

Homelessness — Causes & Effects

Background Report

A Profile and Policy Review of Homelessness in the Provinces of Ontario, Quebec and Alberta



BRITISH
COLUMBIA

March 2001

Acknowledgement

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Volume 4

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1 Introduction

This report is Volume 4 of the study of the causes and effects of homelessness. It provides background information on the homeless population and relevant government policies in the provinces of Ontario, Quebec and Alberta. The information has been used to provide a comparison with the homelessness situation in British Columbia in Volume 2, *A Profile, Policy Review and Analysis of Homelessness in British Columbia*. The data is based primarily on published reports. Volume 1 of this study is entitled *The Relationship between Homelessness and the Health, Social Services and Criminal Justice Systems: A Review of the Literature*. Volume 3 is entitled *The Costs of Homelessness in British Columbia*.

2 Profile of the Absolute Homeless in Ontario

2.1 Ontario Profile Overview

Information on homelessness in Ontario is largely based on two reports: *Where's Home? A Picture of Housing Needs in Ontario*¹ and the *Federation of Canadian Municipalities National Housing Policy Options Paper*.²

Table 1 shows that in 1998, permanent shelters and emergency housing providers in eight municipalities recorded almost 1.5 million overnight stays. This does not include people accommodated in temporary municipal shelters and Out of the Cold programs that operate during the winter in many communities.³

Table 1: Use of emergency and shelter services in selected Ontario municipalities in 1998

Location	Current annual bed nights in "official" shelters and overflow	Out of the cold annual bed nights	Current annual totals of bed nights
Barrie	8,017	474	8,491
Hamilton-Wentworth	35,788	9,800	45,588
Kitchener-Waterloo	35,163	281	35,444
North Bay	5,328	N/A	5,328
Ottawa-Carleton	192,720	N/A	192,720
Peel	23,763	4,640	28,403
Peterborough	3,762	N/A	3,762
Toronto	1,168,000	N/A ⁴	1,168,000
Total	1,472,541		

Source: Ontario Non-Profit Housing Association & Co-operative Housing Federation of Canada, *Where's Home? A Picture of Housing Needs in Ontario*, 1999 p. 38

¹ Ontario Non-Profit Housing Association and Co-operative Housing Federation of Canada, *Where's Home? A Picture of Housing Needs in Ontario*, 1999.

² Federation of Canadian Municipalities *National Housing Policy Options Paper, A Call for Action, Municipal Profiles*, June 1999 (Draft).

³ Several churches and other faith groups provide overnight shelter, drop-in services, and meals for homeless and socially isolated people in the winter months. An attempt is made to ensure that homeless people have at least one place to go on any given night if shelters are full. The program is run by volunteers. See Report of the Mayor's Homelessness Action Task Force, *Taking Responsibility for Homelessness, An Action Plan for Toronto*, 1999, p. 29.

⁴ Report of the Mayor's Homelessness Action Task Force, *Taking Responsibility for Homelessness, An Action Plan for Toronto*, 1999, p.9 estimates that there are 46 Out of the Cold programs in Toronto of which 25 provide overnight shelter one or more nights a week for between 150 and 400 youths and adults each night.

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There is evidence of increasing homelessness throughout Ontario, as seen in Table 2. In addition, based on input from several municipalities across the province, families with children, youth and people with mental illness appear to be the fastest growing group of shelter users.

It should be noted that figures regarding shelter use over time might not describe the complete situation. Shelter occupancy is limited by capacity, which may not have increased over time to fully accommodate the need. Some households do not seek assistance from shelters and may find temporary solutions by staying with family or friends. In addition, several communities are planning to expand their Out of the Cold programs. Barrie and Cambridge each have three locations and plan to expand next year. Waterloo has one location and also plans to expand next winter. This increased rate of community response to homelessness can be seen as indicating both a growing awareness of need and an actual increase in need.

Table 2: Shelter indicators of growing need in selected municipalities

Municipality*	Percentage Increase**	Period
Barrie	1,235	Over 4 years (1994–98)
Hamilton-Wentworth	26	Over 2 years (1996–98)
Kitchener-Waterloo	8	Over 4 years (1994–98)
North Bay	21	Over 3 years (1995–98)
Ottawa-Carleton		
Peel	41	Over 4 years (1994–98)
Peterborough	98	Over 4 years (1994–98)
Toronto		

Source: Ontario Non-Profit Housing Association and Co-operative Housing Federation of Canada, *Where's Home?*, 1999 p. 39

*Not all shelters represented in each municipality.

**Measures the per cent increase in use of shelter services over varying periods as noted.

Hamilton-Wentworth — In its 1995 Municipal Housing Statement, Hamilton-Wentworth noted that women made up an increasing proportion of shelter users.

Kitchener-Waterloo Region — There has been an increase in mothers with children, youth, and people with mental disabilities among shelter users. There is growing visible evidence of homelessness and poverty in Kitchener as there has been an increase in the number of people panhandling and sleeping under bridges or in abandoned buildings.

London — In 1998, a monthly average of approximately 400 households used the City's three emergency shelters. Shelter use has grown by 13 per cent on an average monthly basis since 1995. A 1998 City study reported

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that youth are uncomfortable using adult shelters and there is no shelter dedicated for youth in London. There has been an increase in the number of people with mental health issues and/or addictions who use the shelter system.

Ottawa-Carleton — On a daily basis, it is estimated that more than 500 men, women and children were accommodated in Ottawa-Carleton's emergency shelters in 1998. Occupancy rates have been increasing to nearly 100 per cent in the Region's two family shelters, and 95 per cent in the men's shelters. The homeless population is made up of single men and women, youth, the elderly and families.

Peterborough — A 1997 report from the Peterborough Housing Advisory Committee reported that a recently opened shelter for women and children immediately experienced a sharp increase in the number of children throughout its first winter. Peterborough has experienced almost a 100 per cent increase in the use of men's and family shelters over four years from 1994–1998.

Toronto — Families and youth under the age of 18 are the fastest growing group of hostel users. Families accounted for 46 per cent of the people who used hostels in 1996. Approximately 30–35 per cent of the Toronto homeless population suffers from mental illness. Approximately 80 per cent of adult women suffer from mental illness. In 1996, 4,400 people were chronic hostel users who stayed in hostels for a year or more.

Windsor — The Salvation Army Centre is the primary shelter in Windsor and was filled beyond the licensed capacity of 90 beds throughout 1998. It was not uncommon for 150–165 people to be sleeping in the Centre on any given night. Thirty to 40 per cent of shelter users have been identified as chronic users, many of whom have mental health issues. The largest growth in shelter use has been among persons with a mental illness or addiction to drugs or alcohol.

2.2 City of Toronto

2.2.1 Sources of Information

The main source of information used to describe the homeless population in the city of Toronto is a background report prepared for the Homelessness Action Task Force by Springer, Mars and Dennison, entitled *A Profile of the Toronto Homeless Population*.⁵ The purpose of the report was to provide information about the homeless population that was as accurate as possible.

Information for the Toronto profile was obtained from data gathered by hostels on each admission and subsequent discharge of a household. There are two important files. The first includes the 500,190 cases (defined as each admission/discharge) from 1988–1996. The second file includes information on 133,155 unique household heads that used the hostel system over the same period. This includes information on the number of persons, including spouses and children who were part of the household during the period of service.

Two other reports were used to obtain additional information on health issues facing homeless people. The first includes another background report prepared for the Homelessness Action Task Force by Carol Kushner, entitled *Better Access, Better Care, A Research Paper on Health Services and Homelessness in Toronto*.⁶ Appendix A of the Kushner report provides selected data on the health needs of homeless people in Toronto from a variety of different sources. Another useful document is the *Toronto Street Health Report*, which involved face-to-face interviews with 450 homeless people in 1992.⁷

2.2.2 Count

Hostel Occupancy — Point Prevalence

Table 3 shows hostel occupancy by type from 1988–1996. This is the number of unduplicated individuals who used hostel services on a “typical” day. Since 1988, families have been the fastest growing group of hostel users (105 per cent), followed closely by youth at 94 per cent. In 1996, families represented 46 per cent of all hostel users.

⁵ Springer, Joseph, James Mars, and Melissa Dennison, *A Profile of the Toronto Homeless Population*. Report prepared for the Homelessness Action Task Force, City of Toronto, June 1998.

⁶ Kushner, Carol, *Better Access, Better Care, A Research Paper on Health Services and Homelessness in Toronto*. Report prepared for the Homelessness Action Task Force, City of Toronto, July 1998.

⁷ Ambrosio, Eileen, Dilin Baker, Cathy Crowe and Kathy Hardill, *Street Health Report*, May 1992.

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Table 3: Hostel occupancy by type, 1988–1996 (Yearly Average)

Hostel Type	1988	1989	1990	1991	1992	1993	1994	1995	1996	per cent increase
Youth	170	183	199	198	201	195	257	319	329	94
Families	700	595	517	671	930	1,120	1,081	1,648	1,437	105
Single Women	226	224	214	231	225	229	242	256	246	9
Single Men	1,018	977	972	927	912	1,015	1,072	1,014	1,124	10
Total	2,114	1,979	1,902	2,027	2,268	2,559	2,652	3,237	3,136	48

Source: Springer, Mars and Dennison, 1998 p.9

Number of Distinct Hostel Users — Period Prevalence

a) One Year Prevalence

In each year over the nine-year period, hostels served between 22,000 and 28,000 distinct individuals in 19,000 to 24,000 distinct households. More and more children were included in these households, rising from 2,700 children in 1988 to 5,300 in 1996.⁸

Table 4: Number of distinct hostel users — annual prevalence, 1988–1996

One Year Prevalence	1988	1989	1990	1991	1992	1993	1994	1995	1996	per cent increase
No of unique households	18,600	20,277	22,284	24,142	22,164	21,442	19,176	19,130	19,473	5
No. of spouses	404	460	604	582	703	780	594	*1,405	*1,120	177
No. of children	2,681	3,046	3,637	3,822	3,872	4,238	4,301	4,907	5,318	98
Total no. of unique individuals	21,685	23,783	26,525	28,546	26,739	26,460	24,071	25,442	25,911	19

Source: Springer, Mars and Dennison, 1998 p. 10

*Based on conversations with Greg Suttor, City of Toronto, August 1999

b) Prevalence over 9-year period

From 1988–1996, 133,000 distinct households used the hostel system. This included 133,000 household heads, 31,000 children, and 6,000 spouses, for a total of 170,000 distinct individuals. Many of these people used the hostel system in only one year.⁹

⁸ Springer, Mars and Dennison, 1998 p.11.

⁹ Springer, Mars and Dennison, 1998 p. 11.

2.2.3 Characteristics

The information in this section is based on an analysis of the distinct hostel users over the period from 1988–1996. In terms of change over time, the fastest growing populations using hostels are persons under 18 and families with children.¹⁰

Gender

Most of the single persons who use hostels are men. Over the 1988–1996 period, 71 per cent were men and 29 per cent were women. Single women accounted for 12 per cent of hostel users. The number of women as a percentage of hostel users has increased significantly over time, from 24.3 per cent in 1988 to 37.2 per cent in 1995–1996.

Table 5: Change in gender distribution 1988–1996

Gender	1988 (per cent)	1989–90 (per cent)	1991–92 (per cent)	1993–94 (per cent)	1995–96 (per cent)
Women	24.3	25.9	26.4	31.4	37.2
Men	75.7	74.1	73.6	68.6	62.8

Source: Springer, Mars and Dennison, 1998 p. 30 and Figure 10

Age of Hostel Users

Table 6 below shows the age of hostel users compared with the general population in Toronto. The numbers indicate that youth age 18–24, is over-represented in hostels where they make up 21 per cent of clients compared to their share of the population of Toronto (7.7 per cent).

Table 6: Age of hostel users compared to the general population

Age Group	Hostel users ¹¹ (per cent)	(New) City of Toronto 1995 (per cent)
Under 18 years	21.8	22.1
18–24	21.0	7.7
25–34	27.8	18.8
35–44	17.2	16.8
45–64	10.7	21.4
65+	1.5	13.3
Total	100.0	100.0

Source: Springer, Mars and Dennison, 1998 p. 13

¹⁰Springer, Mars and Dennison, 1998, (summary).

¹¹All hostel clients over a nine-year period.

Client Type

The data over a nine-year period shows that the vast majority of those who use the hostels are single adults 25 years of age or older (59 per cent). Eighty per cent of these single persons are men. Youth (single persons 24 years of age or younger) account for 28 per cent of persons who need service. Single parents account for 9 per cent of users, while couples and two-parent families account for the remaining 4 per cent for a total of 13 per cent.

Table 7 illustrates changes over the nine-year period. Information is based on characteristics of the 133,000 households who used the hostel system over the nine-year and two-year time frames. Table 7 shows an increase in the proportion of homeless people who are families with children.

Table 7: Change in client type 1988–1996

Client type	1988 (per cent)	1989–1990 (per cent)	1991–1992 (per cent)	1993–1994 (per cent)	1995–1996 (per cent)
2-parent family	2.6	2.9	3.8	4.5	7.5
1 parent family	6.6	7.8	8.3	9.4	10.1
Youth	26.6	30.0	26.9	26.5	29.1
Single women	11.0	10.4	10.6	12.4	13.4
Single men	53.0	49.0	50.4	47.2	39.9

Source: Springer, Dennison and Mars (Figure 11), 1998

Race

A 1997 survey of homeless people in Toronto found that Aboriginal people (5 per cent) and Black people (15 per cent) were over-represented in the homeless population in Toronto compared with the general population.¹²

Reasons for Service among Hostel Users

Table 8 shows that the top three known reasons for service among hostel users over the nine year period were new arrival to Toronto, followed by eviction, and family breakdown. Another significant reason for hostel use fell into the transient/other/unknown category.

¹²Tolomiczenko et al.1997 as cited in Springer, Mars and Dennison, 1998 p. 12.

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Table 8: Reasons for service among hostel users

Reasons for Service	# of Households	Per cent of Households
New Arrival to Toronto	40,823	30.7
Eviction	15,667	11.8
Family Breakdown	11,769	8.8
Spousal Abuse	10,648	8.0
From Hospital/Treatment	3,983	3.0
Parental Abuse	3,284	2.5
From Corrections System	2,972	2.2
Refugee Claimant	1,889	1.4
Fire or Unsafe Premises	876	.7
Sponsorship Breakdown	76	.1
Transient/Other/Unknown	41,101	30.9
Total — All Reasons	133,028	100.0

Source: Springer, Mars and Dennison, 1998 p. 14

The reasons for hostel use have changed over time. Spousal abuse as a reason for service rose sharply in the 1993–1996 period, from 6.5 per cent to 10 per cent. Parental abuse as a reason for hostel use also increased from less than 1 per cent in 1988 to 6 per cent in 1993–1994 and back down to 4 per cent in 1995–1996. Family breakdown as a reason for hostel use increased from 6 per cent in 1988 to 12 per cent in 1995–1996. Most recently, it has also been estimated that use of shelters by approximately 40 per cent of families is related to evictions and overcrowding.¹³

¹³Conversation with K. Chislett, City of Toronto, June, 1999.

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Changes in reasons for service is illustrated in Table 9 below.

Table 9: Change in reasons for service 1988–1996

Reasons for service	1988 (per cent)	1989–1990 (per cent)	1991–1992 (per cent)	1993–1994 (per cent)	1995–1996 (per cent)
Family breakdown	6.3	6.8	6.4	14.7	12.1
Abuse	7.3	8.2	8.6	15.9	14.0
Eviction or Fire	15.3	12.4	12.3	14.2	10.5
New Arrival or Refugee	40.2	40.4	37.6	23.1	21.7
From Institution	6.4	5.1	4.7	5.1	6.1
Transient	24.5%	27.1%	30.3%	27.0%	35.5%

Source: Springer, Mars and Dennison, 1998 (Figure 12)

Prior Residence among Hostel Users

Table 10: Prior residence among hostel users 1988–1996

As shown in Table 10, the majority of hostel users came from Toronto.

Home community	# of Households	Per cent of Households
Toronto	70,904	53.3
Another Province	22,420	16.8
Other Parts of Ontario	20,665	15.5
Another Country	18,072	13.6
Unknown	1,027	.8
Total	133,088	100.0

Source: Springer, Mars and Dennison, 1998 p.14

Over time, an increasing proportion of hostel users has reported that they lived in Toronto before admission. In 1988–1990, the proportion was approximately 47 per cent, but it rose to 53 per cent, 59 per cent and 62 per cent in the last three periods ending 1995–1996. A survey in March 1998 of 1,200 hostel users showed that 69 per cent lived in Toronto one year before admission. However, the Springer report notes that this data needs to be interpreted carefully, one of the reasons being that chronic users may report Toronto as their residence during the previous year rather than their previous address.

Accommodation after Discharge

Most hostel users who found permanent housing upon discharge moved into subsidized housing (13.4 per cent). Another 4 per cent found housing in the private market. A significant number, however, (41 per cent) went to another hostel. Whereabouts were unknown for another 31 per cent of users.

Table 11: Accommodation after discharge, 1988–1996

Destination	# Households	Per cent of Households
New Address in Subsidized Housing	17,783	13.4
New Address in Private Housing	5,323	4.0
Returned to Previous Address	3,338	2.5
Returned to Partner	3,171	2.4
Moved in with Friends/Relatives	1,655	1.2
To Other Hostel	54,081	40.6
Admitted to Hospital	3,202	2.4
Left City	715	.5
Whereabouts Unknown/Other	41,258	31.0
Total	133,088	100.0

Source: Springer, Mars and Dennison p. 15

It is important to note that there has been a dramatic drop in the ability of the system to find subsidized accommodation for households leaving hostels. In 1988 and earlier, about 22 per cent of households were placed in this type of housing. By 1995–1996, however, only 8 per cent of households could be accommodated in subsidized housing.¹⁴

Physical health issues among homeless people

Research collected on homeless people in Toronto indicates that “in general, they have the same kinds of health problems as the mainstream population but *at much higher prevalence rates*. In other words, they face far higher risks of becoming ill than the general population.”¹⁵ Some of the specific health issues are set out below.

¹⁴Springer, Mars and Dennison, 1998, p. 31.

¹⁵Kushner, 1998, p. 57.

Higher rates of premature death — Information from the City of Toronto Department of Public Health found that 71 per cent of homeless people who died between 1979 and 1990 were less than 70 years of age compared to 38 per cent in the general population.

Higher rates of infection and disease — A 1995 report prepared by a Toronto Public Health Department epidemiologist dealing with people who have no traditional home and/or are intravenous drug users living in poverty documented higher infection and diseases largely attributed to their living conditions. Some of these include poor hygiene, inadequate diets, constant exposure to the elements, lack of sleep and physical injuries. Toronto's Public Health Department has also raised concern about the potential for an outbreak of tuberculosis. A survey of tuberculosis (TB) skin test results among homeless people in Toronto found 48 per cent tested positive for TB. Higher rates of HIV infection have also been found within sub-populations of homeless people, including street youth and/or IV drug users, and those recently admitted to correctional facilities.

Chronic health conditions — The Toronto *Street Health Report* found that homeless people were at much higher risk than the general population for many common chronic conditions as shown in Table 12.

Table 12: Prevalence of chronic health conditions 1992

Condition	Homeless (per cent)	General Population (per cent)
Arthritis/rheumatism	29.8	13.4
Emphysema/chronic bronchitis	17.8	3.6
High blood pressure	13.2	12.5
Asthma	12.2	4.6
Heart attack	7.4	4.1*
Epilepsy	6.3	1.0
Diabetes	3.1	2.4

Source: Ambrosio, Baker, Crowe and Hardill, *The Street Health Report*. 1992

*This figure from the Toronto Community Health Survey (1988) combines heart attack and other "heart trouble."

Dental problems — According to the *Street Health Report*, 24 per cent of the sample reported sore or bleeding gums in the month before the survey, 23 per cent reported a toothache or cavity, and 12 per cent reported a loose tooth or teeth. Another study of 174 homeless youth (14–25 years old) found that 40 per cent had pain when chewing. For 13 per cent, the pain was severe enough to keep them awake. Forty-five per cent had bleeding gums. Among those who reported no pain, 38 per cent had tooth decay and almost 40 per cent had calculus and/or were in urgent need of periodontal treatment.

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Assault — As many as 40 per cent of those surveyed in the *Street Health Report* had been physically assaulted in the past year. Of these, more than half had been assaulted more than one time. Forty-six per cent of the women had been physically assaulted in the past year. More than one in five of the women (21.2 per cent) had been raped in the past year. Of the entire sample, 5.8 per cent admitted to having been raped in the past year.

Estimates of Mental Health Issues among Hostel Users

According to data on mental illness from the Hostel Services Division presentation to the Homelessness Task Force, it is estimated that 80 per cent of adult homeless women have a mental illness. About one-third of adult men suffer from mental illness. Alcoholism is the most pervasive health and mental health issue among homeless adult males.

Table 13: Estimates of mental health issues among hostel users

Category	Per cent with mental health issues (N=3600)
Youth	15
Adult men	35
Adult women	80
Adult parents	10

Source: Springer, Mars and Dennison, 1998, p. 21 based on a presentation by the Hostel Services Division to the Homelessness Action Task Force

According to the Toronto *Street Health Report*, 26 per cent of the survey sample had considered suicide in the past year and 8 per cent had attempted suicide in the same period. In terms of the women interviewed, 64 per cent of the sample had contemplated suicide in the past year and 30 per cent had actually attempted suicide in the year before the survey.

The *Street Health Report* also found that 24 per cent of the sample had at some time been given one or more psychiatric diagnoses. Of these, almost half had been diagnosed with depression (37 per cent) or drug or alcohol dependency (14 per cent). Thirteen per cent had been diagnosed with schizophrenia, manic depressive disorder, panic disorder or cognitive impairment.

2.2.4 Chronicity

Chronicity measures the length of time from the day of first admission to the day of last discharge, ranging from one day to a few years. For the City of Toronto, this was calculated based on the visits associated with one unique household head and calculated in days.

Approximately 40 per cent of people admitted to the hostels 1988-1996 stayed no longer than one week. After this time they made no further use of the hostel. More than three-quarters of all hostel users stayed no more than six months, and 83.5 per cent stayed no longer than one year. However, the remaining 16.5 per cent was chronic users who remained for more than one year.

Table 14: Length of stay in hostels 1988–1996

No of days from first in to last out	# of Households	Per cent of Households	Cumulative per cent of Households
1 day or less	24,116	18.1	18.1
2–7 days	29,651	22.3	40.4
1–4 weeks	24,573	18.5	58.9
4 weeks–6 months	26,214	19.7	78.6
6 months–1 year	6,454	4.9	83.5
1 year to more than 6 years	21,888	16.5	100.0

Source: Springer, Mars and Dennison, 1998, p. 25

Chronicity patterns show that women tend to require two weeks to 180 days of service. Men need either one day or else they appear to be chronic users staying from six months to nine years. Families tend to stay two weeks to six months. Those coming from hospitals, other treatment programs, and the corrections system tend to have a total record of staying for over six months. Hospital discharges have a 28 per cent probability of staying for one year or more in the hostel system, and those from corrections have a 30 per cent chance.¹⁶

¹⁶Springer, Mars and Dennison, 1998, p. 26.

2.3 Regional Municipality of Ottawa-Carleton

2.3.1 Sources of Information

Information on the homeless population in Ottawa-Carleton is based primarily on a report prepared by the Regional Municipality of Ottawa-Carleton (RMOC) in 1999, entitled *Homelessness in Ottawa-Carleton*.¹⁷ The Region of Ottawa-Carleton, through its Social Services Department, directly operates two family shelters. The Region purchases services from other shelters that serve men, women and youth. This report includes more detailed information on the people served in the two shelters directly operated by the Region.

Another source of information that has been used to prepare the Ottawa-Carleton homelessness profile is data from the three men's shelters, which was available on the Internet.¹⁸

2.3.2 Count

Hostel Occupancy — Point Prevalence

Table 15 shows the number of beds occupied in emergency shelters on a typical day from 1996–1998. In 1998, a total of 513 individuals were served on a typical night including 364 adults, 30 youth and 119 children.¹⁹

In addition, it is estimated that less than two dozen individuals live on the streets and do not make use of shelter services.

Table 15: Shelter occupancy on a typical day, 1996–1998

Shelter Type	1996	1997	1998	Per cent increase
Men	239	258	276	15
Women	N/A	38	38	N/A
Family	225 (75 adults/ 150 children)	218 (74 adults/ 144 children)	169 (50 adults/ 119 children)	(25)
Youth	28	27	30	7
Total	492	541	513	

¹⁷Regional Municipality of Ottawa-Carleton, *Homelessness in Ottawa-Carleton*. April 1999.

¹⁸Data compiled by Laird Eddy: <http://www.compmore.net/~mission/stats.html>

¹⁹The following shelters were included: Salvation Army, Shepherds of Good Home, Union Mission, YMCA-YWCA of Ottawa-Carleton, Forward Family Shelter, Carling Family Shelter, Cornerstone, and Youth Services Bureau — Young Women's Emergency Shelter.

Occupancy Rates

From 1994 to 1998 the combined occupancy of two family shelters operated by the RMO (capacity of 57 rooms) varied from a low of 70 per cent to a high of almost 105 per cent, with motels being used to handle overflow when demand exceeded capacity. Occupancy rates for the two family shelters in 1998 were 88 per cent, and as high as 99 per cent in the first six months of 1999.

Current occupancy at one of the men’s shelters is running at 95 per cent capacity — the highest it has been since the Depression.

Distinct Shelter Users — Annual Prevalence

In each year from 1996 to 1998, shelters served between about 4,500 and 5,300 distinct individuals. There was an increase in the number of single men, single women and families that were served. There were fewer spouses and children.

Table 16: Number of distinct individuals who used shelters, 1996–1998

One Year Prevalence	1996	1997	1998	Per cent change
No. of unique households (men)	3,102	3,402	3,570	15.1
No. of unique households (women)	N/A	365	395	8.2
No. of unique heads of family households	363	378	375	3.3
No. of spouses	92	87	79	(16.5)
No. of children	920	901	872	(5.5)
Total no. of unique individuals	4,477	5,133	5,291	18.2

2.3.3 Characteristics

Family type

The homeless population in Ottawa-Carleton is made up of single men and women, youth, the elderly and families. Based on the data above, children make up 16.5 per cent of shelter users, while other studies have placed the share closer to 18 per cent.²⁰

Based on annual bed nights in the Region's two family shelters, shelter usage remained relatively stable between 1996 and 1998. The total number of bed nights increased slightly from 71,920 in 1997 to 73,462 bed nights in 1998.

Based on annual bed nights, use of the men's shelters increased in Ottawa-Carleton by almost 8.5 per cent, from 87,345 in 1996 to 94,698 in 1998.²¹

Age of Shelter Users — Men's Hostels

Data available from the three men's shelters show that the average age of shelter users has remained stable from 1996-1998. The average age in 1996 was 37 years old, increasing to 38 in 1997 and 39 in 1998.

Table 17 shows that most of the users were between the ages of 25 and 44.

Table 17: Range of ages in men's shelters, 1996–1998

Age Range	1996 (per cent)	1997 (per cent)	1998 (per cent)
Under 18 years	1.4	.4	.3
18–24	13.2	12.3	11.7
25–34	29.2	26.8	27.8
35–44	32.6	34.2	33.3
45–54	15.4	17.9	17.4
55–64	5.4	5.6	6.2
65+	2.7	2.7	3.4
Total	99.9	99.9	100.1

Source: Laird Eddy, the Mission

²⁰Regional Municipality of Ottawa-Carleton, 1999, p. 24.

²¹Based on information compiled by Laird Eddy, and includes the Mission, Salvation Army and Shepherds of Good Hope.

Reasons for Service in RMOC Family Shelters

Reasons for service in the two RMOC family shelters are shown in Table 18 below. The top three reasons were new arrival to Ottawa-Carleton from other parts of Canada (24 per cent), abuse within Ottawa-Carleton (23 per cent), and relocation from outside Ottawa-Carleton due to abuse (14 per cent). Taken together, domestic abuse accounted for 37 per cent of admissions. Housing-related problems, such as evictions by a landlord, lease expiry or not being able to remain with friends and relatives accounted for 21 per cent of admissions. It is interesting to note that formal evictions in Ottawa-Carleton increased by 16 per cent between 1996 and 1998.²²

Table 18: Reasons for service in RMOC family shelters, 1998

Reasons for Service	Number of Households	Per cent of Households
New arrival to Ottawa-Carleton from other parts of Canada	81	24
Abuse — within Ottawa-Carleton	78	23
Relocation from outside Ottawa-Carleton due to abuse	47	14
New immigrant/refugee	41	12
Evictions	37	11
Lease expired	20	6
Eviction by friends and relatives	14	4
Fire and flood	3	1
Marital breakdown	3	1
Other	14	4
Total — All Reasons	338	100.0

²²Regional Municipality of Ottawa-Carleton, *Creating Community Solutions: An Action Plan to Prevent and End Homelessness*, 1999.

Prior Residence among RMOC Family Shelter Users

Close to half of all RMOC family shelter users (43.2 per cent) came from within Ottawa-Carleton. More than one-fifth were from Montreal and other parts of Quebec. Relatively few families were from other provinces in Canada (7.3 per cent).

Table 19: Prior residence among RMOC family shelter users, 1998

Prior Residence	Number	Per cent
From within Ottawa-Carleton	146	43.2
From other parts of Ontario	47	13.9
From Montreal and Province of Quebec	73	21.5
From other Provinces in Canada	25	7.3
From outside Canada	47	13.9
Total	338	100

Accommodation after Discharge from RMOC Family Shelters

Half the families discharged from the RMOC family shelters in 1998 moved into subsidized housing. An additional 22 per cent moved into private accommodation and 8 per cent returned to their previous address. Close to 5 per cent of families went to another shelter.

Table 20: Accommodation after discharge from RMOC family shelters, 1998.

Destination	Number Households	Per cent Households
New address in subsidized housing	160	49.8
New address in private housing	70	21.8
Moved in with friends and relatives	26	8.1
Returned to previous address	19	5.9
Went to another shelter	16	4.9
Moved out of Ottawa-Carleton	10	3.1
Admitted to hospital	2	.6
Moved to another province (for job)	1	.3
Whereabouts unknown/Other	17	5.3
Total	321	100.0

Physical Health Issues Among Shelter Users

A survey of shelter and drop-in users carried out by the Health Department in 1992 indicated that major health issues of homeless people included: addictions (alcohol, drugs and tobacco); circulatory ailments and related leg, knee and foot problems; mental illness, seizures, and psychological issues; inadequate diet and nutrition; and deficiencies in living conditions. Staff, volunteers and outreach workers reported that the most critical health-related problems faced by their clients were: mental illness, psychological and behavioural issues; addictions; poor personal hygiene, head and body lice; and infectious diseases including illness related to AIDS.

In a survey of 100 people in emergency shelters with mental health involvement in 1997–1998, respondents reported a range of health problems as noted below in Table 21.

Table 21: Health issues noted among shelter users with mental health involvement (n=100)

Reported Health Problem	Number
Vision problems	29
Dental problems	26
Memory problems	25
Asthma	23
Difficulty with mobility	15
Injury	13
HIV/AIDS	6

Estimates of Mental Health Issues among Shelter Users

The Region estimates that approximately 40 per cent of the homeless population suffer from some form of mental health condition. In Ottawa-Carleton, this would represent approximately 1,700 individuals, the majority of whom are single homeless men. Approximately 30 per cent of the single homeless population suffer from some form of drug and alcohol addictions. It is also estimated that a significant portion of those with a mental health condition are addicted to alcohol or drugs.²³

²³Regional Municipality of Ottawa-Carleton, *Homelessness in Ottawa-Carleton*, 1999, p. 24. This information is an estimate rather than an actual count.

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Length of stay

Data from the Region's two family shelters indicates that the average length of stay in the years 1994 to 1998 was approximately 54 days.²⁴ The average length of stay in men's shelters between 1996 and 1998 has remained constant at an average of 28 days. Table 22 indicates the length of stay of shelter users in 1998.

Table 22: Range of length of stay in shelters, 1998

Type of service	Range of length of stay
Emergency Shelter for Men	11 to 32 days
Emergency Shelter for Women	20 days
Emergency Shelter for Youth	9 to 11 days
Emergency Shelter for Families	48 to 52 days

²⁴Not stated, but assume data refers to length of stay *per visit*.

3 Policies Relevant to Homelessness in Ontario

3.1 Introduction

Context

The profile of the absolute homeless²⁵ in Ontario shows that there is increasing homelessness throughout the province. Families with children, youth and people with mental illness appear to be the fastest growing group of shelter users. Between the 1991 and 1996 census, the proportion of tenant households paying more than 50 per cent of their total income on rent increased significantly by 47 per cent, so that almost one in four tenants could be considered at potential risk of homelessness.²⁶ There were 453,000 renter households in core need in 1996. This represents an increase of 62 per cent compared to 1991. The percentage of renter households in core need increased from 23 per cent in 1991 to 32 per cent in 1996.

Some key housing market indicators for Ontario are as follows:

- Ontario has experienced a significant decline in the production of rental housing. Between 1989 and 1993, rental housing starts constituted 27 per cent of all housing starts. This fell to 6 per cent between 1994 and 1998. By 1998, rental housing was only 2 per cent of all housing built in Ontario.²⁷
- Vacancy rates in Toronto were among the lowest in the country in 1998 at 0.8 per cent. Only Calgary's was lower at 0.6 per cent.
- Rents are increasing faster than inflation. The average cost of renting a two bedroom apartment in Ontario increased 5 per cent between 1997 and 1998 from \$726 to \$761. In Toronto, the average cost of renting a two bedroom apartment increased by 7 per cent in the same period, from \$821 in 1997 to \$881 in 1998.
- Census data for Ontario shows that although total owner household incomes increased by 6 per cent between 1990 and 1995, tenant incomes declined by 4 per cent.

Policy Overview

The policy environment in Ontario appears to be a major factor in the increase in the number of households "at risk" of becoming homeless. Beginning in 1995, some of the decisions that have had the greatest impact include the provincial government's decision to cancel the

²⁵The "absolute homeless" are literally without housing. Sometimes they may use emergency shelters. The "relative homeless" generally consist of those who pay too much of their income for rent, or are housing in inadequate housing or lack security of tenure.

²⁶Ontario Non-Profit Housing Association & Co-operative Housing Federation of Canada, 1999.

²⁷Ibid.

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production of 17,000 non-profit and co-op housing units and to terminate the provincial non-profit and co-op housing supply programs. The reduction to income assistance rates by 21.6 per cent in 1995 has also been cited as a key cause of increased homelessness in Ontario. Concerns have also been raised that the repeal of the *Rental Housing Protection Act* and introduction of the *Tenant Protection Act* have resulted in the loss of significant numbers of affordable rental units. Under the new legislation, there is less protection against conversions and demolition, and landlords may raise rents when a tenant moves out. It should be noted that in October 1998, the provincial government announced that it would allocate \$4 million to a Homelessness Initiatives Fund. These funds are being provided to municipalities to implement innovative approaches to address homelessness in their communities.

Some of the critical policy-related issues that have been identified as contributing to homelessness in Ontario include:

- An inadequate supply of affordable rental housing due to the lack of new rental construction and the loss of existing affordable rental units;
- Reliance on emergency and “survival” services such as shelters and food banks rather than permanent housing and programs aimed at preventing homelessness;
- Inadequacy of income assistance benefits;
- The decision to stop providing assistance to cover the first and last month’s rent; and
- Lack of resources to assist people who have been deinstitutionalized.

3.2 *Housing Policies and Programs*

3.2.1 Housing Supply

In 1995, the newly elected government ended the period of unilaterally funded social housing programs in Ontario. Initiated in 1986, these programs had promised a total of 66,600 units. The production of 17,000 of these units was cancelled in 1995, leaving 49,600 units that remained allocated between 1986 and 1995. This was an average of over 5,500 units per year over nine years. These social housing programs provide housing for families and individuals who would otherwise be unable to compete in the housing market.

3.2.2 Loss of Existing Affordable Housing

Tenant Protection Act — From 1986 until its repeal in 1998, the *Rental Housing Protection Act* (RHPA) required designated municipalities to regulate demolitions and the conversion of rental buildings to condominiums during this time at least 14,000 rental units were lost. There is concern that under the new *Tenant Protection Act*, proclaimed in June 1998, the rate of loss of units will increase. Under the new act, municipalities may introduce by-laws to regulate condominium

conversions. However, this will depend on political will. In addition, the scope of municipal authority is not clear, and based on a recent challenge to the City of Toronto's proposed by-law, municipalities may not be able to consider the same criteria as was specified under the RHPA or impose the same types of conditions.²⁸ In addition, municipalities will not be permitted to prevent demolitions, although they may be able to impose certain conditions.

Another concern with the new act is that landlords are permitted to raise the rent when a unit is vacated. This provides an incentive for landlords to evict existing tenants. The process for evictions is also different. A new Ontario Rental Housing Tribunal will replace the courts in landlord and tenant disputes, including disputes over evictions. Under the new procedures, a tenant will have just five calendar days to reply in writing once a landlord files a Notice of Application with the Tribunal to carry out an eviction — otherwise, the Tribunal may proceed without hearing the tenant's side. This leaves very little time for tenants get legal assistance, and will likely be a significant barrier to those who cannot read or write fluently in English or French.

Rent supplement units. The provincial government, through the Ontario Housing Corporation has a portfolio of rent supplement units in private rental buildings. These units are available to low-income households who pay rents-geared-to-income, as if they were in public housing. In 1993, the provincial government decided to terminate rent supplement agreements when they reached the end of their terms or were being considered for renewal. In 1997, a moratorium on these terminations was announced by the province until the successful completion of the social housing devolution to the municipalities. In the meantime, however, between 1993 and 1998, the province lost 20 per cent of its private rent supplement stock, for a total of 3,320 units.

3.3 Emergency Shelter Policies

In the absence of new permanent housing stock for the at-risk population, Ontario municipalities were forced to respond with emergency shelters. As of November 1998, there were approximately 4,000 beds in 46 shelters in Toronto. It appears that there are two reasons why there has been growing reliance on emergency shelters as opposed to the development of permanent housing solutions. First, there has been a need for more beds, and municipalities have taken steps to respond. Another reason may be that the provincial government provides 80 per cent of the funding for emergency shelters whereas there is no provincial assistance available for the provision of permanent housing. Municipalities generally contribute 20 per cent of funding for emergency shelters, and are responsible for their administration.

²⁸The Ontario Municipal Board overturned a proposed City of Toronto by-law that was designed to regulate conversions on the basis that the by-law was attempting to occupy ground covered by a provincial statute and was running counter to the new *Tenant Protection Act*. September 1999, City of Toronto.

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The Report of the Mayor's Homelessness Action Task Force in Toronto expressed concern that there is too much reliance on emergency shelters and that they have become permanent housing for far too many of their users. The view of the Task Force was that emergency hostels should provide refuge from the streets (emergency) and preparation for permanent housing and earning opportunities. Emergency shelters should not provide permanent housing. The Task Force accepted the view that hostels disempower those who use them, particularly chronic users. They can unwittingly reinforce and perpetuate homelessness by forcing people to adapt to an institutional lifestyle of dormitory living, fixed meal times, and a loss of independence.

The Task Force recommended that "resources should be redirected from providing hostel spaces to helping people find and maintain permanent housing, **on condition that a sufficient new supply of supportive and low-cost housing is created.**"²⁹ It was further pointed out that hostels need to have more formal links with services that enable hostel operators to prepare hostel users for housing and employment.

3.4 Income Assistance

3.4.1 Eligibility

The new Ontario Works program was proclaimed in May 1998. The program introduced mandatory work-for-welfare for all participants except those medically defined as disabled and single parents of children under the age of six. Several supplementary benefits that had been previously available to the working poor were eliminated at this time (e.g. medical and drug benefits and the \$37/month pregnancy allowance).

Changes in eligibility requirements for income assistance have made it more difficult for 16 and 17 year olds to obtain assistance.³⁰ This has forced many youth to turn to illegal or undesirable sources of income.

²⁹Report of the Mayor's Homelessness Action Task Force, *Taking Responsibility for Homelessness, An Action Plan for Toronto*, 1999, p. 41.

³⁰In October 1995, the provincial government introduced changes to eligibility requirements for income assistance which made it more difficult for 16 and 17 year olds to obtain assistance. Under the current Ontario Works program, 16 or 17 years olds must have special circumstances justifying the assistance, attend school or a training program full-time, and maintain contact with a responsible adult. These requirements apply to sole-support parents or couples under 18. It is also mandatory that clients under 18 have a designated trustee, and all social assistance payments be made to the trustee.

3.4.2 Amount of Assistance

Income assistance benefits in Ontario were reduced by 21.6 per cent in October 1995.

Table 23: Ontario income assistance rates, 1998

Household Type	Basic benefit	Shelter Maximum	Total*
Single Employable	\$195	\$325	\$520
Sole Support Parent and one child	\$446	\$511	\$957
Sole Support Parent and two children	\$532	\$554	\$1,086
Employable Couple and two children	\$576	\$602	\$1,178

*Note that families with children are eligible for a Canada Child Tax Benefit.

People who are on the street may be eligible for the basic benefit, so that a single person could receive \$195 per month, on a month by month basis. Homeless persons staying in a shelter would not be eligible for benefits because it is assumed that their needs would be addressed in the shelter.

Table 24 below shows the percentage of income that income assistance recipients would be required to pay for an average unit on the private market. As can be seen, single people are most vulnerable. Families with children would also be paying between 70 per cent and 80 per cent of their incomes on rent.

Table 24: Income assistance benefits and average market rents 1998

Household type	Total Benefits	Shelter Maximum	Household Size	Suitable Unit	Avg Ont Market Rents*	Rent as per cent of total benefits	Rent as per cent of shelter max
Single	\$520	\$325	1	Bachelor	\$531	102	163
Single Parent — one child	\$957	\$511	2	2 Bedroom	\$761	80	149
Single Parent — two children	\$1086	\$554	3	2 Bedroom**	\$761	70	137
Couple and two children	\$1178	\$602	4	3 Bedroom**	\$947	80	157

*Based on CMHC Rental Market Report for Ontario

**Depends on age and sex of children

Maximum amounts permitted for shelter do not take regional housing market differentials into account, and are a particular problem in areas with higher rents. Studies in Ontario have also shown consistently that households with the lowest incomes are not able to access the more

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affordable units on the private market.³¹ In Toronto, following the income assistance cuts, 66 per cent of employable households were paying more for shelter than the maximum shelter allowance, compared to 33 per cent of households in 1995 before the rate reductions.

It is estimated that 30 per cent of tenants in the private market receive income assistance benefits. In order to cope with reduced benefits, many of these households were forced to double up (they are the hidden homeless) or move to inadequate housing. Increasing numbers of tenants were also evicted from their homes.

Statistics from the Ministry of the Attorney General show that the number of applications for an eviction increased substantially in Ontario between 1992 and 1997, as shown in Table 25. In Toronto, the number of writs of possession³² that were executed increased by 78 per cent during this period. Research for the Task Force showed that 75 per cent to 85 per cent of evictions were for non-payment of rent. Most of the arrears resulted from short-term emergencies such as job layoffs, accidents, medical problems or family separation. Declining incomes of poorer tenants was also a contributing factor.

Table 25: Evictions in Ontario, 1992 to 1997

	1992	1997	Change (per cent)
L&T applications filed*			
Toronto	17,914	21,296	19
Ontario	38,808	49,679	28
Writs of Possession Filed**			
Toronto	5,281	7,527	43
Ontario	12,085	15,885	31
Writs of Possession Executed***			
Toronto	1,770	3,157	78
Ontario	N/A	N/A	N/A

*Includes all applications under the Landlord and Tenant Act which are primarily for evictions

**Include evictions, recovery for property and any other civil enforcement (e.g. evictions related to mortgages and commercial tenancies)

***Includes writs of possession for mortgages (account for an estimated 10 per cent of evictions)

³¹Callaghan, Maureen, *Understanding Homelessness in Muskoka*, 1999.

³²A writ of possession is a document issued by the court to a landlord that gives him/her the right to take possession of the apartment.

3.4.3 First and Last Months' Rent

In 1991, the Ontario provincial government stopped providing first and last months' rent assistance to households in receipt of income assistance. This made it difficult for social assistance recipients to access affordable rental units and to compete with other prospective tenants who could afford to pay the required amount. Most landlords require payment of first and last months' rent as protection against potential arrears and vacancies caused by tenants who leave without giving notice. The result was that low-income households experienced great difficulty in accessing units. Analysis of the 1991 census data for Toronto renters who moved showed that only 13 per cent of couples with one child who relied on government transfer payments were renting apartments in the most affordable third of the rental stock.³³

It should be noted that a community start-up benefit may be available to individuals or families who need help in re-establishing themselves in the community. In 1999, the amount of assistance was increased to \$1500 for families and \$799 for single persons and couples. This amount may be used for first and last months' rent.

3.5 *Deinstitutionalization*

Ontario has followed a policy of deinstitutionalization beginning in 1960. This has resulted in a dramatic decline in mental health beds in provincial psychiatric hospitals. In Greater Toronto, the number of long-term psychiatric hospital beds fell by 80 per cent between 1960 and 1993–94 from 3,857 to 761 beds.³⁴ At the same time, the promised shift of funding from institutions to community supports did not materialize. Decreases in institutional spending for mental health and addiction services were not met with increases in community funding.

In 1993, the Ministry of Health announced that over the next 10 years, the proportion of investment in mental health services should move towards 60 per cent for community services and 40 per cent for in-patient care. Half way through this 10-year period, mental health spending in Toronto is still heavily weighted in favour of institutional services.

³³ Mayors Homelessness Action Task Force, 1999, p. 252.

³⁴ Mayors Task Force Report on Homelessness, 1999, p. 269.

3.6 Social Services

The need for human support has been identified as a key factor in helping people who are precariously housed to keep their housing, and to assist those who become homeless.³⁵ This type of support can be provided by housing workers, case managers, and a variety of people working in a range of social and housing services. However, budget cuts in Ontario have made it necessary to cut many of these programs.

A report to the Metropolitan Toronto Council in 1996 reported that within Metropolitan Toronto, community agencies to which the municipality had traditionally made referrals or that had provided assistance had either been closed or were operating at reduced capacity. Community resources that were used to assist recipients were being significantly affected by reductions in funding. A survey of community agencies found that in 1995, 162 programs were cancelled. In 1996, 106 programs were expected to be cancelled and 331 more were “under review” from the point of view of cancellation. For 1996, 57 per cent of all employment skills training and skills development programs, 56 per cent of legal services, and 52 per cent of all general service sector programs were seen to be at risk. At the same time, community agencies were reporting that demand had increased.³⁶

3.7 Discharge Policies from Correctional Facilities

According to the Provincial Task Force on Homelessness, discharge planning is made available to people being released from provincial correctional facilities to ensure that they have a place to go in the community. Discharge planning is also mandated as a condition of release for parolees. However, it cannot be forced on those who have completed their sentences, and it is estimated that approximately one-third of individuals go to emergency hostels upon release.

During consultation meetings held by the Task Force, it was recommended that the correctional system ensure that discharge planning is accessed by all offenders who are about to return to the community.³⁷

³⁵ Jim Ward Associates. *Locally Based Approaches to Prevention and Rescue from Homelessness*, Report prepared for the Mayor’s Homelessness Action Task Force, City of Toronto, 1998.

³⁶ Municipality of Metropolitan Toronto, *Impact of General Welfare Assistance Rate Reductions*, 1996.

³⁷ Provincial Task Force on Homelessness. *Report of the Provincial Task Force on Homelessness*, October 1998.

4 Profile of the Absolute Homeless in Quebec

4.1 Quebec Profile Overview

To date, it would appear that only one study has attempted an overview of homelessness for the entire province of Quebec — an exploratory study in 1988. The study, undertaken by the provincial government, used data on persons receiving social assistance in shelters, community centres, and living in rooming houses (Quebec City and Montreal) and those with a “psychological handicap.” This data, by definition, excluded those under 18 and over 64 years and, in some instances, persons under 30 who may not have had access to social assistance. The data was considered not completely reliable and the numbers were relatively low. Data did reveal that the inner city in Montreal had 58.6 per cent of the population studied and the authors concluded that the problem is concentrated in this city.

Table 1: Characteristics of people receiving social assistance in shelters, Quebec 1998

	Social assistance in a shelter	Overall Quebec population (1986 census)
Age (per cent)		
Under 30	40.9	32.9
30–39	28.1	26.1
40–49	17.7	18.9
50 and over	13.3	22.2
Marital status (per cent)		
Single	72.1	27.6
Married	1.8	65.5
Other	26.2	6.9
Sex (per cent)		
Male	73.9	48.9
Female	26.1	51.1
Education (per cent)		
Less than 8 years	21.0	22.5
8–9 years	26.8	12.8
10–11 years	35.8	18.7
over 12 years	16.5	46.0
N	3,382	4,473,325

Source: Les sans-abri au Québec, Étude exploratoire, Ministère de la Main-d’œuvre et de la Sécurité du revenu, Direction de la recherche, Études prévisionnelles et structurelles, Gouvernement du Québec, février 1988.

4.2 Montreal and Quebec City

4.2.1 The Count

Most studies have focused primarily on Montreal, where estimates of the homeless population range from 10,000 to 15,000. In Quebec City, until a recent study by *Santé Québec*,³⁸ the estimated number of homeless in Quebec City was only 400 persons. The study finds that there is five times the estimated number and that more than 2,000 persons in Quebec City are homeless. In addition to providing a current, more accurate estimate of the number of homeless, the second phase of the study will collect data on the psychological and physical health of a sample of 900 persons.

Data from this study are based on a 12-month count in shelters in Montreal and Quebec, using admission data (name, date of birth, SIN, etc.). To this data was added information over a 30-day period on users of drop-in centres and soup kitchens (one file per person was created to avoid double counting). The researchers admit that the shelter data is the strongest as data for other services is based on extrapolation. (Only the shelter data is shown here.) The researchers addressed the concern that homeless persons who did not use the services or shelters would be missed. This was tested by interviewing 186 persons sleeping outside (public places or abandoned sites). Of those who agreed to answer, it is estimated that 90 per cent had used a shelter or soup kitchen/drop-in centre. The authors conclude that the methodology used does not underestimate the numbers.

Table 2: Distinct Individuals

Montreal and Quebec City 1996–1997	Shelter Clients
Montreal	8,253
Quebec City	2,118

Data from 24 shelters (maximum capacity of 793 beds) in Montreal and from nine shelters (maximum capacity of 180 beds) in Quebec City.

³⁸Fournier, Louise et al, *Dénombrement de la clientèle itinérante dans les centres d'hébergement, les soupes populaires et les centres de jour des villes de Montréal et de Québec 1996–97*, Santé Québec, 20 novembre 1998.

4.3 Characteristics

Table 3: Age and sex

Montreal and Quebec 1996–1997	Montreal Shelter users (N=8,253)	Quebec City Shelter users (N=2,118)
Sex(per cent)		
◆ Male	74.4	78.0
◆ Female	25.6	22.0
Age(per cent)		
◆ Average	34.6	33.9
◆ Minimum — maximum	13–85	12–84
Category of age (per cent)		
◆ Under 18	4.6	11.7
◆ 18–29	34.3	25.7
◆ 30–44	40.0	42.5
◆ 45–64	18.9	18.1
◆ over 65	2.2	1.9

Source: Fournier et al. 1998

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Data from a 1991 study, using a methodology similar to that of the recent study undertaken for Quebec City and Montreal, presents a profile of users of shelters. The data is for Montreal only.³⁹

Table 4: Profile of shelter users in Montreal, 1991

Montreal 1991	Total (weighted) N=299	Men N=223	Women N=77
Place of birth (per cent)			
◆ Montreal	37.2	35.8	46.2
◆ Quebec outside of Montreal	37.4	38.3	31.1
◆ Canada, outside of Quebec	11.1	11.4	8.5
◆ Outside of Canada	14.4	14.5	14.2
Race (per cent)			
◆ White	94.2	94.8	90.3
◆ Black*	3.1	2.6	6.5
◆ Other (including aboriginal)	2.6	2.6	3.2
Language learned in childhood (per cent)			
◆ French	72.1	72.9	69.1
◆ English	15.3	15.1	16.3
◆ Other	10.6	9.6	14.7
◆ More than one language	2.0	2.4	

Source: Fournier 1991

* According to census data 1.9 per cent of the Montreal population was black.

³⁹Fournier, Louise *Itinérance et santé mentale à Montréal, Étude descriptive de la clientèle des missions et refuges*, Unité de recherche psychosociale, Centre de recherche de l'hôpital Douglas, Verdun, novembre 1991.

Ministry of Social Development and Economic Security

Those less than 30 years old were more likely to be born in Montreal (50.4 per cent) compared to the other age categories (31 per cent to 34 per cent) and the proportion of those born outside of Canada increases with age.

Table 5: Marital status and number of children

Montreal 1991	Total (weighted) N=299	Men N=222	Women N=77
Marital status (per cent)			
◆ Single	74.9	76.1	67.2
◆ Divorced, separated	19.9	19.0	25.5
◆ Widow(er)	2.3	2.4	1.3
◆ Married	2.9	2.5	5.9
Number of children (per cent)	(N=296)	(N=221)	(N=76)
◆ 0	66.8	70.3	46.2
◆ 1	14.2	13.0	21.9
◆ 2-3	12.7	10.0	27.5
◆ 4-9	6.3	6.6	4.3

Source : Fournier 1991

Table 6: Education

Montreal 1991	Total (weighted) N=296	Men N=221	Women N=76
Education (per cent)			
◆ 0	0.5	0.6	—
◆ 1-7 years	23.0	22.9	24.5
◆ 8-10 years	33.7	33.5	33.1
◆ 11-12 years	25.1	25.8	22.0
◆ 13 + years	17.6	17.3	20.4

Source: Fournier 1991

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Table 7: Source of income

Montreal 1991	Total (weighted) N=297	Men N=221	Women N=77
(per cent)			
◆ None	8.9	7.9	15.4
◆ Welfare	63.6	63.0	67.1
◆ Work	22.4	24.0	13.0
◆ Occasional work	7.9	8.4	4.9
◆ Part time work	4.7	5.1	2.6
◆ Full time work	3.4	3.5	3.0
◆ UI	8.1	9.1	2.5
◆ Pension	9.7	10.3	6.7
◆ Begging	4.7	5.6	—
◆ Family, friends, acquaintances	5.0	5.0	4.4
◆ Other	6.7	7.2	2.7

Source: Fournier 1991

The younger the person, the more likely that the source of revenue is from employment. Fewer young persons receive social assistance.

Fournier (1991) also provides detailed information on current residential status, lifetime residential instability and residential stability in last 12 months, and mobility.

4.3.1 Chronicity

Table 8: Chronicity

Quebec City 1996–1997	Men (N=1,485)	Women (N=357)	Total (N=1,842)
Number of stays at a shelter (per cent)			
◆ 1	52.1	79.6	57.4
◆ 2	16.7	10.9	15.6
◆ 3–5	20.9	8.4	18.5
◆ 6 and more	10.3	1.1	8.5
◆ Average	2.6	1.4	2.4
◆ Median	1	1	1
◆ Minimum—Maximum	1–29	1–7	1–29
Number of nights in a shelter over a 12-month period (per cent)			
◆ 1	34.2	40.6	35.5
◆ 2–3	14.2	19.4	15.2
◆ 4–7	11.7	14.1	12.2
◆ 8–29	25.3	15.8	23.5
◆ 30 and more	14.6	10.1	13.7
◆ Average	14.7	9.7	13.7
◆ Median	4	2	3
◆ Minimum—maximum	1–345	1	1–345
Number of centres used (per cent)			
◆ 1	81.3	90.5	83.1
◆ 2	16.4	8.7	14.9
◆ 3	2.3	0.8	2.0

Source: Fournier et al. 1998

4.3.2 Health and Mental Health

Table 9: Prevalence of mental health and substance misuse issues over lifetime by sex

Montreal	Total (N=299) (per cent)	Men (N=222) (per cent)	Women (N=77) (per cent)
Mental health issue	43.2	41.9	50.0
With substance misuse	(73.7)	(79.1)	(60.1)
Without substance misuse	(26.3)	(20.9)	(39.9)
Substance misuse — without a mental health issue	41.2	42.9	31.7
Neither diagnosis or uniquely a personality issue (i.e. antisocial)	15.5	15.2	18.3
Number of categories of issues*	N=133	N=89	N=56
0	13.2	11.8	17.9
1	25.5	24.7	27.6
2	35.3	36.7	30.8
3	26.0	26.8	23.7

Source: Fournier 1991

* Categories are mental health, substance misuse, personality problems or antisocial behaviour

Table 10: Prevalence of different mental health issues over lifetime by age

Montreal Type of issue	Less than 30 years old N=82 (per cent)	30–44 years N=102 (per cent)	45–59 years N=66 (per cent)	60 years and over N=50 (per cent)
Organic	0.6	1.5	2.7	22.7
Schizophrenia	5.8	16.4	7.1	1.1
Bipolar	2.6	4.4	5.2	1.1
Major depression	21.7	20.8	12.3	11.6
All psychiatric problems	41.4	51.0	39.5	35.3
Issues related to alcohol misuse	64.1	75.9	64.5	56.0
Issues related to drug misuse	69.7	53.8	5.2	12.0

Source: Fournier 1991

Table 11: Psychiatric hospitalisations over lifetime

Montreal	Total (weighted) N=293	Men N=219	Women N=75
Hospitalised in lifetime (per cent)	27.1 N=78	23.7 N=51	45.6 N=33
Average number of times	3.2	3.5	2.2
Age of first hospitalisation	N=79	N=51	N=34
12-19 years	28.0	26.5	27.0
20-29 years	44.0	46.3	40.1
30-39 years	17.3	18.0	16.5
40-54 years	8.0	5.6	16.4
doesn't know	2.8	3.7	
Longest hospital stay	N=76	N=50	N=33
Less than a week	20.4	22.4	15.9
1-4 weeks	25.9	18.7	48.6
5-12 weeks	22.9	25.0	12.0
13-52 weeks	13.9	13.4	16.4
over a year	17.0	20.5	7.1

Source: Fournier 1991

Table 12: Hospitalisations over lifetime and over the last 12 months

Montreal	Total (weighted) N=294	Men N=219	Women N=75
Hospitalised in lifetime (per cent)	87.7	86.4	95.7
Number of times hospitalised (per cent)	N=258	N=189	N=72
1	25.5	26.3	20.7
2-3	36.5	39.7	19.5
4-6	18.7	16.8	30.5
7 and more	17.9	15.9	27.6
Hospitalised in the last 12 months (per cent)	34.6 N=103	32.8 N=73	43.1 N=32
Average number of days of hospitalisation (per cent)	18.5	18.6	16.9

Source: Fournier 1991

4.3.3 Subgroups

Women

While the data on shelter use conclude that just over a quarter of users are women, other studies put this proportion much higher. For example, in *Femmes sans toit ni voix* (Françoise-Romaine Ouellette, Les Publications du Québec 1989) 30 per cent to 40 per cent of the estimated 10,000 homeless persons in Montreal are thought to be women. It is proposed that this population is less visible because of coping strategies that hide them (for example, domestic work, prostitution).

A study of admissions to the emergency department of a downtown hospital (Mercier, Céline and Carmen Beaudoin, *Programme pour femmes itinérantes: étude d'impact sur les services d'urgence*, Conseil de la santé et des services sociaux de la région de Montréal métropolitain, Montréal, avril 1989) found that of a total 1,411 admissions over a one-month period of women over 18 years, 77 admissions were for homeless women (12 were admitted more than once).

Table 13: Admissions to hospital

Montreal	Women N=77 (per cent)
Diagnosis	
◆ Psychological problems	26
◆ Injury	11.7
◆ Respiratory problems	1.3
◆ Other	61
Follow-up	
◆ Hospitalised	7.8
◆ Released	58.4
◆ Transferred	1.3
◆ Referred elsewhere	10.4
◆ Other	22.1

Youth

Data in *Les maisons d'Hébergement pour jeunes: état de la situation* (Louise Bisson, Conseil Permanent de la Jeunesse, mars 1989) is based on the clients of the Regroupement des maisons d'hébergement Jeunesse du Québec (RMHJQ), a network of youth shelters across Quebec.

In 1987–1988, the shelters of the Regroupement received 1,538 youth — two-thirds over 18 years.

Of the minors who requested shelter, 83 per cent were accepted, compared to 30 per cent of the young adults, even though there are more beds for young adults. This confirms that the need is very high for youth spaces — 90 per cent of those refused were turned away because of a lack of space. Most shelters have a 21-day limit for stays.

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Table 14: Youth in shelters according to type of issue

Province 1987–1988	Minor (per cent)	Major (age of majority) (per cent)
Family conflicts	75	58
Mental health issues	7	17
Multiple addictions	19	32
Incest — sexual abuse	11	6
Debts	1	30
Issues with justice	12	32
Malnutrition	1	18
Prostitution	2	7
Suicidal	10	13
	(N: 444)	(N: 1,055)

Table 15: Economic situation upon departure from shelter

Province 1987–1988	Minor (per cent)	Major (age of majority) (per cent)
No revenue	22	11
Welfare		36
Unemployment insurance		4
Return to school	20	4
Participation in a program	6	4
Work	47	41
	(N: 143)	(N: 908)

Table 16: Destination upon departure from the shelter

Province 1987–1988	Minor (per cent)	Major (age of majority) (per cent)
Family	29	5
Foster family	19	–
Youth centre	11	–
Group home	4	–
Supervised apartment	3	5
Room	–	6
Apartment	9	33
Detox	–	6
	(N: 443)	(N: 893)

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A recent study⁴⁰ that focused on HIV and behaviour amongst street youth followed a group of young persons (14–25) who had been without a place to sleep at least once or had regularly made use of street youth resources over a period of two years. A questionnaire was administered every six months and 517 youth were recruited (72 per cent male, average age 20 years). By August 31, 1998, 479 youth had completed at least one follow-up questionnaire. Among the youth studied, 13 had died (11 male and two females — causes included suicide and drug overdose). This mortality rate is 13 times higher than Quebec youth of the same age. The second questionnaire included questions about suicidal thoughts — 63 per cent admitted to these and 35 per cent had attempted suicide. The fifth questionnaire indicated that 21 per cent were lightly depressed, 27 per cent moderately and 9.2 per cent severely.

Furthermore, the study found that:

- Over a third of the youth had been sexually abused (63 per cent of the girls and 15 per cent of the boys).
- 59 per cent reported using drugs more than twice a week and 39 per cent had used intravenous drugs.
- 1.4 per cent were HIV positive.

Persons over 45 years old

According to a 1994 study (*L'itinérance chez les personnes âgées*, Guy Vermette, Régie Régionale de la santé et des services sociaux de Montréal-Centre, Montréal, avril 1994) on the situation of seniors (55 years and over), an increasing number of homeless persons are over 55. Using data from other studies they note that:

- of homeless persons with mental health issues — 18 per cent of the men, 7.3 per cent of the women are over 60 (Fournier 1991).
- 16.6 per cent of homeless persons in the Quebec City region were over 55 (Ferland M. *Survivre dans la capitale*, Équipe Connaissance/Surveillance, Ministère de la Santé et des Services sociaux, Québec 1992).
- men made up 85–90 per cent of homeless persons over 60 (Ferland 1992).

⁴⁰Le “Défi de l'accès” pour les jeunes de la rue, Direction de la santé publique, Régie régionale de la santé et des services sociaux de Montréal-Centre, Montréal, 1998.

4.3.4 Trends

Only two studies permit reliable comparison of data on homelessness over a period of time: Fournier et al. (1998) and Fournier (1991). This data is for Montreal alone and slight differences in methodology make comparisons limited.

The number of persons using shelters appears to have decreased in the eight-year period (8,756 in 1988–1999 and 8,253 in 1998), but the authors attribute this to differences in methodology. Furthermore, a seven-day/24-hour drop-in centre had 1,098 clients in the earlier study. This centre has since closed, and it is not clear where these clients, who seemed to avoid regular shelters, have gone. Preliminary analysis of the two studies reveals that:

- The proportion of women seems to have increased.
- There are no significant changes in the age of shelter users.

5 Policies Relevant to Homelessness in Quebec

5.1 Introduction

Context

While the number of homeless persons in Montreal (the only city where comparable data is available) would seem to indicate that the number of homeless persons has decreased, the authors attribute the difference in numbers to methodology, rather than an improvement in the situation. An examination of the overall housing situation for renters in Quebec reveals the economic fragility of many households. Based on census data, in 1996, over 500,000 Quebec renter households paid more than 30 per cent of their income for rent — a 28 per cent increase in the number of households since 1991.⁴¹ In 1996, 273,825 Quebec households paid more than 50 per cent of their income for rent — a 41 per cent increase in five years.

However, it is also important to note the general housing market conditions in Quebec.

- Rental housing costs have remained relatively stable — the average increase between 1991 and 1996 was 1.1 per cent.
- The average annual income of renters dropped by \$1,000 between 1991 and 1996 (from \$28,136 to \$27,148).
- The drop in income can be explained by an increase in the number of unemployed persons (the population of those actively employed dropped from 63.6 per cent in 1991 to 62.1 per cent in 1996), an increase in the number of part-time workers (from 1989 to 1997 the number of part-time jobs increased by 109,000 while full-time jobs diminished by 6,000) and an increase in the number of persons receiving social assistance (813,000 in 1996 compared to 594,000 in 1991).

Other indicators suggest economic difficulties for many Quebec households.

- In 1998, Moisson Montreal, a food bank, undertook a study of 193 community organisations and found a 36 per cent increase since 1996 of monthly use of food banks. It is estimated that 116,000 persons use these services in Montreal.
- An increase in the number of cases of eviction before the Rental Board for non-payment of rent — in the 1980s there was an annual average of just over 18,000 cases, in the 1990s the average was approximately 34,000 (e.g. in 1997–1998 there were 35,000 requests for eviction).

⁴¹Unless indicated otherwise, the data presented are from the Dossier Noir sur le logement et la pauvreté, Front d'action populaire en réaménagement urbain (FRAPRU), 1998.

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- A 30 per cent increase in the number of households to whom Hydro Quebec cut services for non-payment between 1991 and 1997.

Census data also suggest an increase in poverty in Quebec. Between 1990 and 1995 there was an 18 per cent increase in people living below the poverty line in urban centres in the province.⁴² Especially vulnerable are single-parent households (55 per cent were below the poverty line in 1995), young households (87 per cent of lone-parent families under 30 years were living below the poverty line) and persons living alone (50 per cent). The rate of increase has been especially high for young persons in Quebec — a 34 per cent increase for persons under 15 years and a 33 per cent increase for those 15 to 34 years.

While the data on absolute homelessness in Quebec do not seem to indicate an increase in the number of persons, frontline homelessness agencies report that there is a growing demand for services with clients presenting multiple issues (e.g. substance misuse and mental health concerns). Other indicators point to a worsening situation for many households who are at risk of becoming homeless. Especially vulnerable are youth and women. These two populations are also the least likely to use traditional shelters and are considered by many to be the ‘hidden homeless.’ Data from the census support the trend noted by the agencies, with a quantifiable deterioration of the economic situation of specific populations, while other indicators, such as use of food banks and evictions, attest to the precarious housing situation of many Quebec households.

Policy Overview

The International Year of Shelter for the Homeless (IYSH) in 1987 was instrumental in the development of a number of programs and projects in Quebec. In 1988, a 24-hour/seven days-a-week drop-in centre was opened in downtown Montreal, the result of provincial and municipal collaboration. In 1991, upon the closure of this centre, a broad range of organisations and institutions working with the homeless population, such as hospitals, local health and social services centres, and the police, were spurred to greater co-operation. Following IYSH, the Quebec Housing Corporation demonstrated flexibility in its housing programs with a pilot project that included community support for low-income single persons that added resources far beyond the traditional housing programs.⁴³

A number of broad policy statements have called for better co-ordination of services and diversification of methods of intervention. For example, the 1993 *Protocole interministériel sur l'itinérance*, brought together nine ministries and governmental organisations ranging from the Ministry of Education,

⁴²Schetagne, Sylvain *Urban Poverty in Quebec: Metropolitan Regions, Preliminary Research Report*, Canadian Council on Social Development, June 1999.

⁴³Ducharme, Marie-Noelle, *Les conditions de développement du logement social pour des groupes de personnes vulnérables: une étude exploratoire*, Société d'habitation du Québec, juin 1997.

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the Ministry of Health and Social Services, the Quebec Housing Corporation, and the Secretariats for the Status of Women and for Youth. Using published studies, the phenomenon of a growing homelessness problem was acknowledged, with an increasing proportion of youth, women and persons with multiple problems. The protocol targeted persons 'at risk' such as youth, rooming house residents, ex-offenders and ex-psychiatric patients, as well as the homeless. The policy statement called for better co-ordination and co-operation between ministries and service organisations, the prevention of homelessness through direct interventions and facilitation of the social re-integration of homeless persons.

The current policy of the Ministry of Health and Social Services is to focus on the prevention of homelessness and the reduction of its impacts, especially in Montreal and Quebec, while calling for social integration of homeless persons. The policy statement acknowledges that there has been success in the measures undertaken to date, but there is concern that these have focused on emergency services rather than on long-term solutions such as prevention and social reintegration. Support to families is seen as pivotal, since youth homelessness is a growing phenomenon and half come from families with issues such as alcoholism, psychiatric difficulties and violence. The policy identifies measures to encourage social reintegration by offering social housing units throughout Quebec, developing more attractive schooling options for those who are undereducated, improving access to social and health services, and providing better co-ordination of detox, housing and mental health services.

Some of these proposals have been integrated into specific policies and programs, many following the provincial Economic and Employment Summit held in October 1996. The Summit brought together the private, community, public and co-operative sectors. Significant to the proceedings was the concept of a social economy — the recognition that benefits must be evaluated not only in terms of profits and losses, but also social benefits and the improvement of the quality of life and welfare of the population. While homelessness, per se, was not the object of discussion during the Summit, discussion focused on housing, employment and income support. This resulted in changes in the purpose and administration of these programs.

This section of the report reviews Quebec's policies that are relevant to the discussion of homelessness.

5.2 *Housing Policies and Programs*

5.2.1 Social Housing

Quebec has felt the impact of the federal government withdrawal from social housing. However, the provincial government had developed programs that complemented those of CMHC, and it continued to support co-operatives and other forms of non-profits after 1990. Following the Economic and Employment Summit, a new approach to social housing was instituted. The Quebec Fund for Community Housing was created in September 1997 with a board of directors composed of representatives from the community, municipal, and financial sectors, as well as the Quebec Housing Corporation. The government has committed to an annual contribution of \$43 million for five years, while the Fund has a mandate to solicit and administer donations, gifts and contributions from all sectors. The priority, through the *Accès Logis* program, is funding co-operative and non-profit housing for:

- low- and modest-income households;
- seniors, especially those in the process of losing their autonomy; and
- people with special needs, including homeless persons, those with intellectual handicaps, youth in difficulty and victims of family violence.

The units can be renovations or new construction, depending on the local situation and the needs of the clients.

Furthermore, a complementary program supports community housing organisations. In 1999–2000, a total budget of \$1.3 million was set aside to support organisations in their activities.

Nonetheless, as Table 17 illustrates, the level of production of new social housing units is a fraction of what was being created 20 years ago.

Table 17: Average number of social housing units financed annually by the federal and provincial government:

1980–1984	1985–1989	1990–1994	1995–1998
6,516 units	5,430 units	2,592 units	950 units

Source: FRAPRU, 1998

Accès Logis

The provincial social housing program, *Accès Logis*, initiated in 1997 for a five-year period, has three facets:

- The first is aimed particularly at permanent housing for low- and modest-income families (870 units annually) — 45 per cent of the capital costs are covered; a minimum of 20 per cent and a maximum of 40 per cent of the households must be eligible for rent

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supplement for five years (this can be increased to 50 per cent if the units are occupied by households eligible for rent supplement before acquisition).

- The second (365 units annually) is for permanent housing for seniors who are in slight loss of autonomy — 50 per cent of capital costs are covered and rent supplement is similar to the first facet of the program.
- The third (90 units — increased to 190 in 1999–2000) is for special groups, and can include permanent as well as transition and emergency housing — 45 per cent of the capital costs of permanent and transitional housing are covered as is 66 per cent of emergency housing (rooms). Emergency shelters are not eligible for rent supplement while 20 per cent to 100 per cent of households in permanent and transitional housing can receive rent supplement for five years.

The subsidies are forgivable if the organisation respects the conditions set by the Quebec Housing Corporation (Société d’Habitation du Québec). Furthermore, to be eligible, the organisation must receive a contribution from the “milieu” — this could be the municipality, a charitable organisation, the private sector or fundraising undertaken by the organisation. This contribution can be non-monetary, for example, a gift of land or a building, an interest-free loan, reduction of taxes, etc.

Table 18: Units Funded Under Accès Logis (September 1999)

Facet	Number of Units
I	624
II	303
III	
◆ Regular	183
◆ Emergency	81
Total	1,191

5.2.2 Rent Supplement

This rent supplement program targets low-income households living in unsuitable housing and on a public housing waiting list. The supplement reduces the rent to 25 per cent of annual income. The units eligible for rent supplement can be in the private sector, co-operatives or non-profit groups that agree to house the eligible clients. Over 12,000 households benefit from rent supplement; an annual increase of 1,500 households is budgeted for 2001–2002 and 2002–2003.

5.2.3 Application to Homeless Persons

The third facet of *Accès Logis* is the most suitable for homeless populations, but in Montreal, the jurisdiction with the largest homeless population, application of the program has raised issues of provincial/municipal responsibility. The City has participated in all but the third facet of *Accès Logis* (i.e. the contribution from the “milieu”). There is a perception by the municipality that the provincial government has been withdrawing from its responsibility for populations vulnerable to homelessness, primarily ex-psychiatric patients. While provincial policy statements call for increased community support for this group, few resources have been allocated and there is a perception on the part of the City that the problems have been “dumped” on the municipalities. For example, the Montreal Regional Health and Social Services Board planned to further reduce the number of psychiatric beds in the region in 1998–2001. The City reacted to the lack of identified budgets for community support and of collaboration or consultation in the planning process. It announced that it would not contribute to the third facet of *Accès Logis*.

This reaction stems from a growing perception on the part of the City that throughout the process of deinstitutionalisation of psychiatric hospitals, the City had provided housing for this population through its social housing and renovation programs. For example, increasing numbers of residents of municipally-administered public housing are considered “difficult” and require support services. The public housing agency currently has 450 units or rooms that are offered to homeless and other “special” groups.

The City position on *Accès Logis* is currently being reviewed and discussions have been undertaken to resolve this impasse. Nonetheless, units under the third facet of *Accès Logis* have been produced in Montreal with organisations that have found other sources of “milieu” contributions (e.g. charitable foundations).

5.2.4 Rooming Houses

Since 1982–1983, the provincial government has been funding the renovation of rooming houses, a source of affordable units for very low-income single persons. In the first few years, the subsidies were available only to co-operatives and other non-profit organisations. In 1986, the program was expanded to include all owners of rooming houses, and when the federal government withdrew from rental housing renovation in 1990, the program continued unilaterally. Thousands of units, many in the centre cities, have been preserved and made safe for this population.

5.3 *Social Security Programs*

Social security programs have evolved in the last decade to emphasise work and to encourage recipients to move towards financial autonomy.

Currently, there are three different programs:

- APTE — Actions Positives pour le Travail et l'Emploi (positive actions for work and employment);
- Income Support; and
- APPORT — Aide aux Parents Pour leurs Revenus de Travail (help to parents for their work revenue).

The first two, APTE and income support, are the most applicable to single persons, while the last APPORT, targets working parents of dependent children. A shelter allowance offers complementary aid.

APTE — Positive Actions for Work and Employment

This program targets persons who have neither work nor other resources. Young adults are considered the responsibility of their parents until the young person is independent. The parental contribution can be either financial or material, such as housing or food.⁴⁴ A parental contribution is not expected if the person is an orphan, the parents receive income assistance, parents cannot be found, or the parents refuse to help. In the latter case, the ministry can undertake procedures against them.

The parental contribution is expected for a period of three years and is calculated on the basis of their revenue, marital status and the number of dependant children.

Once accepted into the program, individuals must plan their return to the job market with their socio-economic support agent. The amounts available to the person will be determined on the basis of participation in an employment program or work. If the person shares an apartment, revenue is reduced by \$100/month.

⁴⁴Young people are considered independent if they have lived apart from their mother or father for at least two years for reasons other than schooling; have had a full-time job for at least two years; have been married, or have co-habited with someone at least a year; have or have had a dependent child; have a bachelors degree; or are at least 20 weeks pregnant (with a medical certificate to that effect).

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Table 19: APTE benefits and average market rent

Category:	Household type	APTE benefit	Maximum monthly employment income permitted	Family allowance for households with children*	Total monthly income (without employment)	Suitable unit	Market rents Montreal CMA (1998)	Rent as per cent of monthly benefit (without employment income)	
Participant in an employment development program	1 adult	\$623	\$200		\$623	Bachelor	\$365	59	
	1 child	\$623	\$200	\$175	\$798	2 bdms	\$499	63	
	2	\$623	\$200	\$241	\$864	2 bdrms	\$499	58	
	3	\$623	\$200	\$307	\$930	3 bdrms	\$596	64	
	2 adults	\$967	\$300		\$967	Bachelor	\$365	45	
	1 child	\$967	\$300	\$66	\$1,033	2 bdms	\$499	48	
	2	\$967	\$300	\$133	\$1,100	2 bdrms	\$499	45	
	3	\$967	\$300	\$199	\$1,166	3 bdrms	\$596	51	
	Non-participant	1 adult	\$502	\$200	\$175	\$502	Bachelor	\$365	73
		1 child	\$502	\$200	\$241	\$677	2 bdms	\$499	74
2		\$502	\$200	\$307	\$743	2 bdrms	\$499	67	
3		\$502	\$200		\$809	3 bdrms	\$596	74	
2 adults		\$771	\$300		\$771	Bachelor	\$365	57	
1 child		\$771	\$300	\$66	\$837	2 bdms	\$499	60	
2		\$771	\$300	\$133	\$904	2 bdrms	\$499	55	
3		\$771	\$300	\$199	\$970	3 bdrms	\$596	61	
Not available (present situation precludes participation)		1 adult	\$603	\$200		\$603	Bachelor	\$365	61
		1 child		\$200	\$175	\$778	2 bdrms	\$499	64
	2		\$200	\$241	\$844	2 bdrms	\$499	59	
	3		\$200	\$307	\$910	3 bdrms	\$596	65	
	2 adults		\$300		\$947	Bachelor	\$365	46	
	1 child		\$300	\$66	\$1,013	2 bdrms	\$499	49	
	2		\$300	\$133	\$1,080	2 bdrms	\$499	46	
	3		\$300	\$199	\$1,146	3 bdrms	\$596	52	

*The maximum family allowance has been calculated, i.e. for single parent households with annual incomes below \$15,000 and two-parent households with annual incomes below \$21,000.

Income Support

The program of income security is seen primarily as temporary help of last resort. This support is in the form of a monthly payment for persons who cannot work and have no other means of support. A medical report attesting that the person is incapable of work permanently or for an indeterminate time (a minimum of 12 months) for physical or mental/psychological reasons is required. Other factors can also be taken into account — such as a physical or mental condition that may not necessarily preclude a person from work, but because of accompanying socio-professional reasons (e.g. long period of unemployment) creates a constraint on employability. Participants are encouraged to work and supplementary amounts are accorded to persons who participate in employment-related activities (e.g. costs of child care or schooling are covered). Work income is allowed and is not deducted from the base payment if it does not exceed a predetermined amount.

Table 20: Income support benefits and average market rent

House-hold type	Benefit	Maximum monthly employment income permitted	Family allowance for households with children*	Total monthly income (without employment)	Suitable unit	Market rents Montreal CMA (1998)	Rent as per cent of monthly benefit (without employment income)
1 adult	\$726	\$100	\$175	\$726	Bachelor	\$365	50
1 child	\$726	\$100	\$241	\$901	2 bdms	\$499	55
2	\$726	\$100	\$307	\$967	2 bdrms	\$499	52
3	\$726	\$100		\$1,033	3 bdrms	\$596	58
2 adults	\$1,079	\$100		\$1,079	Bachelor	\$365	41
1 child	\$1,079	\$100	\$66	\$1,145	2 bdms	\$499	44
2	\$1,079	\$100	\$133	\$1,212	2 bdrms	\$499	41
3	\$1,079	\$100	\$199	\$1,278	3 bdrms	\$596	47

*The maximum family allowance has been calculated, i.e. for single parent households with annual incomes below \$15,000 and two-parent households with annual incomes below \$21,000.

APPORT — help to parents for their work revenue

This program is for working parents with at least one dependent child and with revenues that are insufficient to meet all their needs. It is a financial inducement for persons to stay in their employment. The amount available varies with income earned. For example, a single parent or a two-parent household with one child and an annual earned income of \$20,000 would receive an annual benefit of \$256. If the annual income was \$10,000, the single parent of one child would receive \$2,293 and a two-parent household with a child would receive \$2,816. The amounts decline after an annual income of \$10,000 for single parents and \$14,000 for two-parent households.

Shelter Allowance

The shelter allowance program is currently undergoing changes and will combine two programs, one for persons over 56 years and the other for families. Eligible households will be couples with at least one person over 55 years and families with dependent children who pay over 30 per cent of their income on rent. Rooming house residents are eligible.

Table 21: Eligibility criteria

Household size	Household type	Rent is over:	Annual household income is below:
1 adult	Single person over 55 years	\$308	\$16,480
2 adults	A least one member of the couple over 55 years	\$398	\$19,320
1 adult & 1 child	Single parent family		
2 adults & 1 child	Couple with one child	\$434	\$20,360
1 adult & 2 children	Single parent with 2 children		
2 adults & 2 children	Couple with 2 children	\$460	\$21,160
1 adult & 3 children	Single parent with 3 children		
2 adults & 3 children	Couple with 2 children	\$486	\$22,000
1 adult & 4 children	Single parent with 3 children		
1 or 2 adults	Rooming house resident at least 55 years	\$198	\$12,720
1 adult & 1 child	Single parent one child living in a rooming house		

The amount of shelter allowance is calculated according to a percentage of the difference between the admissible rent (i.e. a maximum amount) and 30 per cent of the household income. Thus, families with children receive 66.6 per cent of the difference. For example, a single-parent family with two children and an annual income of \$11,000 with a monthly rent of \$520 would receive \$57 a month. Currently, 163,000 households receive the shelter allowance.

Application to homeless persons

To overcome the necessity of a fixed address to be eligible for income security, homeless persons can use the address of a shelter. According to a spokesperson in Montreal, however, younger homeless persons rarely use the larger shelters. Many prefer to share accommodation. However, program rules penalise this arrangement (i.e. a reduction of \$100/month), leaving the person with a minimal amount.

5.4 Youth

In early 1999, the Ministries of Health and Social Services and Youth Protection undertook a \$27.5 million action plan to address youth social distress, of which \$12.5 million is new funds. The areas targeted include social adaptation, suicide prevention, alcoholism and addictions as well as homelessness. Homelessness has been accorded \$2 million, which will be used to intensify the work of community organisations.

5.5 Deinstitutionalization

There has been a recognition that the process of deinstitutionalisation of psychiatric hospitals in Quebec has been a failure and that many who have been released find themselves without any support.⁴⁵ A 1987 study, for example, identified over 30,000 persons with psychiatric issues: 10,000 in psychiatric hospitals; 5,000 in intermediate housing affiliated to institutions; 15,000 with members of their family and an indeterminate number in the judicial system, rooming houses or homeless.⁴⁶ Since that time, research seems to indicate an increase of mental health issues among the homeless.

Since 1989, a Mental Health Policy defines all interventions. However, there has been recognition recently that the policies that had been set out have not been realised. Thus, a 1997 report noted that expenditures are still concentrated primarily in hospitals (64 per cent) rather than other services.⁴⁷ The ministry concludes that the funding has not followed the clients and has a goal of reversing the proportions by 2002, with 60 per cent of the budget to go to services in the community and 40 per cent to psychiatric hospitals. During this period, deinstitutionalisation will continue. The 6,000 psychiatric beds in the province in 1995 will be reduced by half.

Not only has this process begun (in 1998 the number of beds had been reduced to 4,780), but it has caused some conflict. While budgets were to be transferred to the community sector, much of this transfer has been to clinics and services operated by hospitals rather than existing community groups. Furthermore, the emphasis has been on specialised services rather than the general support offered by community groups. The difficulties with the application of the third facet of *Accès Logis* in Montreal further illustrates the difficulties with the process of deinstitutionalisation and the perception of provincial government withdrawal from its responsibilities.

⁴⁵ Ducharme, op. cit.

⁴⁶ *ibid.*

⁴⁷ *ibid.*

5.6 Discharge Policies from Correctional Facilities

There is no policy to deal directly with homeless persons who have been incarcerated. A recent study (Laberge et al 1998) found that homeless persons were at a distinct disadvantage when dealing with the criminal justice system. For example, early release often required not only that the person demonstrate good behaviour while incarcerated, but that there be guarantees of stability such as an address or names of persons that they would be staying with. Similar conditions would apply to weekend release. The isolation of homeless persons and their very status made it difficult for them to meet these criteria and they were often required to fulfil the full sentence, even for minor infractions.

In 1996, the provincial government initiated a reform of the correctional system. This reform targets the reduction of the number of incarcerations, concentrating on incarcerating those who are a threat to public security and using community resources as an alternative for the rest. There is also a focus on prevention, with an emphasis on addressing chronic social exclusion and using community resources, such as transition houses.

6 Profile of the Absolute Homeless in Alberta

6.1 Alberta Profile Overview

Information on homelessness in the province of Alberta is featured for the cities of Calgary and Edmonton. Key issues in each municipality are highlighted below.

Calgary

- The *Count of Homeless Persons in Downtown Calgary* in 1998 showed a 61 per cent increase in the number of homeless people compared to 1996.
- Approximately 1,000 people used shelters each night in 1998.
- Shelters are operating over-capacity the majority of time with a low vacancy rate of 1 per cent.
- A study of homeless individuals in 1997 found that 45 per cent of shelter users were employed, with average earnings of \$7.40/hour.
- A growing number of families are using shelters, especially those headed by women. There is also an increase in shelter use by single unemployed males, the working poor, individuals from outside the Calgary region and individuals with mental health issues.

Edmonton

- The first official count of homeless people in Edmonton found 836 homeless persons in the city.
- Shelters are operating over-capacity.
- The homeless population is diverse. It includes about 70 families (with 112 children), youth, single men and women, and seniors.
- The majority of homeless people are single males.

6.2 City of Calgary

6.2.1 Sources of Information

Information on homelessness in the city of Calgary is based primarily on two sources. The first source is the count of Homeless Persons in Downtown Calgary May 21, 1998.⁴⁸ It is the fourth in a series of surveys of various downtown shelter and non-shelter service providers undertaken every two years since 1992. The count provides information on the number of homeless persons who were served by service agencies or observed to be sleeping “on the street” on a designated night. It provides useful information on how the homeless population has changed over time.

⁴⁸City of Calgary, Community and Social Development Department, Social Research Unit, *Count of Homeless Persons in Downtown Calgary May 21, 1998*, July 1998.

Ministry of Social Development and Economic Security

Twenty-two organizations participated in the 1998 count, including men's hostels, women's shelters, emergency services (e.g. Red Cross), police, hospitals, and outreach services. The 1998 count also includes transitional shelter beds.

The second source of information is the Calgary Homelessness Study,⁴⁹ which was prepared for the Alberta Health Department in 1997. The study included agencies involved in providing overnight shelter and accommodation to Calgary's homeless and at-risk population, primarily in the downtown core. It was able to provide information on the characteristics of approximately 3,800 distinct individuals who were homeless during the four-month study period between January and April 1997.

6.2.2 The Count

Number of Homeless⁵⁰ — Point Prevalence

On May 21, 1998, the City of Calgary survey of various downtown shelter and non-shelter service providers counted a total of 988 homeless persons.⁵¹ This represents an increase of 60.7 per cent compared to 1996. Part of this increase is due to the inclusion of additional facilities and transitional shelter beds. The remaining increase (118 persons or 31.6 per cent) represents an overall increase in the number of homeless persons counted by agencies that had participated in the 1996 count.

Table 1: Number of homeless persons counted by surveyed agencies, 1992–1998

Agencies	1992	1994	1996	1998	Per cent increase
General shelters	340	339	482	830	144
Women's shelters	57	53	94	80	40
Subtotal	397	392	576	910	129
Non-shelter agencies	50	69	39	78	56
Total	447	461	615	988	121

⁴⁹Arbolita-Florez J. and H.L. Holley. *Calgary Homelessness Study*, Alberta Health, December 1997.

⁵⁰Homeless persons are considered to be those who do not have a permanent residence to which they can return whenever they choose. This does not include those who stayed with friends or family on the night of the count or those who slept in vehicles or abandoned buildings where they would not have been seen.

⁵¹This does not include 100 people who were refused shelter that night. Nor does it include 50 people housed by the Red Cross on the night of the count who were homeless as a result of fire.

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Turnaways

Most shelters were filled or nearly filled to capacity and a few were over capacity. Agencies reported that 90 homeless persons were turned away from shelters that night because they were full. Another three persons were refused because of alcohol/drug use, three because of behaviour, and four because they fell outside the shelter's target group.

Table 2: Number and reasons for being turned away, 1998

Reason for being turned away	Number
Shelters were full	90
Alcohol/drug use	3
Behaviour	3
Outside shelter's target group	4
Total	100

Family Status

There were 36 homeless families with children in shelters on the night of the count. This represents an increase of 29 per cent compared to 1996 when there were 28 homeless families. In 1994, there were 24 homeless families, which means that the number of homeless families increased by 50 per cent between 1994 and 1998.

Gender

In 1998, 138 of the 988 homeless people were female (14 per cent), compared to 850 males (86 per cent). This represents a decline compared to 1996, when females made up 24 per cent (147 individuals) of the homeless population. The percentage of men who are homeless compared to women has increased since 1994.

Table 3: Gender — 1994–1998

Gender	1994*		1996		1998	
	No.	Per cent	No.	Per cent	No.	Per cent
Male	345	75	468	76	850	86
Female	75	16	147	24	138	14
Total	420	91*	615	100	988	100

*N=461. Sex was not noted for 8.9 per cent (n=41) of the persons counted in 1994.

Age and Sex Distribution of Homeless Persons

In 1998, the majority of homeless persons (505 persons or 51 per cent) were males between the ages of 25 and 45. There were also 17 children under the age of six, 20 children age 6–12, and another 33 children age 13–17.

Table 4: Age and sex distribution of homeless persons 1998

Age Group	Female		Male		Total	
	Number	Per cent	Number	Per cent	Number	Per cent
0	9	.9	8	.8	17	1.7
6–12	7	.7	13	1.3	20	2.0
13–17	14	1.4	19	1.9	33	3.3
18–24	29	2.9	90	9.1	119	12.0
25–35	33	3.3	223	22.6	256	25.9
36–45	29	2.9	282	28.5	311	31.5
46–55	12	1.2	157	15.9	169	17.1
56–64	1	.1	43	4.4	44	4.5
65+	3	.3	13	1.3	16	1.6
Unknown	1	.1	2	.2	3	.3
Total	138	14	850	86	988	100.0

Table 5 below shows that the number of young females age 0–24 years remained the same in 1996 and 1998. However, as a percentage of the homeless population, this group declined by 3.6 per cent over this period. The number of homeless females age 25–64 declined by 13.8 per cent in 1998 compared to 1996.

The number of men who were 25–64 increased by 91.1 per cent between 1996 and 1998. In 1998, men in the 25–64 age group represented 71.4 per cent of the homeless population, compared to 60 per cent in 1996, representing an 11 per cent increase.

The number of seniors remained the same in 1998 compared to 1996, but as a proportion of the homeless population, the percentage of seniors declined by 1 per cent to a total of 1.6 per cent.

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Table 5: Age of homeless persons, 1994, 1996, 1998

Age Group	Sex	1994*		1996		1998	
		Number	Per cent	Number	Per cent	Number	Per cent
0–24	Female	32	6.9%	59	9.6%	59	6.0%
	Male	87	18.9%	84	13.7%	130	13.2%
25–64	Female	41	8.9%	87	14.1%	75	7.6%
	Male	240	52.1%	369	60.0%	705	71.4%
65+	Female	0	0.0%	1	.2%	3	.3%
	Male	11	2.4%	15	2.4%	13	1.3%
Unknown	Female	2	.4%	0	0.0%	1	.1%
	Male	7	1.5%	0	0.0%	2	.2%
Total	Female	75	16.3%	147	23.9%	138	14.0%
	Male	345	74.8%	468	76.1%	850	86.0%
	Both	420	91.1%	615	100.0%	988	100.0%

*N=461. Sex was not noted for 8.9 per cent (n=41) of the persons counted in 1994.

Race

In 1998, it was observed that the majority of homeless people were Caucasian (760 or 76.9 per cent). This represents an increase from 1996 when Caucasian persons made up 72.8 per cent of the population. Aboriginal people who were homeless in 1998 represented 18.4 per cent of the homeless population. This represents a decline compared to 1996. However, Aboriginal people are over-represented in the homeless population since they make up approximately 4 per cent of the general population in Calgary. In 1998, Black and Asian people made up 1.7 per cent and 1.1 per cent of the homeless population, respectively, which was lower compared to 1996.

Table 6: Racial distribution 1994, 1996, 1998

Age Range	Male		Female		Total	
	Number	Per cent	Number	Per cent	Number	Per cent
Caucasian	331	71.8	448	72.8	760	76.9
Aboriginal	101	21.9	121	19.7	182	18.4
Black	12	2.6	18	2.9	17	1.7
Asian	8	1.7	19	3.1	11	1.1
Unknown	9	2.0	9	1.5	18	1.8
Total	461	100.0	615	100.0	988	100.0

6.2.3 Characteristics of Distinct Users⁵²

Over a four-month period from January 1997 to April 1997, approximately 3,800 unique individuals were identified as being homeless.⁵³

Age and gender of distinct shelter users, 1997

Table 7 below shows that 86 per cent of the shelter users (3007) was male. The majority of all shelter users were between the ages of 25 and 44. Compared to men, women were over-represented in the youngest age category by about 8 per cent.⁵⁴

Table 7: Age and gender of distinct shelter users, 1997

Age Range	Male		Female		Total	
	Number	Per cent	Number	Per cent	Number	Per cent
14-24	500	16.6	123	24.9	623	17.8
25-34	881	29.3	148	30.0	1029	29.4
35-44	987	32.8	116	23.5	1103	31.5
45-54	461	15.4	69	14.0	530	15.1
55+	178	5.9	38	7.7	216	6.2
Total	3007	100	494	100	3501	100

Note: Data on age were missing for 328 individuals
 Source: Calgary Homelessness Study, December 1997

⁵² *Calgary Homelessness Study*, December 1997 p.39. See also *Reducing Homelessness in Calgary, A Community Action Plan*, May 1998, sponsored by the Homeless Initiative Ad Hoc Steering Committee.

⁵³ *Calgary Homelessness Study*, December 1997.

⁵⁴ *Calgary Homelessness Study*, December 1997.

Life events prior to becoming homeless

Table 8 below shows that the three most common life events that occurred prior to becoming homeless included job loss, ending of a relationship, and eviction.

Table 8: Life Events Prior to Becoming Homeless

Life Events Prior to Homelessness	Per cent of 250
Job loss	63
Relationship ended	49
Eviction	48
Substance misuse	44
Debt	42
Criminal offence	35
Robbery	34
Physically beaten or assaulted	29
Correctional facilities	28
Hospitalized for physical problem	23
Gambling problem	15
Serious accident	15
Hospitalized for mental illness	10
Being sexually assaulted	6

Source: Calgary Homelessness Study as cited in *Reducing Homelessness in Calgary, A Community Action Plan*, p.27

Use of services

Shelter users consumed resources disproportionate to their numbers. For example, people over the age of 55 made up 6 per cent of the study population, but consumed 10 per cent of the resources (measured in daily contacts with an agency).⁵⁵ Those between the ages of 45 and 54 made up 13 per cent of the study population, but consumed 18 per cent of the resources. Those under the age of 24 made up 18 per cent of the population, but consumed only 13 per cent of the resources. Those between 25 and 34 made up 29 per cent of the population, but consumed 27 per cent of the resources.

⁵⁵A contact could include the equivalent of a bed day.

Mental health issues

Based on the 1997 data, it was estimated that 30 – 40 per cent of shelter users suffered from serious mental health issues. Thirty-four per cent of shelter users had issues related to substance misuse.⁵⁶ Psychiatric symptoms experienced since being homeless during the four months in 1997 are shown below (n=250).

Table 9: Mental Health Issues Experienced by Homeless Persons in 1997.

		Per cent
Depression	Depression	29
	Suicidal thoughts	34
Anxiety	Panic attacks	31
	Unreasonable fears	39
Psychotic symptoms	Believed something that others doubted could be true	10
	Reported feeling that others could read their thoughts	9
	Had seen things that weren't there	5
	Heard imaginary voices	4
	Felt others could seize control of their body or minds	4

Source: Calgary Homelessness Study, as cited in *Reducing Homelessness in Calgary, A Community Action Plan*, p.28

Other characteristics

Other information about the distinct individuals who were homeless in 1997 showed that:⁵⁷

- 20 per cent had higher education;
- 45 per cent were employed: 15 per cent full time; 9 per cent part-time, 21 per cent casual; with average earnings of \$7.40/hour;
- 73 per cent were from outside Alberta;
- 55 per cent had been in Calgary less than one year.

⁵⁶ *Reducing Homelessness in Calgary, A Community Action Plan*, May 1998.

⁵⁷ Cited in *Reducing Homelessness in Calgary, A Community Action Plan*, May 1998.

6.3 City of Edmonton

6.3.1 Source of Information

Information on homelessness in the city of Edmonton is based on the report entitled *Homelessness in Edmonton, A Call to Action*.⁵⁸ This report includes a “snapshot” of the homeless based on a community-supported count that took place on March 18, 1999. This was the first official count of homeless people in Edmonton.

The methodology involved a direct count of people in emergency shelter beds. An indirect count was also attempted to capture the invisible homeless through the following:

- Street count — asking people on the street if they have a permanent residence to return to that night and how many people they know who don't have a permanent residence on that night;
- Agency count — asking people at agencies (such as the food bank and drop-in centres) if they have a permanent residence for that night;
- Turnaway count — people turned away by providers and crisis services because no appropriate housing was available; and
- Discharge count — people either discharged or ready for discharge from facilities, but with no permanent residence to go to.

Demographics gathered during the count included gender, observed race and age, family status, number of caregivers, and number of children in families.

The Edmonton report does not include the results of the “snowball” count for reliability reasons. However, a high percentage of people interviewed indicated that they knew many other homeless people. It was further noted that the results of the count could be an under-representation of the actual number of homeless persons in Edmonton because it may not have included those who stayed with friends or family on that day, and it did not include people living in condemned housing. At the same time, it is possible that some people were counted twice.

⁵⁸Edmonton Task Force on Homelessness, *Homelessness in Edmonton, A Call to Action*, May 1999.

6.3.2 The Count

Number of Homeless — Point Prevalence

On March 18, 1999, the first official count of homeless people in Edmonton found 836 homeless persons in the city. Of these, 313 were defined as absolute homeless — having no housing alternative⁵⁹ and 523 were sheltered homeless — living in emergency accommodation.⁶⁰ These numbers include single men and women, adults and children in families, youth and seniors.⁶¹

Shelter Occupancy

523 individuals were housed in shelters on March 18, 1999.

Table 10: Number of Homeless People Registered in Shelters, 1999

Shelter (type)	Spaces Available	No. Registered	Per cent Occupancy
Single men and single women	62	88	142
Single men	258	239	93
Single women	62	61	98
Families with children	70	73	104
Youth	59	62	105
Total	511	523	102

People turned away from shelters and discharged from facilities

The count also included the number of people who were denied a bed because the facility was full or they did not meet entrance standards (e.g. exhibited violent behaviour) and who declared they had no home to return to. On count day, 113 individuals were turned away from housing providers (56 per cent) and from shelters (44 per cent). In addition, 32 individuals were discharged from correctional facilities, hospitals or group homes (91 per cent) and shelters (9 per cent). These persons declared that they had no home to go to.

⁵⁹This includes individuals and families who are absolutely homeless (having no housing alternatives). During the March 18 count, this included people who, when asked on the street or within agencies such as drop-in centres or the food bank, self-reported that they had no permanent place to reside. They may have slept “on the street” or in a stairwell that night, or they may have stayed with a friend or found an emergency shelter space.

⁶⁰This includes individuals and families who are the sheltered homeless (living in emergency accommodations or condemned housing and expected to be “on the street” at the end of their stay). During the March 18 count, this included people who were registered to stay in approved emergency shelters.

⁶¹This does not include 113 individuals who were turned away from shelters for not meeting entrance standards. Nor does it include 32 individuals discharged from hospitals, correctional facilities or group homes who had no place to go.

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Table 11: People turned away from agencies, 1999

Type of Agency	Number	Per cent
Housing Providers	63	56
Shelters	50	44
Total	113	100

Table 12: People discharged from facilities with no place to go, 1999

Institution	Number	Per cent
Correctional Facilities/Hospitals/Group Homes	29	91
Shelters	3	9
Total	32	100

Family Status

The count revealed about 70 homeless families with 112 children under the age of 18. This included 91 caregivers such as men, women and seniors. Among these families, 55 per cent of the individuals were absolutely homeless, while 45 per cent stayed in shelters.

Table 13: Number of homeless families, 1999

Family Status	Number	Per cent
Single	633	76
Families	203 individuals in 70 families (112 children under 18 and 91 caregivers)	24
Total	836	100

Gender

A total of 530 homeless individuals were male (73 per cent) compared to 194 females (27 per cent).

Table 14: Gender, 1999

Gender Status	Number	Per cent
Male	530	73%
Female	194	27%
Total	724*	100%

*Does not include 112 children in families

Age

Adults between the ages of 19 and 54 years were the predominant age group among the homeless (67 per cent). Children in families were the next largest group (13 per cent) followed by youth between the ages of 15 and 18 (10 per cent), and seniors (9 per cent).

Table 15: Age of homeless population, 1999

Age	Number	Per cent
Children (in families)	112	13
Youth (15–18 years)	87	10
Adult (19–54 years)	561	67
Senior (55+)	76	9
Total	836	100

Race

The majority of homeless persons were Caucasian (53 per cent), while 42 per cent were of Aboriginal origin. However, most of the Caucasian people were in shelters (301 compared to 84 absolute homeless), whereas most of the Aboriginal people were not in shelters (164 compared to 143).

Table 16: Homeless observed by race, 1999

Race	Absolute homeless		Sheltered Homeless		Total	
	Number	Per cent	Number	Per cent	Number	Per cent
Caucasian*	84	12	301	41	385	53
Aboriginal*	164	22	143	20	307	42
Other	4	1	28	4	32	5
Total	252	35	472	65	724	100

*Does not include 112 children in families

7 Policies Relevant to Homelessness in Alberta

7.1 Introduction

Context

The profile of absolute homelessness in Alberta has shown that Calgary experienced a 61 per cent increase in the number of homeless people from 1998 to 1996. Shelters are operating at over-capacity most of the time, and a growing number of families are using shelters, especially families headed by women. There is also an increase in shelter use by single unemployed males, the working poor, individuals from outside the Calgary region, and people with mental health issues. Edmonton is also experiencing an increase in homelessness, and shelters are operating at over-capacity. The majority of homeless people are single males, but families with children, youth, single women and seniors are also homeless.

In terms of households 'at risk' of becoming homeless, in Calgary (CMA), it is estimated that the proportion of renter households who paid more than 50 per cent of their income to rent increased from 15 per cent in 1990 to 17 per cent in 1995. In Edmonton (CMA), the proportion of renter households who paid more than 50 per cent of their incomes to rent increased from 15 per cent in 1990 to 19 per cent in 1995.⁶² It should also be noted, however, that between 1991 and 1996, the number of renter households who were in core need decreased from 68,000 households in 1991 to 58,000 renter households in core need in 1996.

When considering Alberta's policies that are relevant to homelessness, it is also important to note general housing market conditions.

- Vacancy rates in Calgary were the lowest in the country at 0.6 per cent in 1998. In Edmonton, vacancy rates declined to a low of 1.9 per cent in 1998, which was a significant decline from the 1997 rate of 4.6 per cent.
- Rents in Calgary experienced a significant increase of 12 per cent in 1998. Rents in one-bedroom units increased from \$511 per month in 1997 to \$574 in 1998. In Edmonton, rents increased by an average of 5 per cent, with the cost of a one bedroom increasing from \$429 per month in 1997 to \$450 in 1998.
- There is increasing poverty among Aboriginal households, single-parent families, people who are mentally ill, victims of family violence and youth, which will mean a continuing need for additional permanent social housing and special needs housing.⁶³

⁶²Federation of Canadian Municipalities, *National Housing Policy Options Paper, A Call for Action, Municipal Profiles*, June 1999.

⁶³Alberta Urban Municipalities Association, *An Agenda to Create Solutions*, 1998.

Policy Overview

The provincial government in Alberta is beginning to examine ways to address homelessness and the need for more affordable housing. A symposium was held in Edmonton in June 1998 to address the pressing need for more affordable housing for families, seniors, and people with special needs. The primary goal was for participants to provide input regarding affordable housing solutions. In terms of housing policy, the government's main tool appears to be its Rent Supplement Program to subsidize low-income tenants in private accommodation. A portion of these units has been used to assist in the development of group homes and emergency shelters, and assist people with special needs. Funding has also been provided for a variety of homeless initiatives in several municipalities. The Alberta government's approach is one that involves working with municipalities, local agencies (e.g. the Calgary Homeless Foundation), and local planning committees (e.g. Edmonton Joint Planning Committee on Housing) to develop local solutions to housing needs. There is recognition that homelessness is a growing problem in Alberta and the provincial government is currently working on a policy to address this issue. Concerns have been raised about the inadequacy of household income (as a result of low wages and low-income assistance benefits), the lack of community supports (e.g. amenities and services), the need for better coordination and cooperation within government, and the need for more flexible funding for groups with special needs.

Critical issues that have been identified as contributing to homelessness in Alberta, particularly Calgary and Edmonton include:

- Economic and population growth in Alberta that has resulted in increasing housing prices and lower vacancy rates, combined with greater variation in the types of jobs available;
- Poverty resulting from more temporary, contract, part-time or low-paying jobs. Alberta has the lowest minimum wage in the country at \$5.00 per hour;
- Inadequate supply of housing that is affordable to low-income households;
- Insufficient resources for special needs housing with support services;
- Loss of affordable rental housing due to demolitions, conversions and upgrading of existing rental housing;
- Inadequacy of income assistance; and
- Inability of households to pay a damage deposit and the first month's rent.

Some of the policies that are relevant to the discussion of homelessness in Alberta are discussed below.

7.2 *Housing Policies and Programs*

The Alberta Ministry of Municipal Affairs administers 40,258 social housing units. Since 1993, however, there has been no federal or provincial non-profit housing supply program to support new housing projects.

According to the Edmonton Task Force on Homelessness, the lack of affordable housing is a significant part of the homelessness problem. A long-term needs assessment conducted by the Edmonton Joint Planning Committee on Housing in mid-1997 estimated that there was a demand for 2,600 more units of low-income and special needs housing. About 70 per cent of this demand is for independent living options. The remaining 30 per cent is for a range of long-term and transitional special needs or supportive housing options.

Provincial initiatives in affordable housing include the following:

- Since 1997, the provincial government has provided about 1,000 Rent Supplement Units. Approximately 25-40 per cent of these units assist individuals with special needs. An estimated 50-100 units have been used to develop group homes and emergency homeless shelters.
- In 1998, through refinancing the social housing mortgage debt, the provincial government eliminated the requirement for municipal contributions for provincially-owned family social housing. In Edmonton, the saving was approximately \$1.3 million in 1998, and the City is targeting this money to address homelessness. In Calgary, the saving was approximately \$965,000. This amount, together with \$2 million from the province's lottery fund, enabled the City of Calgary to leverage its savings into \$4.4 million and establish the Calgary Homeless Foundation.
- The provincial government is also providing funding for temporary emergency spaces in Edmonton and Calgary for a period of six months during the winter.
- Funding was provided to convert a senior's project to one that would serve hard-to-house seniors. Another project that included bachelor units was converted to supportive housing for homeless single people.
- The provincial government has participated in studies of homelessness.
- Assistance was provided to the City of Grand Prairie to create a shelter for the homeless.

7.3 Income Assistance — Supports for Independence (SFI) Program

7.3.1. Amount of Assistance

Alberta's Supports for Independence (SFI) program, is meant to assist employable people for a short time while they find ways to get back into the labour force, or to help people who are unable to work and have no means of support. A parent who stays home to look after a new baby is expected to work again when the baby is six months old. Financial help is available to low-income families for day care.

Table 17: Standard Benefits, August 1999

Household Type	Basic benefit	Shelter Maximum	Total*
Single Employable	\$229	\$168	\$397
Single Parent and one child (under 10)	\$321	\$428	\$749
Single Parent and two children (under 10)	\$403	\$503	\$906
Employable Couple and two children (under 10)	\$579	\$524	\$1103

Note that families with children under 18 are also eligible for a Child Tax Benefit.

Tables 18 and 19 show the percentage of income that households would be required to pay for an average unit on the private market in Calgary and Edmonton. As can be seen, single people are the most vulnerable. Families with children would be paying between 57 and 94 per cent of their incomes to rent.

Table 18: Percentage of income for rent ratios, Calgary 1998

Household Type	Total Benefits	Shelter Maximum	Household Size	Suitable Unit	Average Market Rents*	Rent as per cent of income	Rent as per cent of shelter max
Single employable	\$397	(\$168)	1	Bachelor	\$431	109	257
Single Parent — one child	\$749	(\$428)	2	2 Bedroom	\$707	94	165
Single Parent — two children	\$906	(\$503)	3	2 Bedroom**	\$707	78	141
Couple — two children	\$1103	(\$524)	4	3 Bedroom**	\$682	62	130

*Based on CMHC Rental Market Report

**Depends on age and sex of children

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Table 19: Percentage of income for rent ratios, Edmonton 1998

Household Type	Total Benefits	Shelter Maximum	Household Size	Suitable Unit	Average Market Rents*	Rent as per cent of income	Rent as per cent of shelter max
Single employable	\$397	(\$168)	1	Bachelor	\$389	98	232
Single Parent – one child	\$749	(\$428)	2	2 Bedroom	\$551	74	129
Single Parent — two children	\$906	(\$503)	3	2 Bedroom**	\$551	61	110
Couple — two children	\$1103	(\$524)	4	3 Bedroom**	\$624	57	119

*Based on CMHC Rental Market Report

**Depends on age and sex of children

Information from the Edmonton Task Force on Homelessness indicates that SFI rates are inadequate to meet basic expenses.⁶⁴ Either there is not enough money to pay for accommodation, or money needed for basics (such as food) is used to pay for housing. In other words, households can either pay rent or eat, but not both. SFI rates are a real barrier for low-income recipients wanting to maintain affordable housing, especially in the larger urban centres and high growth communities. Maximum shelter payments do not reflect the wide variation in rents in different communities. Surveys of community agencies conducted by the City of Edmonton have indicated that people are being forced to live in substandard housing because of the SFI program. There is also evidence of increased dependence on services such as the Food Bank.⁶⁵

The Edmonton Task Force has recommended that SFI rates be reviewed with the intention of ensuring that they provide sufficient support to meet recipients' housing needs. Specific actions that are recommended include:

- Introducing community-specific rates that reflect current market rents;
- Reinstating the policy of paying security deposits for all SFI recipients;
- Considering a policy that SFI will be provided to people with no fixed address; and
- Examining age restrictions on the shelter allowance so that youth under the age of 18 living without family support may qualify.

⁶⁴Homelessness in Edmonton, *A Call to Action*, May 1999, p. 37.

⁶⁵Edmonton Joint Planning committee on Housing, *Supply and Demand Update on Affordable Housing for Low Income and Special Needs Households*, December 1997, p. 15.

7.3.2 Damage Deposits

Damage deposits may be paid under the SFI program in abuse situations. The amount may not exceed the applicable monthly maximum shelter allowance.

7.4 *Deinstitutionalization*

The current trend to deinstitutionalization has placed people in the community who need supports to make the transition successful. There is a desire to attempt discharge planning when mental health patients are discharged from a psychiatric institution or general hospital. However, there are not enough beds or support services in the community. The dilemma is that either people stay in the hospitals too long, consuming scarce resources there, or they are released into the community without the necessary resources. It is recognized that community options are more cost-effective than institutional care, however, there is a shortage of spaces and programming dollars. Services in the community have been growing, but not quickly enough to meet the need.

7.5 *Discharge Policies from Correctional Facilities*

In Alberta, a caseworker is required to develop a caseplan for every offender who has received a sentence. The caseworker reviews this plan with the offender at least once a month to ensure that expectations are clearly understood and to assess progress toward caseplan goals. For maximum and medium security inmates, caseplans address the specific services to be used during the custody period, such as forensic assessment, addiction assessment/counseling, school or vocational programs, and graduated release through a minimum security centre.

Caseplans for inmates with a minimum security rating could be limited to planning for their release. Some of the issues to be addressed as part of the release plan would include transportation, subsistence, clothing, and destination. It does not matter whether a person is released on a temporary absence or released because the sentence has been completed, a release plan would still be prepared. An attempt is made to help the inmate find accommodation, although not necessarily permanent housing. If the inmate does not have a home to return to, he could be released to an emergency shelter.

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