

# Report on Homelessness in Sudbury: Time 2

## Comparison of Findings from July 2000 and January 2001

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**with**

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## EXECUTIVE SUMMARY

### Overview

This study has confirmed many of the same trends revealed in our first report based on the July, 2000 data collection. The magnitude of the problem was verified, with 341 homeless individuals identified in January compared with 407 individuals identified in July. Furthermore, in January, 2001, 100 of these individuals (29%) were absolutely homeless, using the restrictive definition of homelessness that has been rejected by many as underestimating the problem (Casavant, 1999). The strong presence of women and children among Sudbury's homeless population was confirmed in the current study, as was the over-representation of First Nations people. However, one important difference between the Time 1 and Time 2 studies was that the proportion of Francophones in the homeless population matched their numbers in the total population in the latter, while they were under-represented in the former. The neighbourhood survey also produced similar findings as the earlier study, with 10 homeless individuals identified in July, 2000 and 7 in January (4.2% and 3.6% of households, respectively).

### Introduction and Background

At the local level, the Social Planning Council of Sudbury (SPC) has been working with the Advisory Committee on Emergency Shelter (ACES), the City of Greater Sudbury, and other community partners to gather information on the extent of the problem, coordinate local services, and address the issue. In July, 2000, the SPC conducted the first comprehensive study of homelessness in Sudbury. A mixed-methods study was designed to enable the collection of quantitative and qualitative data on the problem. After the release of the findings of the July, 2000 study, the City of Greater Sudbury made a joint commitment with the Social Planning Council to undertake a three-year program of research on homelessness in order to track changes in homelessness over time and to study various dimensions of the problem locally.

This report describes the following:

- the numbers of people who are absolutely homeless and those at high risk of homelessness;
- breakdowns on background characteristics including children, youth, women, men, cultural groups (i.e. those of Anglo/European origins, First Nations people, and francophones);
- agencies used by homeless individuals and families and reasons for homelessness;
- the extent of hidden homelessness;
- local residents' opinions regarding homelessness; and
- observations of sites in the city centre occupied by homeless people during the winter.

### Defining Homelessness

Like the Time 1 study on homelessness in Sudbury, the current project adopted an inclusive definition of homelessness by taking into account people who were vulnerable to becoming homeless in addition to those who were absolutely homeless at the time of the study (i.e. the approach taken by the Mayor's Homelessness Action Task Force, Toronto). The definition used in the Toronto study was based on work by Daly (1996) and views homeless people as those who are absolutely, periodically, or temporarily without shelter, as well as those who are at substantial risk of being in the street in the immediate future. However, the Time 2 study also identified and enumerated those who were absolutely without housing.

## **Research Methodology**

To enable comparisons with the Time 1 study conducted in July, 2000, the same mixed-methods design was used. Quantitative and qualitative data were collected in three phases that were ongoing simultaneously during the week of January 22<sup>nd</sup> to 28<sup>th</sup>, 2001 (a survey of service providers was not repeated in Time 2). The three phases included:

- A count of the homeless population using emergency shelters, social service agencies, and other services supporting this population in Sudbury, including the identification of individuals who were absolutely homeless;
- A face-to-face survey of households in a random sample of neighbourhoods in the city of Sudbury; and
- Qualitative field research in settings occupied by homeless people in the downtown core.

## **Key Findings**

### ***Phase I: Count of Homeless People***

An unduplicated count was obtained by examining the first, middle, and last initials of each individual, as well as their date of birth and gender; individuals with identical information were treated as the same person and the duplicated information was eliminated from the final database. The background information enabled us to identify 341 different homeless individuals who used the services of one or more of the agencies during the week of January 22<sup>nd</sup> to 28<sup>th</sup> or were staying temporarily less than five nights per week in the homes of participants of the neighbourhood survey. The overall number of homeless people was slightly lower than in July, 2000 when 407 individuals were identified. The characteristics of the homeless population were as follows:

- 100 people in Sudbury were absolutely homeless in late January, 2001. Half of these individuals were female (50%), 19% were Aboriginals, 20% were Francophones, and just over half were of Anglo/European origins (54%). Over a third were children (9%) or adolescents (27%) and the remainder were adults between the ages of 20 to 59 years of age. The children were with their mothers at the YWCA Geneva House.
- The 341 people identified in the homeless count included 43 infants and children under age 13, 61 adolescents aged 13 to 19, and four seniors over the age of 65. These findings were similar to those noted in Time 1.
- Women represented a slightly larger proportion of the people who were homeless in January (40.6%) compared with July (36.9%).
- As was also found in July, 2000, the majority of homeless people had European backgrounds (72.5% in 2000 and 75.6 in 2001).
- While Francophones were under-represented in the July 2000 count, they accounted for 24.2% of the homeless people in January 2000.
- Similar to the finding in July 2000, Native people were greatly over-represented among the homeless population, with 25.8% being Aboriginal in July and 21.5% in January.
- The majority of both men and women who were homeless were single/unattached (85% of the men and 77% of the women).
- In January, a slightly larger proportion of the homeless adults with children were women, single or divorced individuals, and people who were not receiving any social assistance or government benefits, compared with July.

- As in July, the subgroups of the homeless population who were less likely to be receiving social support payments were youth, seniors, and Francophones.
- While the same reasons for homelessness were given at both data collection points, the relative importance of the reasons differed somewhat. While the primary reasons given for homelessness in July were unemployment and low wages, these were cited by a smaller proportion of people in January. In contrast, domestic violence was the main reason for homelessness in January.

### ***Phase II: Neighbourhood Survey***

The survey gathered information on public opinions regarding the reasons for homelessness in Sudbury, factors related to homelessness, personal experiences with homeless people and perceived solutions to the problem. In total, 195 residents participated in the survey in January compared with 236 in July. The Time 2 participants ranged in age from 17 to 87, with a mean of age 44.

- Seven homeless individuals were identified as staying temporarily in the homes of relatives or friends (i.e. 7 in 195 households). This represents 3.6% of those surveyed, a rate that was slightly lower than that observed in July, 2000 (4.2%).
- The respondents in the January, 2001 neighbourhood survey generally identified the same reasons for homelessness in Sudbury as did the sample from July, 2000. The two main reasons identified were government policies and cut-backs and unemployment or lack of education.
- A larger proportion of the 2001 respondents believed that government policies, cut-backs, and a lack of funding for social assistance were causes of homelessness. In addition, nearly twice as many people identified mental health or health problems as reasons for homelessness.
- The main difference between the responses of residents and the homeless people regarding the reasons for homelessness was that the residents did not recognize the extent to which domestic violence is a factor related to homelessness.
- Another difference stemmed from the belief of some residents that homelessness results from personal failure or a lifestyle choice while none of the homeless people reported this.
- A smaller proportion of the residents in the January study reported that they, a family member, or a personal friend had been homeless compared to the July, 2000 study (19% vs. 34.6%, respectively). The primary reasons given for the homelessness were family issues, unemployment or poverty, domestic violence, substance abuse, and a lack of affordable housing.
- In comparison with the July, 2000 survey, a smaller proportion of the January, 2001 respondents indicated that *they personally knew someone in Sudbury* who was homeless (35.9% versus 23.2% respectively). Those who knew someone stated that the most common reasons gave somewhat different responses compared to the more general question on personal experiences with homelessness (i.e. among themselves, family, or friends) since substance abuse, unemployment, family issues, problems with social assistance, and mental illness or illness were given most often as explanations for acquaintances in Sudbury being homeless.
- As in the Time 1 survey, the primary solution to homelessness identified by the residents was to provide more government funding for welfare, social services and programs to support homeless people. In addition, over twice as many of the Time 2 respondents mentioned the establishment of shelters compared to Time 1. The other strategies mentioned most often in both studies pertained to creating more jobs and job assistance and working to create affordable housing.



***Phase III: Field Observations***

Foyer Notre Dame House (Outreach Program), the Youth Action Centre Intravenous Drug Unit (IDU), and the Sudbury Regional Police Service assisted with the study by serving as key informants and enabling members of the research team to accompany front-line workers or officers on regular evening/night shifts during the week of the Time 2 study. The frigid temperatures in January had an obvious effect on the homeless population—it is simply not possible for people to sleep outdoors in the park or on benches. The temperature during the seven days between January 22<sup>nd</sup> and 28<sup>th</sup> varied between a maximum of -1 °C and a minimum of -17.5 °C with a mean temperature of -8, and snow or ice pellets were recorded every day except for January 26<sup>th</sup>. The main themes emerging from the field observations in July, 2000 and January, 2001 were quite similar. Eight issues were identified through the field work, including mental illness, substance abuse, the routinization of homelessness, supportive relationships among homeless people, accessing services, health issues, and finding a place to keep warm, and homeless adolescents.

**Recommendations**

Seventeen recommendations were developed on the basis of the findings of the July, 2000 study and these recommendations were reviewed by service providers in Sudbury. They also prioritized the recommendations to identify ten that should be the focus of local action. Given the similarity in the trends identified in the two studies, it is recommended that community efforts to address homelessness continue to focus on these ten priorities:

- 1) Provide more funding for shelters and beds for homeless people.
- 2) Implement measures to ensure that new affordable rental housing is developed and existing low cost, appropriate rental housing is preserved.
- 3) Develop strategies for addressing the needs of homeless people with mental illness.
- 4) Provide more support services and financial support to homeless and low income people to assist them in making the transition to stable housing and to reduce the risk of homelessness in the future.
- 5) Consult with First Nations and Francophone organizations in order to develop strategies for addressing the needs of homeless people in these cultural groups.
- 6) Review the shelter arrangements for women who are not victims of domestic violence and establish beds for women who do not require or are averse to heightened security arrangements.
- 7) Enhance outreach services to homeless people in Sudbury in order to connect them with existing community resources.
- 8) Involve consumers in the development of new services and the enhancement of existing services.
- 9) Press the federal and provincial governments to implement policy changes that will address the underlying causes of the problem.
- 10) Provide funding for community-based workers who will engage in follow-up activities with clients and offer ongoing support services to assist clients in making a successful transition into stable housing in the community.

## INTRODUCTION

There has been increasing public attention given to the issue of mass homelessness in Canada and the manner in which social change has contributed to this growing problem. As Hulchanski (2000, p. 2) has argued, various institutions, policies, and practices have created and sustained mass homelessness by failing to address “homeless making processes”. Rising rent costs and the lack of affordable housing, inadequate levels of public assistance, harsh/punitive attitudes toward the poor, unemployment and low wages, the economic impact of illness or disability, and family violence or abuse are all processes that are linked to homelessness.

Surveys conducted by the Canada Mortgage and Housing Corporation (CMHC) during the late 1990s and 2000 showed that there was a high level of awareness among Canadians regarding the rising numbers of homeless people and the higher proportions of women, children, and families among them than in the past (CMHC, 2000). In 1998, over 90% of Canadians believed that governments and policy makers must address the problem of homelessness. The Government of Canada reacted to the growing crisis of homelessness by announcing funding of \$305 million through the *Supporting Communities Partnership Initiative (SCPI)* to develop local strategies for reducing and preventing homelessness. Most of this funding (80%) was committed to the ten cities with the largest documented homeless populations. The funding announcement noted that the remainder would be allocated to other communities that could demonstrate the presence of significant numbers of people who were absolutely homeless.

At the local level, the Social Planning Council of Sudbury (SPC) has been working with the Advisory Committee on Emergency Shelter (ACES), the City of Greater Sudbury, and other community partners to gather information on the extent of the problem, coordinate local services, and address the issue locally. ACES comprises members who reflect the communities of the City of Greater Sudbury including current providers of emergency shelter services, consumers, community advocates, providers of service to those with special needs including relevant provincial and federal ministries, and all regional departments involved in providing emergency and social housing. The general purpose of the committee is

- to act as a consultative community resource to assist in planning and co-ordination for the provision of emergency housing in the Region of Sudbury; and
- to be accountable to local government.

ACES has specific responsibilities to develop and sustain communication and co-ordination strategies between existing emergency housing services within the Sudbury area, to review, evaluate and advise the city on the provision of emergency shelter needs and issues, and to identify priority emergency shelter needs and issues as they arise.

In July, 2000, the SPC conducted the first comprehensive study of homelessness in Sudbury. A mixed-methods study was designed to enable the collection of quantitative and qualitative data on the problem. The study was conducted in four phases that were ongoing simultaneously. The four phases included a count of the homeless population using emergency shelters and other services supporting this population in Sudbury, a survey of service providers in the region, a face-to-face

survey of households in a random sample of neighbourhoods in the city of Sudbury, and qualitative field research in settings occupied by homeless people in the downtown core.

The main purposes of the study of homelessness in Sudbury conducted during the week of July 17<sup>th</sup> to 23<sup>rd</sup>, 2000 were to obtain an unduplicated count of homeless people and gather information on their characteristics and reasons for homelessness, describe the network of services available for this population, obtain baseline data on the views of local residents with regard to homelessness, obtain current statistics on homelessness, and identify local solutions from the perspectives of service providers and local residents.

The study identified 407 different homeless men, women, and children using shelters and other services in a one-week period in July, 2000. The survey conducted in a random sample of neighbourhoods in the city found homeless persons staying temporarily in 4.2% of households. Extrapolating this to all low income households adds an additional 273 “hidden homeless” to the population. After the release of the findings of the July, 2000 study, the City of Greater Sudbury made a joint commitment with the Social Planning Council to undertake a three-year program of research on homelessness in order to track changes in homelessness over time and to study various dimensions of the problem at the local level.

### **Research Plan**

The plan for ongoing research into the problem of homelessness in Sudbury was developed to provide data allowing for a description of trends and changes in homelessness over the next three years (2001 to 2003) and to enable us to build on the Time I study by providing in-depth research on particular aspects of the problem at each data collection point. By end of the study period, a body of research data and reports will afford a comprehensive understanding of the nature of homelessness locally as well as an indication of the effectiveness of the ongoing intervention strategies implemented to address the problem.

#### ***The Current Study –January, 2001 (Time 2)***

This study repeated three phases of the Time I study; the count of homeless people, the neighbourhood survey, and the qualitative field research were conducted. The data enabled a comparison of the findings with those from July, 2000 to determine how patterns of homelessness differed in the summer and winter. Service providers were asked to provide the information on homeless people using their services at the end of January, 2001. The data collection instrument used in conducting the unduplicated count was the same as that used in Time I with two additions: first, a category was added to differentiate between people who were absolutely homeless and those who were at high risk of homelessness and, second, the measure of linguistic group was revised to ensure that Francophones would be identified more consistently. In addition, a broader range of agencies was asked to participate in conducting the count of homeless people.

### ***Future Studies***

- ***July, 2001 (Time 3)***

This study will repeat the research activities from Time 2; however, an in-depth study of homeless people will be conducted to gain a better understanding of their issues and needs. Researchers trained by the Social Planning Council will interview a sample of homeless people (n=30) to gather more detailed information regarding their circumstances, reasons for homelessness, and barriers to obtaining secure housing.
- ***January, 2002 (Time 4)***

The research activities from Time 2 will be repeated again and this stage in the research plan will also include the second survey of service providers. The data will enable us to track how the network of services to homeless people has changed since the Time I study. It is expected that the survey will include a description of the number of beds, the types of services offered, the numbers and characteristics of clients served, service demands, and perceived causes of and solutions to homelessness at the local level.
- ***July, 2002 (Time 5)***

The research activities from Time 2 will be repeated again and this stage in the research plan will focus on examining services to particular sub-groups of homeless people. The Time I study indicated that additional services for homeless women, families, and First Nations people were needed. This study will examine the needs of these groups and the extent to which the available services meet their needs. The study will also be designed to examine the particular needs of Francophone people. The data collection activities will target Francophone areas of the City of Greater Sudbury to ensure a better understanding of patterns of homelessness among Francophones.
- ***January, 2003 (Time 6)***

The research activities from Time 2 will be repeated again and this stage in the research plan will focus on an examination of the health and mental health services for homeless people in Sudbury. The Time I study was not designed to examine health issues and access to health care among homeless people. However, the observational field research as well as previous studies have indicated that homelessness is associated with poor health and a higher incidence of infectious diseases. This study will examine the health needs and access to services by homeless people. It will include interviews with homeless people, staff of health services and mental health services, and other service providers.
- ***July, 2003 (Time 7)***

This study will build on findings from the six previous stages in the research plan and will repeat all research activities from Time 1. The study will be designed to enable comparisons with the Time 1 data to determine how the patterns of homelessness in Sudbury have changed over a three-year period. The report will document changes in the numbers and characteristics of the homeless population and services provided throughout all seven stages of the study.

## **Overview of the Current Report (Time 2)**

This report describes the following:

- the numbers of people who are absolutely homeless and those at high risk of homelessness;
- breakdowns on background characteristics including children, youth, women, men, cultural groups (i.e. those of Anglo/European origins, First Nations people, and francophones);
- agencies used by homeless individuals and families and reasons for homelessness;
- the extent of hidden homelessness;
- local residents' personal experiences with homelessness;
- local residents' opinions regarding homelessness and perceived solutions;
- observations of the sites in the city centre where homeless people may be found in the winter; and
- comparisons of the Time 1 and Time 2 findings.

## **METHODOLOGY**

### **Defining Homelessness**

Like the Time 1 study on homelessness in Sudbury, the current project adopted an inclusive definition of homelessness by taking into account people who were vulnerable to becoming homeless in addition to those who were absolutely homeless at the time of the study (i.e. like the Mayor's Homelessness Action Task Force, Toronto). The definition used in the Toronto study was based on work by Daly (1996) and views homeless people as those who are absolutely, periodically, or temporarily without shelter, as well as those who are at substantial risk of being in the street in the immediate future.

In a literature review of homelessness conducted for the Parliamentary Research Branch of the Government of Canada, Casavant (1999) observed that many researchers and service providers believe that defining homelessness in terms of the absolute absence of shelter is overly restrictive. However, in order to gain a better understanding of the dimensions of the problem in Sudbury, the Time 2 study also identified and enumerated those who were absolutely without housing.

### **Approach to the Study**

Researchers working in this field have noted the difficulties in studying this population; consequently, a mixed-methods study was designed to enable the collection of quantitative and qualitative data. The study was conducted in three phases that were ongoing simultaneously during the week of January 22<sup>nd</sup> to 28<sup>th</sup>, 2001. Phase I focussed on obtaining a count of the homeless population using emergency shelters, social service agencies, and other services supporting this population in the Region of Sudbury as well as gathering information on their characteristics and reasons for homelessness. Phase II involved a face-to-face survey of homes in randomly selected neighbourhoods in the city of Sudbury. This survey gathered information on public opinions on homelessness in addition to the identification of the "hidden homeless" or at-risk population who stay in temporary accommodation. Finally, Phase III of the study involved qualitative field research in settings occupied by homeless people in the downtown core. Researchers accompanied outreach workers serving the homeless population and Sudbury Regional Police Services making rounds in

order to observe the locations inhabited by homeless people in Sudbury. The methodology for each of these phases is described below.

## **Agency Count of the Homeless Population**

In order to obtain a complete count of homeless people, it was essential to obtain participation from the majority of the service providers in the Region of Sudbury. A list of providers from the Time 1 study was used, and expanded to include more organizations serving this population. A letter explaining the objectives of the study and the need for participation from all providers was delivered to the agencies along with a copy of the chart to be used for the count. Every provider was subsequently contacted by telephone in order to set a date and time for a meeting to review the information to be collected in the study and to determine how the data could be collected from each agency. The data collection instrument consisted of a form for collecting information on each homeless person (see explanation in the following section).

### ***The Count***

Defining homelessness, counting or estimating the size of the homeless population, and determining an appropriate methodology for studying homeless people continue to be somewhat problematic. A decision was made to utilize service-based techniques. This method was described by Iachan & Dennis in 1993 (cited in Peressini, McDonald, & Hulchanski, 1996). These authors identified 14 studies of homelessness employing a service-based method and classified them into three groups.

- The first set of studies employed only samples of service system locations (e.g., shelters, soup kitchens, day programs) because they can be surveyed inexpensively and cover most of the population.
- The second set of studies used probability samples of shelter and street locations to reduce the potential for bias due to under coverage and limitations of services systems.
- A final set of studies, representing a compromise approach, focuses on service system samples, but also include either purposive or partial samples of high-density street locations.

Peressini, McDonald & Hulchanski (1996) noted that there has been a tendency to utilize a variation of the service-based methodology in most studies of homelessness conducted since the late 1980s. This methodology was used in the current study because it captures most of the population. In addition, by having the count conducted by providers who are experts in the field we were reducing the chances of violating confidentiality of the clients and intruding on the services offered by the providers. In the Time 2 study, however, it was necessary to have research staff collect data in one agency, due to limited staff resources in the agency to perform this task.

The service-based method used in this study was designed to obtain an unduplicated count of the homeless population in Sudbury. In order to accomplish this, the week of January 22<sup>nd</sup> to 28<sup>th</sup> was identified as the time period in which the count would take place. The timing of the study was planned so that the data collection would be conducted at the end of the month when homelessness has been found to increase (Peressini et al., 1996). The count was conducted by 16 emergency

shelters or support agencies and operationalized by using an information chart (slightly revised and expanded from the Time 1 study) that would allow us to gather information about each one of the homeless people using the service. Some of the agencies contacted did not participate for various reasons. In addition, it was found that some individuals do not want to provide information about themselves. The experiences of members of the research team who were collecting data in one of the agencies illustrate the problem:

*For the first couple of days, nobody wanted to talk to us...*

*We started mingling and asking them if they wanted to do our survey and some said no, and we said fine...*

*A few nights there were some people that were pretty hostile, like telling us to go to hell... Some of them got right in our faces and swore — telling us to get out of here and that we were a bunch of losers and other names. They wanted to know how much we were getting [paid] and how much our bosses were making for doing this and yelling what we were going to do for them, and as we explained they just got more angry.*

Hence, it is likely that the count represents a conservative estimate of the extent of homelessness in Sudbury. In addition, some agencies did not participate in the study, as noted above. However it is possible that, for example, many of the same people will utilize the services of the non-participating agencies (e.g. the Catholic Charities Soup Kitchen) and the participating agencies (e.g. Elgin Street Mission).

The data collection tool was designed to obtain information providing a valid, unduplicated count of the homeless population in Sudbury without raising concerns about violating the privacy rights of individuals using services. The data collection tool utilized was adapted from the Automated National Client-specific Homeless services Recording System (ANCHoR). The ANCHoR recording system is an information system designed to support the coordination of services to the homeless. It was designed to collect basic socio-demographic information about the consumers using the services, including the first, middle, and last initials, date of birth, social insurance number, gender, ethnicity/race, marital status, linguistic orientation, date of entry or use of services and exit or service discontinuation (Peressini, McDonald and Hulchanski; 1996).

We also gathered information on welfare status and reasons for homelessness. In addition to the count of homeless people conducted by service providers, a neighbourhood survey was also conducted to identify the “hidden homeless” (see the following section). Furthermore, the January, 2001 count differentiated between people at high risk of homelessness and those who were absolutely homeless.

## Neighbourhood Survey

### *Sampling Strategy*

The maps available in the annual publication of the *Northern Life Telephone Directory* were used to generate a random sample of the neighbourhoods in Sudbury. The maps of the city of Sudbury are numbered from six to sixteen and the regions within each of these maps are alphabetically and numerically sectioned. The 11 maps of the city identified 35 sections in the city of Sudbury.<sup>1</sup> In total, eighteen of these sections were selected in generating the sample for the neighbourhood survey. Included in this number were five areas that were predetermined for inclusion in the study because of their low income housing status. Low income neighbourhoods were over-sampled because of the higher risk of homelessness in these areas.

The remaining sections of the city were selected by using a cluster sampling method in which a random sample of sections was selected and then a systematic sample of residences in each section was identified for the survey (the sampling units were individual residences). Approximately half of the areas in the city (18 of 35) were selected for inclusion in the study in order to provide a representative sample of neighbourhoods in the city. Ten research assistants were trained to gather data and the neighbourhood survey was conducted between January 22<sup>nd</sup> to 28<sup>th</sup>. When sampling a section, the researchers were paired together to form teams of two. The teams selected every third street and knocked at every fifth door on the street. Each team remained in a section for approximately three hours.

### *Procedure*

One member of the team explained the purpose of the survey and outlined ethical considerations (e.g. voluntary participation, withdrawal, confidentiality, anonymity etc.). If the resident agreed to participate in the survey, she or he was given a letter which explained the study, the ethical principles, and provided contact information. A brief structured interview (adapted from the Time 1 study and slightly expanded) was then conducted by one team member while the other recorded the address and gathered demographic information about the participant. As part of the survey, respondents were asked if there was anyone living with them who fit the definition of homeless. The same data collection tool was used in this phase of the study as was used in Phase I so that the same kind of information was gathered about the hidden homeless population as that collected by the service providers in the count of homeless persons. The response rate to the neighbourhood survey was 63%. Women were more likely to answer the door and to agree to participate than were men. Nearly two-thirds of the respondents were women (67%).

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<sup>1</sup> The survey excluded the outlying communities of the City of Greater Sudbury (i.e. the former outlying municipalities of the Regional Municipality of Sudbury) because the absolute homeless population is likely to remain within the higher density areas of the city since most services for them are located there. While “hidden homelessness” may well exist in the surrounding communities, the homeless population is likely to be more concentrated within the former city of Sudbury.



## **Field Observations**

The field observations were conducted in partnership with the Foyer Notre Dame House Outreach Program and the Youth Action Centre Intravenous Drug Unit (IDU). The first of these programs has a team of outreach workers serving at-risk populations in the community five times per week. The second program has an outreach program operating two or three times a week depending on staff availability. Members of our research team were permitted to accompany the outreach workers. This allowed us to conduct the field observations.

A member of the research team accompanied the Foyer Notre Dame House Outreach Program worker and the Youth Action Centre IDU Outreach Program worker while performing their duties. The researchers complied with the regulations of the respective programs while out on the streets; this was for safety reasons and to ensure that the relationships between the outreach workers and the at-risk populations were not jeopardized. The researchers were instructed to observe the locations inhabited by homeless people and to make notes regarding the people, events, activities, and the environments they encountered. Brief notes were made in the field and detailed notes were made immediately after each field observation.

The field observation was also conducted in partnership with the Sudbury Regional Police Services. After a background check, this service allowed a researcher to ride along for one night during the week of the study. While this activity did not allow for any direct contact with the homeless population, it enabled the collection of information regarding police knowledge and experience with the homeless population. This activity allowed us to talk with the officers who work with people on the streets. The ride involved two officers who offered opinions regarding homelessness in Sudbury and pertinent information on hangouts and sleep outs.

## RESULTS

### **Phase I: The Count of Homeless People**

The count of homeless people, conducted by the shelters and other service providers, identified 464 people who had used services during the week of the study. This number included some people who were counted more than once. The service providers adopted varied approaches to recording information on individuals who used the agency more than once during the study period. Some recorded the background information on each occasion while others recorded the individual only once since the primary purpose of the count was to obtain an unduplicated count of homeless individuals.

The list of service providers is shown in Table 1. It is important to note that Table 1 does not indicate the total number of people served by these agencies during the week of January 22<sup>nd</sup> to 28<sup>th</sup> since some people were served by the same agencies more than once but this information was not recorded. It may be noted that the Elgin Street Mission, Salvation Army Family Services, YWCA Geneva House, and the Salvation Army Shelter identified three-quarters of the total homeless population. These agencies also identified over half of those who were absolutely homeless. The neighbourhood survey identified an additional four people who were absolutely homeless and staying temporarily in the home of the survey respondent. Three additional individuals were identified as being at high risk of homelessness; these seven individuals were included in the count. The identification of 7 homeless individuals in 195 households represented 3.6% of those surveyed, a rate that was slightly lower than that observed in July, 2000 (4.2%).

An unduplicated count was obtained by examining the first, middle, and last initials as well as the date of birth and gender; individuals with identical information were treated as the same person and the duplicated information was eliminated from the final database. A number of individuals did not provide all of the information on their first, middle, or last initials, or the data on date of birth, gender, or marital status was incomplete. Since we could not determine whether those with missing data were included in the count from other agencies, they were excluded from the analysis. The background information enabled us to identify 341 different homeless individuals who used the services of one or more of the agencies during the week of January 22<sup>nd</sup> to 28<sup>th</sup> or were staying temporarily less than five nights per week in the homes of participants of the neighbourhood survey.

### **High Risk and Absolute Homelessness**

In keeping with the approach adopted by Mayor's Homelessness Action Task Force (Toronto, 1999), the July, 2000 study did not differentiate between individuals at high risk of homelessness and those who were absolutely homeless. However, the current study (January, 2001) sought to determine the number of homeless people who were absolutely without housing.

The results showed that 100 people in Sudbury were absolutely homeless in late January, 2001. Nearly all of the agencies participating in the count (12 of 16) identified one or more of their clients who were absolutely homeless. Half of these individuals were female (50%), 19% were Aboriginals,

20% were Francophones, and just over half were Anglophone, non-Aboriginal people (54%). Over a third of these individuals were children (9%) or adolescents (27%) and the remainder were adults between the ages of 20 to 59 years of age. The children were with their mothers at the YWCA Geneva House.

**Table 1: Shelters and Agencies Identifying the Homeless Population  
July, 2000 and January, 2001<sup>a</sup>**

Agency Name	July, 2000		January, 2001	
	Number of People	Percentage of Total	Number of People	Percentage of Total
Elgin Street Mission	103	22.3	50	15.2
Salvation Army Family Services	86	18.6	130	39.6
Salvation Army Shelter	79	17.1	27	8.2
YWCA Geneva House	51	11	37	11.3
YMCA Employment and Career Services	20	4.3	16	4.9
Ontario Works	18	3.9	1	0.3
Foyer Notre Dame House	15	3.2	7	2.1
Pinegate Men's <sup>b</sup>	14	3	--	--
Canadian Mental Health Association	11	2.4	8	2.4
Sudbury Action Centre for Youth	10	2.2	9	2.7
Sudbury Regional Police Services	10	2.2	--	--
Rockhaven <sup>b</sup>	9	1.9	--	--
Elizabeth Fry Society	8	1.7	5	1.5
Canadian Red Cross Sudbury Branch/ Housing Registry Program	7	1.5	3	0.9
Crisis Intervention Program <sup>b</sup>	4	0.9	--	--
N'Swakamok Native Friendship Centre	4	0.9	2	0.6
Inner City Home of Sudbury	3	0.6	2	0.6
Pinegate Women's <sup>b</sup>	2	0.4	--	--
Participation Project	1	0.2	--	--
Overcomers	--	--	4	1.2
Service Familial de Sudbury - Family Service	--	--	14	4.3
John Howard society	--	--	6	1.8
Street survey/other	10	2.5	20	5.9

<sup>a</sup> Note that this list includes the duplicated cases.

## Characteristics of Homeless People

### *Age*

The 341 people identified in the homeless count included 43 infants and children under age 13, 61 adolescents aged 13 to 19, and four seniors over the age of 65. The age breakdown of the homeless people is shown in Table 2. In general, the proportions of individuals in the various age groups were quite similar in July, 2000 and January 2001. For example, children and adolescents represented 28% of the homeless people in July 2000 and 31% in January, 2001; approximately forty percent were young adults between the ages of 20 and 39 in both studies; and only a small proportion of homeless people were older adults 60 years of age or older in both July and January. Nearly three-quarters (76) of the 114 homeless children and adolescents were identified as being with their parents. The remainder of the adolescents accessed services on their own.

Figure 1 shows a comparison of the age groups of homeless people in the current study with the July 2000 study and an earlier study of the homeless population conducted by ACES in 1995<sup>2</sup>. The results shown in Figure 1 show the similarities in the age groups of homeless people between the 2000 and 2001 studies, confirming the larger number of children among homeless people compared to 1994.

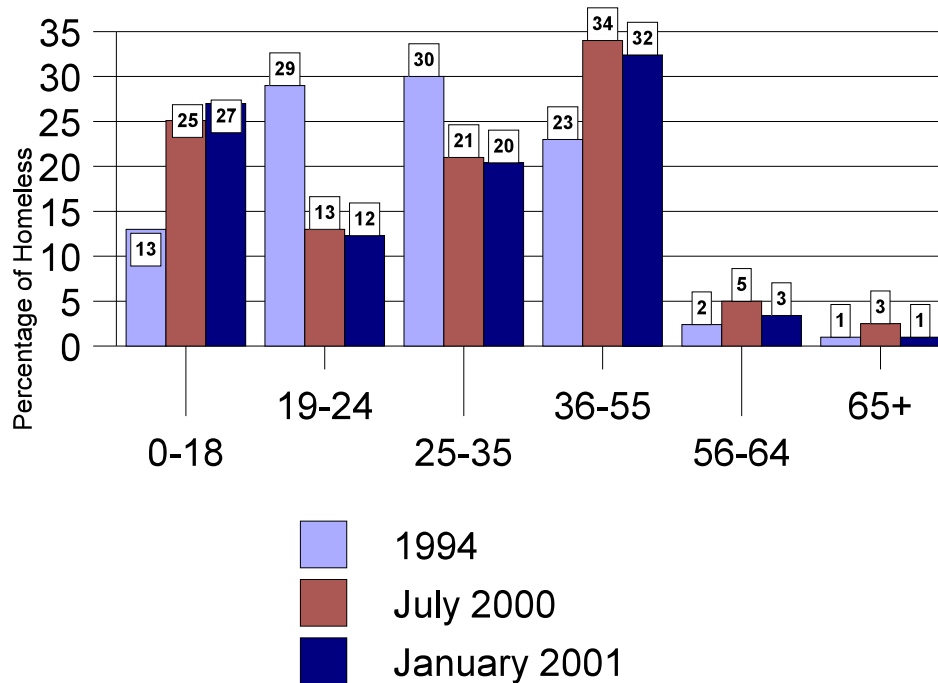
**Table 2: Homeless Population by Age Groups  
July, 2000 and January, 2001**

Age Groups	July, 2000		January, 2001	
	Number	Percentage	Number	Percentage
0 - 5	30	7.4	21	6.5
6 - 12	23	5.6	22	6.8
13 - 19	61	15	57	17.6
20 - 29	79	19.4	68	21
30 - 39	87	21.4	61	18.8
40 - 49	82	20.1	58	17.9
50 - 59	27	6.7	33	10.5
60 - 69	13	3.2	3	0.9
70+	5	1.2	1	0.3

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<sup>2</sup>It is important to note that the methodologies used in the two studies were different. The 1994 statistics were based on the clients of a housing registry operated by Crisis Housing Liaison. Three hundred and thirty people on the registry for the full year in 1994 were homeless.

Figure 1: Homeless Population in Sudbury  
By Age Groups, 1994, 2000, and 2001



**Gender and Age**

Figure 2 compares the gender of homeless people in July 2000 and January 2001 and indicates that women represented a slightly larger proportion of the people who were homeless in January compared with July. As noted above, fully half of those who were absolutely homeless were women. Figures 3 and 4 indicate that the proportions of homeless males and females were similar at younger ages. However, in January, 2001, females were the majority among adolescents who were homeless. The gender split widened among older age groups, with male homelessness increasing with each age category in both July and January.

Figure 2: Homeless Population By Gender

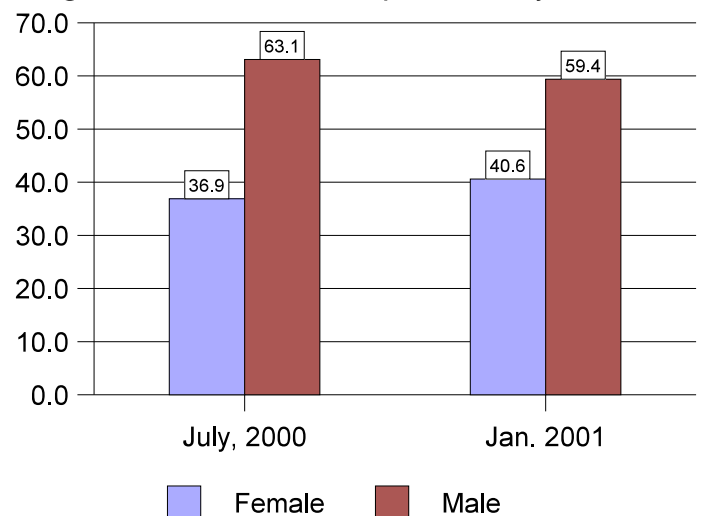


Figure 3: Homeless Population  
By Age and Gender, July 2000

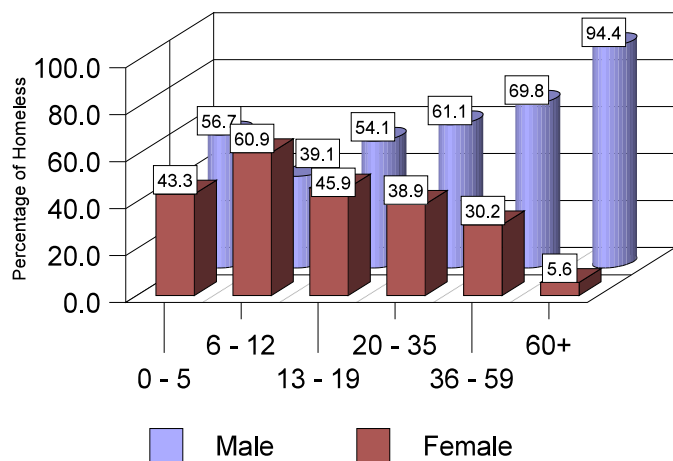
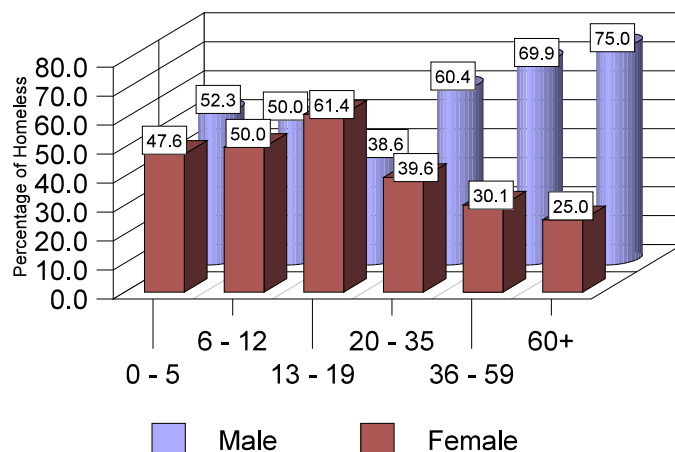


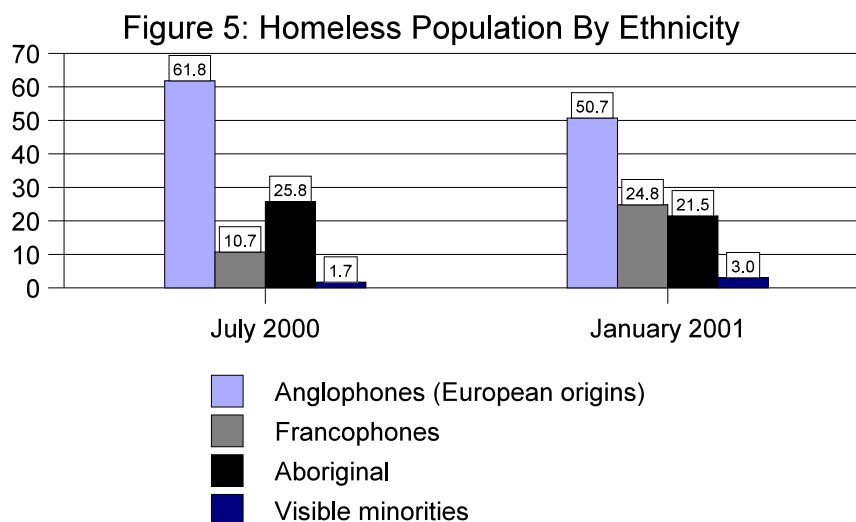
Figure 4: Homeless Population  
By Age and Gender, January 2001



### *Ethnicity*

As was also found in July, 2000, the majority of homeless people had European backgrounds (72.5% in 2000 and 75.6 in 2001). However, while Francophones were under-represented in the July 2000 count, they accounted for 24.2% of the homeless people in January 2001. A majority of the Francophones were clients of Genevra House, Service Familial de Sudbury—Family Service, Sudbury Action Centre for Youth, and the Elgin Street Mission.

Similar to the finding in July 2000, Native people were greatly over-represented among the homeless population, with 25.8% being Aboriginal in July and 21.5% in January (see Figure 5). In both 2000 and 2001, the percentage of homeless people who were members of a visible minority group was similar to their proportion in the Sudbury population. According to Statistics Canada (1996), the 1996 census data indicated that the visible minority population represented 1.8% of the total population, and Aboriginal people made up 1.3% of the population in the Census Metropolitan Area (CMA) of Sudbury, while those of French origins made up 26.3%.



### ***Marital/Family Status***

The majority of both men and women who were homeless were single/unattached (85% of the men and 77% of the women). As was also found in July, 2000, there were significant differences between women and men in their family status, with more homeless men being single, divorced, separated, or widowed compared to women<sup>3</sup> (see Table 3). However, a higher proportion of both women and men who were homeless in January were single people compared to the July results. Nevertheless, homeless women were more likely than men to have a child or children.<sup>4</sup> Over a quarter of the women over the age of 19 had one or more children (26.3%) compared to 6.1% of the men.

**Table 3: Gender and Family Status  
July, 2000 and January, 2001**

Family Status	July, 2000		January, 2001	
	Women %	Men %	Women %	Men %
Married/Common Law	22.8	10.8	17.3	6.8
Single/unattached	50	66.5	77.4	84.8
Divorced/widowed	27.2	22.7	5.3	8.4

<sup>3</sup>  $\chi^2(2, n = 324) = 9.4, p < .01$

<sup>4</sup>  $\chi^2(1, n = 340) = 27.6, p < .001$

Table 4 compares the characteristics of homeless adults with children in July, 2000 and January, 2001. The general patterns in the results were similar; however, in January, a slightly larger proportion of the homeless adults with children were women, single or divorced individuals, and people who were not receiving any social assistance or government benefits.

**Table 4: Characteristics of Homeless Adults with Children  
July, 2000 and January, 2001**

	<b>July, 2000</b>	<b>January, 2001</b>
<b>Characteristics</b>	<b>Percentage</b>	<b>Percentage</b>
Gender		
Women	67	80
Men	33	20
Family status		
Married/common law	58	47
Single/divorced	42	53
Receipt of benefits		
Receiving benefits	83	77
No benefits	17	23

### **Social Support/Welfare Benefits and Reasons for Homelessness**

#### ***Receipt of Social Support/Welfare Benefits***

While the proportions of the adults aged 18 and over who were not receiving any social support benefits in July, 2000 (47%) and January, 2001 (40%) was similar, a slightly larger proportion of homeless people were receiving some type of benefits in January. As in July, the subgroups of the homeless population who were less likely to be receiving social support were youth, seniors, and Francophones (see Table 5). With the exception of Francophones and seniors, however, the proportion not receiving any benefits was smaller than was found in July, 2000. It is also important to note that the number of homeless seniors identified in the count in January, 2001 was very small (n=4); thus, the findings for seniors must be treated with caution. Individuals who were most likely to be receiving benefits were women, adults aged 20 to 59, people who had children, and those in couple relationships.



**Table 5: Percentage of Homeless People Aged 17+ Receiving Social Support by Gender, Age, Presence of Children, Marital Status, Ethnicity and Linguistic Groups July, 2000 and January, 2001**

Background Characteristics	July, 2000		January, 2001	
	Receiving Benefits	Not Receiving Benefits	Receiving Benefits	Not Receiving Benefits
<i>Gender</i>				
Female	58.8	41.3	62.1	37.9
Male	50.7	49.3	58.7	41.3
<i>Age</i>				
18 to 19	19.4	80.6	42.9	57.1
20 to 59	57.0	43.0	62.4	37.6
60+	44.5	55.5	25.0	75.0
<i>Presence of Children</i>				
No Children	48.2	51.8	56.8	43.2
Children	84.2	15.8	76.9	23.1
<i>Marital Status</i>				
Married/Common Law	72.1	27.9	62.9	37.1
Single	44.5	55.5	59.7	40.3
Divorced/Separated/Widowed	67.7	32.3	57.1	42.9
<i>Ethnicity<sup>a</sup></i>				
European Origins	52.0	48.0	46.8	53.2
Aboriginal	56.5	43.6	54.5	45.5
<i>Linguistic Groups</i>				
Anglophones	58.2	41.7	54.8	45.2
Francophones	45.2	54.8	38.4	61.5

<sup>a</sup> The number of visible minority homeless people was very small. Thus figures are not shown for this group.

### ***Reasons for Homelessness***

Table 6 summarizes the main reasons for homelessness in Sudbury in July, 2000 and January, 2001. While the same reasons were given at both data collection points, the relative importance of the reasons differed somewhat. While the primary reason given for homelessness in July was unemployment and low wages, this was cited by a smaller proportion of people in January. In contrast, domestic violence was the main reason for homelessness in January; this was identified as the cause of homelessness for nearly a quarter of the homeless people who participated in the study in January.

Problems with social assistance remained the second most frequently mentioned reason for homelessness in both July and January. People are forced into homelessness when they are deemed ineligible for support, are cut-off from benefits, when cheques are late, or when their benefits do not cover the cost of living. A related problem is the lack of affordable housing. This was the third reason given for homelessness in July and the fourth in January. An inability to pay the rent, eviction, or inadequate/unsuitable housing force people into homelessness.

Relocating also places vulnerable people at risk of homelessness if they have no place to stay while they become established, obtain social assistance, or secure employment and this was among the main reasons given for homelessness in January, 2001. A larger proportion of the homeless population identified the reason for homelessness as stemming from transience or relocation in January compared with July (16% in January versus 6% in July). However, it is possible that some of the transient, homeless population in Sudbury do not access services in the summer when, for example, they can sleep outdoors. In winter, this is clearly more difficult.

Social and health problems such as family issues, illness, mental illness, and substance abuse were also issues contributing to homelessness in Sudbury, as in other urban centres. It should be noted that, while a smaller proportion of people were homeless due to substance abuse problems in January, this was likely due to the lack of participation in the second study by the agencies serving this population. Finally, people released from jail are also at risk for homelessness in both summer and winter.

### ***Reasons for Homelessness by Gender, Age, and Ethnicity***

Boxes 1 and 2 list the main reasons for homelessness among various sub-groups, in order of importance. The results show that there are more commonalities than differences in the main reasons for homelessness for various sub-groups. For example, problems with welfare, unemployment or low wages, inability to pay rent or mortgage, and domestic violence were cited as main reasons for homelessness for most subgroups shown in Boxes 1 and 2. The problems with social assistance included circumstances such as being deemed ineligible for benefits or being cut-off, the inadequacy of welfare benefits or other government benefits in covering the costs of living, and cheques being late in arriving.

**Table 6: Main Reasons for Homelessness, July, 2000 and January, 2001**

<b>Reasons for homelessness:</b>	<b>July, 2000</b>		<b>January, 2001</b>	
	<b>Number of Responses</b>	<b>Percentage of Responses</b>	<b>Number of Responses</b>	<b>Percentage of Responses</b>
Problems with work: <ul style="list-style-type: none"> <li>• Unemployment</li> <li>• Seeking work</li> <li>• Low wages</li> </ul>	89	22.7	34	11.6
Problems with social assistance: <ul style="list-style-type: none"> <li>• Welfare not adequate/late</li> <li>• Social assistance cut</li> <li>• Waiting for disability pension</li> <li>• Does not qualify for welfare</li> <li>• No money</li> </ul>	80	20.4	51	17.6
Problems with housing: <ul style="list-style-type: none"> <li>• Unable to pay rent or mortgage</li> <li>• Evicted or kicked out</li> <li>• Housing not adequate</li> </ul>	56	14.3	41	14.1
Domestic violence	45	11.5	65	22.4
Substance abuse	37	9.4	8	2.8
Family Issues <ul style="list-style-type: none"> <li>• Divorce or separation</li> <li>• Family problems (violence, abuse etc.)</li> </ul>	28	7.1	17	5.9
Travelling/transient	13	3.3	25	8.6
Relocated, transferred, or moving	12	3.1	22	7.6
Illness or mental illness	11	2.8	15	5.2
Out of jail	8	2.0	8	2.8
Other	13	3.3	6	2.1
<b>TOTAL RESPONSES</b>	<b>392</b>	<b>100</b>	<b>290</b>	<b>100</b>

As was noted in the findings from July, 2000, there were also differences in the relative importance of the reasons for the various subgroups of homeless people in January. For example, domestic violence was the most important factor for adult women and male adolescents as well as francophones and Aboriginals. Problems with welfare and family issues were cited by female adolescents as the primary reasons for homelessness. One notable difference between the main reasons for homelessness found in July, 2000 and January, 2001 was that relocation or transience was identified by all sub-groups except for female teens, and was a more prominent factor in the winter than it had been in the summer data collection. However, this finding could reflect a difference in patterns of service usage whereby it may not be necessary for people who are transient to use shelter services when the weather is warm while the extremely cold temperatures in winter likely ensure that most homeless people will seek out services during the winter months.

**Box 1: Main Reasons for Homelessness by Gender and Age, January, 2001**

<b>Adult Males</b>	<b>Adult Females</b>	<b>Adolescent Males</b>	<b>Adolescent Females</b>
<ul style="list-style-type: none"> <li>• Relocated/transient</li> <li>• Unemployment/ Seeking work</li> <li>• Unable to pay rent or mortgage</li> <li>• Problems with welfare</li> <li>• Mental illness or illness</li> <li>• Family issues/ divorce/separation</li> </ul>	<ul style="list-style-type: none"> <li>• Domestic violence</li> <li>• Problems with welfare</li> <li>• Relocated/ transient</li> <li>• Unemployment/ seeking work</li> <li>• Unable to pay rent or mortgage</li> <li>• Divorce/separation</li> </ul>	<ul style="list-style-type: none"> <li>• Domestic violence</li> <li>• Unable to pay rent</li> <li>• Unemployment/ seeking work</li> <li>• Family issues Unemployment</li> <li>• Problems with welfare</li> <li>• --</li> </ul>	<ul style="list-style-type: none"> <li>• Problems with welfare</li> <li>• Family issues</li> <li>• Domestic violence</li> <li>• Unemployment</li> <li>• Unable to pay rent or mortgage</li> <li>• Refuses services</li> </ul>

**Box 2: Main Reasons for Homelessness by Ethnicity, January, 2001**

<b>Anglophones</b>	<b>Francophones</b>	<b>Aboriginals</b>
<ul style="list-style-type: none"> <li>• Relocated/transient</li> <li>• Domestic violence</li> <li>• Unemployment/ seeking work</li> <li>• Unable to pay rent or mortgage</li> <li>• Problems with welfare</li> <li>• Family issues/divorce</li> </ul>	<ul style="list-style-type: none"> <li>• Domestic violence</li> <li>• Problems with welfare</li> <li>• Unable to pay rent or mortgage</li> <li>• Unemployment/ seeking work</li> <li>• Relocated/ transient</li> <li>• Mental illness/illness</li> </ul>	<ul style="list-style-type: none"> <li>• Domestic violence</li> <li>• Unemployment/seeking work</li> <li>• Relocated/transient</li> <li>• Substance abuse</li> <li>• Problems with welfare</li> <li>• Unable to pay rent or mortgage</li> </ul>

**Service Utilization by the Homeless Population**

Four agencies provided services to three-quarters of the homeless population in Sudbury (the Elgin Street Mission, Salvation Army Family Services, the Salvation Army Shelter, and YWCA Genevra House, see Table 1, presented above). However, it must be recognized that the study was conducted over the course of one week at the end of January, 2001. The results presented a brief snapshot that does not reflect the full scope of services utilized by the homeless population.

The main patterns of service utilization by subgroups of homeless people based on age and cultural group who were identified in the study are shown in Boxes 3 and 4. This reflects the agencies used most by these groups. As may be expected, the major shelters and services for homeless people in Sudbury were among the main services used by their target groups (i.e. the Salvation Army Family Service, the Salvation Army Shelter, YWCA Genevra House, Foyer Notre Dame House, and the Elgin Street Mission). The YMCA Employment and Career Services were used by men, adolescents, Anglophones, and Francophones. In addition, the Service Familial de Sudbury — Family Service was among the five agencies used most often by adult women, adolescents, and Francophones.

Table 7 shows a comparison of the length of time served by the agencies in July and January, and indicated that most of the homeless people used the services for less than a day (minutes or hours). As was also found in July, a small proportion of the clients used the services for the entire week of the data collection period. However, these findings must be treated cautiously since many service providers did not report the multiple uses of the services, instead reporting only unique cases.

**Box 3: Shelters and Agencies Used Most by Homeless Men, Women,  
and Adolescents, January, 2001**

<b>Adult Men</b>	<b>Adult Women</b>	<b>Adolescents</b>
<ul style="list-style-type: none"> <li>• Salvation Army Family Services</li> <li>• Elgin Street Mission</li> <li>• Salvation Army Shelter</li> <li>• YMCA Employment and Career Services</li> <li>• John Howard Society</li> </ul>	<ul style="list-style-type: none"> <li>• Salvation Army Family Services</li> <li>• YWCA Genevra House</li> <li>• Elgin Street Mission</li> <li>• Service Familial de Sudbury—Family Service</li> <li>• Elizabeth Fry Society</li> </ul>	<ul style="list-style-type: none"> <li>• Salvation Army Family Services</li> <li>• Service Familial de Sudbury—Family Service</li> <li>• Foyer Notre Dame House</li> <li>• YMCA Employment and Career Services</li> <li>• YWCA Genevra House</li> </ul>

**Box 4: Shelters and Agencies<sup>a</sup> Used Most by the Anglophones,  
Francophones, and Aboriginal People, January, 2001**

<b>Anglophones</b>	<b>Francophones</b>	<b>Aboriginals</b>
<ul style="list-style-type: none"> <li>• Salvation Army Shelter</li> <li>• Elgin Street Mission</li> <li>• YWCA Genevra House</li> <li>• YMCA Employment and Career Services</li> <li>• Foyer Notre Dame House</li> </ul>	<ul style="list-style-type: none"> <li>• YWCA Genevra House</li> <li>• Service Familial de Sudbury—Family Service</li> <li>• Elgin Street Mission</li> <li>• Sudbury Action Centre for Youth</li> <li>• YMCA Employment and Career Services</li> </ul>	<ul style="list-style-type: none"> <li>• Elgin Street Mission</li> <li>• YWCA Genevra House</li> <li>• Salvation Army Family Services</li> <li>• John Howard Society</li> <li>• Elizabeth Fry Society</li> </ul>

<sup>a</sup> Excludes the Salvation Army Family Service because the agency did not record the information on ethnicity.

Most of the service providers indicated that they also referred the homeless clients to other agencies in the community as well as to professional or private sector services. However, referrals were noted for less than 10% of the homeless people. Table 8 shows the referral patterns for the homeless people in the study and indicates that they were referred to a range of services. A substantially larger proportion of the homeless people were referred to health and housing services than was noted in the July, 2000 study. The “other” services for 2001 that are not shown in Table 8 were services such as the soup kitchen, sexual assault centre, hospital, churches, and other local charities.

**Table 7: Length of Time Served by Agencies  
July, 2000 and January, 2001**

	<b>July, 2000</b>	<b>January, 2001</b>
<b>Length of Time</b>	<b>Percentage</b>	<b>Percentage</b>
Minutes or hours	38.2	93.6
One or two days	24.0	2.5
Three to six days	27.8	--
One week or more	10.0	3.9

**Table 8: Referral Patterns for Homeless People  
July, 2000 and January, 2001**

<b>Agency or Service</b>	<b>July, 2000 Percentage</b>	<b>January, 2001 Percentage</b>
Sudbury Housing	12.2	20.7
Ontario Works	9.8	6.9
Foyer Notre Dame	7.3	3.4
N'Swakamok Native Friendship Centre	7.3	3.4
Local motels	7.3	3.4
Legal Clinic	7.3	3.4
Sudbury Regional Police Services	4.9	--
Local lawyers	4.9	--
Hostel	4.9	--
Canadian Mental Health Association	4.9	--
YWCA Genevra House	2.4	--
Salvation Army Shelter	2.4	3.4
Pinegate Addiction Service	2.4	--
Health and housing services	2.4	34.4
Other	19.5	21

<sup>a</sup> Note that referrals were recorded for less than 10% of the homeless people in the study.

## **Phase II: Neighbourhood Survey**

In total, 195 residents participated in the survey. As was found in the July, 2000 neighbourhood survey, about two-thirds of the participants were women (67%). The participants ranged in age from 17 to 87, with a mean of 44. Reflecting the dominant ethnic composition of the population in Sudbury, 45% of the respondents described themselves as English Canadians or of British, Irish, or Scottish origins, 40% were Francophones, and an additional 13% reported a European heritage (primarily Italian, German, Polish, Ukranian, and Finnish). Due to the over-sampling of low income neighbourhoods, 67% of the respondents described their income level as below average. Similar proportions reported that their incomes were average (17%) and above average (16%).

### **Perceived Reasons for Homelessness and Factors Related to Homelessness**

#### *Perceived Reasons for Homelessness*

The residents were asked to give their opinions about homelessness in two ways; first, in the form of an open-ended question, and second, by indicating their agreement or disagreement with a set of factors related to homelessness. The respondents in the January, 2001 neighbourhood survey generally identified the same reasons for homelessness in Sudbury as did the sample from July, 2000 (see Table 9).

The two main reasons identified were government policies and cut-backs and unemployment or lack of education. However, a larger proportion of the 2001 respondents believed that government policies, cut-backs, and a lack of funding for social assistance were causes of homelessness. In addition, nearly twice as many people identified mental health or health problems as reasons for homelessness. Fewer of the residents in the Time 2 sample agreed that a lack of affordable housing, poverty, unemployment and a lack of education were central causes.

The main difference between the responses of residents and the homeless people regarding the reasons for homelessness was that the residents did not recognize the extent to which domestic violence is a factor related to homelessness. Another difference stemmed from the belief of some residents that homelessness results from personal failure or a lifestyle choice while none of the homeless people in either study reported this.



**Table 9: Comparison of Residents' and Homeless People's Explanations of Homelessness in Sudbury, July, 2000 and January, 2001**

Reasons	Residents		Homeless People	
	Percentage of Responses		Percentage of Responses	
	2000	2001	2000	2001
Unemployment/Lack of education & qualifications	30.3	23.7	22.7	11.6
Lack of affordable housing/High costs of living and rent/low income or poverty	21.6	8.6	14.3	14.1
Welfare cut backs or lack of social assistance <ul style="list-style-type: none"> <li>• Government policies and lack of funding</li> <li>• Eligibility requirements for welfare</li> <li>• Mike Harris</li> </ul>	20.1	25.8	20.4	17.6
Personal failure/life style or choice of life style <ul style="list-style-type: none"> <li>• Lazy people</li> <li>• Bankruptcy or poor money management</li> <li>• People who do not want help</li> </ul>	9.3	10.8	--	--
Unhealthy family relationship <ul style="list-style-type: none"> <li>• Lack of family support</li> <li>• Kicked out</li> <li>• Family cycle</li> <li>• Youth who left home/teenage runaway</li> <li>• Divorce</li> </ul>	5.3	8.1	7.1	5.9
Need for support or information/ people with no where to go/Transient	4.6	8.3	6.4	16.2
Mental illness/health problems	3.4	8.1	2.8	5.2
Substance abuse	1.9	2.2	9.4	2.8
Selfish community	1.6	0.8	--	--
Lost hope	1.6	0.3	--	--
Abuse, sexual abuse, or domestic violence	--	2.2	11.5	22.4
Release from jail	--	--	2.0	2.8
Other	--	0.3	--	2.1
<b>TOTAL RESPONSES</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

<sup>a</sup> Results are based on the multiple responses of the participants, therefore the number of responses is greater than the number of participants.

### ***Factors related to Homelessness***

A majority of the participants in both the Time 1 and Time 2 neighbourhood surveys viewed all of the factors listed in Table 10 as contributing to homelessness in Sudbury, with the exception of divorce or separation. The same factors — unemployment, increased poverty, and alcohol or substance abuse— were identified as the most important causes of homelessness in both studies. However, in January, 2001, a slightly larger proportion of residents saw alcohol or substance abuse as the primary factor linked to homelessness compared to July, 2000. Mental illness was also perceived to be a more significant factor in the Time 2 study, with 83% rating it as being important or very important, compared to 64% of the Time 1 sample.

In January, 2001, the residents were also more concerned with the shortage of social assistance, inadequate welfare payments, and the lack of funding support for social programs in general. Similarly, a significantly larger proportion of the residents agreed in January, 2001 that a lack of affordable housing, low wages, and excessive rent costs were important causes of homelessness locally.

As Table 10 indicates, there were statistically significant differences between the responses in July, 2000 and January, 2001 indicating higher ratings of the importance of 7 of the 12 factors related to homelessness on the part of residents in the Time 2 survey. The data gathered do not provide an explanation for these differences and it is possible that they are due to random differences in the samples generated. Alternatively, the media coverage of homelessness, including the local coverage of the July, 2000 study, may have contributed to these findings.

### **Personal Experiences with Homeless People**

The survey included questions on personal experiences with homelessness. The questions determined whether the residents, members of their families, or friends had ever been homeless and whether any personal acquaintances or friends, living anywhere in Canada, had ever been homeless. A smaller proportion of the residents in the January study reported that they, a family member, or a friend of theirs had been homeless compared to the July, 2000 study (19% versus 34.6%, respectively)<sup>5</sup>. The majority of the respondents reported that it was a friend who had been homeless rather than a family member or themselves<sup>6</sup> (see Figure 6). The main reasons given to explain this homelessness were similar to those shown in Table 11. The primary reasons given for their own homelessness or that of family members or friends were family issues, unemployment or poverty, domestic violence, substance abuse, and problems with housing (i.e. the high cost of housing).

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<sup>5</sup> The question was worded as follows: “Have you, any member of your family, or a friend ever been homeless?”

<sup>6</sup> Note that Figure 6 provides a breakdown of the sub-sample of individuals who reported that they, a family member, or a personal friend had been homeless.

**Table 10: Residents' Ratings of Factors Contributing to Homelessness in Sudbury<sup>a</sup>  
July, 2000 and January, 2001**

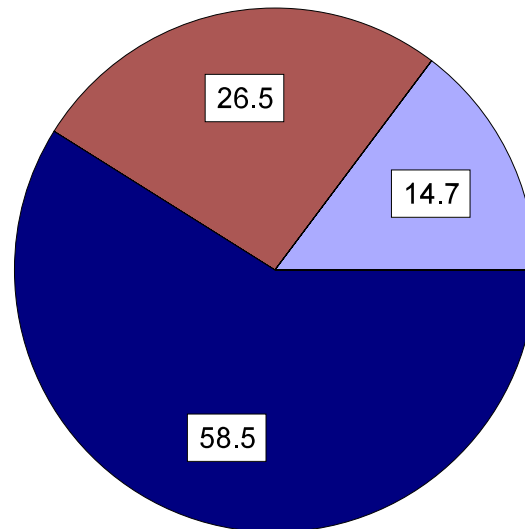
Factors	July, 2000		January, 2001		
	Agree (%)	Agree Completely (%)	Agree (%)	Agree Completely (%)	Order of importance
Unemployment	25.8	55.1	23.6	61.0	2
Increased poverty	23.7	55.1	15.9	67.7	3
Alcohol/substance abuse	23.2	54.1	19.3	68.8	1*
Lack of funding support for social programs	22.6	51.1	20.7	58.5	7
Shortage of social assistance	22.8	42.1	20.4	60.2	5*
Mental illness	22.9	41.3	22.5	60.4	4*
Low wages	20.3	41.4	21.5	54.4	9*
Inadequate welfare	19.7	40.4	15.0	65.3	6*
Lack of affordable housing	22.3	34.5	23.7	54.7	8*
Excessive rent cost	16.7	39.7	27.3	45.4	10*
Domestic violence	18.8	35.7	23.3	36.8	11
Divorce/separation	18.0	24.6	20.2	29.0	12

<sup>a</sup> Note that the issues are listed in order of level of agreement among residents by summing the percentages in the categories *Agree* and *Completely Agree*.

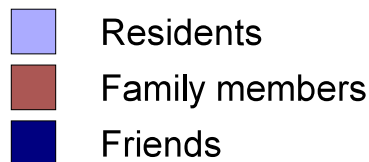
\* Signifies that there was a statistically significant difference between the attitudes of residents in the July, 2000 and January, 2001 studies regarding these factors ( $p < .05$ ).

In comparison with the July, 2000 survey, a smaller proportion of the January, 2001 respondents indicated that *they personally knew someone in Sudbury* who was homeless (35.9% versus 23.2% respectively)<sup>7</sup>. The most common reasons cited differed somewhat from the responses to the more general question on personal experiences with homelessness (i.e. among themselves, family, or friends) since substance abuse, unemployment, family issues, problems with social assistance, and mental illness or illness were given most often as explanations for acquaintances in Sudbury being homeless (see Table 11).

**Figure 6: Distribution of Responses for those with Personal Experience of Homelessness**



"Who was homeless?"



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<sup>7</sup> The question was worded as follows: "Have you ever personally known anyone in Sudbury who was homeless?"

**Table 11: Comparison of Residents' Explanations for Prior Homeless Among Themselves, Family Members, or Friends, January, 2001**

Reasons	Percentage of Responses		Rank Order
	Reasons for Self, Family, or Friends	Reasons for Homelessness of Acquaintances in Sudbury	
Unhealthy family relationship <ul style="list-style-type: none"> <li>• Lack of family support</li> <li>• Kicked out</li> <li>• Family cycle</li> <li>• Youth who left home/teenage runaway</li> <li>• Divorce</li> </ul>	22.2	15.7	3
Unemployment/Lack of education & qualifications	19.1	17.2	2
Abuse, sexual abuse, or domestic violence	13.6	4.5	8
Substance abuse	12.3	20.4	1
Personal failure/life style or choice of life style <ul style="list-style-type: none"> <li>• Lazy people</li> <li>• Bankruptcy or poor money management</li> <li>• People who do not want help</li> <li>• People with no where to go/transient</li> </ul>	10.5	9.6	6
Lack of affordable housing/High costs of living and rent/low income or poverty	7.4	4.5	7
Mental illness/health problems	6.8	13.4	4
Welfare cut backs or lack of social assistance <ul style="list-style-type: none"> <li>• Government policies and lack of funding</li> <li>• Eligibility requirements for welfare</li> <li>• Mike Harris</li> </ul>	6.2	13.4	5
Other	1.9	1.3	9
<b>TOTAL RESPONSES</b>	<b>100</b>	<b>100</b>	

<sup>a</sup> Results are based on the multiple responses of the participants.

### Residents' Perceived Solutions to Homelessness

Table 12 shows the residents views on how to address homelessness in Sudbury and compares the responses of the two neighbourhood surveys (Time 1 and Time 2). As in the previous survey, the primary solution identified by the residents was to provide more government funding for welfare, social services and programs to support homeless people. In addition, more than twice as many of the January, 2001 respondents mentioned the establishment of shelters compared to the earlier study. The other strategies mentioned most often in both studies pertained to creating more jobs and job assistance and working to create affordable housing

**Table 12: Residents' Views on Strategies for Addressing Homelessness  
July, 2000 and January, 2001**

	<b>July, 2000</b>	<b>January, 2001</b>
<b>Strategies</b>	<b>Percentage of Responses</b>	<b>Percentage of Responses</b>
More government funding for welfare, social services, and mental health services	44.8	35.5
Increase public awareness of the issue	14.1	1.7
Create more/better jobs and job assistance	12.4	10.7
Affordable housing	11.4	13.2
Establish more shelters	9.4	20.5
Community should provide donations	4	0.9
Change the provincial government	3	3.4
Conduct more research on homelessness locally	1	7.3
Other	–	6.8

### Phase III: Field Observations

The qualitative component involving observations of locations inhabited by homeless people in Sudbury was conducted in January during the week of the study (i.e. January 22<sup>nd</sup> to 28<sup>th</sup>). The goal of this phase of the study was to understand the circumstances of homeless people and to enable a comparison with the Time 1 data. The SPC researchers accompanied outreach workers providing services to homeless people as well as officers of the Sudbury Regional Police Service during a night shift. Interviews were also conducted with key informants in these and other agencies serving the homeless population. The excerpts shown below in italics are taken from field notes and transcribed interviews with the key informants.

The frigid temperatures in January had an obvious effect on the homeless population—it is simply not possible for people to sleep outdoors in the park or on benches. The temperature during the seven days between January 22<sup>nd</sup> and 28<sup>th</sup> varied between a maximum of -1 °C and a minimum of -17.5 °C with a mean temperature of -8, and snow or ice pellets were recorded every day except for January 26<sup>th</sup> (Ontario Weather Page, 2001). The snow depth ranged between 38.1 and 42.9 centimetres.

On Friday, January 26<sup>th</sup>, for example, the weather made it difficult for anyone to remain outdoors:

*The wind was blowing hard and it was snowing which made it somewhat difficult to walk and difficult to see. My face got cold quickly. I could not help but to wonder how people could survive out here in this harsh climate. There were only a few cars driving around. We walked down Elm Street to Elgin Street. We walked past the Mission towards the soup kitchen. There was nobody around. We walked under the Paris St. bridge, as it is a popular place for people who have nowhere else to go. Even under the bridge the swirling wind burned the exposed skin on my face.*

The main themes emerging from the field observations in July, 2000 and January, 2001 were quite similar, as is shown in Box 5. The main differences were related to the weather, as noted above. For example, in July, homeless people who were observed sleeping outside had covered themselves with coats and newspapers but they were not observed at heating vents. Conversely, in January, no one was seen sleeping outside; nor was anyone observed pushing a stroller or cart full of bags as was the case in July—it is quite difficult to manoeuvre a cart through the snow. There can be no doubt that other stressors are present for homeless people in both summer and winter, including the struggle to obtain food, personal hygiene, safety issues, and the psychological trauma of living by one's wits without secure shelter and a stable means of support.

While people were not observed to be sleeping outdoors in January, as was noted in the summer, there was some evidence that people were using some of the locations known to be occupied by homeless people—a duffle bag was seen under a bridge, a location that is often used by homeless people and numerous coffee cups littered an outdoor heating vent. The patterns of use of these locations differed between summer and winter since people could only stay in them for shorter periods of time during the coldest months.

<b>Box 5: Themes from Field Observations July, 2000 and January, 2001</b>		
<b>Themes</b>	<b>July, 2000</b>	<b>January, 2001</b>
Mental illness	✓	✓
Substance abuse	✓	✓
Homelessness among “regular folks”	✓	✓
Supportive relationships among homeless people	✓	✓
Accessing support services	✓	✓
Health issues	✓	✓
Daily hassles and stressors (e.g. carrying bags)	✓	--
Finding a place to sleep	✓	--
Finding a place to keep warm	--	✓
Homeless adolescents	✓	✓

**Note:** ✓ indicates that the issue/theme was observed directly.

The following sections describe the circumstances for homeless people in January, 2001 as observed by researchers on the team and by key informants. Comparisons are made with the Time 1 study when appropriate.

### **Finding a Place to Keep Warm**

Service providers pointed out the places where homeless people can be found, even in the winter. Several locations that had also been noted in July, 2000 were identified such as the alley which has large heating vents along the top of the wall providing a place where homeless people can go to find warmth, a rooming house, and unused buildings that homeless people use for shelter. A description of one building inhabited by homeless people provides a sense of the conditions:

*We went between buildings that are used as shelter. It was damp and clammy. When you opened the door it was obvious that people visited often because there were layers of cardboard lined up along the walls. There were clothes, magazines and broken glass lining the ground of this confined space. There was a slight smell of urine.*



*We went past the grate for the vent that blows the hot air. We went past there three times tonight, and there were a couple of woman and a man standing there having a cigarette; they had a box of doughnuts they were laughing and joking. They had jackets on and boots, but no hats and no mitts.*

*A key informant mentioned the places to be looking for homeless people. These places were out of the way — staircases, alcoves, and heat vents located in the down town area. Often the street people will sit there to get warm, if only for a few minutes. He talked about the places where most outreach workers don't look that are on top of the buildings; there are lots of heat vents up on the tops of buildings and they are out of sight so nobody bothers the homeless people who stay there. We talked about one situation where he used to travel the roof tops of some of the buildings, and he found one individual who had a tent set up there and had found a little 14-inch TV and was using hydro from one of the tenants. That is where he lived and nobody really took notice of him.*

The field observation conducted for this study suggested that, in the winter, few homeless people attempt to stay all night in the meagre shelter provided by these locations. The service providers confirmed that most homeless people access services during the coldest months but there are gaps in service that leave some people with nowhere to go:

*In the wintertime, they're mostly in shelters... There's the Salvation Army for men but nowhere for teenagers, children and women. We've had women who have looked for lodging and had nowhere to go. Sometimes we've let people sleep in the lobby of the agency because there was nowhere for them to go.*

The problem of service gaps is clearly more acute in winter for those who are not in a secure shelter at night. Key informants identified the problem regarding a lack of services for homeless women on the streets in Sudbury:

*It was cold last night; we had a call about a female — we deal with her often. She was laying in the laneway and Sally Ann took her in but its closed after 11:00 pm. There's the detox but she had to have consumed alcohol [and] the Genevra House but she had to have been abused.*

There is little that the officers of the Sudbury Police Service can do to assist homeless people after service providers have closed for the night: “Not a lot we can do; no grounds for arrest”.

### **Lack of Winter Clothing**

While most people accessing services were wearing coats, hats, and boots, some homeless people appeared not to have adequate clothing to protect themselves from the cold weather:

*We stopped and talked to two men at approximately 2:00 a.m. One man was obviously intoxicated. The other man was not showing signs of intoxication. Neither*

*one of them were dressed appropriately for the weather. Neither had on hats or mitts. One man wore his coat unbuttoned. When I asked him if he was cold he chuckled, and said that he had lived all his life on the streets and he was used to it.*

*The first night [I worked at the agency] I almost wanted to cry seeing the things that I did, so many people coming in the dead of winter wearing almost no clothes, some of them.*

As part of the outreach program of the Sudbury Action Centre for Youth, the workers carry hats and mittens with them to provide these items to people on the streets. However, the outreach program does not operate every night. In addition, it is not possible for them to find each individual and provide all items they may require.

### **Regular Folks: The Routinization of Homelessness**

In the Time 1 study, it was noted by key informants that many homeless people cannot be identified as such by their appearance. This was also mentioned in January:

*You can't be sure sometimes if they are homeless. I see them walking the streets. Sometimes people are setting up tents but that doesn't happen often. But if it does we get called in for that. If we come across someone, they usually say they're staying with a friend. They don't tell the police they're homeless. If they have no fixed address, they're usually travelling... When you look at them it's hard to identify them as homeless.*

*Lots [of the homeless people] were just like you and me... This one lady got a \$2.50 cheque from welfare 'cause apparently someone called and said she got money from something else but she had not received other moneys from another source. But until she brought in proof that she never received other money, welfare was not going to issue her a cheque...*

As Novac, Brown, and Bourbonnais (1996) have observed, the homeless population increasingly includes women and younger people, compared with the situation prior to the 1960s. However, Casavant (1999) noted that there is less awareness of homelessness among women because they are more likely than men to attend to their personal hygiene and clothing, therefore rendering their homeless status invisible to the public.

The problems are structural, with people being forced into homelessness due to the erosion of the social safety net, unemployment, and rising poverty. In a study of street youth Caputo, Weiler, and Anderson (1997, p. 23) concluded that "having a decent place to live, a decent job, and access to appropriate services definitely facilitates the transition to mainstream society. Conversely, therefore, the absence of these resources may represent a significant barrier to making a successful transition from the street."

## Helping Each Other: Supportive Relationships Among Homeless People

Prior studies of homeless people have shown that they form a supportive social network among themselves and this was also noted in our Time 1 study. Homeless people had been observed helping each other to deal with health problems and providing friendship, kindness, and support in accessing services. The field observations in January revealed similar findings. At the Elgin Street Mission, it was found that most people engaged others in conversation:

*It's not that people came to the agency in groups, but over the course of everyone coming in, they formed their groups of people to talk to.*

*Whatever the reason, [people were telling me] they had no family but they really seemed to feed off each other, as friends... like they had each other...*

*Out there, people of the street stick together. They see each other on a regular basis and form a mutual-aid system.*

However, it was observed that some homeless people remain alone, not forming connections with the other people being served by agencies.

## Health Issues

The research literature clearly demonstrates the link between homelessness and poor health due to a lack of access to health services. In January, 2001, health problems were identified by some people as the cause of their homelessness while for others, health problems may have developed as a result of their living conditions.

*One lady had to go into the hospital and have a cancerous kidney removed. She had been married for 26 years and for some reason why, I don't know... but when she got out of the hospital she didn't qualify for VON care. When she was going through the chemotherapy and radiation her boss didn't think her priorities were straight so fired her. And then her husband didn't think she was doing her house work or stuff so he kicked her out.*

*One man that I was talking to for quite some time, he actually started crying [when telling me about his circumstances]. He was in some type of car accident and lost an eye and there was some kind of brain damage so he couldn't do the job he was doing anymore, he didn't have the mental capacity... mentally he couldn't do it any more. He had a lawsuit against this drunk driver [who hit him when the man was walking down the street]. He couldn't get a disability.*

*A women said that she wasn't feeling very well—apparently she was very sick the night before, as the outreach worker was aware of the woman's situation. She was saying she was still feeling pretty sick. We talked and I asked her what she was up to, and she said "Just hanging out".*

Coping with illness while remaining outdoors on a cold January night provides some insight into the miserable circumstances endured by those who are absolutely homeless in Northern communities.

### **Accessing Services**

Service providers and key informants believed that homeless people access services in the winter or stay with friends. Outreach workers also make contact with people on the streets.

*The outreach worker asked a homeless woman if she still had some of the condoms left from the other day, because she had given the woman some at that time. The woman said that she would take some.*

*We went to check behind the Nim bins at the Eatons Centre because its quiet there and it's warm and the people of the downtown can sit there without being noticed. From there we went to the bus station and at the bus station we encountered a teen who I saw at the Action Centre the day before. As well, I have seen him at Foyer Notre Dame House. He is 17. He doesn't say much and has a sad look on his face all the time.*

*Seeing our faces throughout the week at the Mission, because it was a lot of the same people every single day, they would start talking to us and they wouldn't stop talking to us, after that...we just had to get a hello out! We heard a lot of life stories— they all needed someone to listen.*

*I saw someone at the Mission grab some food, stick it in a bag, and run out the door because there was someone out there who didn't want to come in.*

Some people feel shame and humiliation because of the need to access services. The published literature on best practices in services for homeless people emphasizes the importance of non-judgmental approaches that operate via “aggressive outreach” (Culhans, 1992). Outreach workers play an important role in monitoring the situations of homeless people and connecting them with services.

### **Mental Illness**

In the July, 2000 study, the field observations showed that mental illness is a visible cause of homelessness in Sudbury. Service providers and key informants also confirmed this. The January, 2001 study produced similar findings.

*We look for signs of schizophrenia, delusions of grandeur, the way they're dressed. If they're living somewhere—is there enough food? Is it clean and neat? If they're not caring for themselves, we can arrest them under the mental health act. The ones on the street are harder to assess—can't arrest them because they look ragged. Some may look okay but are homeless; can't identify them.*

*One guy said to me “We’re not from here.” He said “We started out on another planet and now we’re here— we’re going to go back one day and you will all see I’m right.”*

Research on homeless populations in various communities has shown that a substantial proportion of homeless people suffer from mental illness. It is also evident that the living conditions for homeless people exacerbate or even cause mental health problems. A report of the Toronto Disaster Relief Committee, based on sixty interviews with homeless people in 2000, states that a third of the respondents were suffering from depression and two thirds identified a range of mental health problems.

### **Substance Abuse**

It is sometimes difficult to determine, on the basis of observable behaviour, whether substance abuse or other physical or mental health problems may be producing unsteady, unusual, or disturbing conduct. The field research indicated that there were some homeless individuals who clearly had been drinking (i.e. the odour of alcohol was present); however, these individuals represented the minority of those accessing the services studied in the field observation.

### **Youth on the Streets**

The field observations indicated that there are homeless teens as young as 14 (perhaps younger) using local agencies and key informants confirmed that they attempt to monitor youth on the streets.

*The youngest that I talked to was a 14 year old boy; he was there without his parents and he was there every night, actually. Other than that, there was a 17 year old boy who was homeless and he told me that it was mental illness too.*

*[There were] two runaway girls who were around 16 or 15 maybe, they didn’t tell me their ages, but they did tell me that they were runaways.*

*A 17 year old boy who is known to the outreach workers as being homeless was observed “hanging out” by himself at the bus station. He can’t go to the Salvation Army, Bloor Street has been closed, and he can’t go to Foyer Notre Dame House... He’s wearing the same clothes he was wearing yesterday. When we asked him “do you know what are you doing” he just shrugs his shoulders and says “Whatever, just hanging out.” The outreach worker asked him where he was going to stay and he said “Well, you know, I have friends.” He sleeps by himself most of the time— anytime I have seen him he doesn’t really hang out with anybody else... When we went back down to the bus station, he was still there [sitting by himself] he hadn’t left, still hanging around. He wears a base ball hat, and he hasn’t shaved... could be 2 months growth on his face. His clothes are dirty, you can tell he hasn’t had a shower for awhile. He has nothing with him; he doesn’t carry anything. He really doesn’t say too much.*

Canadian research on street youth indicates that the vast majority of these youth (79%) have left their families because of circumstances in the home such as conflict, neglect, or abuse (Caputo, Weiler, & Anderson, 1997). These researchers also noted that youth who are on the streets are often more willing to accept help offered by service providers during their first two weeks on the street, perhaps due to fearfulness and uncertainty that they can cope with the circumstances of street life. Mobile outreach activities are therefore a vital aspect of service provision to this population.

## CONCLUSIONS

This study has confirmed many of the same trends revealed in our first report based on the July, 2000 data collection. The magnitude of the problem was confirmed with 341 homeless individuals identified in January compared with 407 individuals identified in July. Furthermore, in January, 2001, 100 of these individuals were absolutely homeless, using the restrictive definition of homelessness that has been rejected by many as underestimating the problem (Casavant, 1999). The smaller size of the overall homeless population in the January study may reflect seasonal fluctuations in homelessness, a decline in the number of homeless people in Sudbury, or it may simply be an artifact of the greater difficulty of collecting data in the winter months.

Many researchers and service providers acknowledge that the homeless population is fluid and ever-changing, with people moving from housing to homelessness due to circumstances such as job loss, inadequate income, and the changing eligibility requirements of income support programs. The results of the Time 1 and 2 studies reinforce the view that a broad definition of homelessness is required in order to understand and address the problem. In July, 2000 and January, 2001, we documented a local homeless population of well over 300 people (i.e. 341 in January and 407 in July) who were on the brink of homelessness or were absolutely homeless. The Time 2 study showed that nearly a third of them (29%) had no shelter. The research literature indicates that those who are absolutely without housing frequently find shelter after some period of time but the size of the pool of homeless people remains about the same, as it is continuously replenished by others who lose their housing.

The strong presence of women and children among Sudbury's homeless population was confirmed in the current study, as was the over-representation of First Nations people. However, one important difference between the Time 1 and Time 2 studies was that the proportion of Francophones in the homeless population matched their numbers in the total population in the latter, while they were under-represented in the former. The Time 2 results likely reflect the inclusion of an organization serving Francophones and an improvement in the measurement of language and culture. Other characteristics, as well as the reasons for homelessness, were very similar to those noted in the July, 2000 study.

The neighbourhood survey also produced similar findings as the earlier study, with 10 homeless individuals identified in July, 2000 and 7 in January (4.2% and 3.6% of households, respectively). The small difference in these numbers may have been due to the smaller sample size in Time 2 and the greater difficulties in obtaining respondents in January. It was found that more residents were

unwilling to open their doors for the members of the research team. While people can step outdoors to answer questions in the summer, this is difficult in January.

The neighbourhood survey revealed that there is a high level of concern about homelessness in Sudbury. Overall, a larger proportion of the residents in the January, 2001 sample stated that a range of structural and personal factors were causes of homelessness compared to the July, 2000 sample. In addition, a larger proportion of the residents believed that government cut-backs and policies were responsible for the homelessness problem. With regard to key strategies for addressing homelessness, the provision of more government funding for welfare and other services was the primary recommendation given by the residents in both studies. In the January study, respondents seemed to have a greater awareness of the lack of shelter beds in Sudbury since more than twice as many of them commented that more homeless shelters should be established, compared to the July sample.

### **RECOMMENDATIONS**

Seventeen recommendations were developed on the basis of the findings of the Time 1 study and these recommendations were reviewed by service providers in Sudbury. The service providers also prioritized the recommendations to identify ten that should be the focus of local action. Given the similarity in the trends identified in the two studies, it is recommended that community efforts to address homelessness continue to focus on these ten priorities:

- 1) Provide more funding for shelters and beds for homeless people.
- 2) Implement measures to ensure that new affordable rental housing is developed and existing low cost, appropriate rental housing is preserved.
- 3) Develop strategies for addressing the needs of homeless people with mental illness.
- 4) Provide more support services and financial support to homeless and low income people to assist them in making the transition to stable housing and to reduce the risk of homelessness in the future.
- 5) Consult with First Nations and Francophone organizations in order to develop strategies for addressing the needs of homeless people in these cultural groups.
- 6) Review the shelter arrangements for women who are not victims of domestic violence and establish beds for women who do not require or are averse to heightened security arrangements.
- 7) Enhance outreach services to homeless people in Sudbury in order to connect them with existing community resources.
- 8) Involve consumers in the development of new services and the enhancement of existing services.
- 9) Press the federal and provincial governments to implement policy changes that will address the underlying causes of the problem.
- 10) Provide funding for community-based workers who will engage in follow-up activities with clients and offer ongoing support services to assist clients in making a successful transition into stable housing in the community.

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