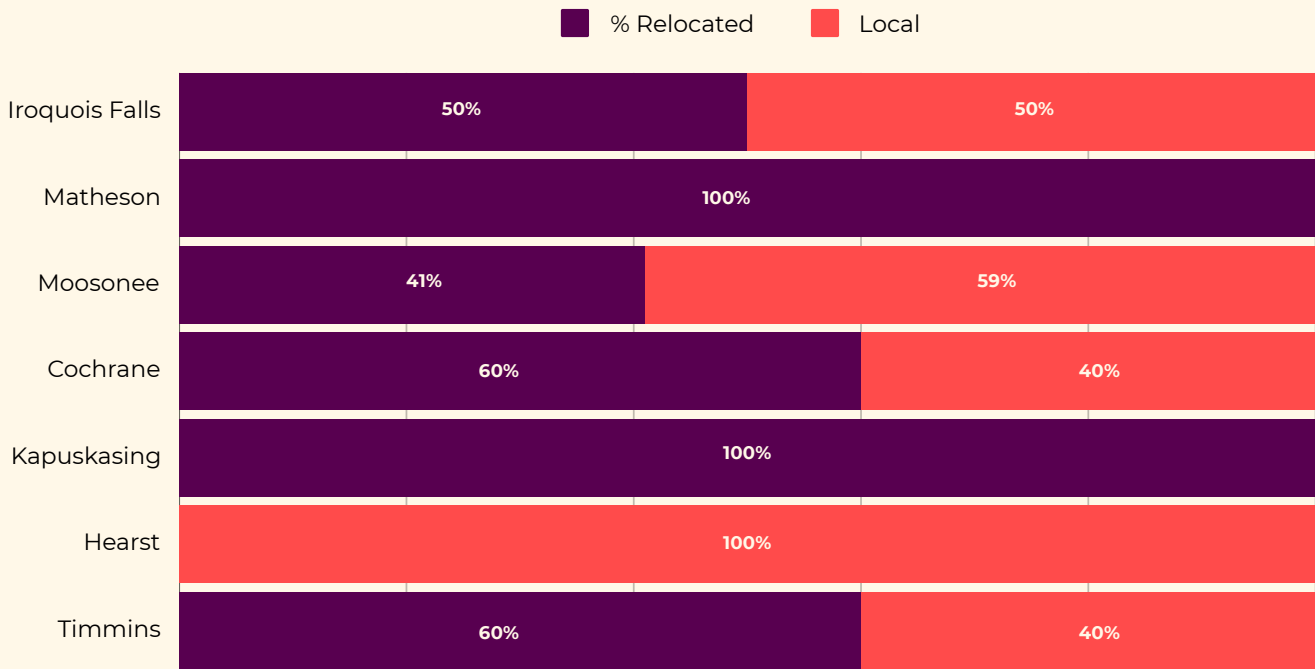
Indigenous respondents were more likely to report early experiences of homelessness. All (100%) of respondents who first experienced homelessness as a child (0 to 9 years) were Indigenous. The trend of Indigenous population experiencing homeless in their youth is higher compared to adults is similar to the finding in the Everyone Counts 2020-2022 – Results from the Third Nationally Coordinated Point-in-Time Counts of Homelessness in Canada, however, the Indigenous population findings in the Point-in-Time Count is much higher.

Figure 17. Age of first experience of homelessness and Indigenous identity



Community Specific Figures

Figure 18. Total people who relocated vs. local respondents



Respondents were asked if they originated in the community from which they were taking the survey. Table 6 displays the total number of respondents who have relocated to each community versus local respondents.

Table 6: Total people who relocated vs. local respondents by community

	Timmins	Hearst	Kapuskasing	Cochrane	Moosonee	Matheson	Iroquois Falls
Relocated	132	0	4	40	21	1	1
Local	88	2	0	27	30	0	1
Total	220	2	4	67	51	1	2

The author notes that many respondents who relocated to new communities originate within the Cochrane District or nearby regions. A note of caution: Not all survey respondents provided complete information regarding their previous location. As a result, some responses are incomplete or missing, and these have been excluded from this model to ensure accuracy in reporting.

Table 6 provides a detailed breakdown of total respondents per community, while distinguishing between those who are local to the community and those who have relocated within the Cochrane District. It presents the total number of respondents by community (within the District).

Figure 19: Total people who relocated from outside of district

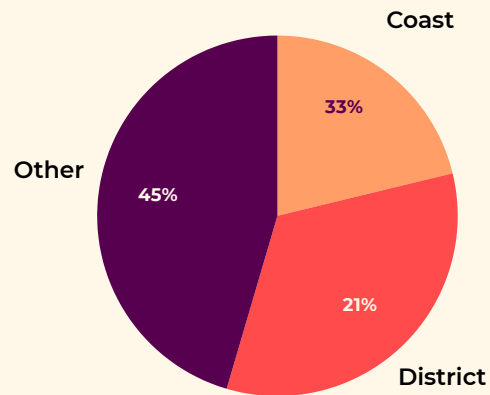
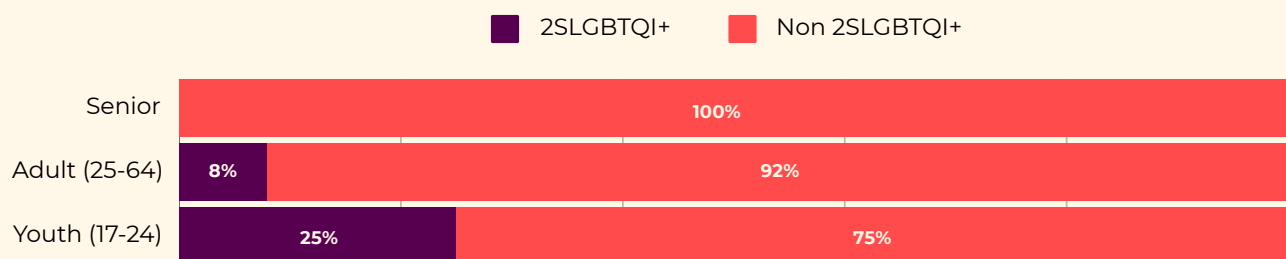


Figure 19 presents a breakdown of individuals experiencing homelessness in the Cochrane District who have relocated from outside the district, expressed as percentages. The data shows that 21% of homeless individuals currently living in the Cochrane District have relocated from coastal communities just outside the district, while 33% have moved within the district itself. Additionally, 45% have relocated to the Cochrane District from regions outside of its boundaries.

2SLGBTQI+

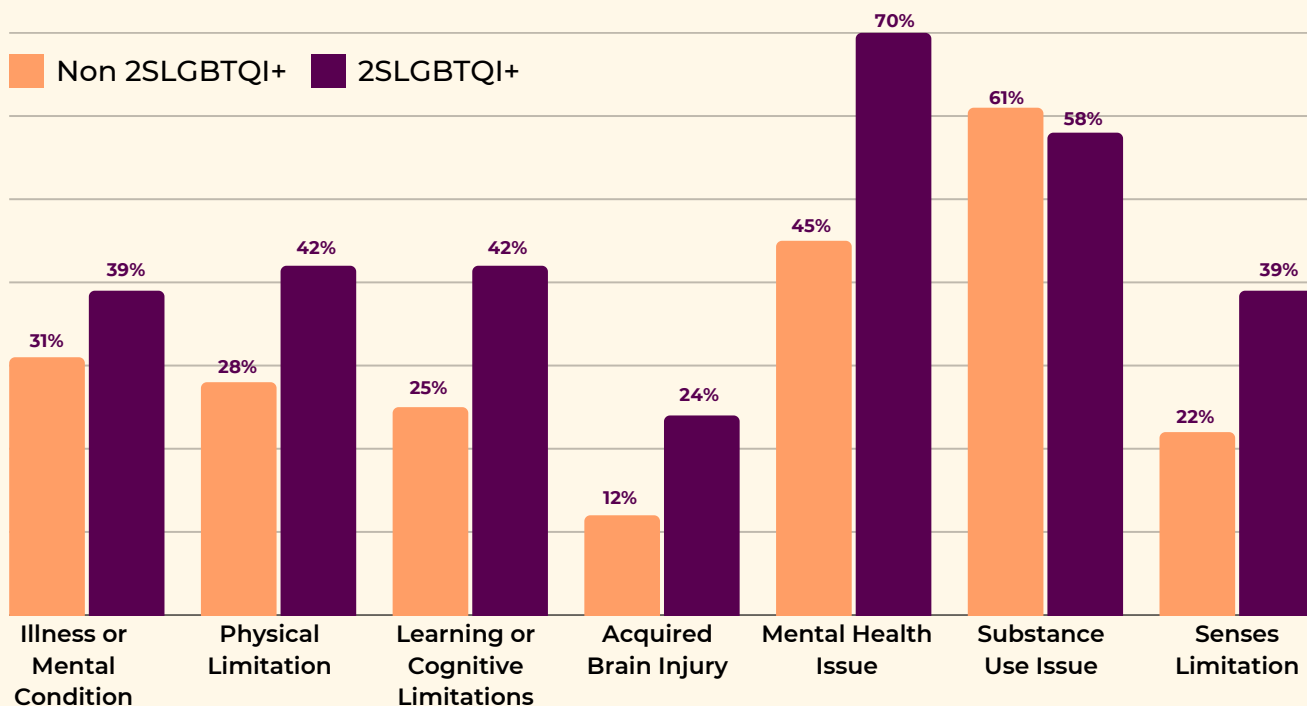
Of all respondents, 9% identified as 2SLGBTQI+. Of those who identified as 2SLGBTQI+, 70% identified as bisexual, 15% as gay, 6% as two-spirited and 3% as pansexual. The rate of 2SLGBTQI+ responses was highest among youth (25%). The proportion decreased with age, accounting for 8% of adults and 0% of seniors. In total, 33 respondents identified as being part of the 2SLGBTQI+ community within the Cochrane District.

Figure 20. 2SLGBTQI+ identity and age



2SLGBTQI+ respondents had a greater likelihood of reporting all health challenges except substance use. In the findings of the Federal report from 2022, 2SLGBTQI+ population reported higher substance use issues. In the 2024 survey, the greatest difference was seen for mental health issues between the two subsets.

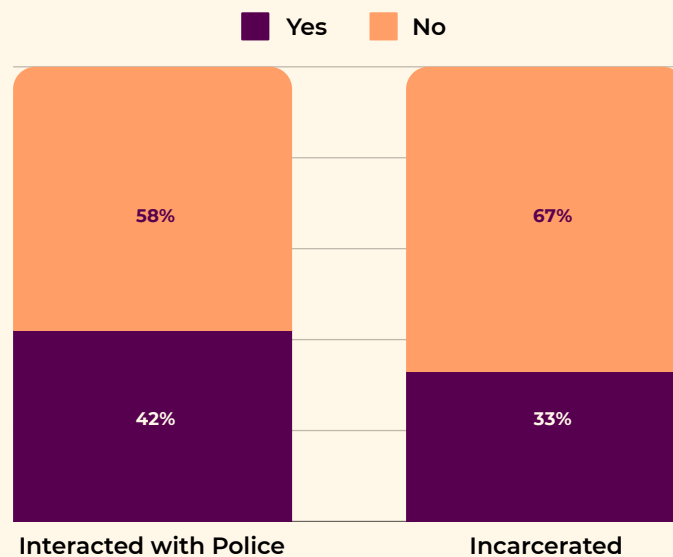
Figure 21. 2SLGBTQI+ respondents and health challenges



Incarceration and People Experiencing Homelessness

Respondents were asked to report the number of times they had interacted with police—including receiving tickets, being arrested, or being searched—as well as the number of times they had been incarcerated in a jail or prison over the past 12 months. It is important to note that this question does not specifically inquire whether the individual was formally charged with a crime. Additionally, responses rely on self-reported memory, which may be subject to inaccuracies.

Figure 22: Interaction with police and incarceration



The Everyone Counts: Cochrane District 2024 Enumeration did not have the opportunity to conduct enumeration or surveys with inmates at the local correctional facility. As a result, we must rely on external studies to make assumptions about the relationship between incarceration and homelessness at the local level. According to a report released by the Canadian Observatory on Homelessness, the John Howard Society of Ontario and the Social Research and Demonstration Corporation in 2024, approximately 16.4% of admissions to Ontario Correctional Institutions had No Fixed Address upon entry. In addition, the report found that “justice system involvement is a leading cause of housing loss” by “imposing barriers to employment and housing”. (Tasca, et al., 2024).

Furthermore, “survey participants were asked if they had ever been discriminated against, stigmatized, or otherwise harassed by landlords or employers due to their past justice involvement. Approximately 40% of respondents reported discrimination or stigmatization by a landlord or housing provider and almost 37% reported discrimination or stigmatization by an employer” and about 79% made some reference “to how their justice involvement led to homelessness, or how their homelessness led to further enmeshment with the justice system” (Tasca, et al., 2024). The report further found that incarceration causes and perpetuates homelessness and that “people released from correctional facilities were often released [directly] into shelters ... or had nowhere to go upon release and were thus released to live on the streets. Once homeless, many were at increased risk of contact with the police and re-incarceration” (Tasca, et al., 2024). The evidence clearly shows a connection between homelessness and incarceration in Ontario; many homeless individuals are arrested for minor infractions, while many ex-inmates become homeless upon release due to lack of housing supports.

RECOMMENDATIONS

Updated Recommendations to Address Homelessness in the Cochrane District (2024)

Homelessness in Northern Ontario is shaped by complex social, economic, and systemic factors. While data from the 2024 Point-in-Time Count provides a snapshot of the current landscape, it is essential to move beyond enumeration and work toward sustainable, community-driven solutions.

The following recommendations are rooted in the realities of homelessness in the region and reflect the urgency of targeted, evidence-based interventions.

01

Expand Culturally Competent Supports for Indigenous Peoples and Gender-Diverse Individuals

- Strengthen collaboration with Indigenous organizations and leadership to co-develop housing solutions that reflect the distinct needs of Indigenous Peoples, who continue to be disproportionately affected by homelessness (79%). This includes expanding access to supportive and transitional housing that is culturally responsive and community-driven.
- Introduce gender-responsive and gender-diverse programming, particularly for youth, as 75% of gender-diverse individuals experiencing homelessness are under the age of 25.
- Ensure all services adopt trauma-informed, culturally safe practices that recognize the unique vulnerabilities of Indigenous women (82% of Indigenous survey respondents) and gender-diverse individuals.

- Explore the development of an emergency shelter in Moosonee through collaboration between the municipality, Friendship Centres, the Cochrane District Services Board and the Province of Ontario. Given the unique geographic and service barriers present in Moosonee, a localized shelter could provide critical support for individuals experiencing homelessness in the region. Future planning should consider sustainable funding models, culturally appropriate service delivery, and integration with existing community supports.

02

Enhance the Coordinated Access System, Data Collection and Utilization of the By-Name List and Homeless Individuals and Families Information System

The Cochrane District is a Designated Community under Reaching Home, which requires the community to “address local homelessness priorities using a coordinated, systems based and data-driven approach...[which was] adopted in recognition that preventing and reducing homelessness requires access to safe and appropriate housing, a high degree of coordination across funders and community organizations...” (Reaching Home directives, 2025). Research and real-world applications indicate that By-Name Lists and Coordinated Access Systems, when paired with Housing First principles, are effective in reducing homelessness by improving data tracking, prioritizing services, and streamlining housing placement (Vallesi, et al., 2018) . Although not without challenges, communities that fully implemented a Coordinated Access System and By-Name List reduce chronic homelessness.

- Strengthen the integration of the BNL and HIFIS across the Cochrane District to improve real-time tracking of homelessness, including hidden homelessness.
- Use data to identify gaps in services, particularly for youth, seniors, and gender-diverse individuals, and to evaluate the effectiveness of current interventions.

03

Targeted Interventions to Prevent and Address Youth Homelessness

Without early interventions, youth experiencing homelessness are at a high risk of long-term housing instability and chronic homelessness. “Once youth begin to experience homelessness, they are further victimized. While homeless, they may experience: declining mental health, suicide attempts, exposure to sexual and physical violence, reduced school participation, unemployment, criminal victimization (including high

rates of sexual assaults, especially among young women and transgender/gender non-binary youth), and human trafficking (this may including being pressured into drug dealing and sex work, being tricked or being manipulated)” (Falvo, Chapter 9: Youth, 2024).

- Develop dedicated housing and support programs for youth, recognizing that 10% of the homeless population are under 25, with 65% having had prior involvement with child welfare or foster care.
- Expand transitional housing and life skills programming for youth aging out of care to prevent them from cycling into homelessness.
- Address the underlying causes of youth homelessness, including family conflict (28%) and inadequate income (29%).

04

Improve Public Awareness and Community Engagement

- Partner with municipalities and local organizations to build public understanding of homelessness, particularly the prevalence of hidden homelessness, which affects a significant proportion of youth.
- Launch educational campaigns to challenge stigma and foster empathy, illustrating the diverse pathways into homelessness, including housing unaffordability, relationship breakdowns, and unsafe living conditions.

05

Strengthen Supports for Seniors and Older Adults Experiencing Homelessness

It is essential to invest in senior’s supportive housing, a model designed for semi-independent older adults who require 24/7 support but not necessarily the intensive care provided in long-term care facilities. Research has shown that “the annual operating cost for one unit of supportive housing was just one-third the cost of a long-term care bed” (Falvo, Homelessness among older adults, 2024), which highlights the economic and social benefits of expanding this housing option.

- Develop age-appropriate housing options for seniors, who, while making up a smaller percentage of the homeless population (2%), face compounding challenges such as mobility restrictions (71%) and sensory impairments (43%).
- Provide wraparound supports, including healthcare and income assistance and food security programs, to meet the needs of seniors who are experiencing homelessness for the first time at age 60 or older (75%).

06

Expand Integrated Health and Housing Services and Improve Support Services for those with Criminal Records

- Strengthen access to mental health (52%) and substance use (67%) services within housing programs, particularly for those experiencing chronic homelessness.
- Foster interdisciplinary approaches that integrate healthcare, harm reduction, and stable housing to address the complex health needs of those experiencing homelessness, using the principles of Housing First as defined by the Federal Government of Canada.
- Prioritize culturally appropriate care models, particularly for Indigenous individuals, who are more likely to experience early-onset health challenges linked to homelessness.
- Invest in transitional housing and vocational training programs to prevent homelessness post-incarceration, while advocating for the expansion of mental health and addiction support

07

Promote Economic Stability and the Expansion of Affordable Housing

Neoliberal policies that emphasize market-driven solutions have often exacerbated homelessness rather than alleviate it, as affordable housing is increasingly treated as a commodity rather than a human right. (Falvo, Chapter 2: Theory and Homelessness, 2022). According to the Canadian Mortgage Housing Corporation, the average rent in 2023 across the Cochrane District was \$828 for a bachelor apartment, \$1039 for a 1 bedroom apartment, and \$1243 for a 2 bedroom apartment (District of Nipissing Social Services Administration Board, 2024). Current social assistance rates fall significant short of these costs, leaving individuals reliant on Ontario Works or the Ontario Disability Support Program unable to afford even the lowest-priced rental units without additional financial support or shared accommodations.

- Advocate for increased income supports, as 62% of survey respondents reported social assistance as their primary source of income, with an additional 20% relying on disability benefits.
- Establish a regional prosperity table focused on economic development, workforce training, and housing affordability.
- Recognize that economic precarity is a leading driver of homelessness, with insufficient income cited as the most common reason for housing loss (29%).

08

Strengthen Enumeration and Data Collection Efforts

- Apply lessons from the 2024 Point-in-Time Count to refine enumeration strategies, particularly to better capture hidden homelessness.
- Conduct follow-up surveys with service providers to assess the effectiveness of interventions and emerging trends in homelessness.
- Maintain and regularly update the By-Name List and HIFIS to ensure accurate, real-time data that reflects shifts in the local homelessness response system.

KEY TAKEAWAYS

from 2024 Findings



Youth Homelessness: Young people account for 10% of the homeless population, with many having a history of child welfare involvement.



Gender Diversity: Gender-diverse individuals, making up 4% of those surveyed, require targeted supports to address their unique needs.



Indigenous Overrepresentation: Indigenous Peoples continue to experience homelessness at a disproportionate rate (79%), underscoring the need for culturally safe, Indigenous-led interventions.



Health and Substance Use: Mental health, substance use, and chronic illness are intertwined with housing instability, necessitating integrated service approaches.



Economic Instability: The lack of affordable housing and inadequate income supports remain key structural drivers of homelessness. By implementing these updated recommendations, the Cochrane District can move beyond emergency responses and toward long-term, sustainable solutions that uphold housing as a fundamental human right. Addressing homelessness requires ongoing collaboration between governments, service providers, and communities to ensure that no one is left behind.

“*Homelessness is real. Homelessness is everywhere.
Homelessness needs to [be] addressed now.*”

– Mike Robin

CONCLUSIONS

AND PLANNING FOR THE NEXT ENUMERATION

Planning for the Next Enumeration: A Call to Action

As we look ahead to Fall 2025, it is critical to begin laying the groundwork for the next Enumeration Count now. Unlike this year's effort, which combined both enumeration and survey administration, the 2025 count will focus exclusively on sheltered and unsheltered enumeration—a streamlined approach that requires extensive coordination to ensure we are capturing as full a picture of homelessness as possible.

Enumeration is not just a bureaucratic exercise; it is a moral imperative—one of the few tools we have to hold systems accountable and push for change. A well-planned, well-executed enumeration has the power to shape policy, drive funding decisions, and reveal the often-invisible realities of homelessness in the Cochrane District. However, success hinges on preparation. Given the vast geography of our region and the limitations we encountered in 2024—insufficient outreach in certain communities, logistical hurdles, and a lack of district-wide participation—it is essential that planning begins now.

The current direction from the federal and provincial governments underscores the importance of ongoing data collection and continuous monitoring. While enumeration has historically been conducted every two years, there is increasing recognition that a single-night snapshot is not enough. Governments are moving toward more dynamic, real-time data collection models, with an emphasis on strengthening tools like the By-Name List (BNL) and Homeless Individuals and Families Information System (HIFIS) to track homelessness trends between enumerations. This shift aligns with broader efforts to create evidence-based, responsive solutions that address homelessness as a systemic issue rather than an isolated event.

For 2025, we know that the enumeration will require deeper engagement with service providers and frontline workers across the district. Given that we will not be conducting surveys, every effort must be made to ensure a diverse range of staff and volunteers are participating during the 24-hour count period. The integrity of the data depends on it. Agencies will play a crucial role in identifying and reporting on individuals experiencing homelessness within their services, and in some communities, this will be the only way we capture accurate numbers.

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APPENDIX A

2024 EVERYONE COUNTS POINT-IN-TIME COUNT SURVEY

EVERYONE COUNTS: COCHRANE DISTRICT 2024

Survey Number: _____

Location: _____

Time: _____ AM/PM

Interviewer & Agency: _____

Contact #: _____

Screening Questions:

First two letters of first name	First two letters of last name	Year of birth
Preferred language	Language the survey was conducted in	

SCREENING QUESTIONS

A. HAVE YOU ANSWERED THIS SURVEY WITH A PERSON WITH THIS BADGE YET? (SHOW BADGE AND SURVEY)?

YES NO

IF YES, THANK THEM FOR THEIR TIME & DO NOT CONTINUE WITH SURVEY

B. ARE YOU WILLING TO PARTICIPATE IN THE SURVEY?

YES NO

IF NO, THANK THEM FOR THEIR TIME & DO NOT CONTINUE WITH SURVEY

C. WHERE ARE YOU STAYING TONIGHT? (Do not read categories; select one)

<input type="radio"/> DECLINE TO ANSWER	<input type="radio"/> TREATMENT CENTER	<input type="radio"/> UNSHELTERED IN A PUBLIC SPACE (EG. STREET, PARK, BUS SHELTER, FOREST, OR ABANDONED BUILDING)
<input type="radio"/> OWN APARTMENT/HOUSE	<input type="radio"/> JAIL, PRISON, OR A REMAND CENTER	<input type="radio"/> ENCAMPMENT (EG. GROUP OF TENTS, MAKESHIFT SHELTERS, OR OTHER LONG TERM OUTDOOR SETTLEMENT)
<input type="radio"/> SOMEONE ELSE'S PLACE	<input type="radio"/> HOMELESS SHELTER (EG. EMERGENCY, FAMILY)	<input type="radio"/> VEHICLE (EG. CAR, VAN, RECREATIONAL VEHICLE (RV), TRUCK, BOAT)
<input type="radio"/> MOTEL/HOTEL (SELF-FUNDED)	<input type="radio"/> DOMESTIC VIOLENCE SHELTER/VIOLENCE AGAINST WOMEN SHELTER	
<input type="radio"/> HOSPITAL		
<input type="radio"/> HOTEL/MOTEL FUNDED BY CITY OF HOMELESS PROGRAM		
<input type="radio"/> TRANSITIONAL SHELTER/HOUSING		
<input type="radio"/> UNSURE: INDICATE PROBABLE LOCATION: _____		

D. DO YOU HAVE ACCESS TO A PERMANENT RESIDENCE WHERE YOU CAN SAFELY STAY AS LONG AS YOU WANT?

YES NO DON'T KNOW

If yes, ask the question again to ensure the individual understands the question.

The purpose of this question is to screen out people that are not homelessness and have access to safe, secure housing that they are not staying in on the night of the PiT Count. Examples include people who are visiting the city and staying with a friend, or house sitting. Those who answer "no" or "don't know" should continue the survey.

IF YES, THANK THEM FOR THEIR TIME AND DO NOT CONTINUE THE SURVEY.

IF NO/DON'T KNOW, PLEASE CONTINUE TO THE SURVEY.

➔ For this survey, "homelessness" means any time when you have been without a permanent and secure place to live, and includes sleeping in shelters, on the streets, or living temporarily with others without having your own permanent housing (e.g. couch surfing).

BEGIN SURVEY

1. Have you spent at least one night in any of the following locations in the past year? (check all that apply)

- | | |
|---|---|
| <input type="radio"/> HOMELESS SHELTER (e.g. emergency, family or domestic violence shelter, warming centre, drop-in) | <input type="radio"/> VEHICLE (e.g. car, van, recreational vehicle (RV), truck, boat) |
| <input type="radio"/> HOTEL/MOTEL FUNDED BY CITY OR HOMELESS PROGRAM | <input type="radio"/> SOMEONE ELSE'S PLACE BECAUSE YOU HAD NOWHERE ELSE TO GO |
| <input type="radio"/> TRANSITIONAL SHELTER/HOUSING | <input type="radio"/> HOSPITAL OR OTHER HEALTH FACILITY |
| <input type="radio"/> UNSHELTERED IN A PUBLIC SPACE (e.g. street, park, bus shelter, forest, or abandoned building) | <input type="radio"/> JAIL, PRISON, OR OTHER CORRECTIONAL FACILITY |
| <input type="radio"/> ENCAMPMENT (e.g. group of tents, makeshift shelters, or other long-term outdoor settlement) | <input type="radio"/> NO <input type="radio"/> DON'T KNOW |
| | <input type="radio"/> DECLINE TO ANSWER |

1b. If you haven't stayed in a homeless shelter in the past year, what are the main reasons? (Do not read categories; check all that apply)

- | | | |
|---|--|---|
| <input type="radio"/> TURNED AWAY - SHELTERS ARE FULL | <input type="radio"/> FEAR FOR SAFETY | <input type="radio"/> OTHER: _____ |
| <input type="radio"/> TURNED AWAY - BANNED | <input type="radio"/> BED BUGS & OTHER PESTS | <input type="radio"/> DON'T KNOW |
| <input type="radio"/> LACK OF TRANSPORTATION | <input type="radio"/> CROWDED | <input type="radio"/> DECLINE TO ANSWER |

2. Do you have family members or anyone else who is staying with you tonight? / Did any family members or anyone else stay with you last night? (Indicate survey number for partners. Check all that apply)

- | | |
|--|---|
| <input type="radio"/> NONE | <input type="radio"/> PET(S) |
| <input type="radio"/> PARTNER – Survey #: | <input type="radio"/> OTHER ADULT (Can include other family or friends) |
| <input type="radio"/> CHILD(REN)/DEPENDENT(S)
[indicate age for each child/dependent] → AGE | |
| <input type="radio"/> DECLINE TO ANSWER | |
- | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

3. How old are you? [OR] What year were you born? (If unsure, ask for best estimate)

- | | | | |
|---------------------------------|--|----------------------------------|---|
| <input type="radio"/> AGE _____ | <input type="radio"/> OR YEAR BORN _____ | <input type="radio"/> DON'T KNOW | <input type="radio"/> DECLINE TO ANSWER |
|---------------------------------|--|----------------------------------|---|

→ For this survey, "homelessness" means any time when you have been without a permanent and secure place to live, and includes sleeping in shelters, on the streets, or living temporarily with others without having your own permanent housing (e.g. couch surfing).

4. In total, for how much time have you experienced homelessness over the PAST YEAR (the last 12 months)?

(Does not need to be exact. Best estimate.)

- | | | |
|--|----------------------------------|---|
| <input type="radio"/> LENGTH _____ DAYS WEEKS MONTHS | <input type="radio"/> DON'T KNOW | <input type="radio"/> DECLINE TO ANSWER |
|--|----------------------------------|---|

4b. In total, for how much time have you experienced homelessness over the PAST 3 YEARS?

(Does not need to be exact. Best estimate.)

- | | | | |
|--------------------------------------|--|----------------------------------|---|
| <input type="radio"/> LESS THAN HALF | <input type="radio"/> ABOUT HALF OR MORE | <input type="radio"/> DON'T KNOW | <input type="radio"/> DECLINE TO ANSWER |
|--------------------------------------|--|----------------------------------|---|

4c. In total, how many different times have you experienced homelessness over the PAST YEAR (the past 12 months)?

(Best estimate.)

- | | | |
|--|----------------------------------|---|
| <input type="radio"/> NUMBER OF TIMES _____ (includes this time) | <input type="radio"/> DON'T KNOW | <input type="radio"/> DECLINE TO ANSWER |
|--|----------------------------------|---|

5. How old were you the first time you experienced homelessness?

AGE _____ DON'T KNOW DECLINE TO ANSWER

6. Did you come to Canada as an immigrant, refugee, asylum claimant (i.e. applied for refugee status after coming to Canada), or through another process?

<input type="radio"/> YES, IMMIGRANT	→	If YES: How long have you been in Canada? <input type="radio"/> LENGTH _____ DAYS WEEKS MONTHS YEARS OR DATE: ____ / ____ / ____ DAY / MONTH / YEAR <input type="radio"/> DON'T KNOW <input type="radio"/> DECLINE TO ANSWER
<input type="radio"/> YES, REFUGEE	→	
<input type="radio"/> YES, ASYLUM CLAIMANT IN CANADA	→	
<input type="radio"/> YES, TEMPORARY FOREIGN WORKER	→	
<input type="radio"/> YES, OTHER WORK PERMIT	→	
<input type="radio"/> YES, STUDY PERMIT	→	
<input type="radio"/> YES, TEMPORARY RESIDENT	→	
<input type="radio"/> YES, OTHER (including undocumented)	→	
<input type="radio"/> NO	→	
<input type="radio"/> DON'T KNOW	→	
<input type="radio"/> DECLINE TO ANSWER	→	

6b. Are you a Canadian Citizen?

<input type="radio"/> YES	<input type="radio"/> DON'T KNOW
<input type="radio"/> NO, PERMANENT RESIDENT	<input type="radio"/> DECLINE TO ANSWER
<input type="radio"/> NO, OTHER	

7. How long have you been in (community name)?

LENGTH _____ DAYS | WEEKS | MONTHS | YEARS ALWAYS BEEN HERE DON'T KNOW DECLINE TO ANSWER

Where did you live before you came here? CITY: _____ PROVINCE/TERRITORY/COUNTRY: _____

DECLINE TO ANSWER

7b. What is the main reason you came to (community name)? (Do not read categories; select one)

<input type="radio"/> TO ACCESS EMERGENCY SHELTER(S)	<input type="radio"/> EMPLOYMENT (SEEKING)	<input type="radio"/> RECREATION/SHOPPING
<input type="radio"/> TO ACCESS SERVICES AND SUPPORTS	<input type="radio"/> EMPLOYMENT (SECURED)	<input type="radio"/> OTHER: _____
<input type="radio"/> FAMILY MOVED HERE	<input type="radio"/> TO ATTEND SCHOOL	<input type="radio"/> DON'T KNOW
<input type="radio"/> TO VISIT FRIENDS/FAMILY	<input type="radio"/> FEAR FOR SAFETY	<input type="radio"/> DECLINE TO ANSWER
<input type="radio"/> TO FIND HOUSING		

8. What is the main reason you came to (community name)? (Do not read categories; select one)

<input type="radio"/> YES, FIRST NATIONS	<input type="radio"/> YES, MÉTIS	<input type="radio"/> NO	<input type="radio"/> DECLINE TO ANSWER
<input type="radio"/> YES, INUIT	<input type="radio"/> INDIGENOUS ANCESTRY	<input type="radio"/> DON'T KNOW	

Please specify:

8a. Which Indigenous community are you from?

<input type="radio"/> COMMUNITY/RESERVE NAME		
_____	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER

8b. In addition to your response in the question above, do you identify with any of the racial identities listed below?
(Show or Read list. Select all that apply)

<input type="radio"/> IDENTIFY AS INDIGENOUS ONLY	<input type="radio"/> BLACK-AFRICAN (e.g., Ghanaian, Ethiopian, Nigerian)
<input type="radio"/> ARAB (e.g., Syrian, Egyptian, Yemeni)	<input type="radio"/> BLACK-AFRO-CARIBBEAN OR AFRO-LATINX (e.g., Jamaican, Haitian, Afro-Brazilian.)
<input type="radio"/> ASIAN-EAST (e.g., Chinese, Korean, Japanese)	<input type="radio"/> LATIN AMERICAN (e.g., Brazilian, Mexican, Chilean, Cuban)
<input type="radio"/> ASIAN- SOUTH-EAST (e.g., Filipino, Vietnamese, Cambodian, Malaysian, Laotian)	<input type="radio"/> WHITE (e.g. European, French, Ukrainian, Euro-Latinx)
<input type="radio"/> ASIAN-SOUTH OR INDO-CARIBBEAN (e.g., Indian, Pakistani, Sri Lankan, Indo-Guyanese, Indo-Trinidadian)	<input type="radio"/> NOT LISTED (PLEASE SPECIFY): _____
<input type="radio"/> ASIAN-WEST (e.g., Iranian, Afghan)	<input type="radio"/> DON'T KNOW
<input type="radio"/> BLACK-CANADIAN/AMERICAN	<input type="radio"/> DECLINE TO ANSWER

9. Have you ever served in the Canadian Military or RCMP? (Military includes Canadian Navy, Army, and Air Force, Regular and Reserve, Army Rangers including completing basic training)

<input type="radio"/> YES, MILITARY	<input type="radio"/> BOTH MILITARY AND RCMP	<input type="radio"/> DON'T KNOW
<input type="radio"/> YES, RCMP	<input type="radio"/> NO	<input type="radio"/> DECLINE TO ANSWER

10. As a child or youth, were you ever in foster care or in a youth group home (COMMUNITY NOTE: include any other Provincial child welfare programs)? (Note: This question applies specifically to child welfare programs.)

<input type="radio"/> YES, MILITARY	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
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10b. Approximately how long after leaving foster care/group home did you become homeless?

<input type="radio"/> LENGTH _____ DAYS WEEKS MONTHS YEARS	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
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10c. Do you feel that Child Protection Services was helpful in transitioning you to independence after leaving foster care/group home?

<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
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11. Have you been experiencing difficulties related to any of the following?:

	YES	NO	DON'T KNOW	DECLINE TO ANSWER
ILLNESS OR MEDICAL CONDITION (e.g. diabetes, tuberculosis (TB) or human immunodeficiency virus (HIV))	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PHYSICAL MOBILITY (e.g. spinal cord injury, arthritis, or limited movement or dexterity)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LEARNING, INTELLECTUAL/DEVELOPMENTAL, OR COGNITIVE FUNCTION (e.g. fetal alcohol spectrum disorder (FASD), autism, attention deficit hyperactivity disorder (ADHD), dyslexia, or dementia)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ACQUIRED BRAIN INJURY (e.g. due to an accident, violence, overdose, stroke, or brain tumour)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MENTAL HEALTH [diagnosed/undiagnosed](e.g. depression, post-traumatic stress disorder (PTSD), bipolar, or schizophrenia)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SUBSTANCE USE (e.g. alcohol or opiates)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SENSES, SUCH AS SEEING OR HEARING (e.g. blindness or deafness)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. What gender do you identify with? (Show list or read list.)

<input type="radio"/> MAN	<input type="radio"/> TRANS WOMAN	<input type="radio"/> NOT LISTED: _____
<input type="radio"/> WOMAN	<input type="radio"/> TRANS MAN	<input type="radio"/> DON'T KNOW
<input type="radio"/> TWO-SPIRIT	<input type="radio"/> NON-BINARY (GENDER QUEER)	<input type="radio"/> DECLINE TO ANSWER

13. How do you describe your sexual orientation, for example straight, gay, lesbian? (Show list or read list.)

<input type="radio"/> STRAIGHT/HETEROSEXUAL	<input type="radio"/> BISEXUAL	<input type="radio"/> ASEXUAL	<input type="radio"/> NOT LISTED: _____
<input type="radio"/> GAY	<input type="radio"/> TWO-SPIRIT	<input type="radio"/> QUEER	<input type="radio"/> DON'T KNOW
<input type="radio"/> LESBIAN	<input type="radio"/> PANSEXUAL	<input type="radio"/> QUESTIONING	<input type="radio"/> DECLINE TO ANSWER

14. What happened that caused you to lose your housing most recently? (Do not read the options. Check all that apply. "Housing" does not include temporary arrangements (e.g., couch surfing) or shelter stays. Follow up for the reason if the respondent says "eviction" or that they "chose to leave".)

<p>HOUSING AND FINANCIAL ISSUES</p> <ul style="list-style-type: none"> <input type="radio"/> NOT ENOUGH INCOME FOR HOUSING (e.g. rental increase, loss of benefit, income or job) <input type="radio"/> UNFIT/UNSAFE HOUSING CONDITION <input type="radio"/> BUILDING SOLD OR RENOVATED <input type="radio"/> OWNER MOVED IN 	<p>CONFLICT WITH:</p> <ul style="list-style-type: none"> <input type="radio"/> SPOUSE/PARTNER <input type="radio"/> PARENT/GUARDIAN <input type="radio"/> LANDLORD <input type="radio"/> OTHER(_____) 	<p>EXPERIENCED DISCRIMINATION BY:</p> <ul style="list-style-type: none"> <input type="radio"/> SPOUSE/PARTNER <input type="radio"/> PARENT/GUARDIAN <input type="radio"/> LANDLORD <input type="radio"/> OTHER(_____)
<p>OTHER</p> <ul style="list-style-type: none"> <input type="radio"/> COMPLAINT (e.g. noise/damage) <input type="radio"/> LEFT THE COMMUNITY/RELOCATED <input type="radio"/> DEATH OR DEPARTURE OF FAMILY MEMBER <input type="radio"/> PET(S) <input type="radio"/> OTHER REASON: _____ 	<p>EXPERIENCED ABUSE BY:</p> <ul style="list-style-type: none"> <input type="radio"/> SPOUSE/PARTNER <input type="radio"/> PARENT/GUARDIAN <input type="radio"/> LANDLORD <input type="radio"/> OTHER(_____) 	<p>HEALTH OR CORRECTIONS</p> <ul style="list-style-type: none"> <input type="radio"/> PHYSICAL HEALTH ISSUE/DISABILITY <input type="radio"/> MENTAL HEALTH ISSUE <input type="radio"/> SUBSTANCE USE ISSUE <input type="radio"/> HOSPITALIZATION OR TREATMENT PROGRAM <input type="radio"/> INCARCERATION (jail or prison)
	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER

14b. Was your most recent housing loss related to an eviction?

<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
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14c. How long ago did that happen (that you lost your housing most recently)? (Best estimate)

<input type="radio"/> LENGTH _____ DAYS WEEKS MONTHS YEARS	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
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C. WHERE ARE YOU STAYING TONIGHT? (Do not read categories; select one)

<p>Formal or Informal Work</p> <ul style="list-style-type: none"> <input type="radio"/> FULL TIME EMPLOYMENT <input type="radio"/> PART TIME EMPLOYMENT <input type="radio"/> CASUAL EMPLOYMENT (e.g. contract work) <input type="radio"/> INFORMAL INCOME SOURCES (e.g. bottle returns, panhandling, sex work) 	<p>Benefits</p> <ul style="list-style-type: none"> <input type="radio"/> EMPLOYMENT INSURANCE <input type="radio"/> DISABILITY BENEFIT (NAME OF PROV. DISABILITY BENEFIT) <input type="radio"/> SENIORS BENEFITS (e.g. CPP/OAS/GIS) <input type="radio"/> WELFARE/SOCIAL ASSISTANCE (Prov. benefit) <input type="radio"/> VETERAN/VAC BENEFITS <input type="radio"/> CHILD AND FAMILY BENEFITS <input type="radio"/> GST/ST REFUND 	<p>Other</p> <ul style="list-style-type: none"> <input type="radio"/> MONEY FROM FAMILY/FRIENDS <input type="radio"/> OTHER MONEY FROM A SERVICE AGENCY <input type="radio"/> OTHER: _____ <input type="radio"/> NO INCOME <input type="radio"/> DON'T KNOW <input type="radio"/> DECLINE TO ANSWER
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16. What is the highest level of education you completed?

<input type="radio"/> PRIMARY SCHOOL	<input type="radio"/> SOME POST SECONDARY	<input type="radio"/> NO FORMAL EDUCATION
<input type="radio"/> SOME HIGH SCHOOL	<input type="radio"/> POST SECONDARY GRADUATE	<input type="radio"/> DON'T KNOW
<input type="radio"/> HIGH SCHOOL GRADUATE/GED	<input type="radio"/> GRADUATE DEGREE (e.g., masters, Ph.D.)	<input type="radio"/> DECLINE TO ANSWER

16b. Are you currently registered as a secondary (high school) or post secondary (college/university/trade school) student?

YES NO

17. In the past year (12 months) have you: (Ask respondents to give their best estimate)

BEEN TO AN EMERGENCY ROOM	Y _____ N _____	# _____	Times
BEEN HOSPITALIZED	Y _____ N _____	# _____	Times
→ ASIAN-EAST		_____	Days Total
INTERACTED WITH POLICE (Tickets, arrests, searches)	Y _____ N _____	# _____	Times
BEEN TO PRISON/JAIL	Y _____ N _____	# _____	Times
→ DAYS YOU HAVE SPENT IN PRISON/JAIL		_____	Days Total

18. Do you want to get into permanent housing? Not everyone is ready or wanting to be housed.

YES NO DON'T KNOW DECLINE TO ANSWER

19. What challenges or problems have you experienced when trying to find housing? (Select all that apply)

<input type="radio"/> LOW INCOME	<input type="radio"/> MENTAL HEALTH ISSUES	<input type="radio"/> DISCRIMINATION
<input type="radio"/> NO INCOME ASSISTANCE	<input type="radio"/> ADDICTION	<input type="radio"/> DON'T WANT HOUSING
<input type="radio"/> RENTS TOO HIGH	<input type="radio"/> RENTS TOO HIGH	<input type="radio"/> OTHER: _____
<input type="radio"/> POOR HOUSING CONDITIONS	<input type="radio"/> POOR HOUSING CONDITIONS	<input type="radio"/> NO BARRIERS TO HOUSING
<input type="radio"/> DOMESTIC VIOLENCE	<input type="radio"/> DOMESTIC VIOLENCE	<input type="radio"/> DON'T KNOW
<input type="radio"/> HEALTH/DISABILITY ISSUES	<input type="radio"/> HEALTH/DISABILITY ISSUES	<input type="radio"/> DECLINE TO ANSWER

20. In what language do you feel best able to express yourself?

ENGLISH CREE DON'T KNOW

FRENCH NO PREFERENCE DECLINE TO ANSWER

OJIBWE NEITHER/OTHER (please specify) _____

21. In what language do you feel best able to express yourself?

<input type="radio"/> SERIOUS/ONGOING MEDICAL CONDITION	<input type="radio"/> PHYSICAL DISABILITY	<input type="radio"/> PRREGNANCY
<input type="radio"/> ADDICTION OR SUBSTANCE USE	<input type="radio"/> LEARNING DISABILITY	<input type="radio"/> NONE OF THE ABOVE
<input type="radio"/> MENTAL HEALTH (Counselling, treatment, etc.)	<input type="radio"/> BRAIN INJURY	<input type="radio"/> DON'T KNOW
		<input type="radio"/> DECLINE TO ANSWER

- Please provide the honorarium to the client after once the survey is complete
- Please provide a copy of the crisis resources for the client once the survey is complete
- Please thank the client for their time

GLOSSARY

Homeless population

The number of people experiencing homelessness in a geographic area.

Root causes of homelessness

The root causes of homelessness are complex, arising from a combination of structural factors, systemic barriers, and personal or relational circumstances that require a range of interventions. In some cases, especially in the North and in Indigenous communities, there are simply not enough suitable units to house the population, and this shortage has been ongoing for decades. In other cases, especially for people with long-term or recurrent homelessness, it is a result of complex housing and service needs, which often include mental health issues and/or substance use disorders. For Indigenous peoples in Canada, specific dimensions and factors linked to colonization, displacement and inter-generational trauma must also be considered. A shared reality for everyone experiencing homelessness is poverty.

Complex problem

A complex problem is a situation where causes and solutions are not always clear or straightforward. There are many actors involved, sometimes with competing perspectives. Homelessness is a complex problem that extends beyond the scope of any single organization or sector. Its response requires a shared understanding about the problem and a shared commitment to possible solutions. Data plays a critical role in solving complex problems like homelessness. Data can help with defining the problem, as well as analyzing its causes and possible solutions, leading to a greater likelihood that the best options – those with the greatest potential for collective impact – are implemented. Continuous communication and reflection is required to learn and improve responses over time.

Homelessness

The situation of an individual or family who does not have a permanent address or residence, and does not have the immediate prospect, means, and ability of acquiring it. In general, homelessness includes people staying in unsheltered locations, in shelters or somewhere temporarily because they do not have the resources to secure their own permanent housing. People experiencing homelessness often transition between locations, as most people who sleep outside are likely to access shelter at some point.

More specifically, homeless episodes can include time spent:

- In emergency shelters (permanent or overflow beds);
- In unsheltered locations or places not intended for human habitation (e.g., parks);¹⁵
- Staying temporarily with others (e.g., family or friends) without guarantee of continued residency (“couch surfing”); or,
- In short-term rentals with no security of tenure (e.g., paying for motels with income or savings).

Visible homelessness

Visible homelessness refers to staying in unsheltered locations or shelters.

Observed homelessness

In regards to enumeration, observed homelessness refers to individuals who are unwilling or unable to answer the screening questions but who stay overnight in an unsheltered location. Teams use observed homelessness when they are unable to engage with someone and use strict criteria (e.g., a person who is sleeping outside with their belonging) to avoid including individuals who are not experiencing homelessness.

At-risk and at imminent risk of homelessness

At-risk of homelessness refers to a housing situation that is precarious. For example, the housing may not meet public health and safety standards (e.g., due to overcrowding) or the tenant may not be paying rent on-time and/or may have rental arrears. At imminent risk of homelessness refers to a housing situation that will end in the near future (e.g., within two weeks) where the household does not have the immediate prospect, means or ability of acquiring a subsequent residence.

Unsheltered homelessness

People experiencing homelessness that are staying in unsheltered locations or places not intended for human habitation. For example, streets, alleys, parks and other public locations, transit stations, abandoned buildings, vehicles, ravines and other outdoor locations. Under Reaching Home, unsheltered homelessness is considered as “homeless” in the federal standard for measuring community-level outcomes, the HIFIS Reaching Home Housing Continuum, and Point-in-Time Counts (where unsheltered homelessness is part of the core methodology for the enumeration and survey).

Sheltered homelessness

People experiencing homelessness that are staying in emergency shelters (permanent or overflow beds). This includes the following types of shelter spaces: Shelters for all population groups; Shelters for specific population groups (e.g., men, women, youth or families) or situations (e.g., extreme weather or crises); and, Domestic Violence (DV) shelters. People may also be staying at alternative shelter sites, such as hotels or motels,

where their stays are paid for by the service provider (e.g., through a voucher or arrangement with the operator), not privately (e.g., through income or savings). Under Reaching Home, sheltered homelessness is considered as “homeless” in the federal standard for measuring community-level outcomes, the HIFIS Reaching Home Housing Continuum, and Point-in-Time Counts (where sheltered homelessness is part of the core methodology for the enumeration and survey).

Hidden homelessness

People experiencing homelessness that are staying: Temporarily with others (e.g., family or friends) without guarantee of continued residency (“couch surfing”); or, • In short-term rentals with no security of tenure (e.g., paying for motels with income or savings). In general, hidden homelessness includes people staying somewhere temporarily because they do not have the resources to secure their own permanent housing (e.g., persons facing financial difficulties and recently evicted). These living situations are precarious and people could be asked to leave at any time.

It is acknowledged that measuring hidden homelessness is challenging. To determine who falls in the category of “hidden”, people may be asked, for example, “Are you currently living in this household temporarily because you have no where else to live?” Under Reaching Home, hidden homelessness is considered as “homeless” in the federal standard for measuring community-level outcomes and the HIFIS Reaching Home Housing Continuum. That being said, for Point-in-Time Counts, people experiencing hidden homelessness are not included in enumeration, just the survey.

Staying in public institutions

The situation of an individual that is staying in a public institution who does not have a permanent address or residence, and does not have the immediate prospect, means, and ability of acquiring it.

Indigenous homelessness

Recognizing the diversity of Indigenous peoples in Canada, and that Indigenous peoples may choose to refer to themselves in their own languages, the following definition of Indigenous homelessness is inclusive of First Nations, Métis and Inuit, status and non-status persons, regardless of residency or membership status. For the purposes of Reaching Home, and subject to revision based on ongoing engagement and consultation with Indigenous peoples, Indigenous homelessness refers to: “Indigenous peoples who are in the state of having no home due to colonization, trauma and/or whose social, cultural, economic, and political conditions place them in poverty. Having no home includes: those who alternate between shelter and unsheltered, living on the street, couch surfing, using emergency shelters, living in unaffordable, inadequate, substandard and unsafe accommodations or living without the security of tenure; anyone regardless of age, released from facilities (such as Point-in-Time Counts) mental

health and addiction treatment centers, prisons, transition houses), fleeing unsafe homes as a result of abuse in all its definitions, and any youth transitioning from all forms of care”

Youth homelessness

Refers to the situation and experience of young people (e.g., between the ages of 13 and 24) who are living independently of parents and/or caregivers, and do not have a permanent address or residence, or the immediate prospect, means, and ability of acquiring it. Youth homelessness is a complex social issue as it occurs during a time of significant developmental change for the young person, including social, physical, emotional, and cognitive changes. To be effective, youth-specific interventions need to take these factors into consideration.

Chronic homelessness

Refers to persistent or long-term homelessness where people have:

- Been homeless for at least 180 days at some point over the course of a year (not necessarily consecutive days); and/or,
- Recurrent episodes of homelessness over three years that total at least 18 months. The measure of chronicity only includes sheltered, unsheltered and hidden homelessness. More specifically, it only includes time spent in the following living situations:
 - Emergency shelters (permanent or overflow beds, including those for people experiencing domestic violence);
 - Unsheltered locations or places not intended for human habitation (e.g., parks);
 - Staying temporarily with others (e.g., family or friends) without guarantee of continued residency (“couch surfing”); and,
 - Short-term rentals with no security of tenure (e.g., paying for motels with income or savings).

It does not include time spent in transitional housing or public institutions (e.g., hospitals or corrections), although people who are discharged into homelessness from these living situations can be considered chronically homeless if they were experiencing chronic homelessness upon entry to transitional housing or a public institution. This experience can also be further described as acute chronicity or prolonged instability:

- **Acute chronicity:** Homelessness for at least 180 days at some point over the course of a year (not necessarily consecutive days); and/or,
- **Prolonged instability:** Recurrent episodes of homelessness over three years that total at least 18 months. Any individual may experience acute chronicity, prolonged instability or both.

Housed

The situation of an individual or family who has a permanent address or residence, or has the immediate prospect, means, and ability of acquiring it.

Point-in-Time Count

A data collection initiative with two primary purposes:

1. A Point-in-Time Count Enumeration of people experiencing visible homelessness.

An estimate of people experiencing homelessness in shelters, transitional housing, and unsheltered locations within a determined geographical area on a single night. Some communities are also able to enumerate homelessness in other locations, such as institutional settings (e.g., health or correctional systems). Conducted over subsequent years, the Point-in-Time Count Enumeration data can track progress in reducing homelessness at the community level.

2. A Survey on Homelessness to better understand people experiencing homelessness.

This includes a set of standardized survey questions that are administered directly to individuals experiencing homelessness. Respondents include those in shelters, transitional housing, health and correctional systems, unsheltered locations, and hidden homelessness (e.g., people who are “couch surfing”). The survey collects information on the characteristics and experiences of people affected by homelessness to help community organizations and all orders of government better understand and serve the individuals experiencing homelessness in Canada. The Survey on Homelessness can be administered for up to one month following the date of enumeration. Information collected can be used to target community resources to where they are most needed.

Ending homelessness: Functional zero and absolute zero

There are two main ways to understand the “end” to homelessness:

- A **Functional Zero** end to homelessness means that communities have a systematic response in place that ensures homelessness is prevented whenever possible or is otherwise a rare, brief, and non-recurring experience.
- **Absolute Zero** refers to a true end to homelessness, where everyone has access to supports and appropriate, affordable housing so that no one is at-risk and experiences homelessness in the first place.

Housing First involves moving people experiencing homelessness—particularly people experiencing chronic homelessness—rapidly from the street or emergency shelters into stable and long-term housing, with supports. Stable housing provides a platform to deliver services to address issues frequently faced among the chronically and episodically homeless. The goal is to encourage housing stability and improved quality of life for persons served by Housing First and, to the extent possible, foster self-sufficiency.

Under Reaching Home, the Housing First approach is supported as a proven approach to tackling homelessness, including chronic homelessness, which remains an important priority. As of April 1, 2019, all mandatory Housing First investment targets that were under the previous federal homelessness program have been removed.

This gives communities more flexibility in how they use the Housing First approach for populations beyond those experiencing chronic homelessness and to use other innovative approaches to address local needs.

Principles of Housing First

1. Rapid housing with supports: This involves directly helping clients locate and secure permanent housing as rapidly as possible and assisting them with moving in or rehousing if needed. Housing readiness is not a requirement.

2. Offering clients' choice in housing: Clients must be given choice in terms of housing options as well as the services they wish to access.

3. Separating housing provision from other services: Acceptance of any services, including treatment, or sobriety, is not a requirement for accessing or maintaining housing, but clients must be willing to accept regular visits, often weekly. There is also a commitment to rehousing clients as needed.

4. Providing tenancy rights and responsibilities: Clients are required to contribute a portion of their income towards rent. The preference is for clients to contribute 30% of their income, while the rest would be provided via rent subsidies. A landlord-tenant relationship must be established. Clients housed have rights consistent with applicable landlord and tenant acts and regulations. Developing strong relationships with landlords in both the private and public sector is key to the Housing First approach.

5. Integrating housing into the community: In order to respond to client choice, minimize stigma and encourage client social integration, more attention should be given to scattered-site housing in the public or private rental markets. Other housing options such as social housing and supportive housing in congregate setting could be offered where such housing stock exists and may be chosen by some clients.

6. Strength-based and promoting self-sufficiency: The goal is to ensure clients are ready and able to access regular supports within a reasonable timeframe, allowing for a successful exit from the Housing First program. The focus is on strengthening and building on the skills and abilities of the client, based on self-determined goals, which could include employment, education, social integration, improvements to health or other goals that will help to stabilize the client's situation and lead to self-sufficiency.