



Principal Investigator

Kasia Tota

Advisory Committee

Wendy Fraser
Jeff Karabanow
Wayne MacNaughton
Barbara Nehiley
Shirley O'Neill
Joanne Parker

Technical Assistance

Darcy Harvey
Louise VanWart
Don Bickford

Cover Design

Bill Gellard

Executive Summary

Homelessness in HRM – A Portrait of Streets and Shelters is a broad based homelessness study facilitated by research staff at the Halifax Regional Municipality. The study utilizes a mix of methods, including literature review, 2001 Census analysis, qualitative interviews with homeless individuals and a one-day snapshot survey of absolutely homeless individuals in the Metro area.

The first survey was conducted on June 19, 2003 and served as the basis of the first *Portrait* report. It called for a greater collaboration between community organizations and the three levels of government, a swift implementation of the Canada-Nova Scotia Affordable Housing program, and the establishment of a harm reduction facility for individuals with addictions and mental illness disorders currently not served by the shelter system.

While over the past year community organizations and government collaborated on several important initiatives, this report suggests that homelessness continues to be unabated and important gaps remain in the continuum of supports. Specifically:

- A temporary Out of the Cold Program was established in December 2004 in the Metro area, but no financial commitment has been made to continue the program in future years.
- Supportive housing for individuals with dual mental illness and addictions (“shelter of last resort”) has not been established in HRM.
- Current affordable housing programs do not meet the needs of individuals with lowest incomes in HRM (the bottom 20%).
- Income growth in HRM has been stagnant for most households, and the lowest income households have been consistently losing ground. Therefore, income gap is growing (FCM, 2004).

This report presents data on the second point-in-time survey of homelessness conducted on **June 17, 2004**. It draws comparisons between the 2003 and 2004 results, and provides additional analysis of some of the themes

that emerged from the surveys – Vulnerable Families, Youth Homelessness, Diversity and Housing, Income and Housing Affordability in HRM. The findings largely confirm the results of the 2003 survey and validate the *Portrait* survey as a community-based benchmarking tool for monitoring broad service needs and local trends in the state of homelessness.

Highlights of findings:

- 266 individuals were surveyed through the 2004 survey as compared to 234 in 2003 and the gender split was exactly the same as in 2003 (67% male and 33% female).
- Homeless respondents to the survey ranged from 14 to 74 years old, and the average age was 35 years old. Women and those surveyed outside the shelter system tended to be younger and only a third of the youth was surveyed through the shelter system.
- 34% of respondents were under 24 years of age, 39% were between 25 and 44, and 28% were over 45 years of age. There was a marked increase in the proportion of youth (19-24 years old) and older adults (45 -64 years old).
- Half of the respondents reported receiving some form of government assistance and less than 10% engaged in panhandling and related activities.
- Family violence, conflict and breakdown was cited by 32% of respondents as the immediate cause of homelessness, followed by substance abuse (26%), being unable to find accommodation (23%), lack of income (19%) and mental illness (14%).
- 58% of respondents indicated having a health condition, with 33% reporting addiction, 20% mental illness, 15% medical condition and 4% disability (many individuals were affected by more than one health problem).

Summary of Findings

Homelessness is the state of being without shelter, it is not a personal characteristic. Individuals who were **absolutely homeless** are defined in this study as those who did not have a permanent place of their own to stay (ie did not rent, own or have customary access to a conventional dwelling unit) on the night of the survey. In practical terms it included those who stayed in emergency shelters and transitional housing, as well as those who were encountered during a snapshot survey of streets and homeless services in the Metro area and reported not having a place of their own to stay. **Households at risk of homelessness** were defined as those that spent 50% or more of their gross income on shelter, as reported by the 2001 Canada Census.

The results of the survey provide important insights into immediate reasons for homelessness and on some of the demographic characteristics of homeless individuals reached by the survey, however it is not a “count” and should not be used to characterize all homeless individuals in the Halifax Regional Municipality. The results also cannot be used to assert absolute increases or decreases in the scope of homelessness in the region. The point-in-time survey can however serve as a useful bench-marking tool that can, over time, point to changes in the profile and general service needs of the homeless population.

Survey Summary

- ◆ **Portrait 2003:** 234 individuals surveyed and 35 dependent children; 31% independent youth under 24 years of age (n=61).
- ◆ **Portrait 2004:** 266 individuals surveyed and 41 dependent children; 34% independent youth under 24 years of age (n=90).

♦ **Comparison between 2003 and 2004:**

- **Size of the sample population:** Overall 13% more individuals were reached through the 2004 survey as compared to the 2003 survey.
- **Gender:** The survey recorded the same gender split - 67% men (n=178), 33% women (n=87) and one trans-gendered individual.
- **Streets and Shelters:** In this survey:
 - There was an increase in the proportion of individuals reached through the street survey from 25% in 2003 (n=58) to 33% (n=84) in 2004.
 - The same proportion of women were reached through shelters as in 2003 (85%) but a smaller proportion of men were reached through shelters (60% vs 70% in 2003).
 - Independent youth under 24 years of age represented 34% of all respondents (n=90) but 63% all those surveyed outside the shelter system (n=53 out of n=84).
- **Age:** There was a notable increase in the proportion of youth under 24 years of age reached through the survey, from 19% of all respondents in 2003 (n=38) to 22% in 2004 (n=59). Adults between 45 and 64 years of age also increased, from 20% in 2003 (n=40) to 26% in 2004 (n=69). Age distribution remained largely the same as in 2003 survey with 34% (n=90) being under 24 years of age, 39% (n=102) being between 25 and 44 years of age and 28% (n=74) being over 45 years of age. **Only one-third of the youth was surveyed through the shelter system.**
- **Average age:** The homeless respondents in this survey ranged in age from 14 to 74 years old (we do not have data on the age of dependent children). The average age of all respondents was 35, with women being younger than men (average age 32 vs. 36 for men) and the street population being younger than those who were surveyed in the shelters (average age 27 vs. 38 in shelters).
- **Dependent children:** Homeless respondents reported having 41 dependent children in their care (n=34 in 2003 or 17% increase). Ten of those children (10) were reported through emergency shelters, 24 through transitional housing, and seven (7) through the street survey.
- **Family status:** The vast majority of respondents were single (94% n=238), but 15% (n=38) were part of family units that included couples and single parents.
- **Place of origin:** In the 2004 survey 44% (n=116) of respondents said that they were originally from the HRM area (as opposed to 62% or n=132 in 2003). Further, 19% (n=54) were from other parts of Nova Scotia, 29% (n=81) were from other Canadian provinces or territories and 4% (n=10) were originally from outside Canada. Youth between 19-24 were the most mobile group.
- **Visible minority and ethnic status:** In the 2003 survey 31% (n=56) of respondents were members of visible minority. In 2004 only 16% (n=51) of respondents were part of minority groups. Although the proportion of visible and ethnic minorities is significantly lower (a fluctuation not unexpected given the small sample size and the small overall size of minority groups in HRM), the actual number of minority groups' members is only slightly lower. In 2004 2% identified themselves as Aboriginal, 6% as Black, 2% as either Aboriginal/Black or Black/Caucasian, 3% as immigrant or refugee and 2% as "other". The issue of housing discrimination is explored in this study.

- **Income:** The results on respondents' main source of income are comparable between 2003 and 2004 surveys. In 2004 approximately a quarter (24% n=60) reporting having no source of income, half received some form of government assistance (48% n=130), 9% (n=22) had income from employment, 9% engaged in informal economy activities such as binning and panhandling, and 9% had other sources of income. Therefore less than 10% engaged in activities associated with visible homelessness such as panhandling and scavenging.
- **Immediate cause of homelessness:** Similar to the 2003 survey family violence or breakdown (which may be related to parental or spousal conflict) was again the most frequently cited immediate reason for homelessness (32% n=82 as compared to 21% n=49 in 2003). This was followed by substance abuse (26% n=67 as compared to 12% n=29 in 2003), being unable to find accommodation (23% n=58 as compared to 14% n=32 in 2003) and lack of income (19% n=48 as compared to 16% n=37 in 2003). **Housing related reasons** (this includes lack of affordable accommodation, eviction, and fire or unsafe premises) were cited by 35% of the respondents (n=89 as compared to n=54 in 2003). Reported reasons for homelessness are also provided in the report by gender, sheltered and non-sheltered population, and by various age groups. Family violence is explored as one of the themes in this report.
- **Place of stay:** On the night before the survey 65% (n=172) of respondents said that they stayed in a shelter or transitional housing facility, 16% (n=43) stayed on a street, in a squat or public building and 16% were "couch surfing" (n=43). Four individuals (2%) were released from an institution such as hospital, detox or correction institution.
- **Seeking shelter:** All respondents were asked whether on the night of the survey they had sought accommodation or alternative accommodation, and 94% (n=242) said that they did try to seek accommodation. Out of those who did not seek alternative shelter, 66% (n=160) were already admitted to shelter or a transitional housing institution, but 10% (n=24) said that they did not know where to go, 11% (n=26) said that they did not like staying in shelters, 7% (n=17) said that they would not have been admitted, and 6% (n=15) provided no reason. This means that nearly a third (28%) had not sought shelter due to lack of knowledge or negative perception of the services.
- **What happened when shelter was sought?** Only 15 individuals said that they sought shelter, out of which five said that the shelter was full, five said that they were not admitted, and five provided no explanation as to what happened. This result does not coincide with the numbers reported by the shelters and should be interpreted with caution as individuals may have referred to past experiences in accessing the shelter system, and not necessarily on the night before the survey.
- **Incidence of homelessness:** 34% (n=86) said that they were homeless for the first time (42% n=49 in 2003), and 66% (n=167) were homeless two or more times (n=69 or 58% in 2003). Some individuals noted on the survey that they were homeless ten or more times over the course of their lives. Men and those surveyed on the streets were more likely to report repeated incidents of homelessness.
- **Length of homelessness:** Results were again comparable to the 2003 survey where 30% of respondents (n=74) were homeless for less than a month, 50% were homeless between a month a six months (n=126) and 20% (n=50) were homeless more than six months. Women and those surveyed on the streets reported longer periods of homelessness.
- Individuals who are repeatedly homeless and homeless for long periods of time usually require social and medical supports in addition to housing to address their multiple needs. The longer it takes to intervene, the more difficult it may be for an individual to re-establish a stable housing situation;
- **Health:** In the 2003 survey only 25% of respondents (n=58) reported no health concerns, while 26% (n=61) reported addiction, 21% self-reported mental illness (n=49), 16% reported medical condition (n=38) and 4% reported physical disability (n=14). In the 2004 survey 38% (n=101) reported no health concerns, 33% reported addiction (n=88), 20% reported mental illness (n=52), 15% medical condition (n=40), 4% physical disability (n=10) and 3% (n=8) refused to

identify the condition. Many individuals reported multiple problems, including thirteen (5%) who reported dual mental health and addiction concerns.

- **Access to treatment:** Respondents who identified a health concern were asked whether they were currently accessing treatment for their condition. Out of the 198 reported cases of health problems, 77% (n=152) said that they were accessing some form of treatment. Access to treatment was the highest for medical conditions, followed by addictions, mental illness, disability and other conditions. Note that the satisfaction or appropriateness of treatment was not assessed. The fairly high level of access may be partially explained by the inclusion of some residential addiction facilities and emergency shelters that provide case management services.

Qualitative interviews

Individuals who participated in the in-depth interviews spoke of the homeless experience in terms of the interdependency of stresses related to family life, poverty, addictions, and inability to access affordable and safe accommodation. Homeless survival strategies included activities such as “couch surfing” among relatives and friends for as long as that may be possible, initiating relationships to obtain access to housing, sleeping rough, and at times engaging in illegal activities such as theft and prostitution. Individuals with past experience with the justice system spoke of the barriers of staying “clean” in the face of very low-income assistance levels and discrimination in seeking housing and employment. One common theme was that the scarcity of social and financial supports would turn even a relatively small challenge into an insurmountable barrier that would often later lead to more serious problems.

Continuing challenges

- Homelessness may not be on the rise but despite a variety of effective interventions since 1999 it may be unabated. The 2004 results confirm and validate 2003 findings.
- Family conflict, violence and breakdown continue to be the key underlying factors of homelessness;
- Low and stagnating wages, inadequate income assistance rates and lack of income are critical contributing factors to homelessness;
- The continuing lack of access to affordable housing and housing with social supports is putting vulnerable individuals at risk of eviction and homelessness;
- Individuals with addictions and mental illness continue to account for a significant proportion of those who are homeless and may have limited housing options available to them;
- No financial commitment to address the needs of the “hard to house” – individuals with dual mental illness and addictions issues;
- No financial commitment to continue the Out of the Cold Program (Gus’s Place) established in December 2004;
- The 2003 report drew attention to the 16,000 households in HRM that spend 50% or more of their income on shelter. Since then, CMHC released its core housing need data, which combines indicators of housing affordability, quality and appropriateness. According to that data, in HRM **25,180** households are in core housing need (as compared to 16,635 in 1991). These households have an average income of \$18,495 and on average pay 46% of their income on shelter. Therefore, affordable housing options are urgently required for those on very low incomes as well as for the working poor.
- Current affordable housing programs signal a renewed federal and provincial interest in affordable housing. However, current programs exhibit several limitations:

- ◆ **Sustainability:** homelessness programs operate on 3 year timeframes, affordable housing programs operate in five-year timeframes and require affordability commitments for only 10 years;
- ◆ **Depth of subsidy:** The current per unit subsidies (up to \$25,000 per unit) cannot reach the most needy households (ie low income renters, the lowest income quintile);
- ◆ **Lack of operating funds:** many community-based initiatives, particularly those offering supports cannot demonstrate sustainability. The three levels of government need to coordinate their respective programs to facilitate non-profit groups in becoming involved in the construction and maintenance of affordable housing.

Opportunities for action

The primary purpose of this report was to conduct a broad based homelessness study that would provide information to increase general understanding of homelessness issues in the community and affirm the usefulness of the Portrait survey as a community based benchmarking tool. While we do not include formal recommendations at this time, we do include several areas where we believe action is warranted.

Municipal Government:

- Continue to provide support to non-profit housing providers through project grants, tax and fee exemptions, land donations;
- Fast-track affordable housing applications;
- Seek legislative changes to develop private sector incentives for inclusive development of affordable housing;
- Provide leadership in the demonstration of accessible and attractive housing design and neighbourhood-based community based housing development;
- Work with other partners on strategies that increase the safety and housing security of women and children affected by family violence in HRM;

Provincial Government:

- Continue to support the Out of the Cold program;
- Expand supportive housing options to individuals affected by mental illness and addiction;
- Seek additional resources and flexibilities to the Canada-Nova Scotia Affordable Housing Agreement, including higher capital grants;
- Bring income assistance rates and minimum wage levels to the Low Income Cut-off Rates for HRM;
- Develop rent supplements for low income renter households;
- Conduct regular needs assessments and, in consultation with the community and service users, develop goals and outcome measures for homeless services;
- Use existing capacity to assist non-profit organizations to obtain mortgages for affordable housing development;
- Facilitate non-profit rental preservation to prevent the loss of affordable units;
- Encourage school boards to reduce barriers to education for homeless individuals, particularly children and youth;
- Incorporate homelessness issues in policy reviews related to health care provision, housing, income assistance, immigration, justice and child welfare.

Federal Government:

- Commit to a National Housing Policy that includes long-term affordable housing programs, a continuum of housing supports, and tax incentives for affordable housing development;
- Develop additional CMHC products to facilitate affordable housing development for households below the 20th income percentile;
- Incorporate operating funds into capital initiatives funded by the Supporting Community Partnerships Initiative (SCPI).

All Governments:

- Form a store-front consortium of services and programs that provide integrated support for affordable housing project development and fast-track proposals.