



2018 Homeless Enumeration Report

Prepared by
OrgCode Consulting, Inc.



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St. Thomas and Elgin County Homeless Enumeration 2018

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OrgCode Consulting, Inc.

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2018 Homeless Enumeration - Report Summary



Over the last decade, much has been learned about the strategies and approaches needed to prevent and end homelessness in urban, rural and suburban communities across Canada. In addition to this, communities have also invested time and resources in developing and implementing long term housing and homelessness plans dedicated to ensuring that homelessness, if it occurs, is rare, brief and non-recurring. Without clarity into the local realities, prevalence and scope of homelessness throughout the region, however, the success of efforts to prevent and end homelessness will be limited. Just as the journey into and out of homelessness is unique for neighbours, so too must be the customized application of evidence informed practices and approaches.

In communities getting the results needed to prevent and end homelessness, a commitment to decision making and system planning embedded in the analysis of real time data regarding the experience of homelessness locally has ensured progress in positive housing and stability outcomes. With this insight guiding the creation of provincial policy dedicated to ending chronic homelessness by 2025, the Ontario Ministry of Housing (MHO) introduced the requirement that all Consolidated Municipal Service Managers (CMSM) across the province would complete local enumeration of people experiencing homelessness in their communities. Although parameters were established for the enumeration methodologies and standards, timelines and data requirements were established, it was also acknowledged that Service Managers were to ensure that the homelessness enumeration projects were to reflect local needs and priorities. In addition to the recommendation that local data gathering improve, the Expert Advisory Panel on Homelessness and its 2015 report, *A Place to Call Home*, established four provincial priorities to guide action: chronic homelessness, youth homelessness, Indigenous and homelessness following transitions from provincial funded institutions and service systems. With this in mind, the Ministry also established guidelines to ensure that data gathering methods on these four priority sub-populations were incorporated.

Beyond the Ministerial Directive, communities across the province identified that homelessness enumeration provided a valuable learning opportunity that would ensure that future system planning – locally and provincially – would be enhanced with this research. For many regions such as the City of St. Thomas and Elgin County, this directive also represented an opportunity to mobilize community partners, enhance their knowledge of the realities and prevalence of homelessness and ensure that local investments aligned with local needs. In the winter of 2017, the City of St. Thomas, as the Service Manager for the region, contracted with OrgCode Consulting, Inc. for the provision of technical assistance related to the planning and analysis of this community-based initiative.

Given the vast geographical area in the Elgin County and the prevalence of hidden homelessness in the rural communities, the implementation of a Period Prevalence Count was the most appropriate methodology for this first ever homeless enumeration, with particular emphasis on capitalizing the expertise of local community partners in connecting with local residents that were experiencing homelessness included sheltered, unsheltered, provisionally accommodated within provincial institutions as well as hidden homelessness (couch surfing, temporarily staying with friends and families, etc.). In addition to these sub-populations, St. Thomas also wanted to increase their understanding of residents that were also at imminent risk of homelessness and therefore reaching out to service providers for



housing loss prevention supports. Since it is estimated that hidden homelessness represents up to 80% of those who have no place to call home in small, rural and northern communities in Ontario¹, the importance of a comprehensive engagement strategy with community partners could not be underestimated in planning the 2018 St. Thomas and Elgin County Homeless Enumeration.

A Period Prevalence Count is the best way to get an accurate picture of the number of people who are homeless in large geographical areas; however, a Period Prevalence Count is not without its limitations. Although casting a wider net of opportunities to engage with people experiencing homelessness, the scope of hidden homelessness in more rural regions will still create challenges in ensuring that all individuals and families experiencing homelessness during the designated week are enumerated. For instance, a Count relies on the ability of community partners and volunteers to connect with those experiencing homelessness (sheltered, unsheltered, hidden and provisionally accommodated) in public areas and via community access points and may still miss some individuals who do not appear to be homeless, who are well-hidden, or who are actively avoiding being counted. For the reasons cited, although a Period Prevalence Count is a carefully executed research process, all Counts, by their inherent limitations, undercount the homeless population. The findings from the 2018 St. Thomas and Elgin County Homeless Enumeration, therefore, should be considered the *minimum* number of people that were homeless during the week of the Count.

This report provides the summary of the insights gained about the scope and prevalence of homelessness throughout the City and the County as well as recommendations about future system planning to ensure that future resources and investments are dedicated to preventing and ending homelessness locally. Particular emphasis will be required to better understand the experiences and needs of local individuals and families experiencing chronic and episodic homelessness. Recognizing the importance of ensuring that residents with the greatest depth of need will require specialized supports and services to return to housing stability and improved wellness, an enhanced understanding of the sub-population of people experiencing chronic and episodic homelessness will be essential for future system planning in the region.

¹ Kauppi, C., O'Grady, B., Schiff, R., Martin, F. and Ontario Municipal Social Services Association. (2017). Homelessness and Hidden Homelessness in Rural and Northern Ontario. Guelph, ON: Rural Ontario Institute.

One of the valuable insights gleaned during the 2018 St. Thomas and Elgin County Homeless Enumeration was the impact of collective ownership of this initiative throughout the region. It is acknowledged that no one program, agency or service can prevent and end homelessness in any community. Without appropriate information on the scope and depth of homelessness, local departments, service providers and community partners will experience challenges in deciding on future approaches and investments. This initial homeless enumeration provides the inaugural Count of the number of people experiencing homelessness and some of the issues and needs impacting their journey back to housing stability.

During the week of April 22-27 2018, 109 people were identified as experiencing precarious housing (imminent homelessness) and literal homelessness. Agency partners and community volunteers surveyed 109 people to determine their housing situation, experiences of homelessness and the issues that may be impacting their ability to resolve their own housing crises and homelessness. The homeless enumeration also identified 33 dependent children that accompanied their parents/guardians that were also experiencing homelessness. In addition to these single adults, unaccompanied youth and families that were surveyed, an additional 17 women were identified as staying with Violence Against Women Services Elgin County but these women did not participate in the homeless enumeration survey.

In total, 159 people were identified as experiencing homelessness during April 22-27, 2018.

To provide an overview of the real time insights gleaned during the 2018 Homeless Enumeration, the following table provides a snapshot of the demographics, depth of homelessness as well as the common health and safety concerns that jeopardize the efforts of these people to resolve their own housing crises and homelessness.



2018 St. Thomas-Elgin Homeless Enumeration Data		All Respondents	Single Adults	Families	Youth
Number of Respondents		109	65	22	22
Chronic Homelessness		38%	37%	36%	41%
Episodic Homelessness		17%	17%	5%	27%
Percentage Reporting Indigenous Ancestry			20%	27%	5%
Percentage Reporting Mental Health Concerns		52%	51%	41%	64%
Percentage Reporting Substance Use Issues		30%	60%	45%	32%
Percentage Reporting Chronic/Acute Medical Condition		45%	52%	36%	32%
Percentage Reporting Physical Disability		30%	37%	23%	18%
Percentage Reporting Tri-Morbidity (Mental Health + Physical Health + Substance Use Issues)		13%	22%	14%	18%
Percentage Reporting Family Breakdown (Conflict and/or Abuse) as the Reason for their Homelessness		50%	28%	91%	73%
Percentage Experiencing Hidden Homelessness		50%	48%	27%	77%
Percentage Experiencing Sheltered Homelessness		36%	35%	59%	14%
Percentage Experiencing Unsheltered Homelessness		6%	8%	5%	0%

Implications for Future Planning and Investments

The 2018 Homeless Enumeration project identified that single adults, families and unaccompanied youth are staying homeless much longer than necessary with their compromised wellness complicating their efforts to resolve their own homelessness. Although services and supports have enhanced tremendously in recent years, additional opportunities for enhancements exist and must be invested in moving forward to ensure that the most vulnerable people experiencing homelessness receive the housing and support needed to end their homelessness as soon as possible.

In investigating the current finite investments dedicated to preventing and ending homelessness in St. Thomas and Elgin County, it is clear that alignment with evidence informed practices and strategies that align with Housing First can enhance the local system of care and reorient collaborations with the goal of preventing and ending homelessness locally. The following provides recommendations for enhanced service coordination using the finite CHPI funding.

Recommendation 1: Development of Coordinated Access for Shelter and Housing Services

To ensure that the right individual, family and youth get connected to the most appropriate emergency shelter and/or re-housing option, it is recommended that during the 2018-19 contract year, the local homeless serving system begin the process of developing and implementing Coordinated Access. St. Thomas and Elgin County has experienced important successes in improving service delivery for youth experiencing homelessness in the area. The incorporation of the Youth Homelessness Protocol has ensured that youth in a housing crisis or experiencing homelessness receive homelessness prevention and shelter diversion activities, as well as referrals to the most appropriate shelter or housing with support program.

Building on this success and capitalizing on the federal requirement for the implementation of Coordinated Access in each supported community, it is recommended that the homeless serving system in St. Thomas and Elgin County operationalize a Coordinated Access Process that serves all individuals and households that are experiencing housing instability and homelessness. With the adoption of Coordinated Access by the federal plan to prevent and end chronic homelessness called *Reaching Home*, it is anticipated that the Province of Ontario will follow suit and also introduce such system coordination activities for their supported communities.

Such a system enhancement project would require the cooperation of all housing and homelessness partners and would ensure that those individuals and families with the greatest depth of need would be prioritized for shelter and housing supports for all funded programs/residential beds. This would eliminate all inefficient “first come, first served” approaches to filling vacancies and beds that are CHPI funded to ensure that these investments are optimized to prevent and end homelessness. This is certainly not a “business as usual” approach to providing



better service to the people experiencing homelessness that is transparent and accountable.

Recommendation #2: Homelessness Prevention Should Align with Evidence Informed Practices and Approaches

Research into prevention programs have demonstrated that historically 80% of all investments actually went to households that never would have become homeless, even if they had never received homelessness prevention funds². Such an empirical finding increases our focus on not just improving and targeting our homelessness prevention efforts but also on ensuring that only households that have no other safe, appropriate place to be are offered admission to shelter.

Much has been learned about the service approaches and the service orientation that can effectively close the front door into homelessness. The adoption of evidence informed tools and approaches will ensure that the substantial investment of 32% of CHPI funds in homelessness prevention locally is optimized by targeting those households that are at the greatest risk of actually entering homelessness. Homelessness prevention activities must be deliberately targeting households that are the most vulnerable to becoming homeless, not just households that are experiencing financial challenges due to their low income. CHPI investments must be dedicated to homelessness prevention, not used with a poverty reduction lens.

Homelessness Prevention activities currently provided through Housing Links for People (HeLP) must be closely connected with Coordinated Access.

Recommendation #3: Align Housing with Related Support Investments with Evidence Informed Practices

In 2018-19, it is anticipated that 54% of all CHPI funds will be dedicated to supporting Housing with Related Support projects. In the quest to shift from managing homelessness to ending it, such a healthy housing specific investment is important. However, it must be realized that 43% of the funded beds (52 beds in total) are dedicated for Transitional Housing and Emergency Housing Beds provided through a variety of community partners. The evidence regarding the outcomes and impacts of transitional housing is not promising as it relates to a community's quest to end long term homelessness. Although such specialized populations as youth benefit more from transitional support options than most people experiencing homelessness, efforts should be dedicated to converting transitional housing beds to permanent housing options. The only solution to homelessness is housing, not transitional options that ensure that people remain homeless and in survival mode for longer than necessary.

All vacancies for these Housing with Related Support beds should also be filled using the Housing First aligned Coordinated Access process to ensure that all housing investments are dedicated to prioritizing chronically homeless individuals with the greatest depth of need. Without such dedicated housing options, the

² City of New York & ABT Associates (2011). Results of the HomeBase Research. National Alliance to End Homelessness Conference, Washington, DC. and Gale, K. & Raucher, D. (2008).



number of people with high acuity and long term homelessness will continue to increase throughout the area.

Recommendation #4: Shelter Diversion at the Front Door of the Homeless Serving System

Diversion is often misunderstood as turning people away or saying “no”. That is the wrong mindset. Diversion is about saying “yes” to helping neighbours navigate to a safe alternative to shelter that is appropriate to their specific circumstances through an investment in staff time that have specific problem solving skills and access to flexible resources to put the solution into action. For many communities such as the Region of Waterloo and Phoenix, Arizona that are getting the diversion results desired, shelter based discussions happen at the front door of shelter or through the community’s Coordinated Access process. Often, housing-focused shelters also work on rapid exits out of shelter within the first 24-48 hours after admission. These discussions should also replicate the 9 steps of diversion conversation³. Currently, the collective adoption of such an approach would greatly improve services for individuals and families seeking shelter in St. Thomas and Elgin County.

It is recommended that the homelessness prevention and shelter diversion practices incorporated into the Youth Homelessness Protocol provide the example for the region as for the inclusion of such a client focused and evidence informed strategies.

³ See Housing Focused Sheltering and the 9 Steps of Diversion tools by OrgCode Consulting, Inc..
Source: www.orgcode.com



Section 1: Overview of All Respondents



INITIAL SUMMARY OF HOMELESSNESS RESULTS – ALL DATA COMBINED

During the week of April 22-27, St. Thomas and Elgin County completed its first homeless enumeration project to identify the number, demographics and experiences of local individuals and families experiencing homelessness. Below is a summary of the findings:

- Total Number of People Experiencing Homelessness & Surveyed:
 - 109 people (plus 33 children) were identified as experiencing homelessness;
- Experiences of Homelessness:
 - 38% of these respondents are experiencing chronic homelessness
 - 17% of these respondents are experiencing episodic homelessness;
- Types of Homelessness:
 - 54 are experiencing hidden homelessness (50%);
 - 39 are experiencing sheltered homelessness (36%);
 - 7 are experiencing unsheltered or outdoor homelessness (6%);
- Health Conditions:
 - 27% of respondents are experiencing 3 or 4 co-occurring health conditions
- The majority of respondents were Single Adults between the ages of 24 and 55;
- 54 or 50% identified as male, 49 or 45% identified as female;
- 10% of the respondents are 55 years of age or older
 - 6 of these are experiencing hidden homelessness, 3 were staying in transitional housing and 2 were temporarily in their own house/apartment;
- 24% of your homeless population are youth (N=22);
 - 17 of these youth were experiencing hidden homelessness and 1 was sheltered

All Survey Respondents	2018 Data
Total Number	109
Total Number of Dependent Children	33
Additional VAWSEC Shelter Residents – Adults Only identified on Tally Sheet	17
Percentage Chronically Homeless (N=41)	38%
Percentage Episodic Homelessness (N=18)	17%
Percentage Aboriginal (N=20)	18%
Percentage Reporting a Mental Health Condition (N=57)	52%
Percentage Reporting a Chronic Health Condition (N=49)	45%
Percentage Reporting Substance Use Issues (N=33)	30%
Percentage Reporting a Physical Disability (N=33)	30%
Percentage Reporting Tri-morbidity (N=14)	13%
Percentage Reporting Family Breakdown (including abuse and conflict) as the Primary Reason for Homelessness (N=55)	50%

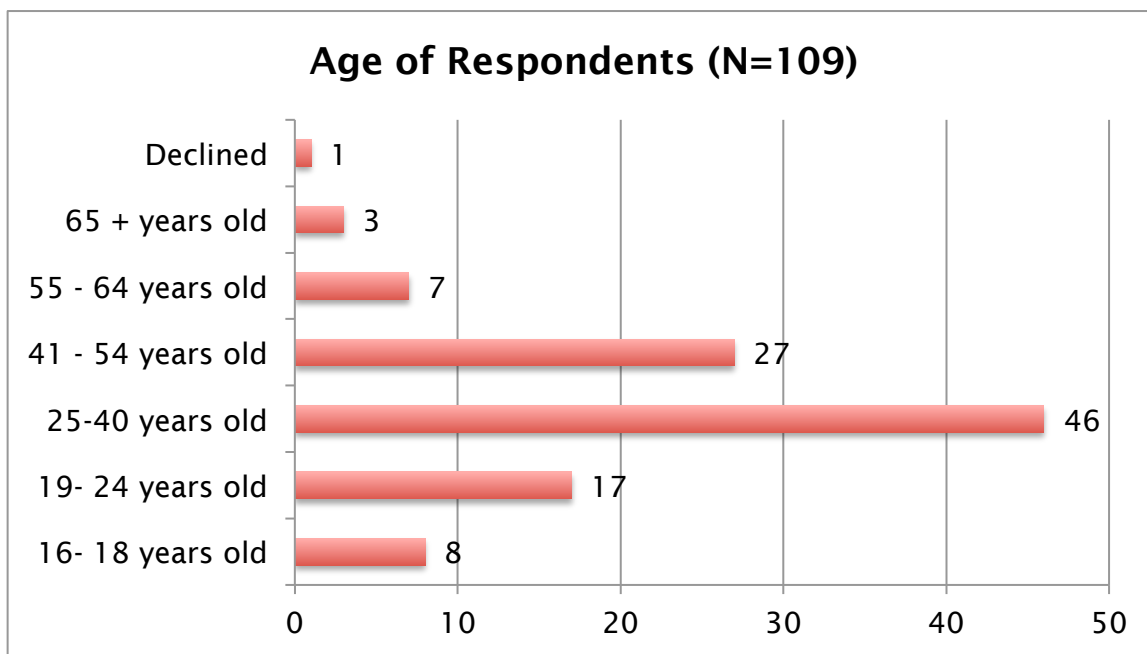


The following report provides the preliminary overview of the survey results.

DEMOGRAPHICS

Age

The average age of all survey respondents was 36 years of age and the median age was 34. The oldest person surveyed was 69 years old and the 4 youngest respondents were all 17 years old.

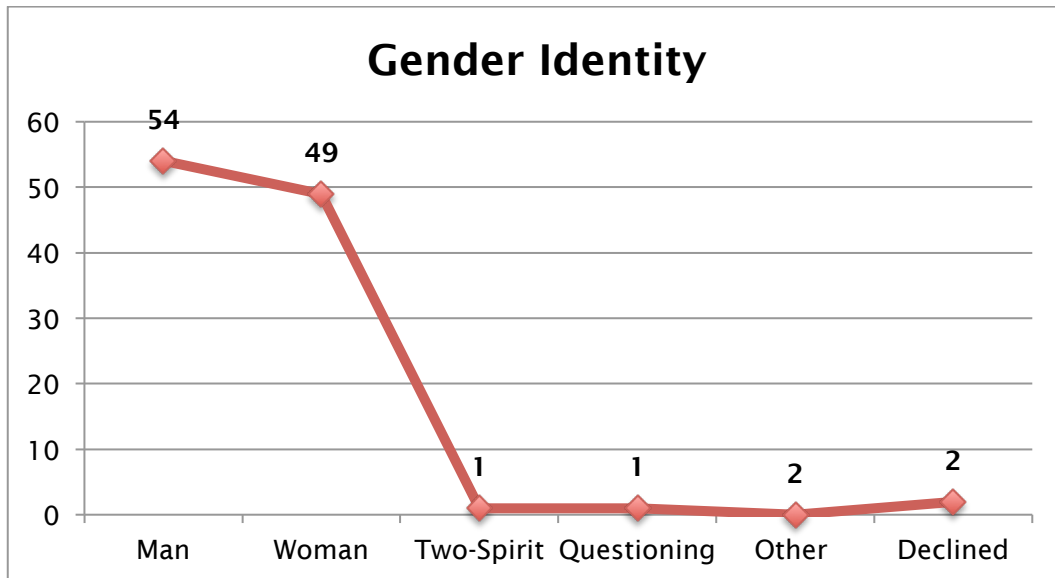


The largest group of people was those 25 through 40 years of age (42%).

Gender

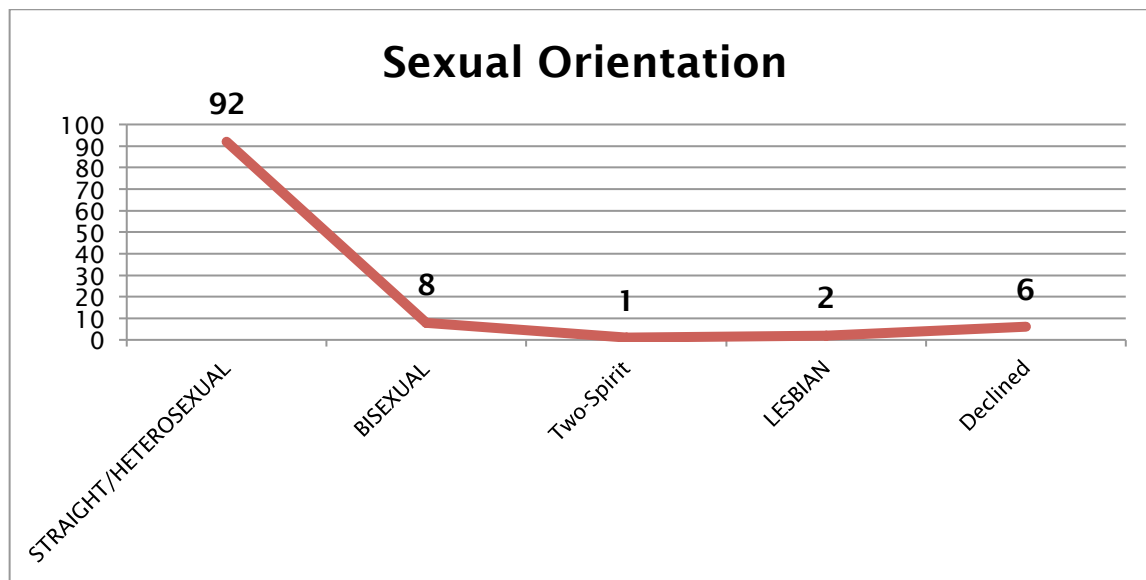
Half of the respondents identified as male, man or cisgender (50%), while 45% of people identified as female, woman or cisgender. The remaining 4% of responses included single responses for each of the following: other (not listed), questioning and two-spirit. Two additional people declined to respond to this question.





Sexual Orientation

Eighty-four percent of survey respondents identified as being straight or heterosexual. Additional sexual orientation responses follow:

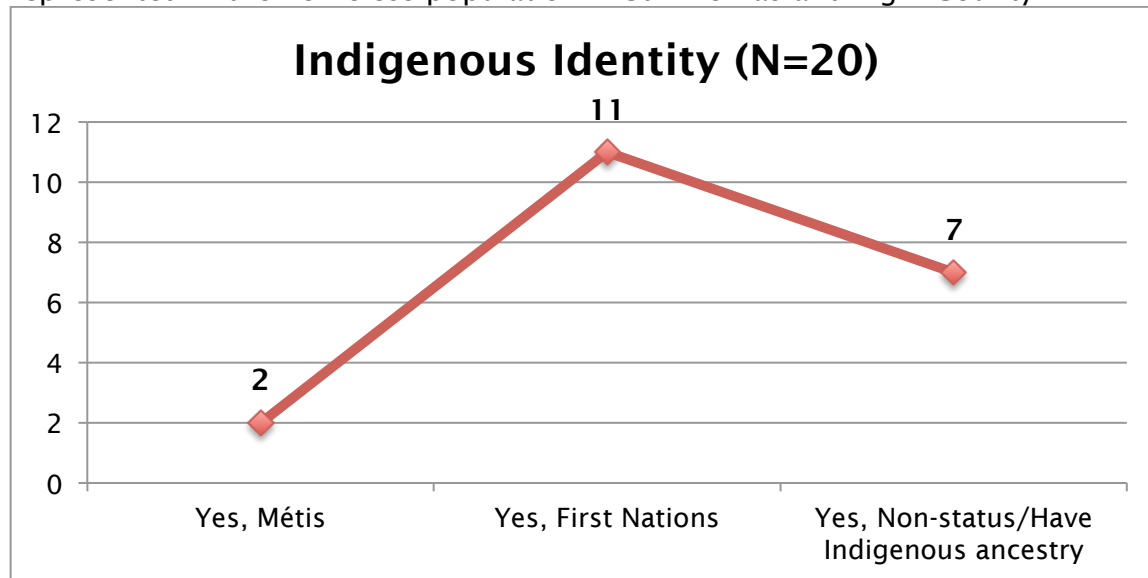


These respondents include 3 youth who identified as bisexual and 1 respondents who declined to answer this question that also identified conflicts with parents as being the reason for their current lack of stable housing.



Aboriginal or Indigenous Identity

When asked if they identified as Indigenous or had Indigenous Ancestry, 20 respondents identified that they did. At 18% of the 109 respondents identified as experiencing homelessness, the Aboriginal or Indigenous population is over-represented in the homeless population in St. Thomas and Elgin County.

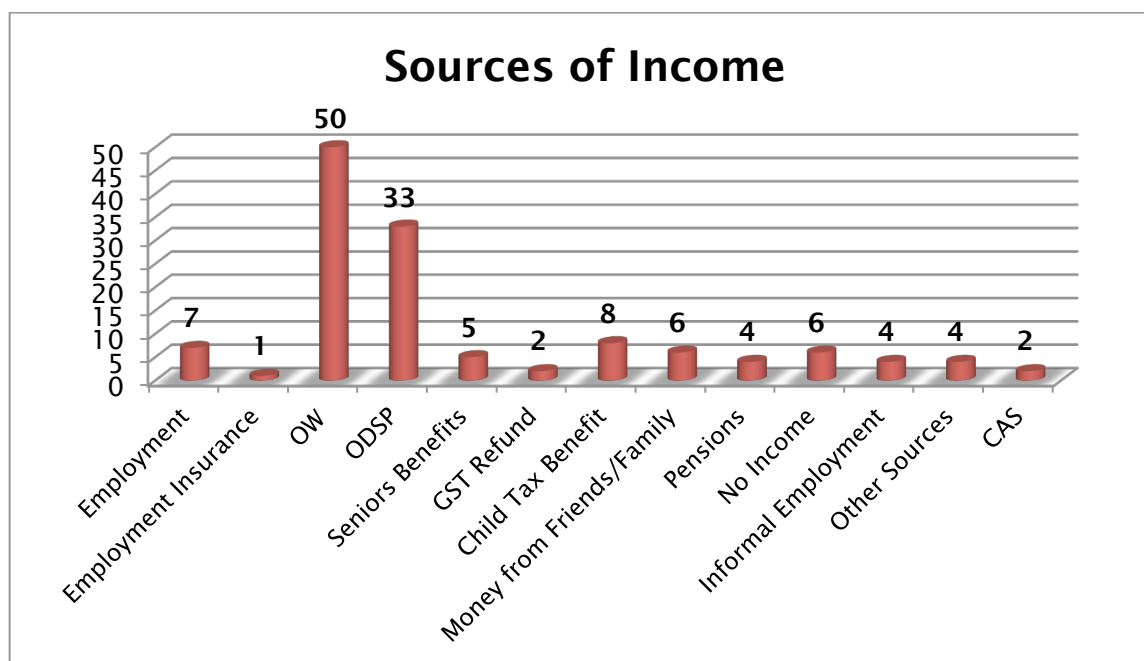


Racial Group

When asked for the racial group with which they identified, 89 of the 109 respondents identified as “White/European” (82%), 11 identified as “Aboriginal or Indigenous” (10%), 2% identified as “Black or African-Canadian”, 2 identified as Mexican-Mennonite and 2 identified as “other”. Only 4 respondents declined to answer this question.

Income

The most frequent source of income reported was welfare or income assistance (46%), followed by disability benefits (30%) and seniors benefits such as CPP/OAS/GIS/Pensions (8%). Seven people reported employment, reflecting 6%, with another 4 people identifying informal self-employment through bottle returns or panhandling. Two of the respondents identified received funds from CAS. Each respondent could provide more than one response to this question.



Military/Royal Canadian Mounted Police Service

Seven people reported having served in the Canadian Military (including the Canadian Navy, Army or Air Force), reflecting 6% of all respondents.

Immigrant, Refugee or Refugee Claimant Status

A total of 2 people identified coming to Canada as an immigrant, refugee or refugee claimant, reflecting 2% of all responses.

Relationship to St. Thomas – Elgin County

Thirty-two of the respondents moved to St. Thomas – Elgin County in the last year, reflecting 29%. In exploring the reasons for the move to the area, the vast majority of respondents identified return to their homes or families.

Foster Care Involvement

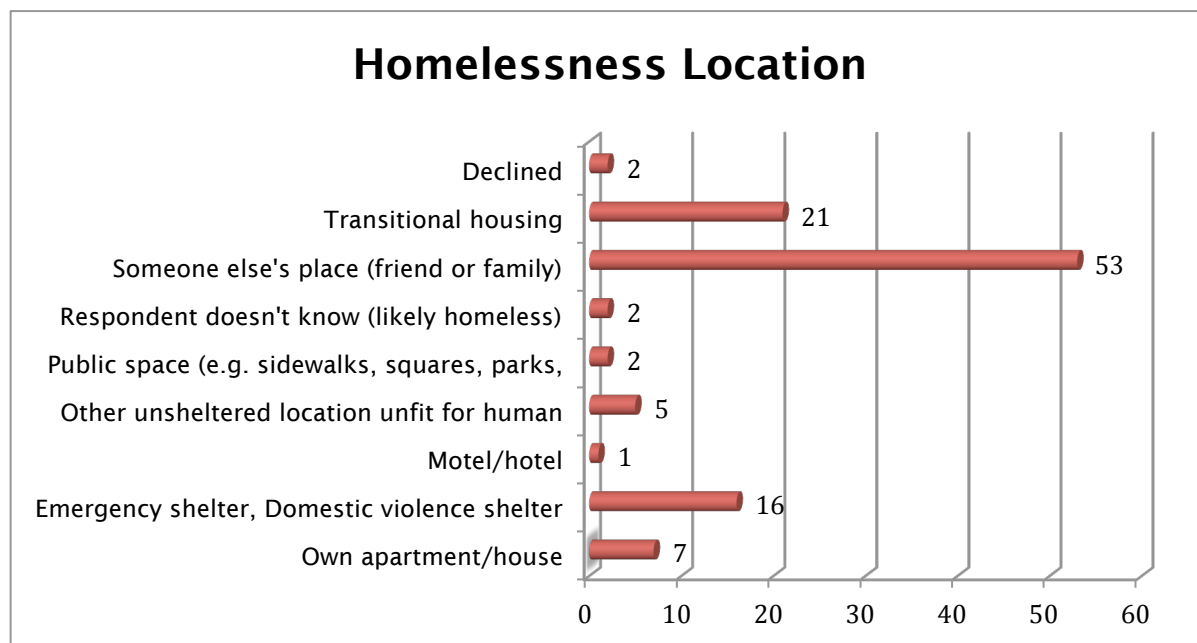
Of the 109 respondents, 33 identified that they had previous involvement with foster care, reflecting 30% of those experiencing homelessness. Of these, 27 had been involved in care more than 10 years ago.

HISTORY OF HOUSING AND HOMELESSNESS

Homelessness Location

Of the 109 people identified as experiencing homelessness, almost half spent the night at someone else's place (N=53) and another 7 were staying temporarily in their own place. Sixteen or 15% were staying in an emergency or family violence shelter.

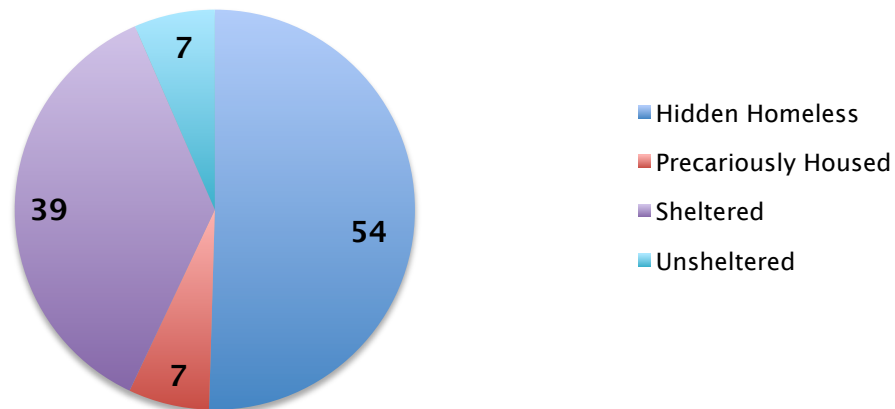
Another 19% were residing in transitional housing, and 6% were staying at an unsheltered location (including public space, makeshift shelter, vehicles, abandoned buildings or other similar places). Additional detail is included below:



Types of Homelessness

In exploring the locations where people experiencing homelessness are staying we are able to identify the type of homelessness being experienced in the region. The following chart identifies the types of homelessness and demonstrates the prominence of hidden homelessness in the region with 54 of the respondents hidden homelessness of staying with someone else or staying temporarily in a motel/hotel.

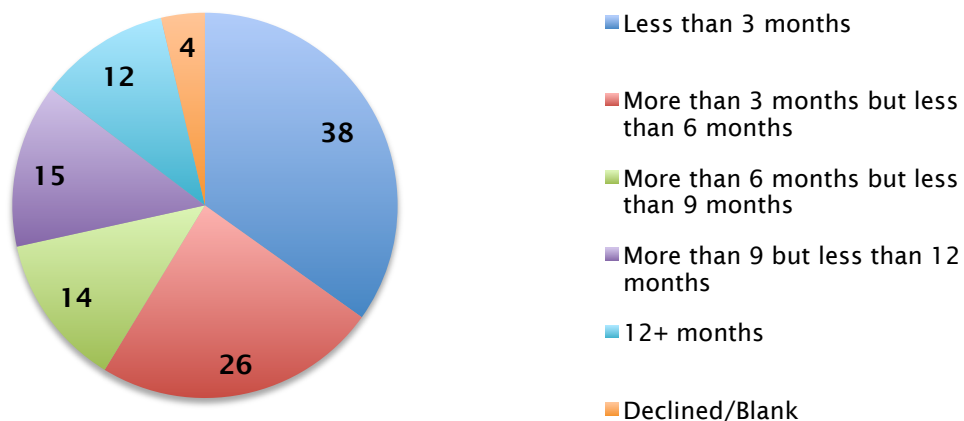
Types of Homelessness



Cumulative Homelessness Over Last Year

A total of 41 people met the definition of chronic homelessness (38%), with 6 or more months of cumulative homelessness over the last year. This identifies that 38% of the people experiencing homelessness in St. Thomas – Elgin County are experiencing lengthy periods of homelessness with 12 people identifying that they had been homeless for longer than a full year. Three of these 12 respondents identified experiencing homelessness for 24 months.

Cumulative Homelessness in Past Year



Episodes of Homelessness Over Last Year

A total of **18 people met the definition of episodic homelessness**, with 3 or more episodes of homelessness over the last year, reflecting **17%** of all respondents. Over 50% (N=56) of the respondents however identified that they had only experienced one episode of homelessness over the last year.

Reason for Most Recent Housing Loss

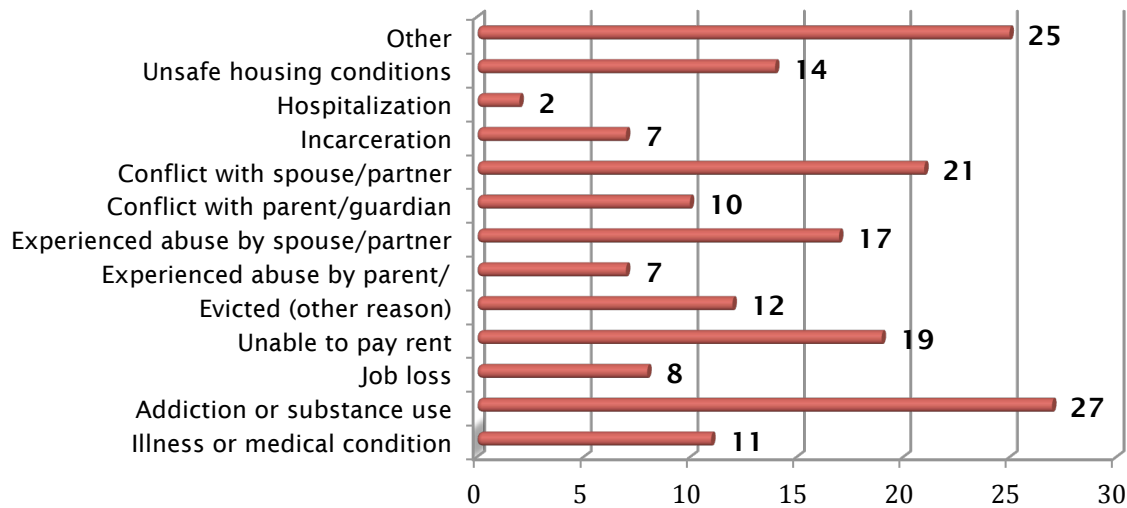
Quantifying “the reason” for homelessness proves challenging. Trying to determine the root cause when a job loss resulted in being unable to pay the rent that resulted in moving to a friend’s unsafe or overcrowded housing, which included conflict or abuse, is an exercise that often produces unclear or contradictory results. As an example, when people were asked, “What happened that caused you to lose your housing most recently?”, almost a third of the respondents gave more than one reason, and some gave as many as four different causes. Twenty-seven respondents (25%) identified addiction or substance use issues as the reason for their current homelessness. Despite 11 different options for surveyors to categorize responses, the second most frequently chosen reason was “other,” utilized by 25 or 23% of all respondents.

It is obvious that family breakdown due to abuse and/or conflict is a key factor impacting people’s journey into and experience of homelessness in St. Thomas and Elgin County. Of the 109 survey respondents, 50% identified issues related to family breakdown as a reason for their current homelessness⁴. The following reflects the reasons for most recent housing loss, with surveyors able to record responses in multiple categories, when applicable:

⁴ It must be realized that the actual number of people that are experiencing homelessness due to abuse and violence would likely be much higher than provided above since Violence Against Women Services Elgin County (VAWSEC) did not survey their current shelter residents. The Tally Sheet for the Women’s Place identified an additional 17 women that were experiencing homelessness due to violence.



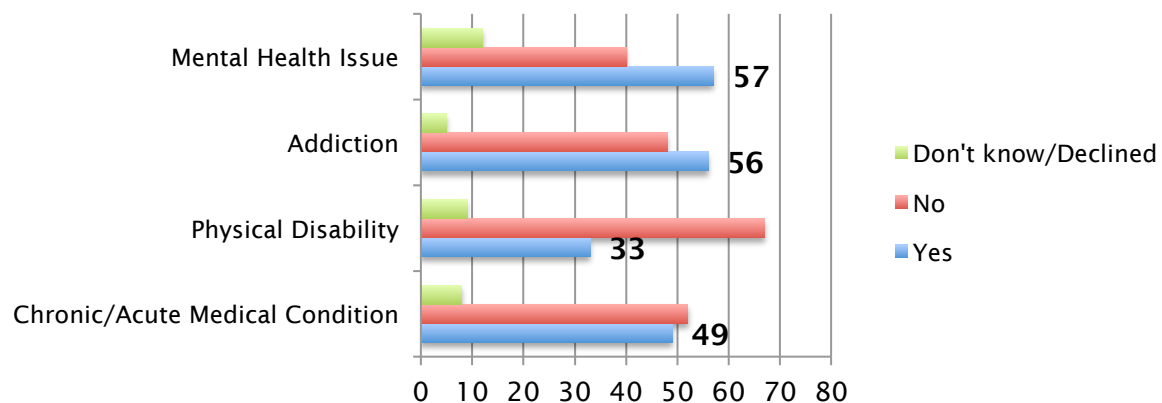
Reasons for Current Homelessness - All



Health Conditions Impacting the People Experiencing Homelessness

It is apparent that the people experiencing homelessness in St. Thomas – Elgin County are generally unwell. The most commonly identified health concern was compromised mental wellness with 57 people or 52% of all respondents identifying mental health issues. Fifty-six people (51%) identified experiencing addiction or substance use issues, 49 (45%) identified having a chronic or acute medical condition and an additional 33 respondents identified having a physical disability. From the four choices available, 14 respondents identified have all 4 health concerns (13%) and an additional 15 identified as experiencing 3 of the conditions (14%)

Health Conditions



Section 2: Unaccompanied Single Adults



Of the 109 people that completed the homeless enumeration survey in St. Thomas and Elgin County, 65 were unaccompanied single adults, 25 years of age and older. The following section provides details on this population of single individuals experiencing homelessness and highlights strategic approaches that must be taken to prevent and end homelessness throughout the region in the future.

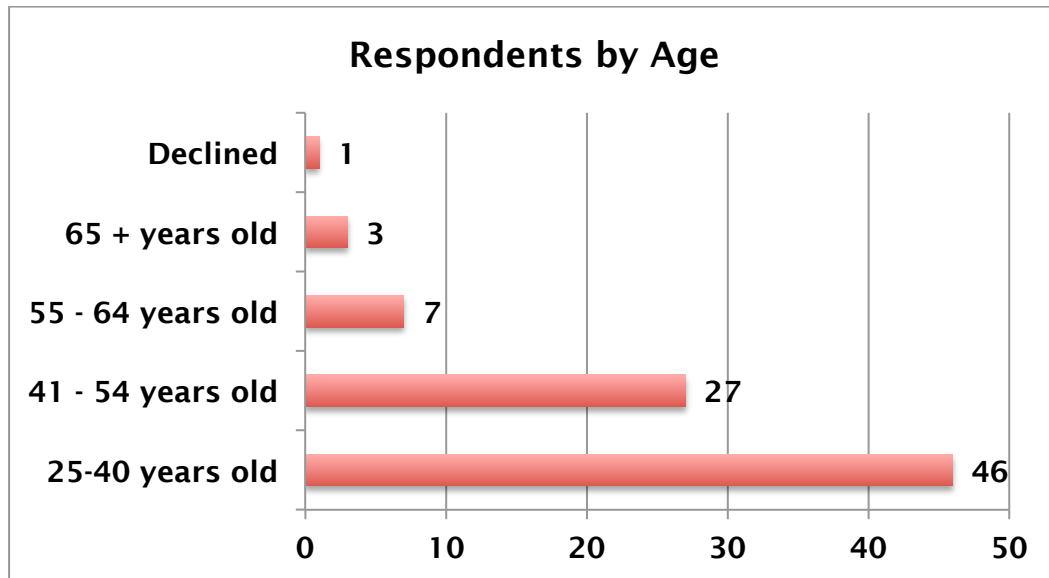
Unaccompanied Single Adults	2018 Data
Number	65
Percentage Chronically Homeless (N=23)	36%
Percentage Episodic Homelessness (N=11)	17%
Percentage Aboriginal (N=18)	27%
Percentage Reporting a Mental Health Condition (N=33)	51%
Percentage Reporting a Chronic Health Condition (N=34)	52%
Percentage Reporting Substance Use Issues (N=39)	60%
Percentage Reporting a Physical Disability (N=24)	37%
Percentage Reporting Tri-morbidity (N=14)	22%
Percentage Reporting Family Breakdown (including abuse and conflict) as the Primary Reason for Homelessness (N=18)	28%

DEMOGRAPHICS

Age

The majority of single adults that responded to the homeless enumeration survey were between the ages of 25 and 40 years of age (71%) and 42% were between the ages of 41 and 54 years. Ages ranged from 25 years of age to 69 years of age and the average age was 42 years. Of the 46 respondents that were 40 or younger, 27 (59%) were between 30 and 37 years of age.

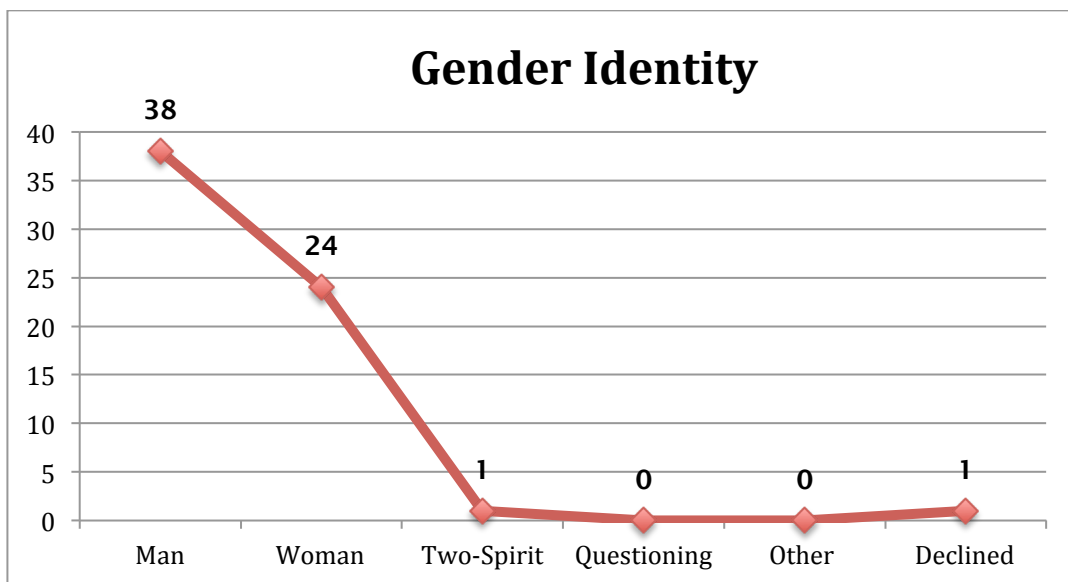




Gender & Sexual Orientation

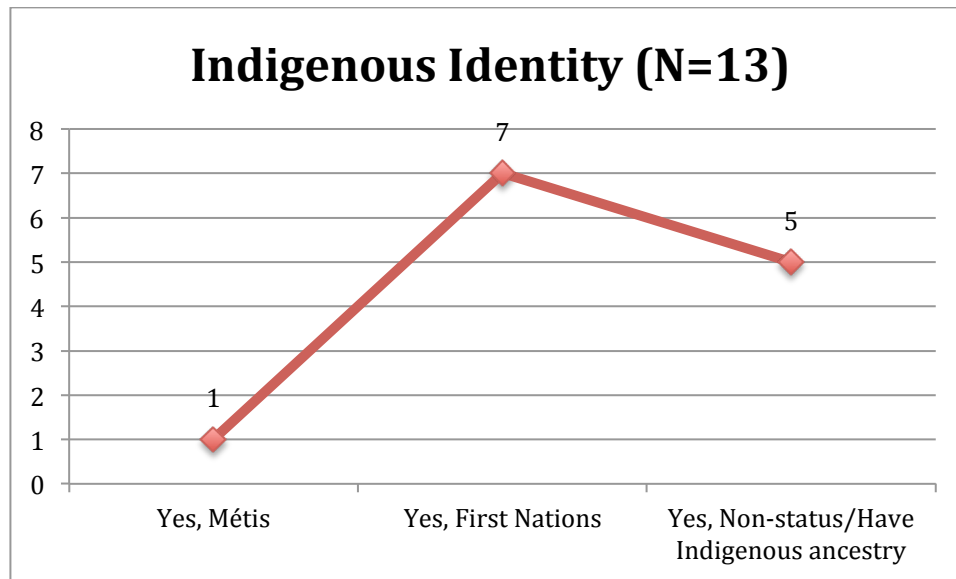
Of the 65 unaccompanied singles, 38 identified as male/man (58%) and 24 identified as female/woman (37%) and 1 identified as two-spirited.

In exploring the responses regarding sexual orientation, 82% identified as heterosexual or straight, 6% declined to respond to the questions and the remaining 12% identified as bisexual or lesbian.



Indigenous Identity

Of the 65 unaccompanied single adults experiencing homelessness, 13 or 20% of the respondents identified as Indigenous or Indigenous ancestry. As is the scenario with most Canadian communities, Indigenous people are over-represented in the population experiencing homelessness in St. Thomas and Elgin County.

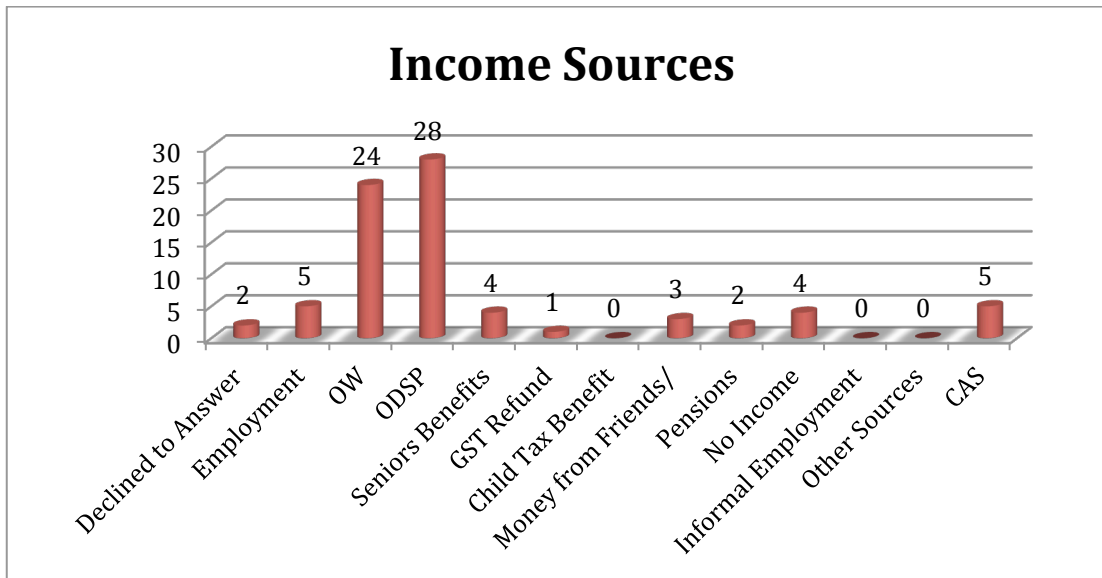


Racial Group

When asked if they identified with a particular racial or ethnic group, 51 (78%) identified as White/Caucasian, 8 (12%) identified as Indigenous and the remaining single adults declined to answer or responded “don’t know”.

Income

In responding to the question related to formal and income sources, 80% of the survey respondents identified income support benefits (OW) or disability payments (ODSP). Five respondents identified receiving money from Children’s Aid Society, 4 singles identified not having any income sources (formal or informal) and 4 received seniors benefits. The following demonstrates the responses provided.



Military Service

Five people reported having served in the Canadian Military (including the Canadian Navy, Army or Air Force), reflecting 8% of all single adult respondents.

Immigrant, Refugee or Refugee Claimant Status

Of the 64 people that responded to this question, no single adults identified that they came to Canada as an immigrant, refugee or refugee claimant.

Relationship to St. Thomas – Elgin County

Eleven of the unaccompanied single respondents moved to St. Thomas – Elgin County in the last year, reflecting 17%. In exploring the reasons for the move to the area, the vast majority of respondents identified returning to their homes or connections with families and/or friends.

Foster Care Involvement

Of the 65 unaccompanied adult respondents, 18 identified that they had previous involvement with foster care, reflecting 28% of those experiencing homelessness. Of these, 15 had been involved in care more than 10 years ago.

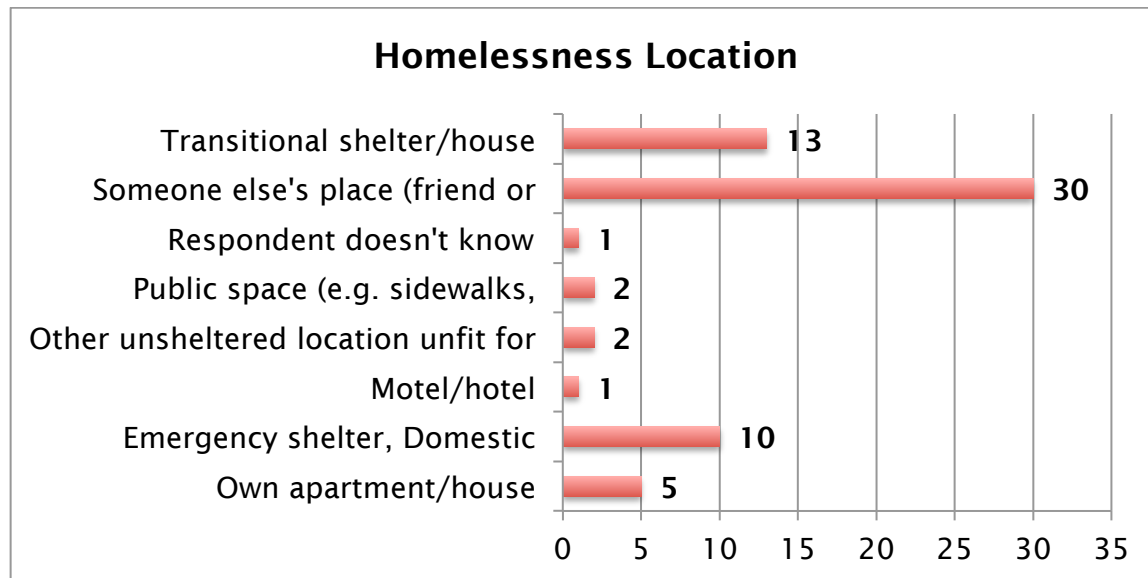
HISTORY OF HOUSING AND HOMELESSNESS

Homelessness Location

Of the 65 unaccompanied adults identified as experiencing homelessness, almost half spent the night at someone else's place (N=30) and another 5 were staying temporarily in their own place. Ten or 15% were staying in an emergency or family violence shelter.

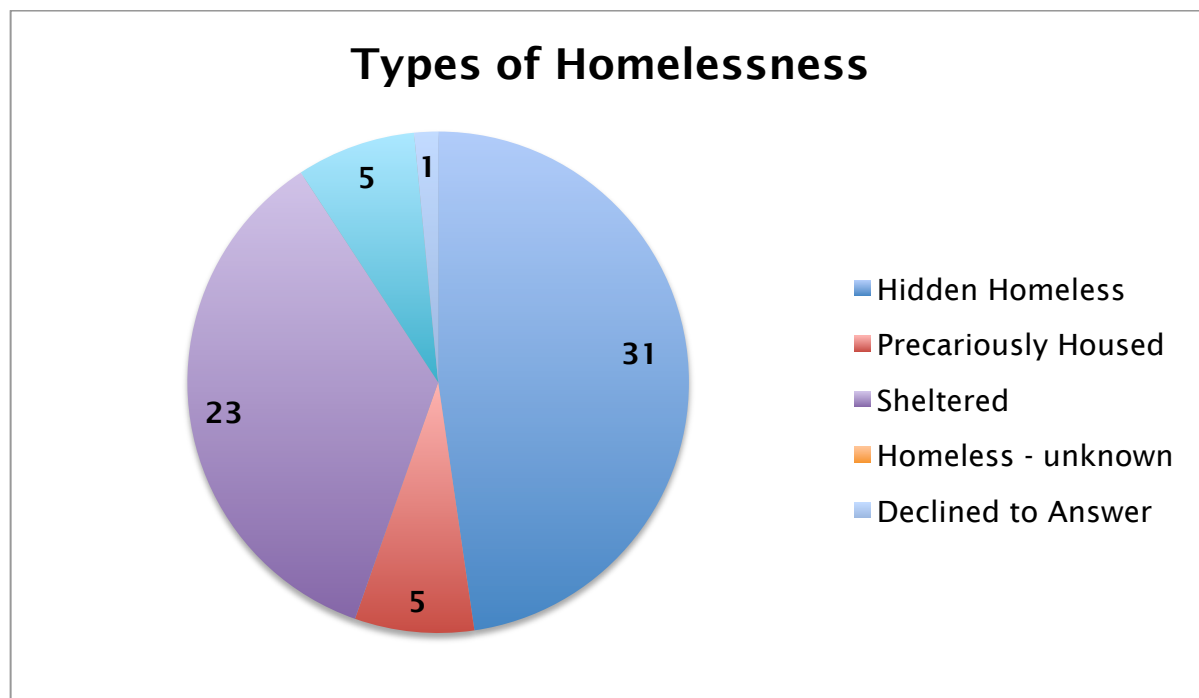


Another 20% were residing in transitional housing, and 8% were staying at an unsheltered location (including public space, makeshift shelter, vehicles, abandoned buildings or other similar places). Additional detail is included below:



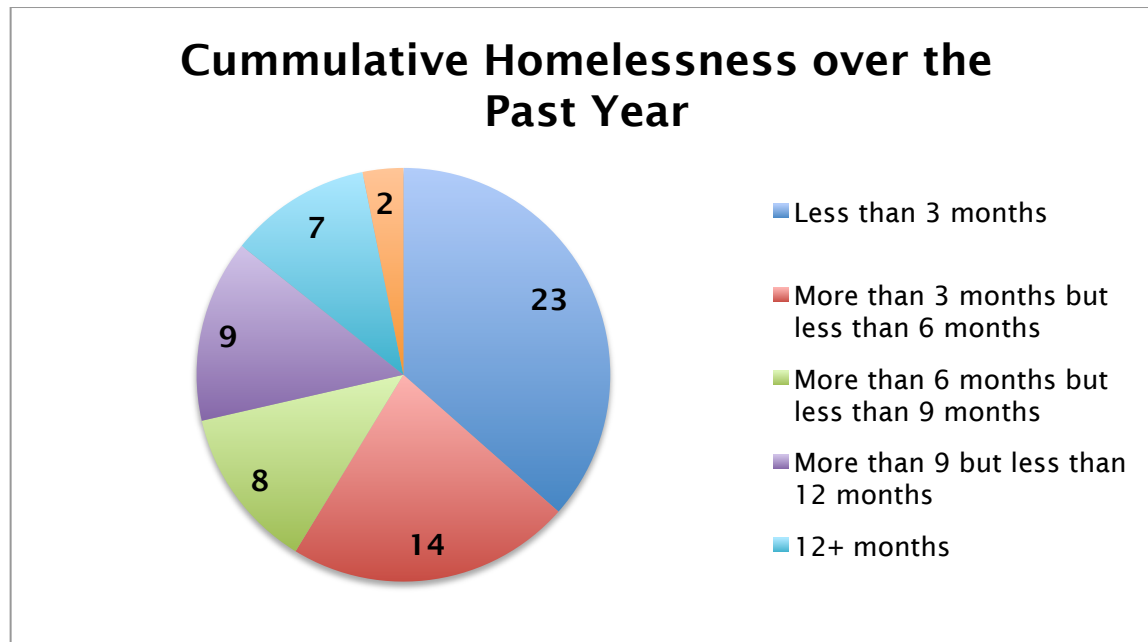
Types of Homelessness

In exploring the locations where people experiencing homelessness are staying, we are able to identify the type of homelessness being experienced in the region. The following chart identifies the types of homelessness and demonstrates the prominence of hidden homelessness in the region with 31 of the respondents experiencing hidden homelessness of staying with someone else or staying temporarily in a motel/hotel.



Cumulative Homelessness Over Last Year

A total of **24 people met the definition of chronic homelessness (37%)**, with 6 or more months of cumulative homelessness over the last year. This identifies that 37% of the people experiencing homelessness in St. Thomas – Elgin County are experiencing lengthy periods of homelessness with 7 people identifying that they had been homeless for longer than a full year. Two of these 7 respondents identified experiencing homelessness for 24 months.



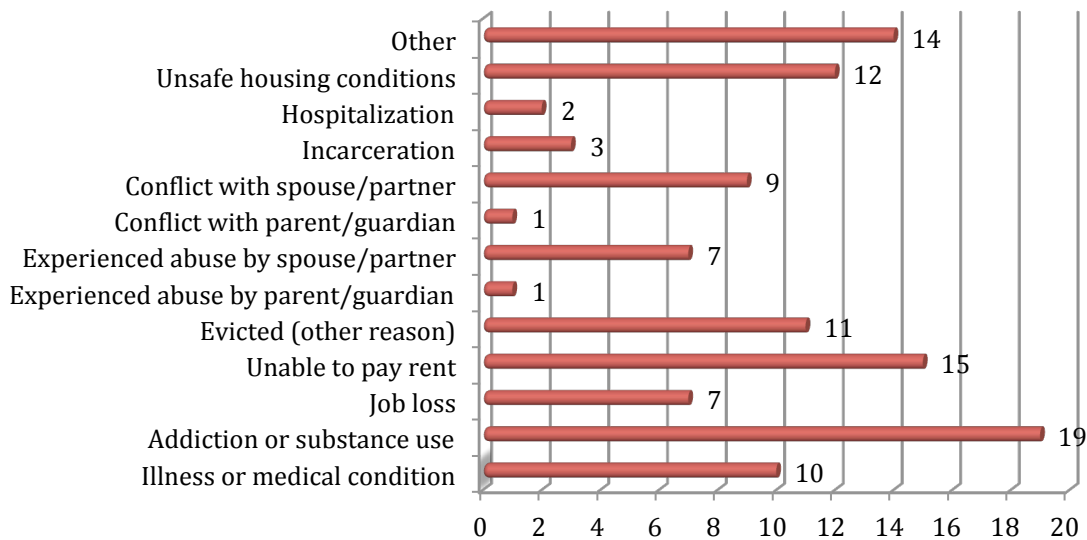
Episodes of Homelessness Over Last Year

A total of **11 people met the definition of episodic homelessness**, with 3 or more episodes of homelessness over the last year, reflecting 17% of all respondents. Over 50% (N=34) of the respondents however identified that they had only experienced one episode of homelessness over the last year.

Reason for Most Recent Housing Loss

Eighteen single adults (28%) identified family conflict or abuse as the primary reason for their current homelessness while 19 respondents (29%) identified addiction or substance use issues as the reason for their current homelessness. Unable to pay rent was identified by 15 respondents. Despite 11 different options for surveyors to categorize responses, the second most frequently chosen reason was “other,” utilized by 14 or 22% of all respondents. The following reflects the reasons for most recent housing loss, with surveyors able to record responses in multiple categories, when applicable:

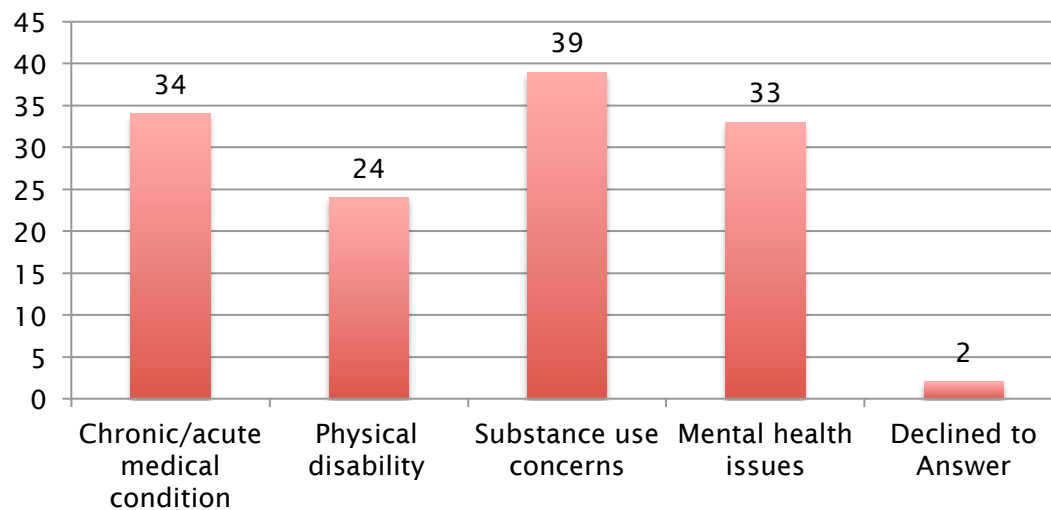
Reasons for Current Homelessness



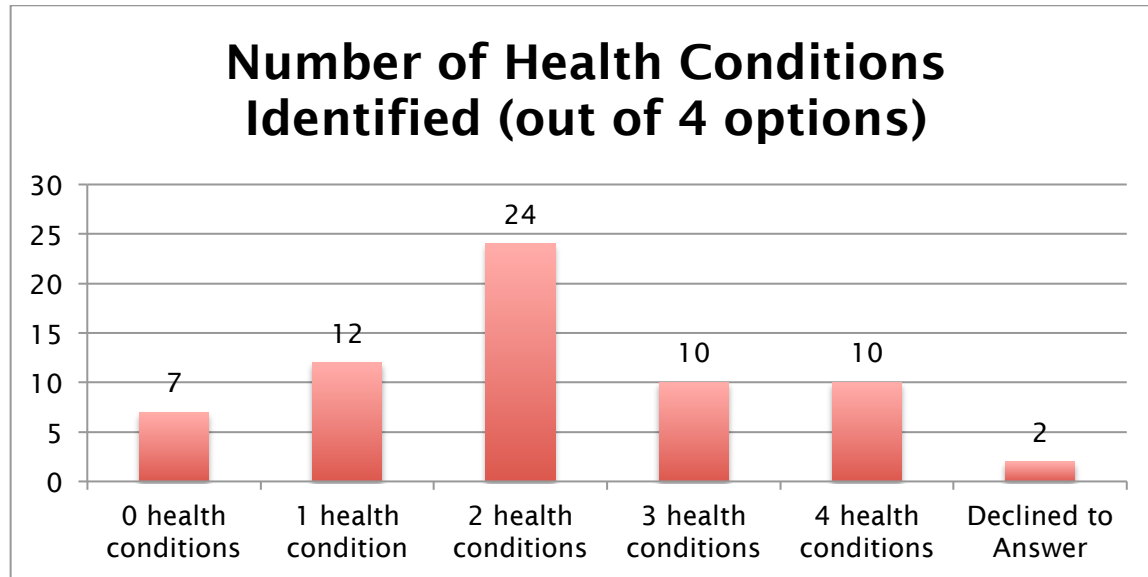
Health Conditions Impacting Respondents

Physical health, mental health and substance use concerns are ongoing challenges for unaccompanied single adults experiencing homelessness in St. Thomas and Elgin County. Of the adult respondents that identified health concerns impacting their daily functioning, 60% identified substance use issues, 52% identified chronic/acute medical conditions, 51% identified compromised mental wellness and 37% identified having a physical disability.

Health Conditions for Single Adults



As identified in the table below, the majority of respondents identified 2 or more health conditions impacting their life with 14 people meeting the definition of tri-morbidity meaning that they self reported having concurrent mental health, substance use and physical health concerns.



Section 3: Families



As part of the 2018 Homeless Enumeration activities, family-specific locations were identified for on-site surveying. During the specified survey times, 22 families were interviewed. To be considered a family-household, there was at least one head of household and one or more dependent children under the age of 18 years. It must be realized that the shelter residents Violence Against Women Services Elgin County (VAWSEC) provided the number of women staying at the Women's Place during the homeless enumeration project. At present, we know that an additional 17 women were experiencing homelessness in the County due to family violence but we are uncertain how many of these women were also accompanied by dependent children. The information regarding family homelessness provided here must therefore be identified as a stark under-representation of the number of families experiencing the trauma of homelessness locally.

Of the 22 households surveyed, 19 households identified as being one-parent households. The total number of dependent children identified in the surveys was 33 with a range in ages from 3 months to 18 years.

The following table provides an overview of the families experiencing homelessness in St. Thomas and Elgin County:

Families (at least one head of household and one or more children under 18)	2018 Data
Number of Households Surveyed	22
Number of Dependent Children	33
Percentage Chronically Homeless (N=8)	36%
Percentage Episodic Homelessness (N=1)	5%
Percentage Aboriginal (N=6)	27%
Percentage Reporting a Mental Health Condition (N=9)	41%
Percentage Reporting Substance Use Issues (N=10)	45%
Percentage Reporting a Chronic Health Condition (N=8)	36%
Percentage Reporting a Physical Disability (N=5)	23%
Percentage Reporting Tri-morbidity (N=3)	14%
Family Breakdown, including conflict and abuse as the cause of Homelessness (N=20)	91%
Additional Families Observed but not Surveyed at VAWSEC	17

DEMOGRAPHICS

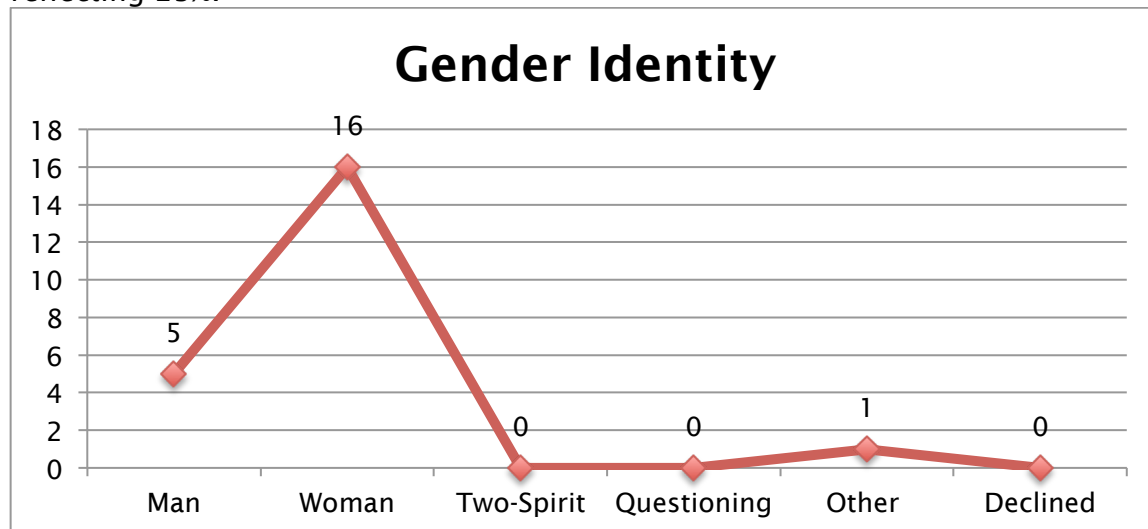
Age

The average age of all family respondents was 34 years old. The oldest family member surveyed was 51 years old, and the youngest family was 18 years old.

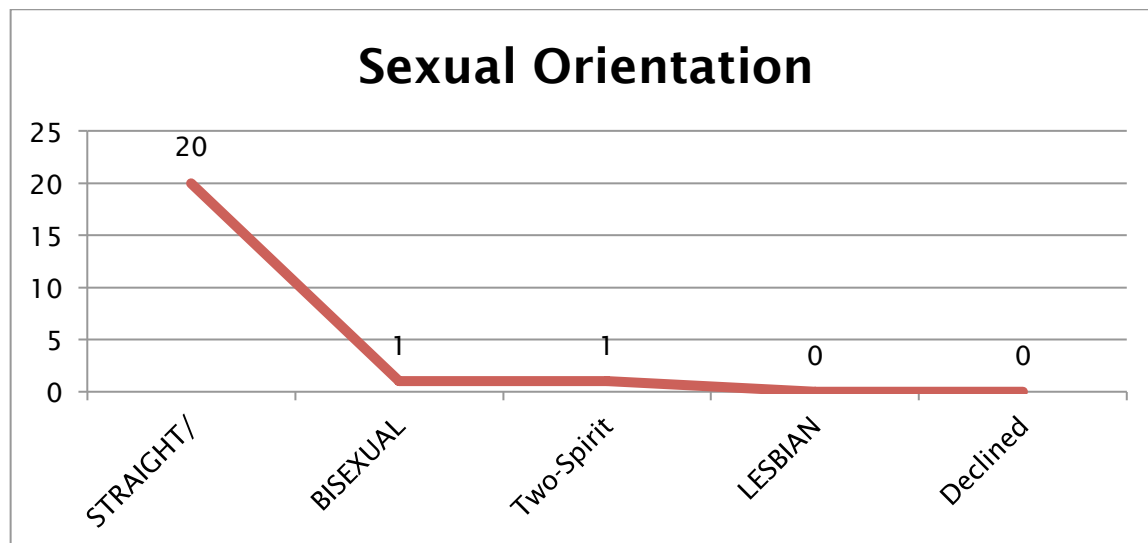


Gender and Sexual Orientation

Of the family respondents, 16 identified as female (73%) and 5 identified as male, reflecting 23%.

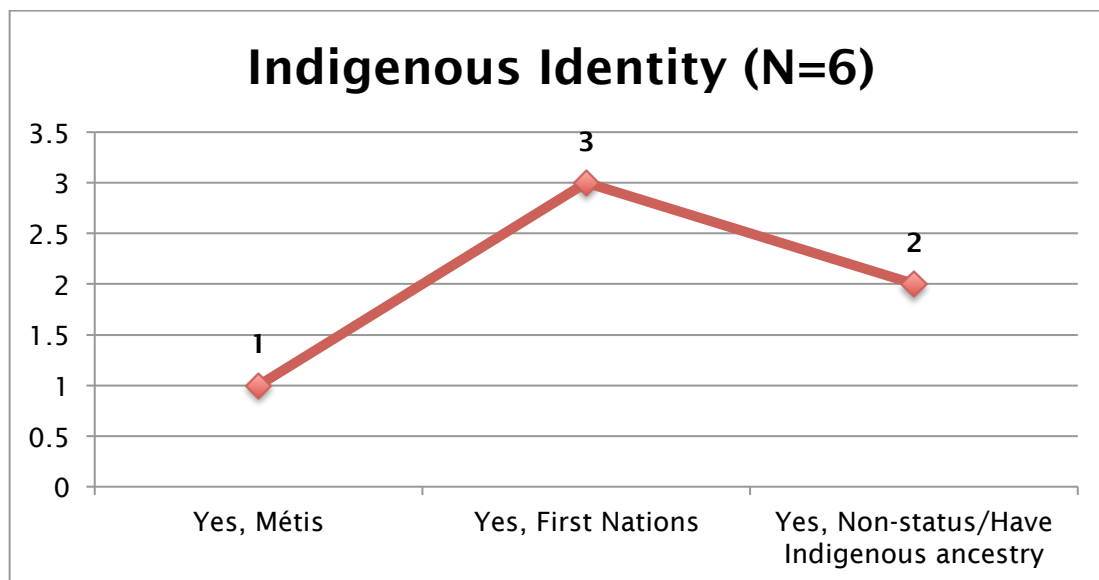


Twenty respondents (91%) identified being heterosexual/straight with 9% of the respondents reflecting an LGBTQ2S orientation.



Indigenous Identity

Six households identified as Indigenous or of Indigenous descent, reflecting 27%.

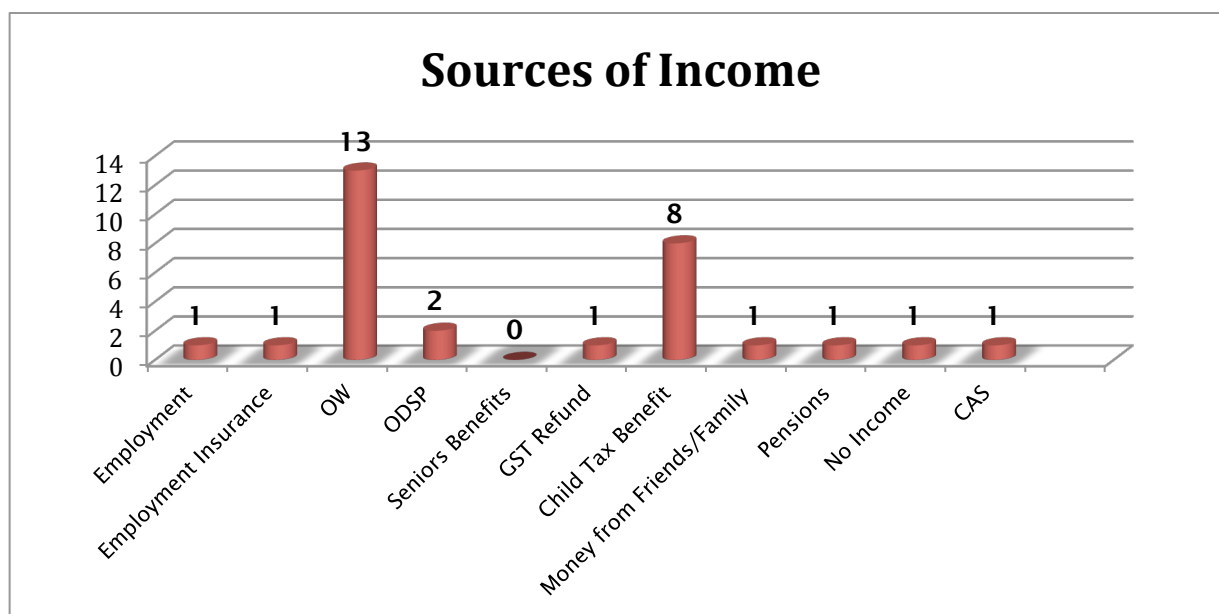


Racial Group

When asked if they identified with a particular racial or ethnic group, 20 of the family respondents identified White/European (91%) and 2 respondents identified Indigenous.

Income Sources

The majority of family respondents identified their primary source of income as income support benefits (OW), reflecting 59% and an additional 36% identified Child Tax Benefits.



Immigrant, Refugee or Refugee Claimant Status

Only 1 family identified coming to Canada as an immigrant but this respondent had been in the area for longer than a year.



Relationship to St. Thomas and Elgin County

Thirteen respondents (59%) identified that they had moved to the area within the past year. Three families identified fleeing abuse or conflict while the other respondents being from the area or moving here to be with family and/or friends.

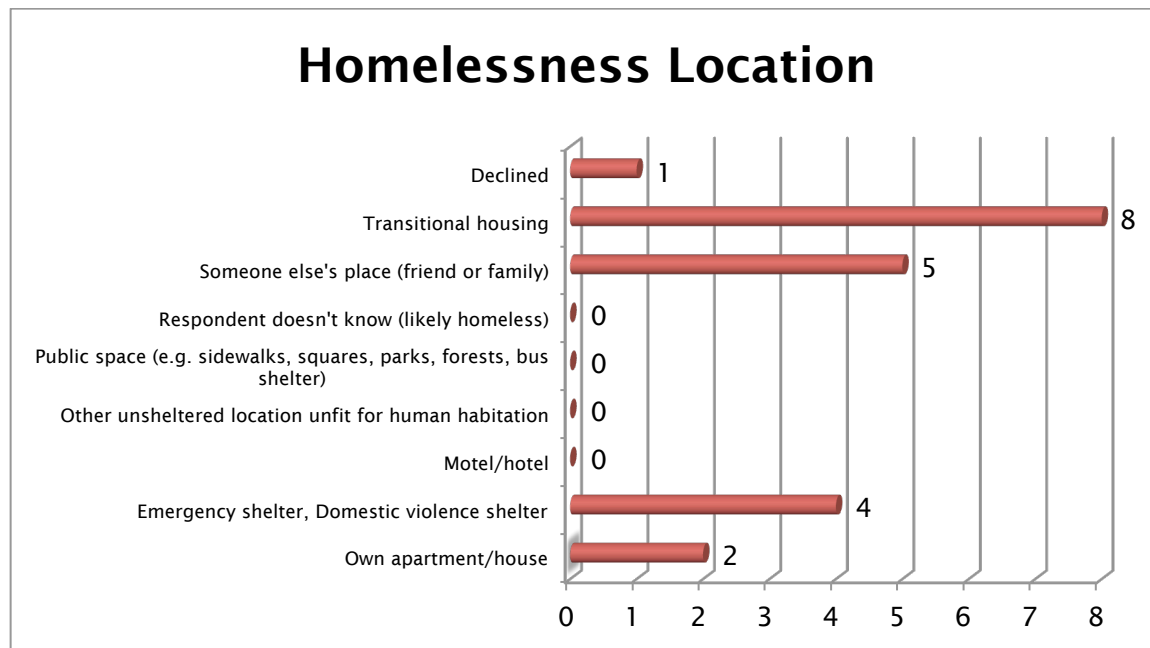
Involvement with Foster Care System

Five of the family respondents identified that they had previously been involved with foster care or lived in a group home. This previous involvement with foster care happened between 9 months ago (indicating a potential discharge to homelessness) to 15 years ago.

HISTORY OF HOUSING AND HOMELESSNESS

Homelessness Location

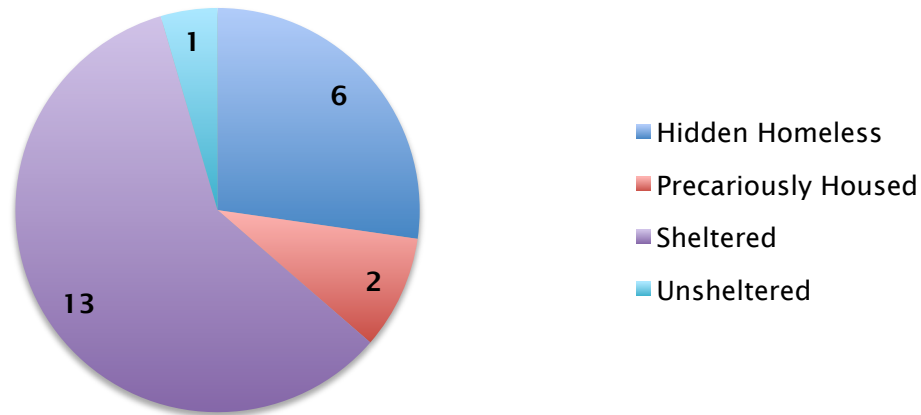
Of the 22 families identified as experiencing homelessness during the April 2018 homeless enumeration project, 8 identified staying in Transitional Housing (36%), 5 identified staying at someone else's place and 4 identified staying at an emergency shelter or family violence shelter. Two families were currently able to stay temporarily in their own unit. Unfortunately, 2 families identified staying in an unsheltered location not meant for human habitation.



As can be seen in the below chart, the majority of families experienced sheltered homelessness (59%) and 6 families experiencing hidden homelessness (27%).



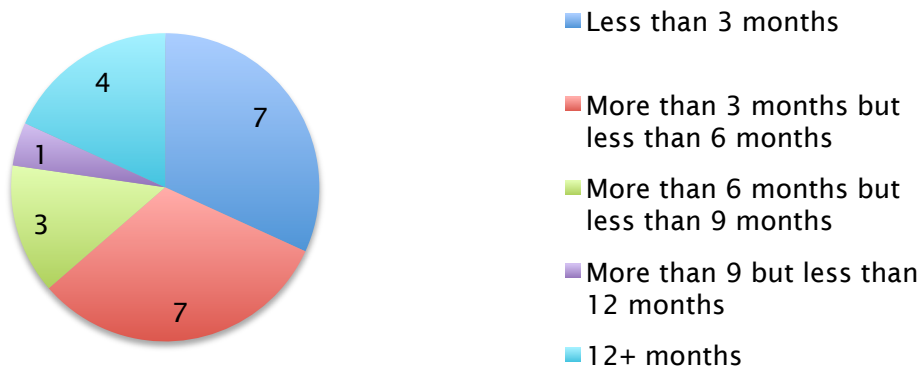
Types of Homelessness



Cumulative Homelessness Over the Past Year

The majority of families (64%) experienced less than 6 months of homelessness in the last year. Eight families met the definition of chronic homelessness since they had experienced six or more months of homelessness in the past year.

Cummulative Homelessness for Families

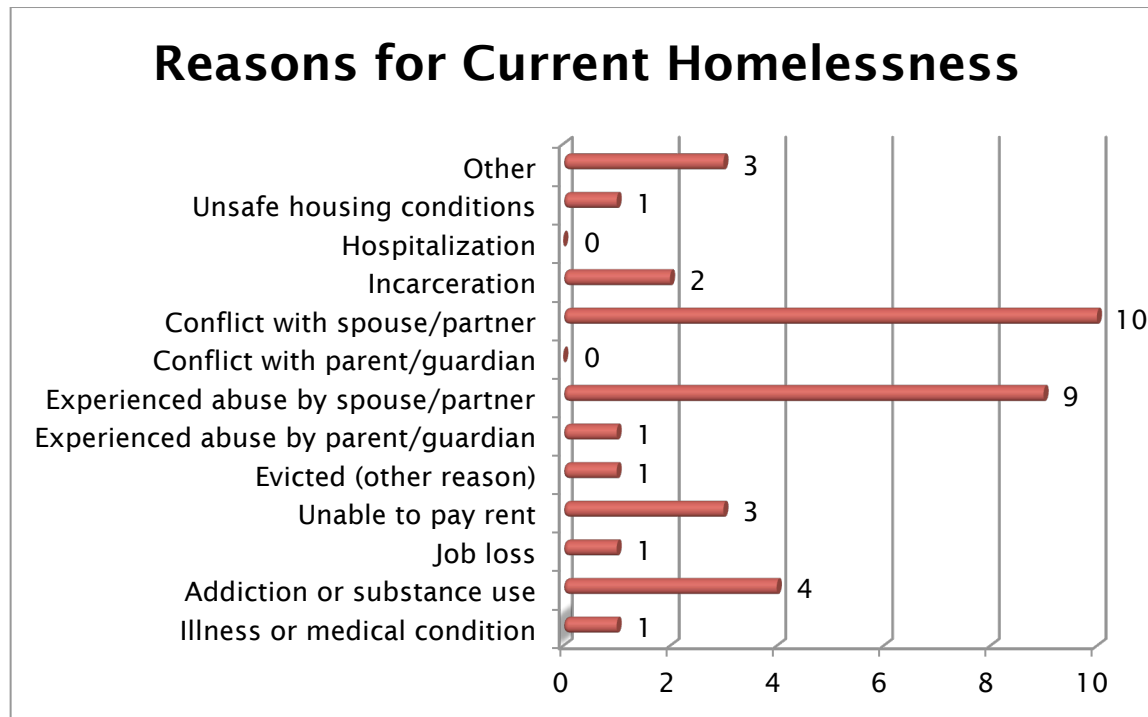


Episodes of Homelessness

The majority of families (82%) surveyed also disclosed that they had experienced just 1 episode of homelessness in the past year, although 2 of those families had experienced a full year of homelessness. Three families met the definition of episodic homelessness having experienced 3 distinct episodes of homelessness in the past year.

Reasons for Most Recent Homelessness Episode

In determining the reasons behind each family's current homelessness, conflict and abuse within the family unit was the primary reason identified by 20 survey respondents, reflecting 91%. Recognizing that The Women's Place (VAWSEC) did not administer the homeless enumeration survey with their current shelter guests, it must be acknowledged that the full extent of the impact of violence in the lives of families locally is gravely underestimated at the present time⁵. Such health issues as illness and substance use were identified by 5 survey respondents.



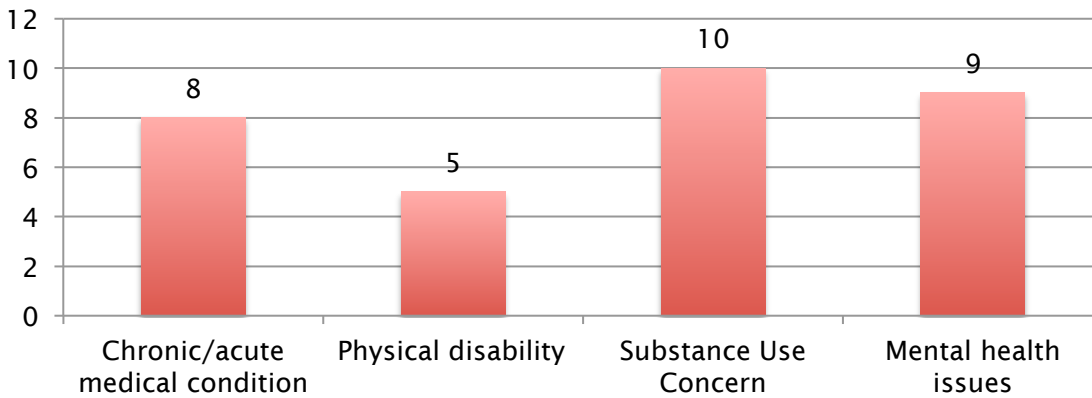
Health Conditions

The health of families experiencing homelessness in St. Thomas and Elgin County is concerning, especially when considering the impact of continued homelessness on their existing health issues. Currently, as can be seen below, 8 families (36%) identified a chronic or acute medical condition, 5 families (23%) identified a physical disability, 10 families (45%) identified experiencing substance use concerns and 9 (41%) self-reported mental health concerns.

⁵ The Violence Against Women Services of Elgin County (VAWSEC) provided the Tally Sheet identifying that 17 female shelter guests were onsite. Since the Tally Sheet captures information on "observed homelessness" without surveying, we are uncertain of the number of children also assisted by this agency during the week of the enumeration project.

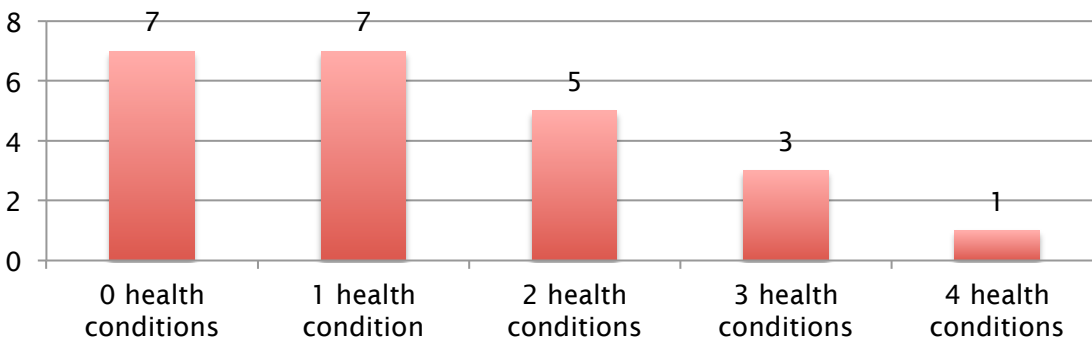


Health Conditions Identified by Families



Although 7 families identified that they currently did not have any health concerns and 7 identified such 1 health issue, 9 families (41%) identified co-occurring issues with 3 families (14%) meeting the definition of tri-morbidity due to concurrent mental health, physical health and substance use concerns impacting their stability. Empirically, it has been demonstrated that households with complex and co-occurring health risk are not only more medically vulnerable if their homelessness continues but they will likely require more intensive supports to return to housing stability in the community.

Number of Health Conditions Identified by Family Respondents (of 4 choices)



Section 4: Youth



During the 2018 Homeless Enumeration Project in St. Thomas and Elgin County, 26 unaccompanied youth between the ages of 16 and 24 were identified as experiencing homelessness. Youth specific agencies and programs ensured that as many unaccompanied youth as possible were connected with during the April event.

The table below identifies a summary of the issues impacting unaccompanied youth experiencing homelessness and identify the need to continue enhancing outreach, shelter, and re-housing supports for these youth locally.

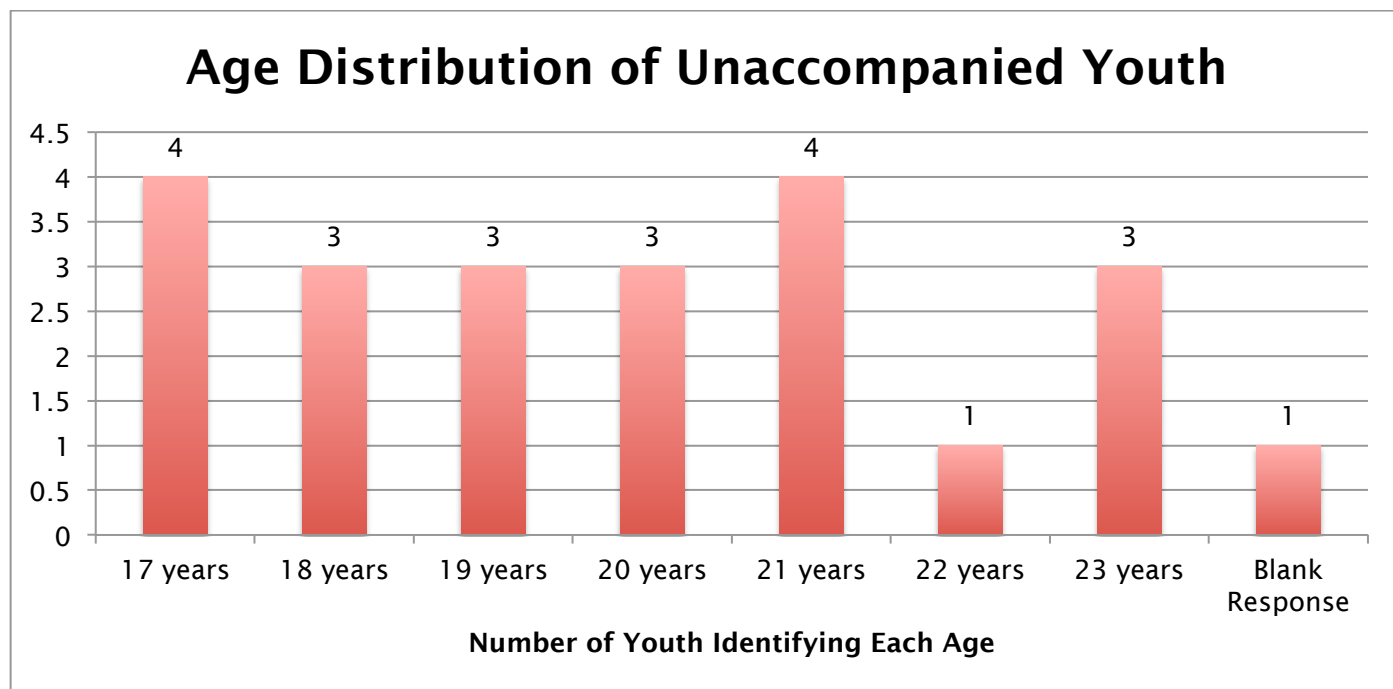
Youth (between the ages of 16 and 24)	2018 Data
Number of Youth Surveyed	22
Percentage Chronically Homeless	41%
Percentage Episodic Homelessness	27%
Percentage Aboriginal (N=1)	5%
Percentage Reporting a Mental Health Condition (N=14)	64%
Percentage Reporting a Chronic Health Condition (N=7)	32%
Percentage Reporting Substance Use Issues (N=7)	32%
Percentage Reporting Tri-morbidity (N=4)	18%
Family Breakdown, including conflict and abuse as the cause of Homelessness (N=16)	73%

DEMOGRAPHICS

Age

The average and median age of all youth respondents was 20 years old. The oldest youth surveyed was 23 years old, and the youngest was 17 years old.





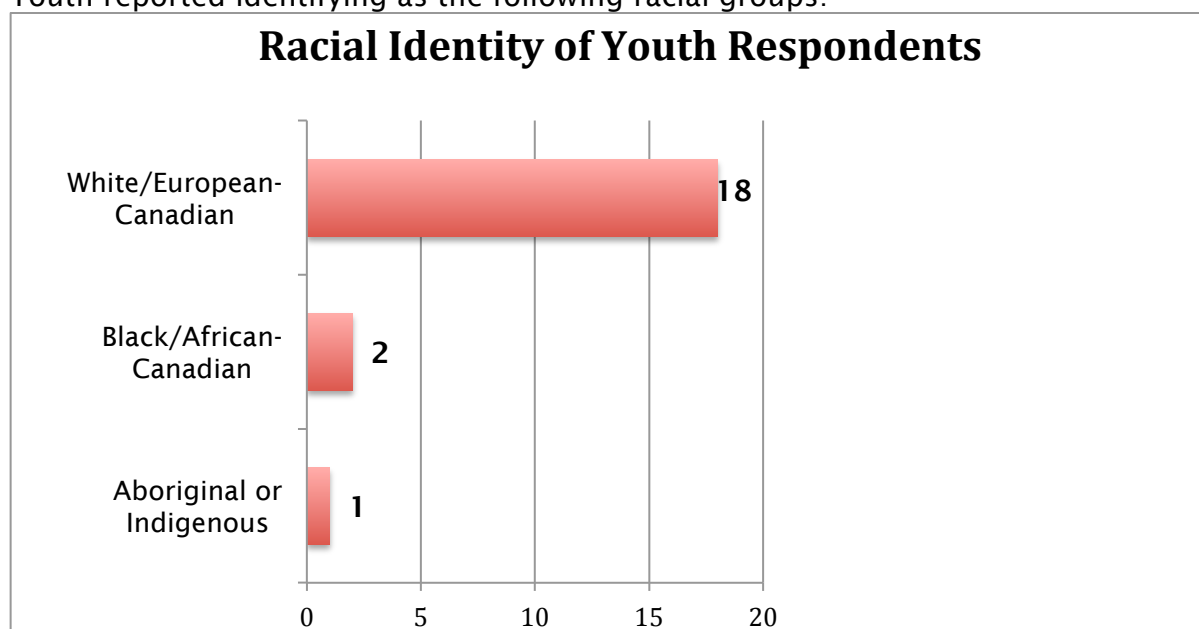
Gender and Sexual Orientation

A total of 42% of youth identified as male, man or cisgender, while 50% identified as female, woman or cisgender. One youth identified as “questioning” and another identified “other”, accounting for the remaining 8% of results.

Twenty-two youth (85%) identified their sexual orientation as straight/heterosexual and 4 youth (15%) identified as bisexual.

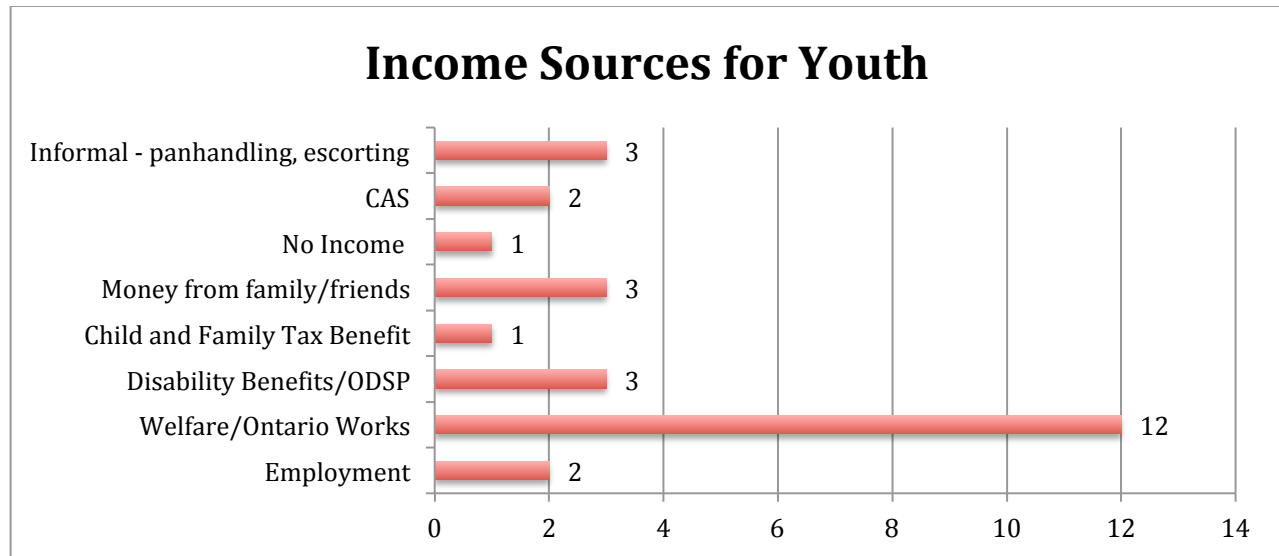
Racial Group

Youth reported identifying as the following racial groups:



Income

More than half of youth reported receiving income assistance/Ontario Works (55%). Only 2 youth reported more than one source of income and both of those responses were from informal sources such as family/friends or panhandling. One youth reported receiving no income (5%).



Military/Royal Canadian Mounted Police Service

Two youth reported having served in the Canadian Military (including the Canadian Navy, Army or Air Force), whereas 6% of all households (combined), 8% of all unaccompanied individual respondents and 0 families reported military service.

Immigrant, Refugee or Refugee Claimant Status

One youth identified coming to Canada as an immigrant, reflecting 5% of all responses.

Indigenous, First Nations, Métis or Inuit Ancestry

One youth identified as Indigenous or having Aboriginal ancestry (5%). The youth identified as First Nations.

Relationship with St. Thomas and Elgin County

Eight of the 22 youth surveyed identified that they had moved to St. Thomas and/or Elgin County in the last year, reflecting 36%. The majority of these youth moved to the area from a surrounding community to “start over” or to be closer to family and friends.



Involvement in Foster Care

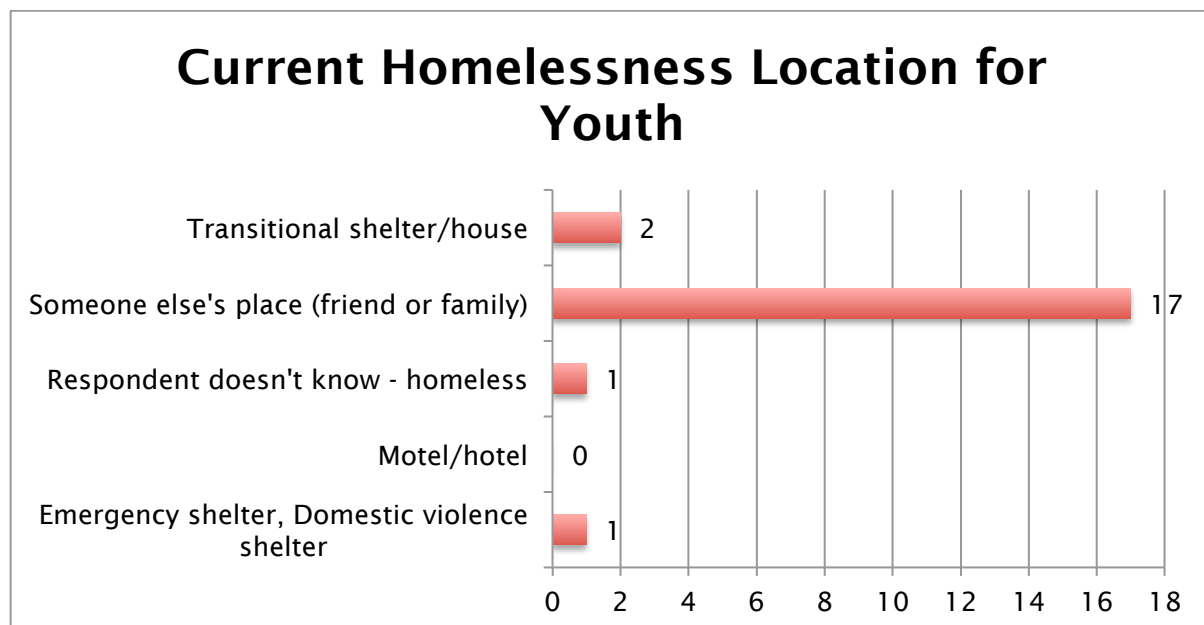
Ten of the 22 youth identified as being homeless had previous involvement with foster care, reflecting 45%. This involvement occurred from a few months ago to 8 years ago.

HISTORY OF HOUSING AND HOMELESSNESS

Homelessness Location

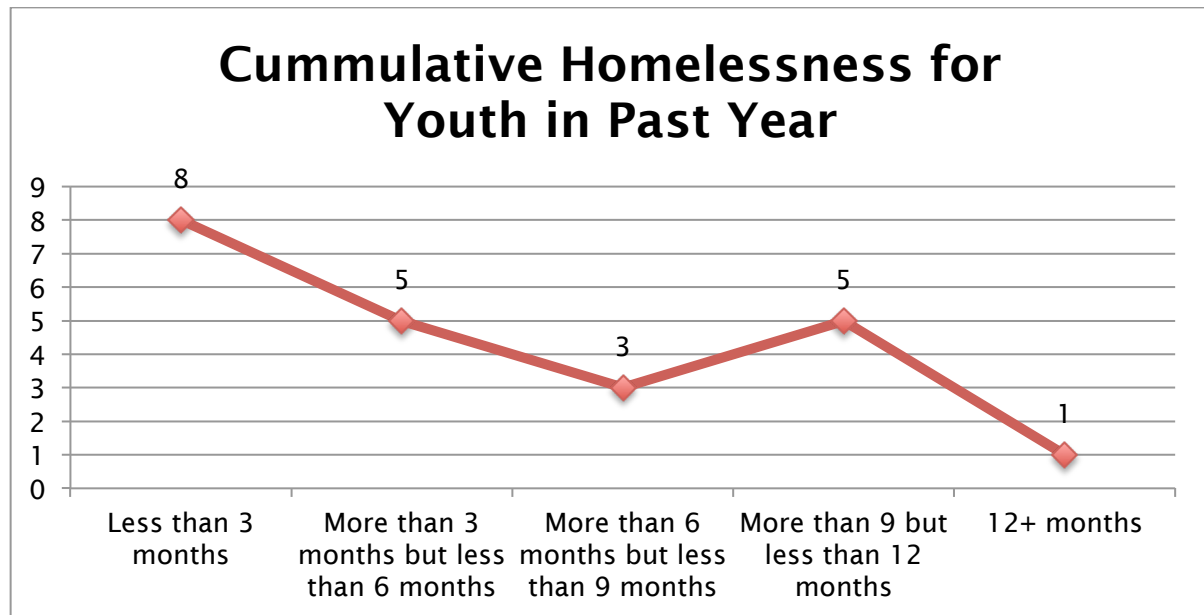
Of the 22 youth identified as experiencing homelessness, only 8 respondents identified that they had stayed in an emergency shelter in the past year, reflecting (36%). When examining “where they slept last night”, only 1 or 5% spent the night at an emergency shelter or domestic violence shelter. The lack of supervised and supportive youth emergency shelter options during the week of the enumeration project are concerning.

The prominence of hidden homelessness as the primary option for youth experiencing homelessness in St. Thomas and Elgin County is evident. At present, OrgCode would be concerned about whether these locations are safe and appropriate for youth. Seventy-seven percent of youth were staying with a friend or family member in a temporary situation and/or without their own house or apartment to which they could safely return. Transitional housing, motel/hotel or location “unknown” were sites identified by 3 youth respondents. This is demonstrated below:

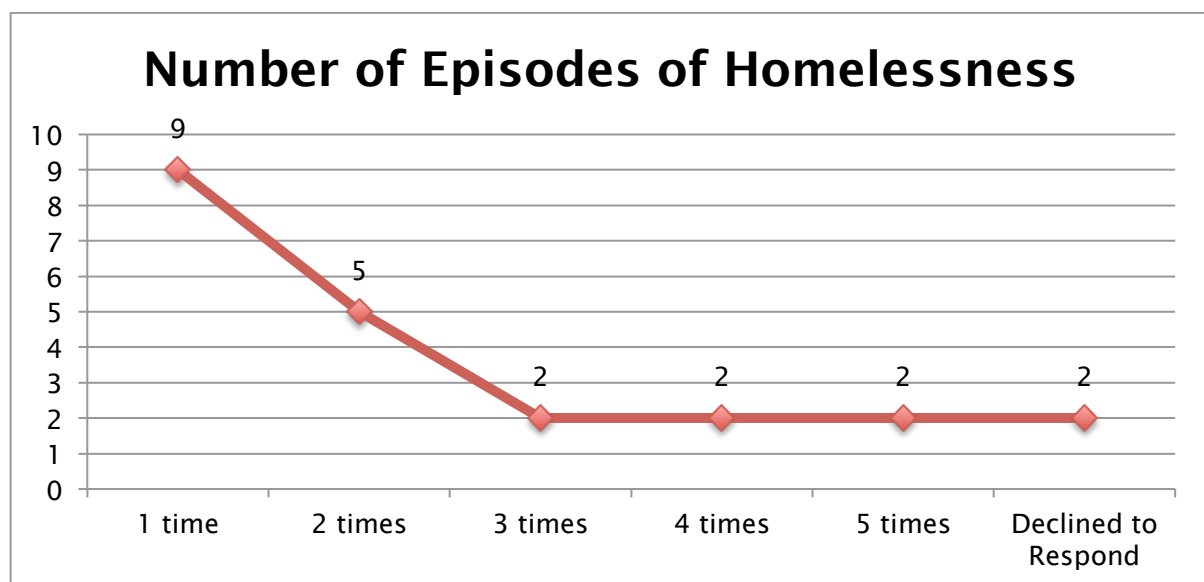


Length and Episodes of Homelessness for Unaccompanied Youth

In examining the amount of time spent in homelessness over the past year, 9 youth respondents met the definition of chronic homelessness (41%). Fifty-nine percent of the youth (N=9) had been homeless for less than 6 months with 1 youth experiencing an entire year of homelessness.



Given the prominence of hidden homelessness within the youth population experiencing homelessness, it is no surprise that a higher percentage of youth have experienced 3 or more episodes in the past year, than their single adults and family counterparts. Six youth – reflecting 27% - met the definition of episodic homelessness.



Reasons for Most Recent Homelessness

Family breakdown is the primary reason for the current homelessness status for 16 of the 22 youth respondents (73%) with wellness (substance use and illness) and safety concerns (human trafficking and unsafe housing conditions) providing the reason for 5 youth and 4 youth respectively. Youth could provide multiple reasons for their current homelessness.

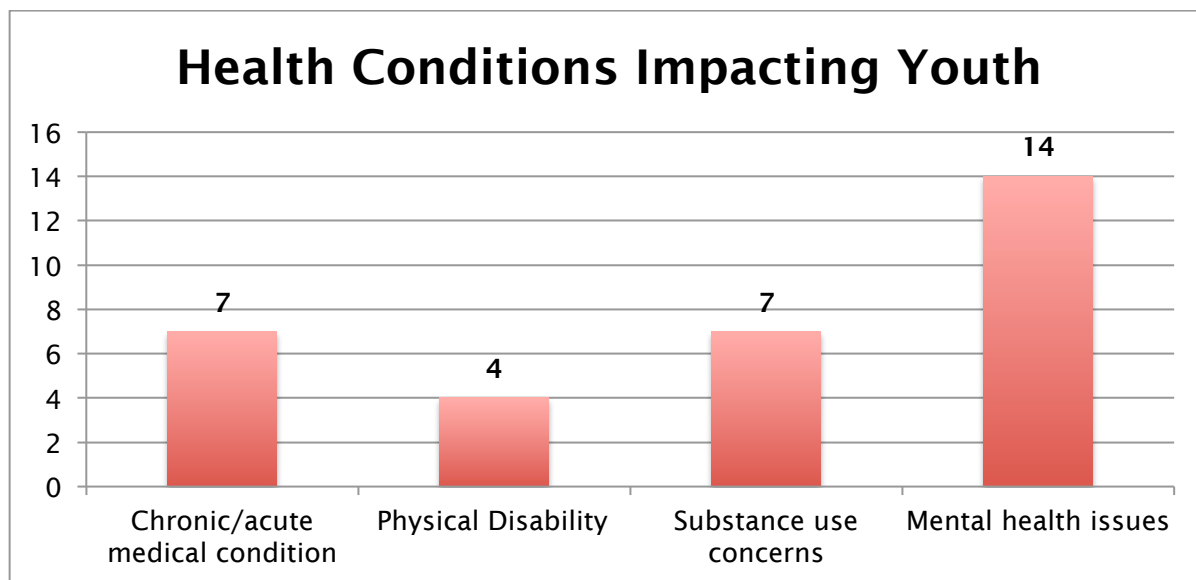


Health Conditions Experienced by Youth

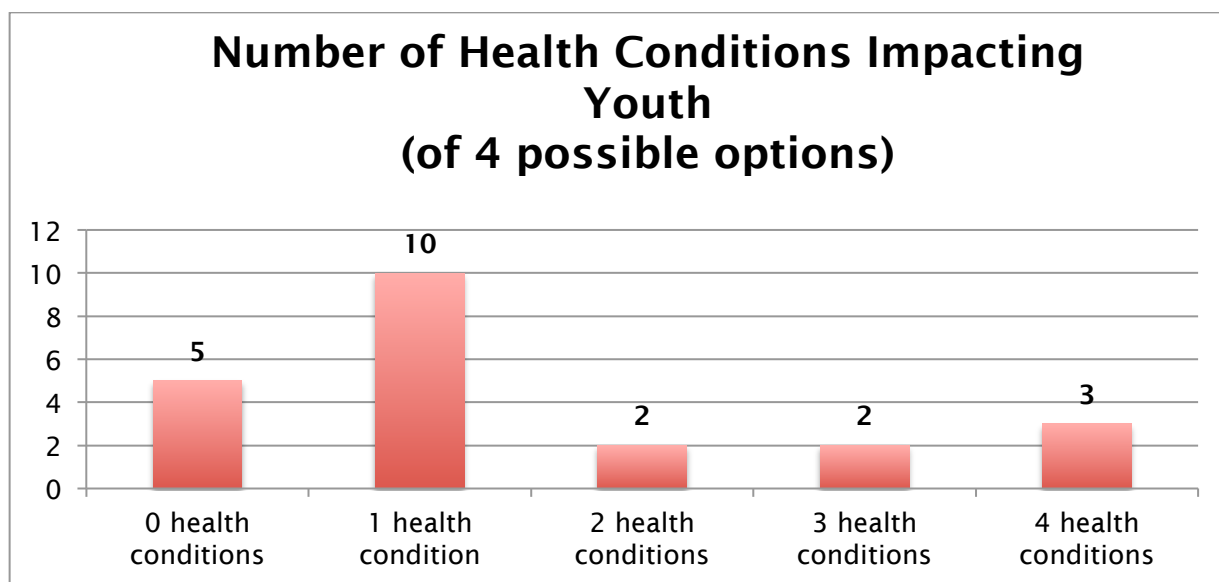
Youth experiencing homelessness in St. Thomas and Elgin County also struggle with compromised wellness issues impacting their vulnerability and increasing the likelihood of becoming stuck in longer terms of homelessness unless the services and supports are available to respond to their needs. Much work has been done in recent years to improve local efforts to prevent and end youth homelessness. Obviously, this investment must continue to be a priority moving forward, given the health issues impacting this population.

Fourteen of the youth respondents identified having mental health concerns, reflecting 64%. Substance use issues were identified by an additional 7 youth (32%), chronic/acute medical conditions impact 7 of the youth respondents (32%) and 4 youth identified having a physical disability (18%).





Beyond the types of health conditions impacting local youth that are experiencing homelessness, co-occurring health issues further complicate the lives of 7 youth (32%) that have 2 or more co-occurring health issues. Four of the youth respondents met the definition of tri-morbidity since they experience physical health, mental health and substance use issues, reflecting 18%. Tri-morbidity not only creates increased risks of medical vulnerability and safety concerns for these youth but increases the likelihood that they will need intensive and targeted efforts to assist in ending their homelessness.



Recommendations for Future System Planning to Prevent and End Homelessness

Undoubtedly, some people are staying stuck in homelessness much too long in St. Thomas and Elgin County. Experiencing multiple and elongated episodes of homelessness suggests that the supports and/or housing services that survey respondents access do not lead to securing stable housing. Efforts to develop and enhance affordable housing options locally must continue in area to achieve the goals established in the long term housing and homelessness plan. The results of this initial Homeless Enumeration also validate that specialized services and supports must continue to ensure that the most vulnerable people must be prioritized for homeless and re-housing efforts. Such an approach is mandated by the adoption of Housing First as the philosophy governing the long-term plan.

Regardless of the multitude of variables that cause housing instability for local residents, *progressive engagement* with individuals and families experiencing homelessness will prove to be essential in St. Thomas and Elgin County. It is apparent that a consistently applied strategy, policy or process should be adopted by all community partners to continuously improve the identification of housing and support needs as early as possible when initial housing assistance has not resulted in individuals and/or families permanently resolving their own homelessness. The importance of matching individuals with the appropriate services is a critical opportunity for the area as more than one third of the people experiencing homelessness in the past year have been homeless for less than three months. The longer an individual is homeless, the more difficult it is for that individual to find and maintain stable housing.

Continuing to enhance the housing focused assessment/triage work occurring throughout the region will be essential. With all potential points of access for service, benefits and support quickly identifying the housing status of local residents, local partners are better equipped to facilitate referrals for homelessness prevention or re-housing supports. Such a “no wrong door” approach to homelessness identification will be essential for the 57% of people experiencing hidden homelessness in St. Thomas and Elgin County. For the individuals and families experiencing unsheltered homelessness, housing focused outreach that is street based as well as agency based (i.e. meal programs, day support centres, hospital and corrections discharge planning meetings, etc.) will continue to ensure that homelessness incidents are quickly identified and engagement focuses on re-housing efforts.

Homelessness prevention, as identified in the City’s long term plan will continue to be important for the precariously housed individuals and families in the area. For those households that cannot maintain their current housing and cannot be effectively and safely diverted from homelessness, local efforts to provide safe shelter options must continue with 39% of people experiencing homelessness during the 2018 Enumeration identified staying in a shelter. The development of safe, housing focused shelter options will continue to be an important connection to permanent housing solutions in St. Thomas-Elgin.

The utilization of real-time data within a shared information management system has been identified as an essential component in a community's quest to prevent and end of homelessness. The 2018 St. Thomas-Elgin County Homeless Enumeration demonstrated the collective impact of gathering a multitude of data on the individuals and families experiencing homelessness throughout the area during the Period Prevalence Count. Such comprehensive information can drive policy, investment, program and system change as well as efficient report and monitoring. With the collective adoption of a shared electronic information system, the daily gathering of real time and identifiable data within Service Manager area can become a standard operating practice for all community partners dedicated to preventing and ending homelessness in the near future – not just during Homeless Enumeration initiatives.

Recommendations for the 2020 Homeless Enumeration Project

The 2018 St. Thomas-Elgin County Homeless Enumeration successfully provided a valuable community-based initiative for the community and its partners dedicated to preventing and ending homelessness. The insights gleaned from the data analysis will enhance system planning, investments and program development into the future. As homeless enumeration projects are repeated in the future, The Service Management area will be able to measure its continued progress in reducing homelessness and test the effectiveness of currently funded programs dedicated to ending homelessness.

The Homeless Enumeration event ran smoothly and professionally. As with every initiative however, there is always room for improvement. The following provides a list of suggestions on how future enumeration projects can be enhanced:

Methodology and Survey Development

- As this was the first homeless enumeration project, basic de-identified information was gathered to generate a more comprehensive overview of the realities of homelessness locally. As the homeless and housing system of care continues its evolution to incorporate additional evidence-informed practices and approaches proven to prevent and end homelessness, it will be important to move from the gathering of de-identified information to the creation of a By-Name List that provides information of the experience of homelessness but also a comprehensive needs assessment so that acuity levels can improve prioritization, program matching and program referrals locally. Knowing all individuals and families impacted by homelessness with moderate and high acuities ensures the mobilization of finite resources to end – not just manage - chronic, episodic, unsheltered, sheltered and hidden homelessness. As has been witnessed in urban and rural communities across Canada, the inclusion of a triage tools such as the VI-SPDAT within the homeless enumeration would assist in achieving this goal in the future.
- The enhanced involvement of other local public systems will be important in future enumeration projects. Recognizing that no one sector of service can end homelessness alone, inclusion of all private, public and non-profit partners will be important in planning future enumeration projects to cast an even wider net

to gather valid information and build strong collaborations. People interacting with mainstream public systems such as corrections, hospitals, child welfare, etc. are impacted by housing instability and homelessness. As active partners in the development of initiatives to address homelessness in the future, potential discharges to homelessness should be understood as a potential driver of homelessness and can therefore be minimized. In 2020, increasing the number and diversity of enumeration sites where currently served people would be helpful to better understand the interactions between these public systems and the homeless/housing sector.

Conclusion

The 2018 St. Thomas and Elgin County Homeless Enumeration was an important step in ensuring that the goal to shift from managing homelessness to ending it gained valuable momentum and a renewed sense of urgency. Although the task at hand may appear daunting, it must be remembered that homelessness will be ended one person/household at a time with the assistance of dedicated support professionals committed to implementing strategies, approaches and tools that have proven to provide the outcomes and impacts to end chronic homelessness. This shift from managing homelessness to preventing it and ending it however must be enhanced with real-time data that reflects the realities of homelessness and precarious housing throughout the region – not simply what we believe it to be based on anecdotal information and our desire to assist all individuals and families that connect with us for assistance.

To the community partners and staff that committed their time for this important community event, we thank you. For the service providers that shared your expertise, insight and approach, we acknowledge your commitment to the over 159 (including the 33 dependents/children) identified as experiencing homelessness in the area and trust that with your continued dedication to evidence-informed strategies, chronic homelessness can indeed be ended. Much hope exists that in the future, shelter diversion strategies will decrease the large number of individuals and families that recently entered homelessness for the first time. Ensuring that those residents that have the ability to resolve their own housing challenges are encouraged to do so as quickly as possible will assist in returning emergency services to their original intent – short term and infrequent use. Locally, continuing efforts to strengthen local partnerships and enhance professional practice will foster an environment where all sectors of service are dedicated to a Housing First philosophy. With the continued leadership of the City of St. Thomas and its community partners, progress will be made to end chronic and episodic homelessness with future Homeless Enumeration initiatives demonstrating this success.

