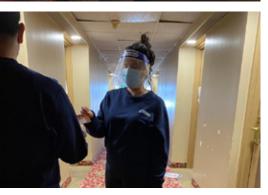
Attachment 1 STREETNEEDS ASSESSMENT

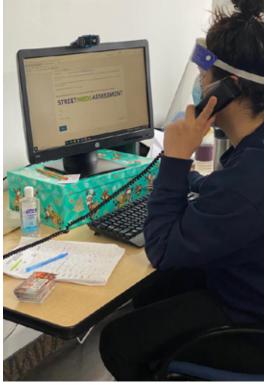
















results report

Land Acknowledgment for Toronto

We acknowledge that our work takes place on the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples and is now home to many diverse First Nations, Inuit and Métis peoples. We also acknowledge that Toronto is covered by Treaty 13 signed with the Mississaugas of the Credit, and the Williams Treaty signed with multiple Mississaugas and Chippewa bands.

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Highlights

1. The profile of those experiencing homelessness has changed during the COVID-19 pandemic

The number of people experiencing homelessness on April 21, 2021 is estimated to be 7,347

The majority (90%) of people experiencing homelessness are staying in sheltered services (City-administered shelters including base emergency and transitional shelters, 24-hour respite sites, 24-hour women's drop-ins, COVID-19 response and recovery/isolation sites, and provincially-administered Violence Against Women shelters, health and treatment and correctional facilities). 10% of the people experiencing homelessness were staying outdoors including in encampments.

There has been an overall decrease in homelessness primarily due to fewer refugee families as a result of COVID-19 border restrictions

The number of people staying in refugee response programs has decreased from 2,618 to 90 between 2018 and 2021. Only 13% of 2021 Street Needs Assessment (SNA) respondents reported coming to Canada as refugees/refugee claimants compared with 40% when the SNA was conducted in 2018. In 2021, just 3.2% of respondents are refugee families and 10.1% are refugee singles.

The number of people provided shelter in non-refugee programs has increased as a result of the City's COVID-19 response

The number of people staying in non-refugee response shelter programs has increased from 4,536 in 2018 to 5,720 in 2021 as a result of the City's COVID-19 response. This includes 2,742 staying in the base shelter system and 2,978 staying in temporary COVID-19 response programs.

There are fewer people experiencing homelessness in other provincial systems

The number of people experiencing homelessness staying in provincially-administered Violence Against Women shelters, health and treatment facilities and correctional facilities has decreased from a total of 1,028 in 2018 to 795 in 2021. Many provincial facilities reduced capacity or discharged individuals in order to support public health guidance around physical distancing.

Outdoor homelessness has increased

The number of people estimated to be staying outdoors increased to 742 in 2021 from 533 in 2018. This estimate also shows that outdoor homelessness has increased from 2018. These findings are consistent with the increased visibility of encampments throughout the pandemic. It is also important to note that the SNA was held during April

at the peak of the third wave of COVID-19 when approximately 20 shelter programs were in outbreak status in the shelter system, which constrained indoor capacity at that time. Since then, there has continued to be steady work to open new programs and move people indoors. The City has referred more than 1,680 individuals living outside to safer inside spaces with supports during the COVID-19 pandemic.

People experience homelessness in all areas of Toronto

Just over half of people staying in City-administered sites and outdoors were staying in the Toronto-East York Community Council District (CCD) which comprises the downtown core. 30% of people staying outdoors were estimated to be staying in the Scarborough CCD, followed by 29% staying in the Toronto-East York CCD.

People experiencing homelessness move between indoor and outdoor locations

37% of people reported staying in both overnight sheltered services and outdoors in the past year. In total, 61% of people stayed indoors only and 2% slept outdoors only. There is significant movement between indoor and outdoor locations

2. Homelessness affects people from different backgrounds but specific groups are overrepresented in Toronto

Indigenous people continue to be overrepresented among people experiencing homelessness, especially individuals sleeping outdoors

Indigenous homelessness continues to be a significant issue in Toronto. Indigenous people represent up to 2.5% of the Toronto population, yet 15% of people experiencing homelessness. This is even more significant for Indigenous people staying outdoors (23%) though the proportion has decreased since 2018 (38%). SSHA has collaborated with Indigenous organizations in its COVID-19 response, in particular providing safer indoor spaces and permanent housing for people staying in encampments and outdoors. Between March 2020 and July 2021, a total of 293 Indigenous people experiencing homelessness have moved into permanent housing.

Racialized individuals, in particular people who identify as Black, are overrepresented among people experiencing homelessness in Toronto

Almost 60% of all respondents identified as members of racialized groups, with the largest percentage identifying as Black (31%).

Non-binary, transgender, and Two-Spirit people are overrepresented

The share of respondents who identify as transgender women, Two-spirit, and non-binary (genderqueer) is approximately 1% each. Less than .5% of respondents identified as transgender men. Men represent almost two-thirds (63%) of all respondents surveyed, and 80% of those surveyed outdoors. Women represent 34% of

respondents surveyed, and 69% of those surveyed in family shelters administered by the City.

More than one-quarter of youth experiencing homelessness identify as 2SLGBTQ+

In total, 12% of respondents identified as 2SLGBTQ+. This was higher among youth with 26% identifying as 2SLGBTQ+.

Seniors represent 15% and youth represent 11% of people experiencing homelessness

The average age of all respondents is 43 years, ranging from 16 to 90 years. The share of respondents who were seniors (60 years and older) is 15% and youth (16 to 24 years) is 10%.

3. Gaps in other service systems are key contributors to homelessness

Changes in other provincial systems have increased pressures on the municipal shelter system

There have been decreases in capacity in provincially-administered Violence Against Women shelters, and fewer people experiencing homelessness in health and treatment facilities and correctional facilities. The number of people experiencing homelessness staying in Violence Against Women shelters, health and treatment facilities and correctional facilities has decreased from a total of 1,028 in 2018 to 795 in 2021. The changes have placed increased pressures on the municipal shelter system.

People experiencing homelessness have multiple health support needs

While 76% of respondents identified as having one or more types of a health challenge, more than one-quarter (28%) of respondents reported having three or more health challenges. Respondents who are chronically homeless were six times more likely to report multiples health challenges compared with respondents who are not chronically homelessness. Half of respondents reported having a mental health issue followed by 42% who identified as having a substance use issue. Learning or cognitive limitations was a newly added federally mandated question to the SNA; 20% of respondents identified as having this challenge.

Findings show a gap in access to substance use treatment

While 42% of respondents reported having a substance use issue, just over one-quarter (27%) of respondents with a substance use issue reported using a treatment facility (16%) and/or supervised consumption service (17%) in the past one year. One-third of respondents who were not currently in treatment for a substance use issue expressed interest in accessing treatment.

Almost one-third of respondents reported their first homeless experience as children or youth

32% of respondents reported their first homeless experience was as children/youth; just over half (51%) of respondents first experienced homelessness during their working ages (24-59 years).

18% of respondents have previously been in foster care

Youth staying in City-administered sites were more likely (26%) to report having been in foster care, kin care, or a group home.

5% of people experiencing homelessness are veterans

5% of respondents reported having any service in the Canadian military (i.e., Canadian Navy, Army, or Air Force) or RCMP. This was slightly higher among the outdoor population (7%). It is estimated that 1.7% of the population of Ontario are veterans.

Most people experiencing homelessness are Toronto residents

10% of respondents have lived in Toronto for less than one year. Just 4.5% of respondents moved to Toronto from another Ontario municipality in the past year. Youth and families staying in City-administered sites were more likely to have lived in Toronto for less than one year.

Most people (60%) who reported moving to Toronto within the past one year became homeless after they arrived. The top three reasons for their move were to seek employment, because their family moved here, and/or to access services and supports.

4. The key solutions to homelessness are increasing income and access to affordable and supportive housing

More than three-quarters of respondents reported being chronically homeless

77% of respondents reported being chronically homeless, which is defined as being homeless for six months or more in the past year. Chronic homelessness was higher among respondents staying outdoors (87%) compared to respondents staying indoors (77%). More than one-third of respondents reported being homeless more than 5 years.

The most important supports to help find housing are those that increase housing affordability and income

The majority (80%) of respondents reported one of the following services as being most important to help find housing: more affordable housing; subsidized housing or a housing allowance; increased social assistance rates; help finding an affordable place; and help finding employment or job training. These findings are consistent with previous SNA results and confirm that affordability is the most significant challenge in helping people move out of homelessness. In the past ten years, average market rent for a one

bedroom unit has increased 51%, while Ontario Works (OW) shelter benefit rates have increased only 7%. The gap between OW shelter benefits and rent has increased from \$585 in 2010 to \$1,041 in 2021. This is compounded by the lack of new rental and affordable housing.

Not enough income for housing was the most frequently reported reason for housing loss

19% of respondents reported that not having enough income for housing was the primary reason for their housing loss/homelessness. 15% of respondents also said that their reasons for their homelessness were related to the COVID-19 pandemic.

Introduction

The City of Toronto conducted its fifth Street Needs Assessment (SNA) in April, 2021. The Street Needs Assessment (SNA) is a needs assessment survey and point-in-time count of people experiencing homelessness in Toronto led by Shelter, Support and Housing Administration, in collaboration with community partners in the homelessness sector. The City has conducted SNAs since 2006 and has done so in 2009, 2013, and 2018. Due to the City's COVID-19 pandemic response, the SNA which was planned for Spring of 2020 had to be postponed.

Since the beginning of the COVID-19 pandemic, significant changes have been made to how services are being provided to people experiencing homelessness. The 2021 results provide critical data needed to understand the impact of the pandemic on homelessness, and to understand broader service needs of people experiencing homelessness in Toronto. The SNA also gives people experiencing homelessness a voice in what services would help them get housing and supports they need to end their homelessness. This information is used to improve the housing and homelessness programs provided by the City of Toronto and its partners to better serve our clients and effectively address homelessness.

The 2021 SNA included people staying outdoors and in encampments, in City-administered shelters and shelter hotels (including COVID-19 response sites and the isolation/recovery site), 24-hour respite sites (including 24-hour women's drop-ins and winter services in operation), as well as provincially-administered Violence Against Women shelters, and health and treatment and correctional facilities. The SNA does not include people who are experiencing hidden homelessness, such as people who are temporarily staying with others.

Surveys in indoor shelter locations were conducted over a period of one week and the outdoor count and survey were conducted on two separate days:

Indoor Survey: April 19 to April 23, 2021
Indoor and Outdoor Count: April 21, 2021

• Outdoor Survey: April 27, 2021

The SNA is part of the national and provincial coordinated point-in-time count with communities across Canada and the results will be used to create a national and provincial picture of homelessness. The SNA was funded and completed as a requirement for the Government of Canada's Reaching Home program. The SNA is also a requirement for municipal service managers under the provincial Ministry of Municipal Affairs and Housing. The SNA results will also be provided to both the federal and provincial government to better understand the scale and nature of homelessness across Ontario and Canada.

The approach for the 2021 SNA followed the recommended methodology prescribed by the federal and provincial governments and was modified to ensure all public health measures and guidelines could be followed so that the project can be delivered safely for everyone involved. Toronto Public Health and the City's Occupational Health and Safety section were consulted on the planning and implementation of this year's SNA.

The initiative was led by staff from City-administered sites and outreach agencies, as well as staff in provincially-administered sites. Due to the COVID-19 pandemic, volunteers were not recruited this year. In addition, all training was provided online rather than in person and surveys were administered electronically. Surveys were conducted by staff adhering to appropriate public health protocols including maintaining a physical distance of two metres and using appropriate personal protective equipment (PPE).

The 2021 SNA was possible thanks to the participation of people experiencing homelessness who contributed their time and valuable input in completing the survey. We are also grateful to the staff from shelters and outreach agencies whose dedication and commitment to this initiative and improving the lives of people experiencing homelessness made it a success. Representatives from the Toronto Alliance to End Homelessness (TAEH), Toronto Shelter Network, Toronto Indigenous Community Advisory Board (TICAB), and Toronto Indigenous Community Entity participated on the SNA Steering Committee overseeing the project along with City staff.

More information about the methodology and implementation of the 2021 SNA is found in Appendix A.

COVID-19 Context

Since the beginning of the COVID-19 pandemic, significant changes have been made to the way homelessness services are being provided and utilized, along with where people are experiencing homelessness are staying.

The City of Toronto rapidly responded to the emergency of COVID-19 by implementing an inter-governmental and sectoral response involving the City, provincial and federal government, health care sector, and community non-profit sector. The City has implemented numerous safety measures in the shelter system to reduce the risks of COVID-19 for people experiencing homelessness who are at greater risk of severe

illness. This included operating more than 25 new temporary shelter locations to create physical distancing, implementing rigorous infection prevention and control measures, testing, isolation and recovery, priority vaccinations and a focus on permanent housing.

In addition to the significant efforts to ensure the safety of the shelter system during the pandemic, the City has taken rapid action to create new affordable and supportive housing opportunities for people experiencing homelessness. Between April 2020 to April 2021, 5,518 people experiencing homelessness moved from the shelter system into permanent housing through programs such as the City's Rapid Re-Housing Initiative, housing allowance programs and new supportive housing opportunities.

In addition to the City's response, responses from other levels of government to COVID-19 provide additional context for the SNA results, including: international border closure resulting in decreases in occupancy in the shelter system (primarily refugee families seeking shelter); discharges of people from provincial correctional facilities and reduced capacity in provincial institutions such as Violence Against Women shelters and health and treatment facilities to support physical distancing; closing of non-essential operations and indoor spaces and services; temporary provincial moratorium on residential eviction; and new social safety measures such as the Canada Emergency Response Benefit.

Overview of Homelessness in Toronto

Total Estimated Number of People Experiencing Homelessness

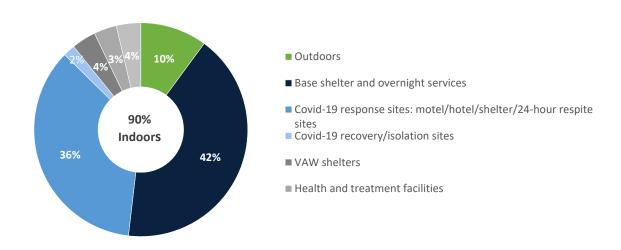
Based on the 2021 SNA, it is estimated that there were 7,347 people experiencing homelessness in Toronto on April 21, 2021 (Table 1). This includes those sleeping outdoors (including encampments), in City-administered sites (which includes base emergency and transitional shelters, 24-hour respite sites, 24-hour women's drop-ins, and COVID-19 response and recovery/isolation sites), as well as in provincially-administered VAW shelters, health and treatment facilities, and correctional facilities.

Table 1: Total Estimated Number of People Experiencing Homelessness in Toronto on April 21, 2021

Enumerated Groups	Number	Percent of Total
Outdoors	742	10%
City-administered sites (total):	5,810	79%
Base emergency shelter and overnight		
services and transitional shelters	3,068	42%
COVID-19 response sites –		
motel/hotel/shelter/24-hour respite sites	2,609	36%
COVID-19 recovery/isolation sites	133	2%
VAW shelters	270	4%
Health & treatment facilities	253	3%
Correctional facilities	272	4%
Total	7,347	100%

Figure 1 shows the distribution of individuals experiencing homelessness staying in indoor sites and outdoors on April 21, 2021. The majority (90%) of people experiencing homelessness were staying indoors.

Figure 1: Distribution of People Experiencing Homelessness Staying in Indoor Sites and Outdoors on April 21, 2021

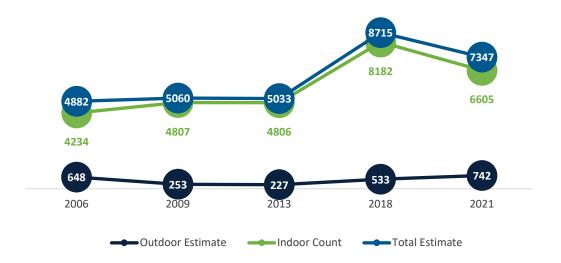


Changes in the Number of People Experiencing Homelessness

The total estimated number of people experiencing homelessness in Toronto has decreased by 16% from 8,715 in 2018 to 7,347 in 2021 primarily due to the decrease in the number of people staying in refugee response programs as a result of COVID-19

border restrictions (Figure 2). In addition, as part of the City's COVID-19 response, the City has moved 5,518 people experiencing homelessness from the shelter system into permanent housing from April 2020 to April 2021. More than 1,600 people staying in encampments have been referred to safe inside spaces since April 2020. Reductions in capacity in provincial systems have also contributed to increasing pressures on the municipal shelter system.

Figure 2: Estimate of Homelessness in Toronto, 2006, 2009, 2013, 2018, and 2021 Street Needs Assessments



Sheltered Homelessness

The number of people experiencing homelessness staying indoors in Toronto on April 21, 2021 has decreased by 19% since 2018 (Figure 2). In total, 6,605 people were staying in shelters, 24-hour respite sites (which include the two 24-hour women's dropins), COVID-19 response sites including the recovery/isolation sites and provincial institutions (which include VAW shelters and health and treatment and correctional facilities) on April 21, 2021.

This is primarily due to a decrease in overall occupancy in the shelter system since the start of the pandemic, driven by a decline in the number of refugee claimants, primarily families, entering the shelter system as a result of the global pandemic and border closure. For example, the average nightly occupancy of individuals in refugee families has decreased from 2,111 in Jan of 2019, to 354 in April 2021 (Figure 3).

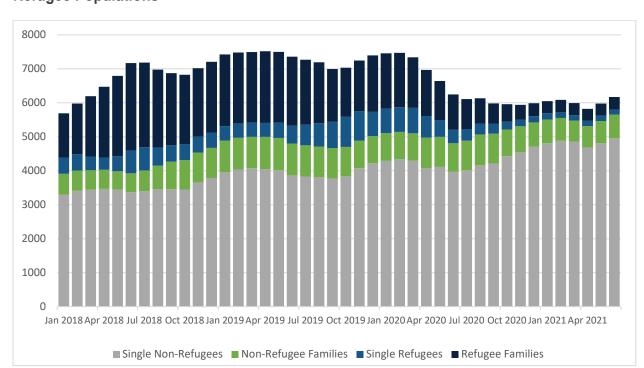


Figure 3: Average Nightly Shelter Occupancy by Month, Family/Single and Refugee/Non-Refugee Populations

Source: Shelter Management Information System Average Nightly Shelter Occupancy by Month, Jan 2018 to April 2021

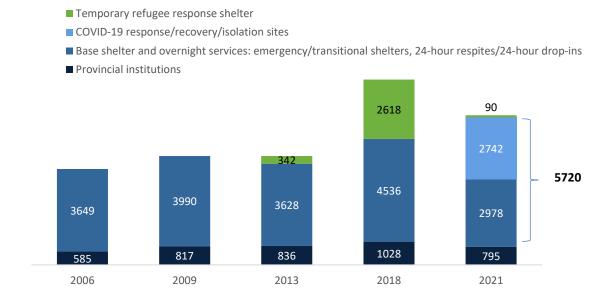
In addition, there has been an increase in the number of people discharged from provincial correctional facilities, many of whom may not have housing to return to. According to Statistics Canada, between February and April of 2020, the number of adults in provincial custody declined by 29% in Ontario, which is more than 2,300 people. In addition, VAW shelters have had to reduce their capacity during the COVID-19 pandemic to support public health guidelines around physical distancing. Figure 4 shows the number of people staying in provincially-administered VAW shelters, health and treatment facilities and correctional facilities. The total number has decreased by 22% from 1,028 in 2018 to 795 in 2021.

Figure 4: Number of People Experiencing Homelessness Staying in Provincially-Administered Facilities in Toronto, 2006, 2009, 2013, 2018, and 2021 Street Needs Assessments



The number of people provided shelter in non-refugee programs has increased by 26% – from 4,536 to 5,720 (Figure 5). This is a result of a substantial increase in temporary COVID-19 response shelter sites to create physical distancing as well as to provide additional space for people to move indoors from encampments. Toronto's shelter system currently provides more than 6,000 spaces across more than 100 locations operated by the City and our funded community partner providers to support the city's homeless population.

Figure 5: Count of Indoor Homelessness in Toronto, 2006, 2009, 2013, 2018, and 2021 Street Needs Assessments



Shelter System Flow Data

The SNA data provides a point-in-time snapshot of people experiencing homelessness on a single night, and includes those staying in City-administered shelters and overnight services, an estimate of those staying outdoors, and those with no fixed address/shelter address staying in provincially administered systems.

Data from the Shelter System Flow Data and the By-Name List provide additional information to better understand the scope and complexity of homelessness in Toronto (Figure 6). These data comes from the Shelter Management Information System, used by more than 100 shelter and overnight services administered by the City. The number of people actively experiencing homelessness as reported in the Shelter System Flow Dashboard includes anyone who has used the shelter system for at least one night in the past three months and has not been discharged to permanent housing.

At the end of April 2021, there were 7,516 people actively experiencing homelessness based on the Shelter System Flow Dashboard.

Figure 6: Shelter System Flow Dashboard, Monthly Snapshot, April 2021

Shelter system flow: monthly snapshot Apr,2021

People actively experiencing homelessness at the end of the month: 7,516 Exited the shelter system in Entered the shelter system in Change this month Apr 2021: Apr 2021: (inflow minus outflow): 1.046 858 -188 Moved to permanent housing: Newly identified: 480 268 Returned from permanent 3,627 (48%) housing: 69 experiencing chronic homelessness (end of month) No recent shelter use: 778 Returned to shelter: 309

Both point-in-time data and system flow data provide valuable, yet different, information about who is experiencing homelessness. As people enter and exit the homelessness system every day, the number of people included in the shelter flow dashboard over time will be greater than those experiencing homelessness at any given point in time. For example, while the average nightly occupancy in 2020 was 6,517 clients, more than 20,000 different people used the shelter system in 2020.

^{*}Chronic homelessness refers to people who meet one of the following criteria as per the federal definition of chronic homelessness. The person has recorded a minimum of 180 overnight stay in the past year (365 days); or the person has recurrent overnight stays over the past three years with a cumulative duration of at least 546 nights.

Unsheltered Homelessness

The number of people experiencing unsheltered (outdoor) homelessness in Toronto on April 21, 2021 is estimated to be 742, an increase of 39% since 2018 (Table 2). Prior to the pandemic, outreach agencies reported that the number of people estimated to be staying outdoors had increased since 2018.

Since the start of the COVID-19 pandemic, there has been a noticeable increase in the number and size of encampments across Toronto. This is due to a number of reasons such as:

- people moving from ravines and more remote locations into more visible areas
- reduced options due to the pandemic for people to stay with friends, family or other temporary accommodations
- fears related to COVID-19 in the shelter system
- an increase in the number of people discharged from provincial correctional facilities, who may not have housing to return to
- reduced access to other provincial programs and services (e.g., , detox, withdrawal and mental health facilities) due to capacity reductions

It is important to note that the SNA was conducted in April 2021 during the peak of the third wave of the COVID-19 pandemic when approximately 20 programs were in outbreak status in the shelter system, which constrained indoor capacity at that time. In addition, since April, the City's Streets to Homes program along with partner outreach agencies have continued to assist people to move into indoor shelter spaces and permanent housing. Shelter system capacity has also been increased since April to provide more space for people to move indoors from encampments. Shelter occupancy has increased from 5,800 in April 2021 to more than 6,400 people to date.

Finally, the methodology for point-in-time counts means that the SNA is always an undercount of homelessness as only public spaces are canvassed and hidden homelessness is not included.

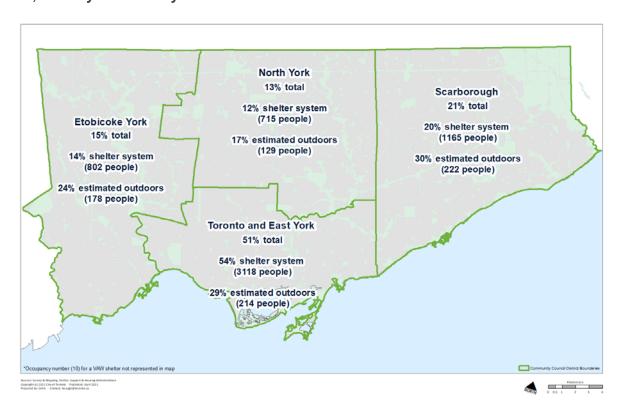
Table 2: Estimated Outdoor Homelessness on April 21, 2021 by Community Council District in Toronto

			Number of Pe	ople Counted			
Community Council District	Total Study Areas	Study Areas Surveyed	Non- Encampments (A)	Encampments (B)	Extrapolation to Unsurveyed Areas (C)	Outdoor Total (A+B+C)	Percentage of Total
Etobicoke-							
York	121	61	85	19	74	178	24%
North York	125	46	45	5	79	129	17%
Scarborough	123	58	104	2	116	222	30%
Toronto-East York	175	130	53	137	24	214	29%
Total	544	295	287	163	292	742	100%

Homelessness Across Toronto

Figure 7 shows the number and percentage of people experiencing homelessness staying in City-administered sites and outdoors across the four quadrants of Toronto. The figure demonstrates that people experience homelessness in all areas of Toronto pointing to the need for services and supports available in all areas. It also highlights that the CCDs of Scarborough, Etobicoke-York and North York all have a greater share of outdoor homelessness (between 17 and 30%) relative to the share of sheltered homelessness (between 12% and 20%), compared to Toronto-East York which has a greater share of sheltered homelessness (54%) relative to outdoor homelessness (29%).

Figure 7: Proportion of People Staying Outdoors and in City-Administered Sites on April 21, 2021 by Community Council District



Comparison to Other Jurisdictions

Many communities experienced disruptions to their point-in-time counts as a result of the COVID-19 pandemic. The US Department of Housing and Urban Development (HUD) allowed US communities to cancel or modify their 2021 unsheltered counts. US communities were able to complete their 2020 counts (which occurred in January) before the COVID-19 pandemic was declared.

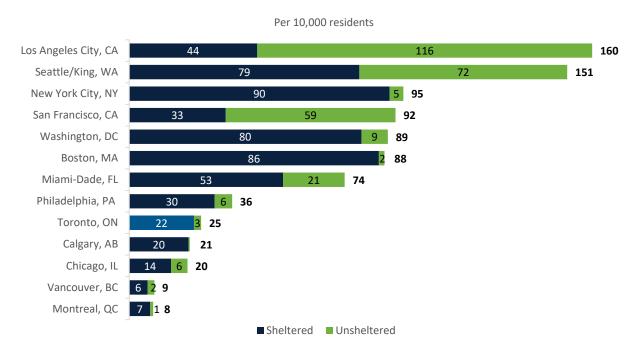
Many Canadian communities, including Toronto, postponed their 2020 point-in-time counts until 2021 as per the recommendation of Economic and Social Development

Canada, the federal department leading the national coordinated point-in-time count. Some communities such as Toronto were able to complete their count in 2021 during the COVID-19 pandemic (Ontario communities were required to complete an enumeration before December 15, 2021), while other communities postponed until 2022. As a result, there is currently limited comparable information about point-in-time count results from other communities.

In addition, although the methods and definitions used to conduct homeless enumerations in other jurisdictions are somewhat different than those used in Toronto, and are therefore not directly comparable in absolute numbers, a comparison of general trends can provide some context for the results from Toronto's 2021 SNA.

Figure 8 illustrates the results for sheltered, unsheltered, and total homelessness per 10,000 residents available for Toronto and other major North American urban centres that have conducted recent enumerations of homelessness.

Figure 8: Comparison of Sheltered, Unsheltered, and Total Homelessness per 10,000 Residents for Toronto and Other Major Urban Centres



Note: Numbers from US cities are based on enumerations conducted in January 2020 prior to the declaration of the COVID-19 pandemic. Numbers from Calgary and Montreal are based on enumerations conducted in 2018. Numbers from Vancouver are based on enumeration conducted in 2019. Toronto conducted its enumeration in 2021 during the COVID-19 pandemic.

Profile of People Experiencing Homelessness

The primary purpose of the SNA is not only to understand the scope of homelessness in Toronto, but also to learn more about the profile and service needs of people

experiencing homelessness to inform program and service delivery. This information is used by the City, community agencies and other groups to support service coordination, planning and advocacy. A total of 2,629 surveys were collected and determined as valid for the purposes of this analysis, representing an overall response rate of 45% of eligible individuals from participating sites.

The results below are from the surveys administered outdoors and at indoor sites. The results are presented for surveyed groups based on where they indicated they would be staying on the night of the SNA survey: outdoors and in City-administered sites (includes base emergency/transitional shelters, 24-hour respite sites, 24-hour women's drop-ins, COVID-19 response sites and COVID-19 recovery/isolation sites). As there were no significant differences in results for respondents staying in City-administered base shelters compared with COVID-19 response and recovery/isolation sites these results were aggregated. Results for respondents staying in City-administered sites are disaggregated into three sub-groups: single adults; families; and youth (age 16 to 24 years).

Due to low participation by provincially-administered Violence Against Women shelters and a resulting small sample size, these results are not presented in this report. Surveys were also not conducted with people experiencing homelessness staying in provincially-administered health and treatment facilities and correctional facilities due to the COVID-19 pandemic. Percentages may not always total 100% due to multiple responses and non-valid responses (e.g., decline to answer, missing information), which are not listed in the tables and figures.

Gender Identity

Gender identity is a person's subjective experience of their own gender. It is a deep internal feeling of whether they identify as female, male, genderqueer, or anywhere along the gender spectrum. A person's gender identity may be the same as or differ from the sex assigned to them at birth.¹

Men represent almost two-thirds (63%) of all respondents surveyed, while women represent 34% (Table 3). 27 respondents (1.1%) identified as non-binary (genderqueer), 26 respondents (1%) identified as trans women, 18 respondents (0.7%) identified Two-Spirit, and 8 respondents (0.3%) identified as trans men. Less than 0.5% of respondents declined to answer the question or responded "don't know" to this question.

Men were overrepresented in the outdoor population with 80% of outdoor respondents identifying as men. Single adult respondents staying in shelters were also more likely to identify as men. Respondents with families were more likely to identify as women. Youth

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¹ For more information about gender identities and their definitions, please see the <u>Glossary of Important Terms on Gender and Sexual Diversity</u>.

respondents (age 16 to 24 years) staying in shelters were more likely to identify as trans women, Two-Spirit, and/or non-binary (genderqueer).

Table 3: Gender Identity of Respondents by Surveyed Group

Surveyed Groups	Man	Woman	Trans Man	Trans Woman	Two- Spirit	Non-Binary (Genderqueer)
Outdoors	80%	17%	0.0%	0.7%	0.7%	2.2%
City-administered						
shelters (total):	64%	33%	0.2%	1.1%	0.7%	1.1%
Single adults	70%	27%	0.2%	1.0%	0.7%	0.9%
Families	30%	69%	0.0%	0.0%	0.3%	0.3%
Youth	62%	30%	0.4%	2.6%	1.5%	3.8%
All Respondents	63%	34%	0.2%	1.0%	0.7%	1.2%

Age

The average age of all respondents is 43 years, ranging from 16 to 90 years. It is important to note that this does not include the ages of dependent children who were ineligible to complete the SNA survey. Using data from the City's Shelter Management Information System, the average age of clients staying in the shelter system on April 21, 2021 was 41.

Youth (16 to 24 years) respondents represent 12% and seniors (60+ years) represent 15% of those surveyed which is a slight increase from the 2018 SNA with both youth and seniors at 10% (Figure 9).

Figure 9: Age of Respondents

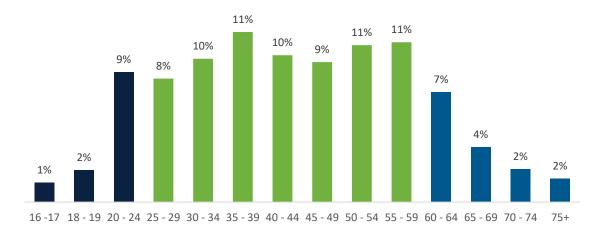


Table 4 presents the average age and percentage of respondents in various age groups by surveyed groups. Single adults staying in City-administered sites had a higher

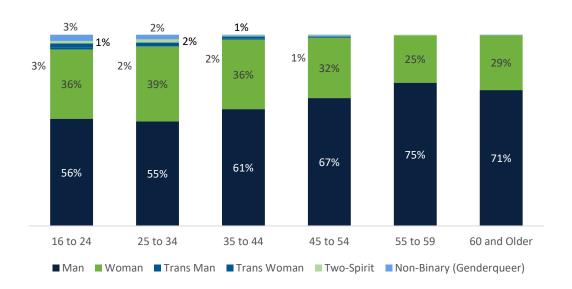
average age than other surveyed groups. In addition, there was a greater share of seniors (60 and over) in the shelter system compared to the other surveyed groups.

Table 4: Age of Respondents by Surveyed Group

Surveyed Groups	Average Age	16 to 24	25 to 34	35 to 44	45 to 54	55 to 59	60 and Older
Outdoors	43	5%	17%	30%	22%	8%	10%
City-administered shelters (total):	44	13%	18%	21%	20%	11%	15%
Single adults	46	0%	19%	21%	23%	14%	20%
Families	40	10%	26%	33%	17%	7%	6%
Youth	21	100%	0%	0%	0%	0%	0%
All Respondents	43	12%	18%	21%	20%	11%	15%

Figure 10 presents age of respondents by gender identity. There are more women represented in the younger age ranges, 39% of the respondents between 25 – 34 years old identified women. Youth respondents and younger adults, ages 16 – 34 were more likely to identify as transgender, Two-spirit or non-binary (genderqueer) than the other age groups which may be reflective of trends in the broader population of Toronto.

Figure 10: Age of Respondents by Gender Identity

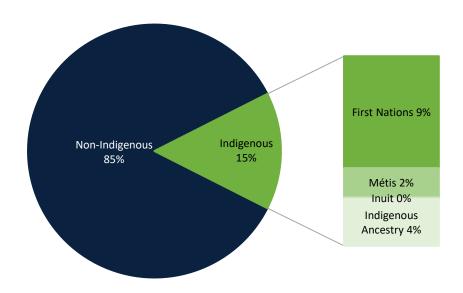


Indigenous Identity

Indigenous people, including First Nations, Inuit, Métis, or people who identify as having Indigenous ancestry, continue to be overrepresented among people experiencing homelessness relative to their share of the general population of Toronto. Indigenous

people represent between 1% and 2.5% of the Toronto population², yet 15% of the total number of people experiencing homelessness (Figure 11). Agencies serving the Indigenous community in Toronto estimate that there are 70,000 residents in this community (City of Toronto, Indigenous Affairs Office).





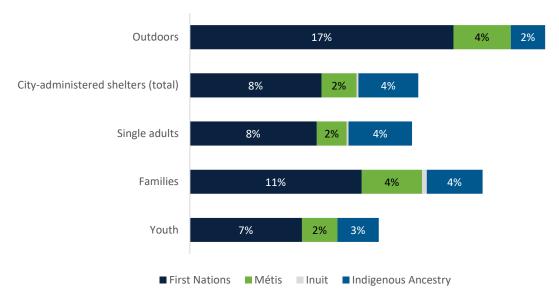
The overrepresentation of Indigenous people continues to be greater among people experiencing outdoor homelessness, with 23% of respondents identifying as Indigenous (Figure 12). Indigenous families (more than one member in household with or without dependents) were also overrepresented in the indoor sheltered population, with 19% of respondents identifying as Indigenous, however, Inuit respondents was less than 0.5%. The overall Indigenous total remain the same since the 2018 SNA, however there was a decrease in the outdoor Indigenous total (38%) and an increase in the family indoor sheltered total (3%).

The decreasing share of Indigenous people staying outdoors (23%) is consistent with a survey of encampment residents conducted from March 3, 2021 to March 12, 2021 prior to the SNA which found 27% of respondents identifying as Indigenous. The SNA also found that the percentage of Indigenous people staying in shelters who reported staying previously in an encampment in the past one year before the SNA and the high percentage of Indigenous people at Covid-19 response locations where people staying in encampments were referred points to a decrease in outdoor Indigenous homelessness that is the result of the City's efforts, in collaboration with partner

² The 2016 <u>Our Health Counts Toronto</u> study estimated that there were between 34,000 to 69,000 Indigenous adults in Toronto. The 2016 Census, which has been criticized for under-counting the Indigenous population, estimated that there are 23,065 Indigenous people in Toronto. By either estimate, Indigenous people are overrepresented among people experiencing homelessness in Toronto.

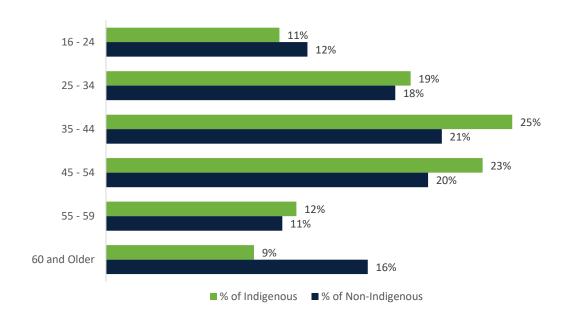
outreach agencies including Indigenous specific outreach services, to move people staying outdoors into safer shelter spaces and permanent housing. Between March 2020 and July 2021, a total of 293 Indigenous people experiencing homelessness have been moved into permanent housing.

Figure 12: Indigenous Identity of Respondents by Surveyed Group



The distribution of Indigenous versus non-Indigenous respondents by age was similar to the general population, however there was a lower share of seniors (60 years or older) among Indigenous people compared to non-Indigenous people experiencing homelessness (9% compared to 16%) (Figure 13).

Figure 13: Distribution of Indigenous Versus Non-Indigenous Respondents by Age



There were no notable differences in the distribution of Indigenous versus non-Indigenous respondents by gender identity. However, the share of Indigenous women experiencing homelessness increased slightly from 27% in 2018 to 32% in 2021, while the share of Indigenous men experiencing homelessness decreased slightly from 64% in 2018 to 60% in 2021 (data not shown).

Overall, Indigenous respondents fared worse than non-Indigenous respondents experiencing homelessness on multiple indicators including, being more likely to experience chronic homelessness, first experience homelessness as children or youth, have experiences with foster care, have multiple health challenges, and have interactions with the health care and criminal justice systems.

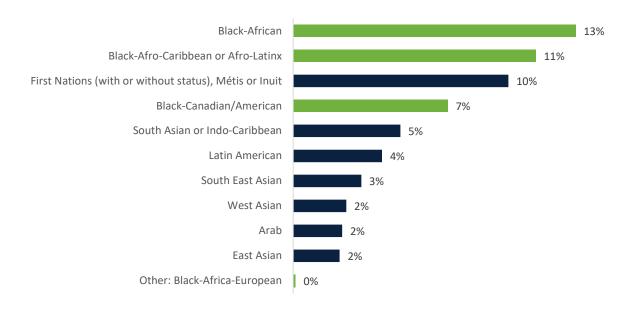
Indigenous homelessness is a significant issue not only in Toronto but across Canada. Indigenous homelessness should be understood as the direct outcome of ongoing colonization, structural and institutional racism, cultural genocide and the effects of intergenerational trauma. It is important to acknowledge that the definition of homelessness for the purposes of the SNA does not adequately capture the multi-dimensional nature of Indigenous homelessness as articulated in the <u>Definition of Indigenous Homelessness in Canada</u>. Using this broader and culturally-based definition would likely result in an even greater overrepresentation of Indigenous people experiencing homelessness. In addition, the definition of homelessness for the purpose of the SNA excludes hidden homelessness. Indigenous women's organizations have noted that this definition underrepresents the extent of homelessness among Indigenous women, non-binary individuals, and Indigenous families which is largely hidden.

Racial Identity

The 2021 SNA found that almost 60% of all respondents identified as members of racialized groups, with the largest percentage identifying as Black (31%). This finding demonstrates that racialized groups are overrepresented among people experiencing homelessness relative to their share of the general population in Toronto. Visible minorities represent 52% of the Toronto population³, yet 60% of people experiencing homelessness (Figure 14). Black people in particular are overrepresented relative to their share of the general population in Toronto – making up 31% of people experiencing homelessness yet 9% of the general population in Toronto.

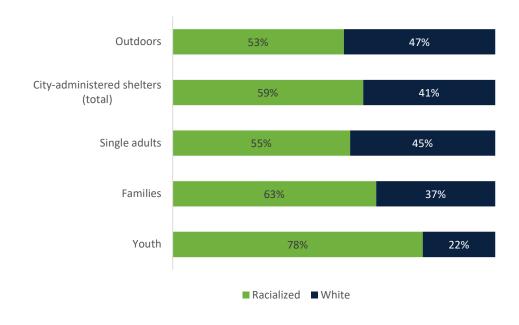
³ City of Toronto. 2017. 2016 Census: Housing, Immigration and Ethnocultural Diversity, Aboriginal Peoples. Available at https://www.toronto.ca/wp-content/uploads/2017/12/8ca4-5.-2016-Census-Backgrounder-Immigration-Ethnicity-Housing-Aboriginal.pdf

Figure 14: Racial Identity of Respondents



The share of racialized respondents was highest among youth and families staying in City-administered shelters (Figure 15).

Figure 15: Respondents Identifying as Members of Racialized Groups by Surveyed Group



Length of Time in Toronto

< 6 months

86% of respondents reported having been in Toronto for one year or more, including those who always been in Toronto (44%), compared to 10% of respondents who have been in Toronto less than one year (Figure 16). This is considerably lower compared to 2018 where 27% of respondents reported having been in Toronto for less than one year. This is likely due to the border restrictions and reduction in the number of refugees within the shelter system.

Always been here

10+ years
19%

1 to 10 years
23%

6 - 11 months
4%

Figure 16: Respondent Length of Time in Toronto

For those respondents who have not always lived in Toronto, the average length of time in Toronto was 12 years. Outdoor respondents were more likely to have always lived in Toronto (60%) (Figure 17). Youth and families staying in shelters were the most likely to have lived in Toronto for less than one year (24% and 15%) (Figure 18).

Figure 17: Respondent Length of Time in Toronto by Surveyed Group

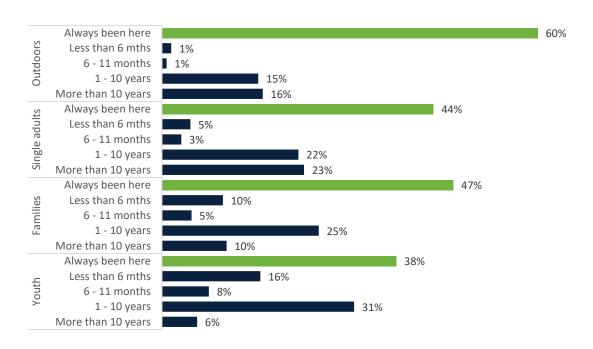
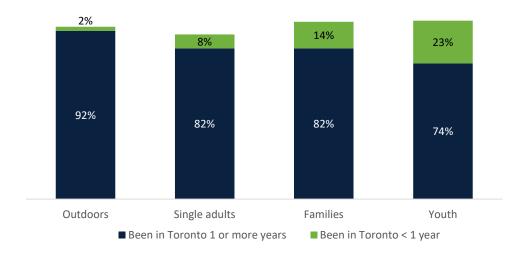


Figure 18: Respondent Lived in Toronto for Less Than One Year by Surveyed Group



Community Lived Just Prior to Moving to Toronto

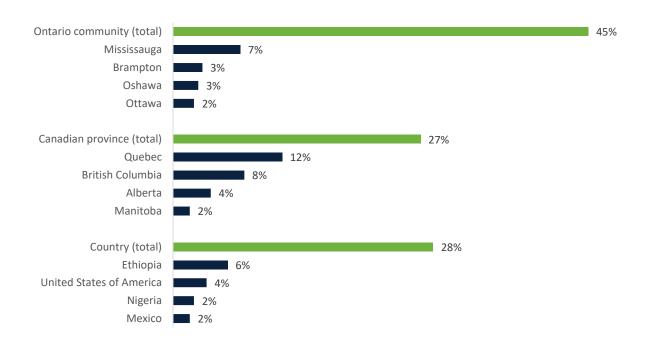
Only 4% of all respondents moved here recently from another municipality in Ontario. Of the respondents who have lived in Toronto for less than twelve months, 45% came from another Ontario community, 27% came from another Canadian province and 28% came from another country (Figure 19).

Respondents who came from another Ontario community were most likely to come from cities within the Greater Toronto Area such as Mississauga and Brampton.

Respondents who came from another province were most likely to come from Quebec.

Toronto has the highest average number of emergency shelter beds per capita. For some people, coming to Toronto to access homelessness services is the only option when other communities have much smaller shelter systems that have not kept up with the needs in those communities.

Figure 19: Community Lived Before Coming to Toronto, Respondents who Have Lived in Toronto for Less than One Year



Homeless Experience in Previous Community

A series of questions were asked in the 2021 SNA regarding homeless experience in their previous community.

Almost 60% of respondents who lived in Toronto for less than one year became homeless after they arrived in Toronto, while 38% were experiencing homelessness just prior to coming to Toronto (Figure 20).

Figure 20: Respondents' Homeless Experience in Previous Community, Respondents who Have Lived in Toronto for Less than One Year



Reasons for Moving to Toronto

Figure 21 below presents the top five reasons why respondents who became homeless after coming to Toronto moved. The top reasons were to seek employment, their family moved to Toronto, and to access services (reported by more than 10% of respondents).

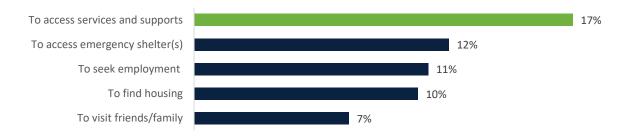
For respondents who were experiencing homelessness before moving to Toronto, the top reasons for moving were to access services and supports, to access emergency shelter, and to find employment and housing (reported by more than 10% of respondents).

Figure 21: Reasons for Moving to Toronto

Respondents who became homeless after coming to Toronto:

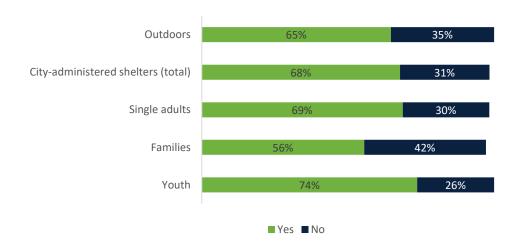


Respondents who were experiencing homelessness prior to coming to Toronto:



More than two-thirds (68%) of these respondents reported that they used shelter services in their previous community, with youth staying in City-administered sites being the most likely (75%) to have used shelter services and families staying in these sites being the least likely (56%) (Figure 22).

Figure 22: Respondents Use of Shelter Services in Previous Community by Surveyed Group

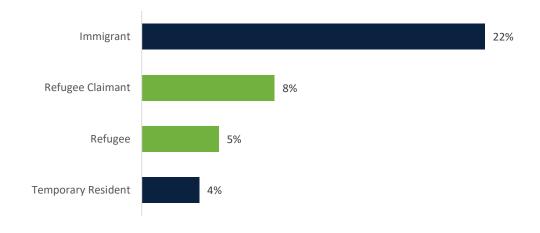


Migration to Canada

During the COVID-19 pandemic the number of refugee/asylum claimants, in particular refugee families, accessing emergency shelter services decreased significantly due to border closures as a result of the COVID-19 pandemic response.

The 2021 SNA results found that only 13% of respondents reported coming to Canada (at some point in their life) as a refugee/refugee claimant (Figure 23), a significant decrease from 2018 where 30% of all respondents reported coming to Canada as a refugee/refugee claimant. It is important to note that responses to the SNA survey question may or may not reflect respondents' current migration status as the question asked how respondents came to Canada and not their current migration status.

Figure 23: Respondents Migration to Canada



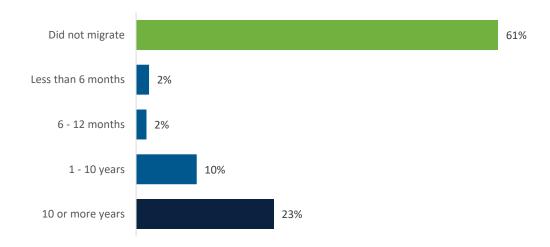
The largest share of respondents who reported coming to Canada as refugee/refugee claimants is found in City-administered shelters (14%) and, in particular, among families staying in these shelters (22%) (Table 5). The share is considerably smaller for respondents staying outdoors (2%).

Table 5: Respondents Migration to Canada by Surveyed Group

Surveyed Groups	Did Not Migrate	Immigrant	Refugee/Refugee Claimant	Temporary Resident
Outdoors	77%	21%	1%	0%
City-administered shelters (total):	59%	22%	14%	4%
Single adults	59%	23%	12%	3%
Families	56%	16%	22%	3%
Youth	60%	17%	14%	7%
All Respondents	59%	22%	13%	4%

Figure 24 presents the length of time in Canada for all respondents including those who did not migrate to Canada. Only 4% of all respondents reported coming within the past one year. Almost one-quarter (23%) of all respondents reported living in Canada for 10 or more years and would be considered long-term immigrants. Of those who migrated to Canada, the average length of time was 20 years, ranging from one month to 74 years ago.

Figure 24: Respondents Length of Time in Canada



The largest share of respondents who reported coming to Canada within the past one year were youth and families staying in City-administered shelters (Figure 25). The largest share of long-term immigrants were single adults staying in shelters (27%), and respondents staying outdoors (19%).

Did not migrate Less than 6 mths 6 - 12 months 0% 1 - 10 years 0% 10 or more years 19% Did not migrate Single adults Less than 6 mths 6 - 12 months 1 - 10 years 10 or more years 27% Did not migrate 58% Less than 6 mths 6 - 12 months 2% 1 - 10 years 25% 10 or more years Did not migrate 61% Less than 6 mths 6 - 12 months 21% 1 - 10 years 10 or more years

Figure 25: Respondents Length of Time in Canada by Surveyed Group

Family Homelessness

Respondents were asked if anyone was staying with them on the night of the SNA survey. If they were staying with someone, they were asked to identify who the person was (Figure 26). The majority (85%) of respondents indicated that they were staying alone; 15% of all respondents reported that they had either a partner, other adults or non-adult dependents staying with them that night.

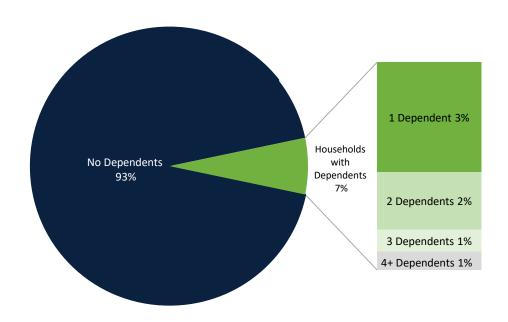
The results for families with non-adult (child) dependents are shown in Figure 27. 7% of all respondents reported that their children and/or other non-adult dependents were staying with them on the night of the SNA survey. Family homelessness has decreased significantly since the 2018 SNA which reported 20% of all respondents had non-adult dependents staying with them on the night of the survey. The decrease in families

experiencing homelessness is primarily due to fewer refugee families as a result of COVID-19 border restrictions. Of the households with non-adult dependents, 81% had either one or two dependents, while 19% had three or more dependents. Families reported having an average of two non-adult dependents. The average age of non-adult dependents was 6 years old.

Figure 26: Persons Staying with Respondent on Night of SNA Survey



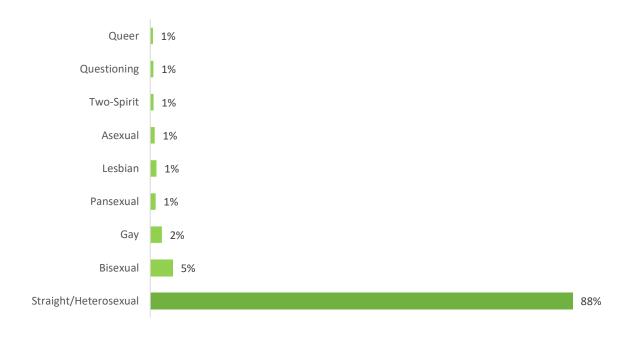
Figure 27: Distribution of Respondents with Non-Adult Dependents



Sexual Identity

Sexual identity refers to how a person identifies to whom they are sexually and romantically attracted to (e.g. lesbian, gay, bisexual, heterosexual, etc.). In 2021, 5% of respondents identified as bisexual and 2% as gay (Figure 28). The percentage of respondents who identified as pansexual, lesbian, asexual, Two-Spirit, questioning, or queer was each 1%. The majority (88%) of all respondents reported their sexual identity as straight/heterosexual.



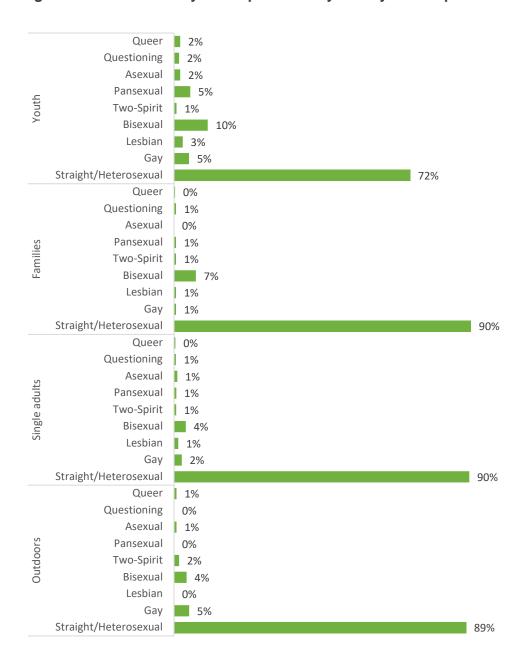


Youth respondents staying in City-administered sites were the least likely to identify as heterosexual/straight (72%) compared to other surveyed groups (Figure 29).

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⁴ For more information about sexual identities and their definitions, please see the <u>Glossary of Important Terms on Gender and Sexual Diversity</u>.

Figure 29: Sexual Identity of Respondents by Surveyed Group



2SLGBTQ+ Identity

Two-spirit, lesbian, gay, bisexual, transgender, queer, and questioning (2SLGBTQ) youth disproportionately represent 20 to 40% of the population of youth experiencing homelessness in North America. The most frequently cited pathways into youth homelessness include family conflict, transitions from foster care and other public systems, and economic problems. While these reasons apply to all youth, these risks

are often intensified for 2SLGBTQ youth who face identity-based family rejection resulting from coming out.⁵

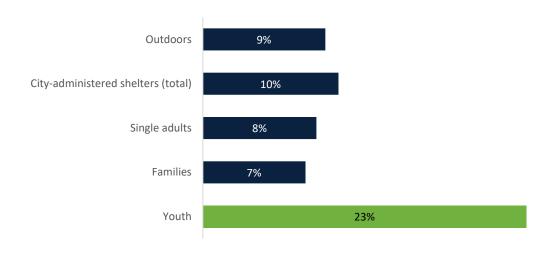
In 2021, a specific question about whether people experiencing homelessness identified as 2SLGBTQ+ (Two-Spirit, lesbian, gay, bisexual, transgender, queer, questioning, + refers to sexual and gender diverse identities not represented in the acronym) was included. The question was developed by Dr. Alex Abramovich from the Centre for Addiction and Mental Health.

Based on the 2021 SNA, 10% of respondents identified as 2SLGBTQ+ (Figure 30). Similar to 2018, almost one-quarter (23%) of youth staying in City-administered sites identified as 2SLGBTQ+, higher than other surveyed groups (Figure 31). It is important to acknowledge that 2SLGBTQ+ individuals, particularly youth and young adults, are overrepresented among those experiencing homelessness, but underrepresented among individuals accessing shelters and housing programs, due to hidden homelessness, stigma, discrimination, and safety concerns.⁶

Figure 30: Respondents Identifying as 2SLGBTQ+



Figure 31: Respondents Identifying as 2SLGBTQ+ by Surveyed Group



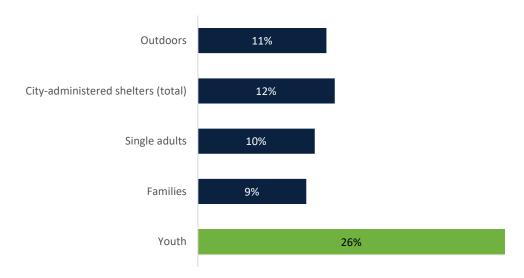
⁵ Abramovich, A., and Pang, N. Understanding LGBTQ2S Youth Homelessness in York Region Report.

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⁶ Abramovich, A. 2016. Preventing, Reducing and Ending LGBTQ2S Youth Homelessness: The Need for Targeted Strategies. Social Inclusion, 4(4), 86-96.

Sexual identity and gender identity responses were also combined as was done in the 2018 SNA. A higher share (12%) of respondents identified as 2SLGBTQ+ when the sexual identity and gender identity responses were combined. In addition, a much higher share of youth identified as 2SLGBTQ+ (26%) (Figure 32).

Figure 32: Respondents Identifying as 2SLGBTQ+ (Gender Identity and Sexual Identity Combined) by Surveyed Group



Questions about 2SLGBTQ+ identity, gender identity and sexual identity are essential because they represent important aspects of people's lives and in many cases are directly linked to people's pathways into and out of homelessness.⁷ People have intersectional identities, which must be included in attempts to understand and end homelessness. The data also provides a better understanding of the scope of 2SLGBTQ+ homelessness and the needs of service users, which will ultimately help inform service delivery.

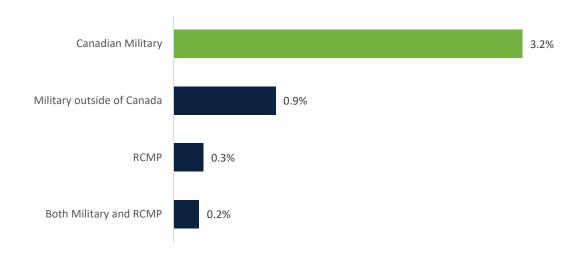
Veteran Homelessness

In 2021, 5% of all respondents experiencing homelessness reported ever serving in the Canadian Military (includes Canadian Navy, Army, or Air Force), RCMP, and/ or Military outside of Canada (Figure 33). Employment and Social Development Canada reported that veterans account for approximately 4.4% of homeless individual counted in communities across Canada in 2018.8

https://www.veterans.gc.ca/eng/housing-and-home-life/at-risk-housing/homeless/activities

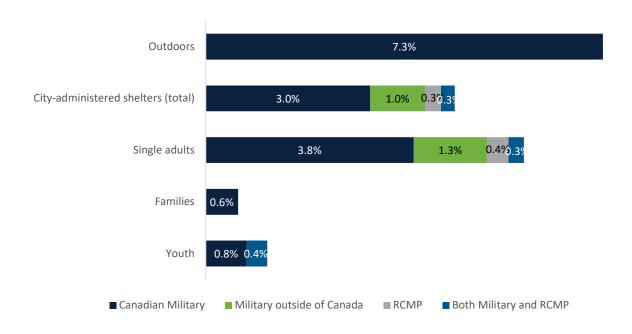
Abramovich, A. 2019. Creating LGBTQ2S Inclusive, Affirming, and Safe PiT Counts. Canadian Observatory on Homelessness. Available at: www.homelesshub.ca/resource/creating-lgbtq2s-inclusive-affirming-and-safe-pit-counts
 Employment and Social Development Canada. 2018. Everyone Counts. Available at:

Figure 33: Respondents Reporting Ever Serving in the Military or RCMP



The percentage of veteran homelessness was highest among respondents staying outdoors (7%), followed by single adults staying in City-administered sites (6%) (Figure 34).

Figure 34: Respondents Reporting Ever Serving in the Military or RCMP by Surveyed Group



Level of Education

This was the first time educational attainment was included on the SNA survey (Figure 35). 42% of all respondents reported having post-secondary schooling or a degree. Just over one-quarter (27%) of respondents completed high school and 28% have not completed high school. Just under 10% of respondents reported that they are currently in school.

Educational attainment was lower among respondents staying outdoors with 35% having not completed high school compared with 27% of respondents staying indoors (Figure 36).

Figure 35: Respondents' Educational Attainment

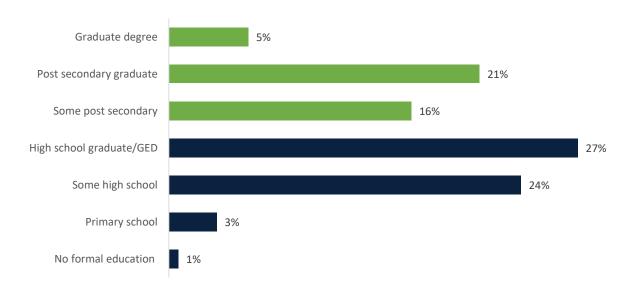
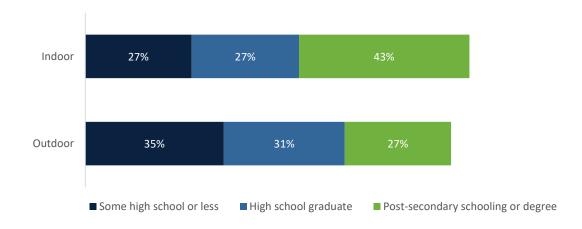


Figure 36: Respondents' Educational Attainment, Indoor Respondents Compared with Outdoor Respondents



Health Challenges

Respondents reported whether they had any of the following five types of health challenges: mental health issue (e.g., depression, PTSD, bipolar disorder), substance use issue (e.g., alcohol, opioids, other drug use), illness or medical condition (e.g., diabetes, arthritis, TB, HIV), physical limitation (e.g., challenges with mobility, physical abilities or dexterity), and learning or cognitive limitations (e.g., dyslexia, autism spectrum disorder, or as a result of ADHD or an acquired brain injury) (Figure 37). Respondents were also asked about tobacco use (e.g., cigarettes, cigars, chewing tobacco), with over half (57%) reporting its use.

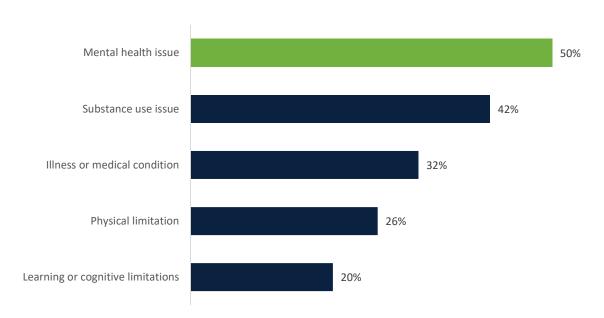


Figure 37: Type of Health Challenge Identified by Respondents

Table 6 presents the results for type of health challenges reported by surveyed group. Respondents who were staying outdoors were more likely to report having a mental health issue, substance use issue, and/or tobacco use issue compared to other surveyed groups.

Table 6: Type of Health Challenges Identified by Respondents by Surveyed Group

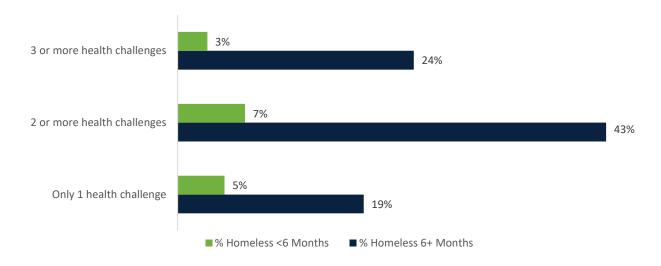
Surveyed Groups	Illness or medical condition	Physical limitation	Learning or cognitive limitations	Mental health issue	Substance use issue	Tobacco use issue
Outdoors	33%	28%	20%	58%	65%	85%
City-administered						
shelters (total):	32%	26%	20%	50%	41%	55%
Single adults	36%	30%	20%	52%	42%	59%
Families	26%	18%	17%	39%	36%	47%
Youth	14%	8%	24%	49%	37%	37%
All Respondents	32%	26%	20%	51%	42%	57%

Overall, 76% of all respondents reported having one or more health challenge and the majority (51%) reported having two or more health challenges (Figure 38). Respondents who are chronically homeless (i.e., homeless for six or more months in the past one year) were six times more likely to report two or more health challenges than respondents who have been homeless for less than six months (43% versus 7%) (Figure 39).

Figure 38: Multiple Types of Health Challenges Identified by Respondents



Figure 39: Multiple Types of Health Challenges Identified, Respondents who are Chronically Homeless Compared with Respondents who are not Chronically Homeless



Substance Use

Almost 27% of respondents who reported having a substance use issue used a treatment facility (16%) and/or supervised consumption service (17%) in the past one year (Figure 40). 33% of respondents who are not currently in treatment for a substance use issue were interested in accessing treatment, with families in City-administered sites being most interested (42%) (Figure 41).

Figure 40: Use of Treatment Facility and/or Supervised Consumption Service, Respondents who Reported Having a Substance Use Issue by Surveyed Group

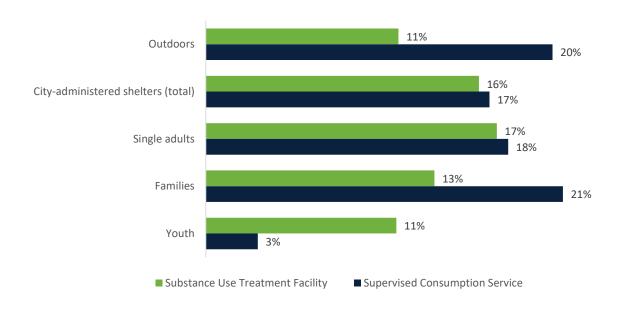
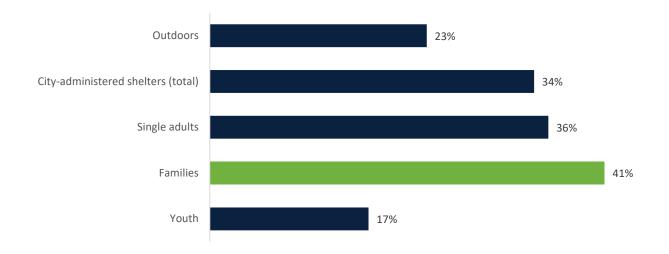


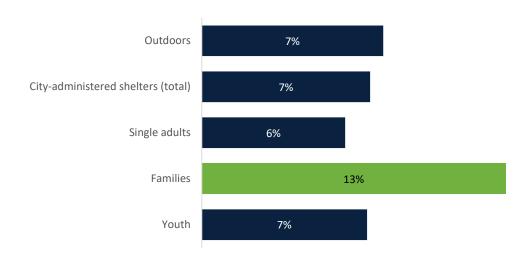
Figure 41: Interest in Accessing Treatment for Substance Use Issues, Respondents who are not Currently in Treatment by Surveyed Group



Pet Ownership

This was the first time a question about pet ownership was included on the SNA survey. 7% of all respondents reported that they currently own a pet at the time of the survey. For those who own a pet, the top three reported were cat (27%), dog (27%), and rabbit (23%). Other pets reported by less than 7% of respondents included hamster, chicken, snake, tarantula, rat, and raccoon. Families staying in City-administered sites had the highest reported pet ownership at 13%, with all other surveyed groups reporting around 6 to 7% (Figure 42).

Figure 42: Respondent Pet Ownership by Surveyed Group



Sources of Income

Consistent with previous SNAs, the most common sources of income were Ontario Works (OW) and Ontario Disability Support Program (ODSP), reported by 58% of all respondents (Figure 43). Just less than 10% of respondents reported having no income and 6% reported seniors' benefits. All other sources of income were reported by less than 5% of respondents. A new source of income reported was the Canadian Emergency Response Benefit (CERB) that was launched during the COVID-19 pandemic, reported by 1% of respondents.

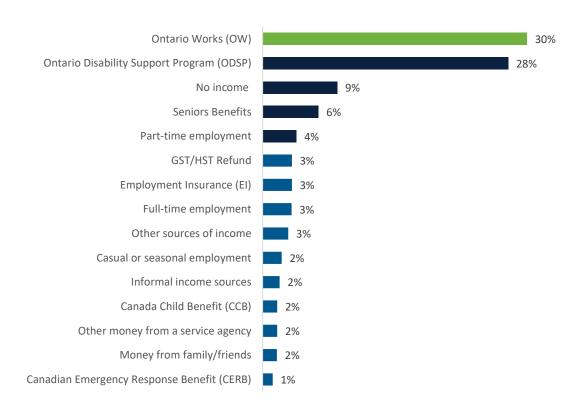


Figure 43: Respondent Source of Income

In addition to the top three sources (OW, ODSP, and no income), outdoor respondents reported informal sources of income and money from family and friends (Figure 44). Single adults also reported seniors' benefits and part-time employment. Families additionally reported GST/HST refund and Canada Child Benefit. Youth also reported income from full-time and part-time employment

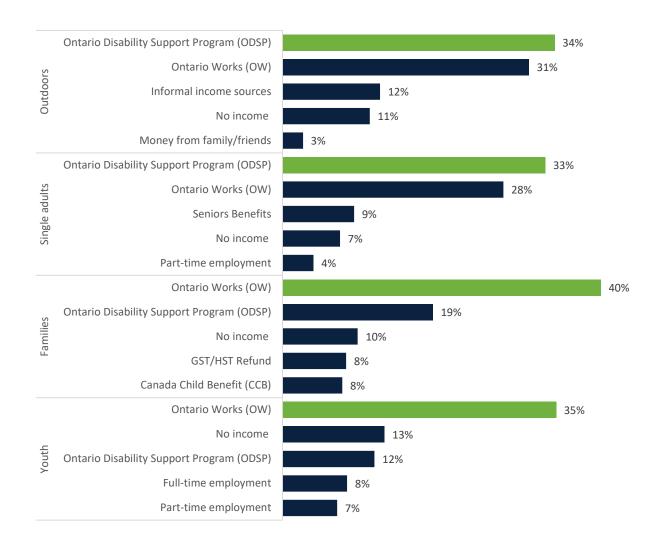


Figure 44: Respondent Top Five Sources of Income by Surveyed Group

Homeless History

Length of Homelessness in Past One Year

The average reported length of homelessness in the past one year was ten months, ranging from less than one month to twelve months, with the outdoor population reporting a slightly longer average length of time of eleven months.

The federal definition of chronic homelessness for the purposes of the national coordinated point-in-time count is experiencing homelessness for six months or more in the past year.⁹ More than three-quarters (77%) of all respondents reported being

⁹ The federal definition of chronic homelessness has changed since the 2018 SNA in which the definition of chronic homeless was experiencing homelessness for six months or more in the past year. With more communities including Toronto using a "By-Name List" – a real-time list of all known people experiencing homelessness (generated from the

chronically homeless in the past one year; 62% of respondents reported being homeless for the entire twelve months (Figure 45). Just 18% reported being homeless for less than six months. The higher share of chronic homelessness in 2021 compared to 2018 is likely due to the absence of refugee families in the shelter system who tend to experience shorter durations of homelessness. The proportion of chronic homelessness is also higher than reported in the Shelter System Flow data, because the SNA is based on self-report rather than shelter use history, and may include periods of outdoor or other homelessness.



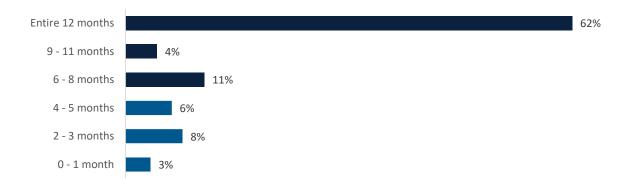


Figure 46 presents the length of time respondents experienced homelessness in the past one year by surveyed groups. Chronic homelessness is higher among outdoor respondents (87%) and an average duration of eleven months homeless in the past one year. Chronic homelessness was also high among single adults staying in Cityadministered sites (81%) with an average duration of 10 months homeless in the past year.

Street Needs Assessment 2021

City's Shelter Management Information System), the definition of chronic homeless was revised to account for the system's ability to track cumulative and recurrent overnight stays. The new <u>federal definition of chronic homeless</u> refers to individuals who are currently experiencing homelessness and who meet at least one of the following criteria: they have a total of at least 180 overnight stays in the past year (365 days); or the person has recurrent overnight stays over the past three years with a cumulative duration of at least 546 nights.

0 - 1 month 1% 2 - 3 months 4 - 5 months 6 - 8 months 8% 3% 9 - 11 months Entire 12 months 0 - 1 month 2 - 3 months Single adults 4 - 5 months 6% 6 - 8 months 9 - 11 months 4% Entire 12 months 0 - 1 month 2 - 3 months 10% 4 - 5 months 6 - 8 months 9 - 11 months Entire 12 months 56% 0 - 1 month 2 - 3 months 4 - 5 months 6 - 8 months 10%

Figure 46: Length of Homelessness in the Past One Year by Surveyed Group

Length of Homelessness over Lifetime

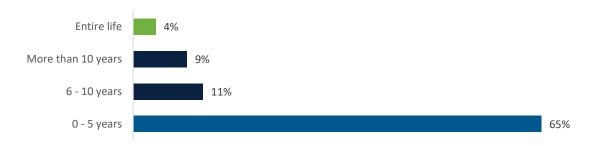
6%

9 - 11 months

Entire 12 months

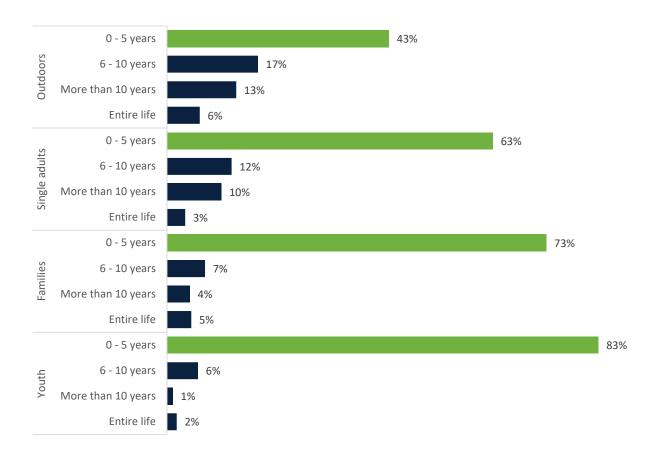
Respondents were also asked about how long they have experienced homelessness over their entire lifetime (Figure 47). The average length of time homeless over respondents' lifetime was 6 years, ranging from 2 days to 53 years, with the outdoor population reporting slightly longer average length of time (9 years). Almost one-quarter (24%) of respondents reported being homeless for more than five years.

Figure 47: Length of Homelessness over Lifetime



Respondents staying outdoors were more likely to experience homelessness for more than 5 years (36%), followed by single adults staying in City-administered sites (25%). 16% of families experienced homelessness for more than 5 years (Figure 48).

Figure 48: Length of Homelessness over Lifetime by Surveyed Group



Age of First Homeless Experience

The average age that respondents reported first experiencing homelessness was 34 years, ranging from zero (possibly indicating since birth) to 83 years old. One-third of

respondents reported that their first experience of homelessness was when they were children or youth (Figure 49). More than half of respondents reported that their first experience of homelessness was during their working ages (between 25 and 59 years of age).

Families staying in City-administered sites and outdoor respondents were more likely to first experience homelessness as children/youth compared to single adults staying in City-administered sites (27% compared to 23%) (Figure 50).

Figure 49: Respondent Age of First Homeless Experience

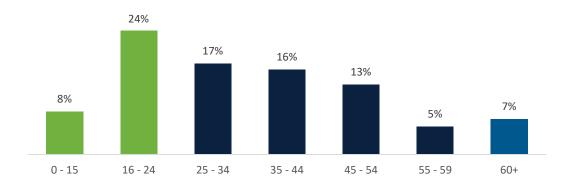
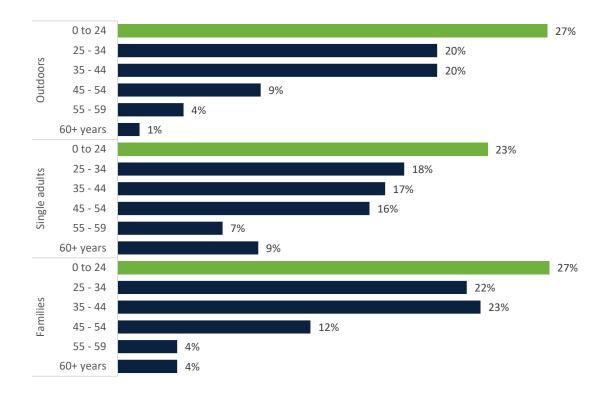


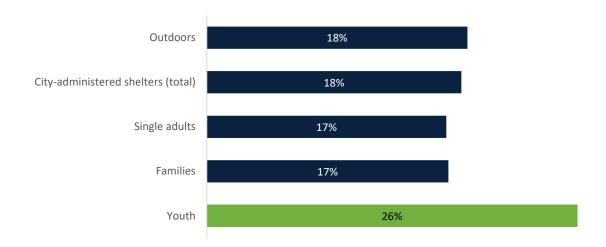
Figure 50: Respondent Age of First Homeless Experience by Surveyed Group



Experience with Foster Care

18% of respondents indicated that they had previous experience being in foster care, kin care and/or a group home. This was highest for youth respondents staying in Cityadministered sites (26%) (Figure 51). Individuals who have had previous experiences with foster care are at a higher risk for experiencing homelessness, particularly when transitioning from foster care.

Figure 51: Respondents with Foster Care and/or a Group Home Experience by Surveyed Group



Reasons for Homelessness/Housing Loss

Not enough income for housing was the most frequently reported reason for housing loss/homelessness, reported by almost 20% of respondents (Figure 52). This finding is consistent with the key driver of homelessness – the rapid increase in rents over the past ten years.

Other reasons reported by more than 5% of respondents included: landlord/tenant conflict, unfit/unsafe housing conditions, substance use issue, conflict with spouse/partner, mental health issue, and conflict with other.

When asked a follow-up question about whether these reasons were related to the COVID-19 pandemic, 15% of respondents reported that they were related.

Figure 52: Respondent Reasons for Homelessness

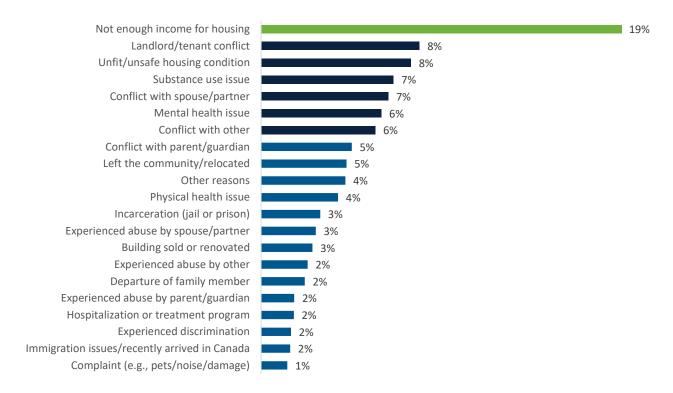
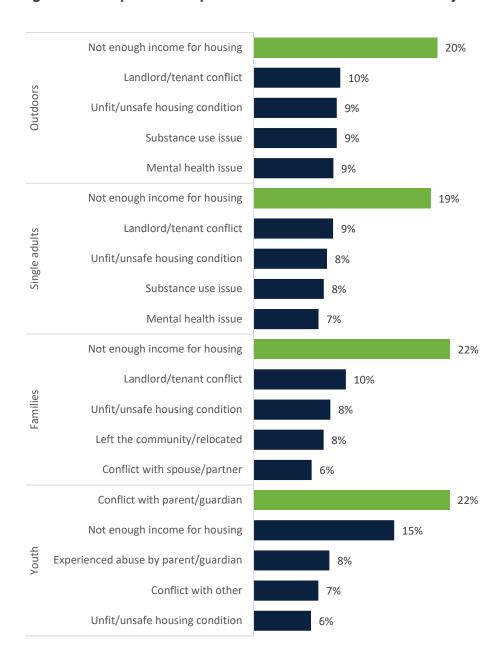


Figure 53 shows the five primary reasons for homelessness reported by surveyed groups. The top five reasons were the same for outdoor respondents and single adults staying in City-administered sites. Conflict was among the top reasons for families and youth. Specifically families staying in City-administered sites reported landlord/tenant conflict and conflict with spouse/partner along with relocating from their community as among their main reasons. Youth reported abuse from parents/guardian and conflict with parent/guardian and other as among their main reasons.

Figure 53: Respondent Top Five Reasons for Homelessness by Surveyed Group



Service Use Patterns

The 2021 SNA found that while 10% of people experiencing homelessness were estimated to be sleeping outdoors on the night of April 21, 97% of all respondents including those staying in indoor locations reported using an overnight sheltered service in the past 12 months.

Figure 54 presents the results for respondents who reported staying only in indoor locations (i.e., shelters, 24-hour respite sites, 24-hour drop-ins, COVID-19 response sites, warming centres) and only outdoors/encampments and well as respondents who reported moving between staying outdoors and indoors in the past 12 months. 60% of respondents reported staying in indoor locations only, while 37% reported moving between staying outdoors and indoors. A very small percentage (2%) of outdoor respondents reported staying outdoors only (and not in an overnight sheltered service).



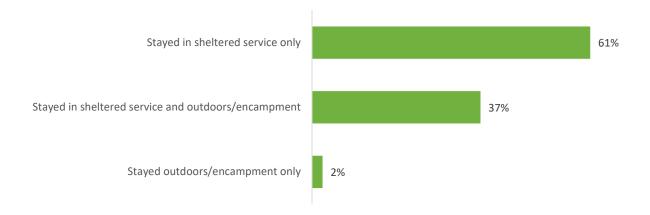
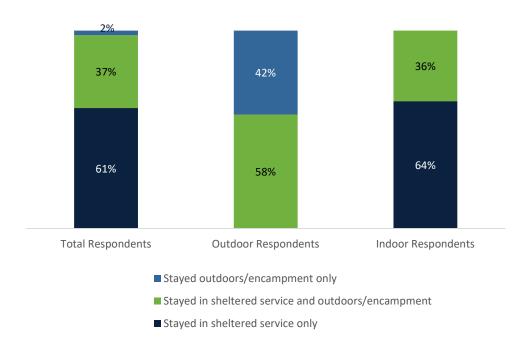


Figure 55 reports these results for indoor, outdoor and total respondents. Of the outdoor respondents, over half (58%) reported using an overnight sheltered service, while 42% slept exclusively outdoors or in an encampment in the past one year. Of the indoor respondents, almost two-thirds (64%) reported staying exclusively in an overnight sheltered service, while 36% of the indoor respondents reported staying at least once outdoors or in an encampment in the past one year.

Respondents were also asked if they left a sheltered service to live outdoors during the COVID-19 pandemic. 29% of respondents indicated that they did so with no variation between respondents staying indoors and outdoors (data not shown).

These findings clearly demonstrate that overnight shelter services are being used among these populations. Overall, these findings point to the fluidity of homelessness and the change in an individual's living circumstances within a relatively short period of time.

Figure 55: Movement Outdoors and Indoors, Indoor Respondents, Outdoor Respondents and Total Respondents



Service Needs of People Experiencing Homelessness

Services and Supports to Help Find Housing

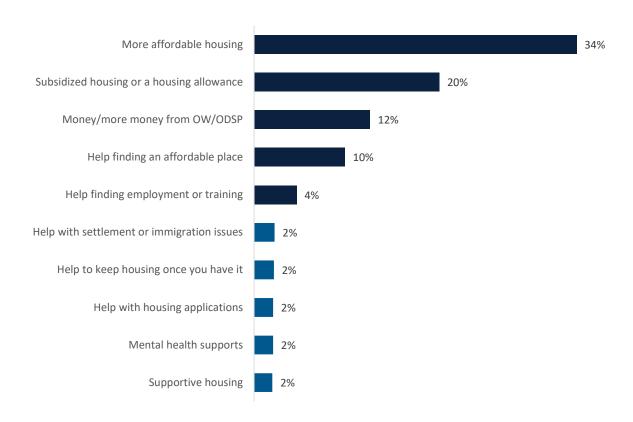
Respondents were asked to identify from a list of 22 services and supports which would help them personally to find and to maintain housing. From this list of 22 services they were also asked which service would be most important to help find housing (Figure 56).

80% of respondents identified five services and supports as being most important to help find housing that were directly or indirectly related to increasing income and housing affordability. These include: more affordable housing, subsidized housing or a housing allowance, increased social assistance rates, help finding an affordable place, and help finding employment or job training. These were also the top five most important services identified by each surveyed group.

These findings are consistent with previous SNAs and confirm that affordability is the most significant challenge in helping move people out of homelessness. In the past ten years, average market rent for a one bedroom unit has increased 51%, while OW shelter benefit rates have increased only 7%. The gap between OW shelter benefits and

rent has increased from \$585 in 2010 to \$1,041 in 2021. This is compounded by a lack of new rental and affordable housing.

Figure 56: Most Important Service and Support Needs of Respondents to Help Find Housing

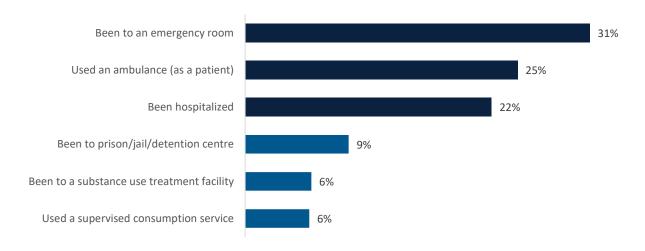


Interaction with the Health Care & Criminal Justice System

Respondents were asked about six different types of interactions with the health care and criminal justice system during the past one year preceding the 2021 SNA.

Overall, the largest share of respondents reported interacting with the health care system, with emergency room visits being the most reported type (31%) (Figure 57). Less than 10% of respondents reported interactions with the criminal justice system. 43% of respondents reported more than one type of interaction (Table 7).





Interaction with the health care and criminal justice system varied by surveyed group, as shown in Table 7. Youth and families staying in City-administered sites were least likely to report more than one type of interaction. Single adults staying in City-administered sites and outdoor respondents were more likely to report more than one type of interaction.

It is important to note that there is a range of reasons why respondents may interact with the health care and criminal justice system. In some cases, the interactions are related to the causes of homelessness (e.g., intimate partner violence), while in other cases they are a consequence of homelessness (e.g., increased emergency health care use as a result of health issues or barriers to accessing primary health care, interaction with law enforcement as a result of increased visibility in public spaces).

Table 7: Respondent Interaction with the Health Care and Criminal Justice System by Surveyed Group

Surveyed Groups	More than one interaction	Been to an emergency room	Used an ambulance	Been hospitalize d	Been to prison, jail, detention centre	Been to a substance use treatment facility	Used a supervised consumpti on service
Outdoors	46%	40%	39%	34%	17%	10%	17%
City-administered shelters (total):	44%	47%	37%	33%	14%	9%	8%
Single adults	47%	49%	39%	36%	15%	10%	9%
Families	35%	38%	27%	24%	10%	6%	8%
Youth	34%	39%	31%	26%	12%	7%	2%
All Respondents	43%	46%	37%	33%	14%	9%	9%

Conclusion

The COVID-19 pandemic has been a challenging time for people experiencing homelessness as well as service providers who rapidly responded to considerable changes across the sector to support this vulnerable population in Toronto. The 2021 SNA provided a unique opportunity to better understand the impact of the pandemic on the number and profile of people experiencing homelessness as well as their service needs.

The 2021 SNA would not have been possible without the participation and support from people experiencing homelessness, and City staff and community partners who, for the first time, led the SNA in its entirety. We also spoke with the largest number of people to date, giving people experiencing homelessness an opportunity to tell us directly the services they need to find and keep housing. This information is also critical to the City of Toronto, SSHA and stakeholders including the federal and provincial governments, community agencies, advocates, and the general public.

Consistent with previous SNAs, the results confirm that the key solutions to homelessness are increasing income and access to safe, supportive and affordable housing. The COVID-19 pandemic has magnified the issue of homelessness and the urgent need for permanent housing solutions to protect the health and well-being of this population.

While it is still too early to know the full impact of the COVID-19 pandemic on homelessness in Toronto, the SNA results provide a better understanding of trends as well as the particular needs and experiences of different groups, which is especially critical during the COVID-19 pandemic. Previous SNA results have helped to improve program and service delivery, such as the creation of an Indigenous funding stream with a 20% allocation of funding, new shelter development, and priority populations for housing benefit programs. The results help inform service planning and ongoing service system transformation efforts as they provide a valuable source of feedback on the services that help people experiencing homelessness find and maintain housing. In particular, the results are a key input into SSHA's Service Plan which will identify priorities for the next three years, as we continue to build and strengthen a responsive homelessness service delivery system and advance our shared goal of ending chronic homelessness in Toronto.

This project is funded in part by the Government of Canada's Reaching Home Strategy. The opinions and interpretations in this publication are those of the author and do not necessarily reflect those of the Government of Canada.

Appendix A: Methodology and Implementation

The third nationally coordinated point-in-time count and survey of homelessness was originally planned to be held between March 1 and April 30, 2020. Due to the COVID-19 pandemic, communities were allowed to postpone until the same time in 2021. The Province also required Service Managers in Ontario to conduct a point-in-time count of homelessness before December 15, 2021.

A number of adaptations to the SNA were designed in 2020 to reduce the risk of implementing the count. These were intended to make implementation of the SNA more manageable within existing staffing resources, ensure greater predictability/reduced risk while at the same time meeting service planning and program development needs and federal funding requirements. This approach was adapted in 2021 to ensure all public health measures and guidelines could be followed and the project can be delivered safely for everyone involved during the COVID-19 pandemic.

In addition, both the federal and provincial government have guidelines and a standard set of survey questions that communities were required to follow to ensure comparability. Communities are required to share these data with the federal and provincial governments to be included in a national and provincial snapshot of homelessness.

Project Governance

The core project team consisted of a Manager, Program Coordinator, and Research Analyst. The project was guided by a Steering Committee which was composed of divisional management staff, many of whom played leadership roles in previous SNAs, as well as staff from key community partners including the Toronto Shelter Network, the Toronto Alliance to End Homelessness, the Toronto Indigenous Community Advisory Board, the Toronto Indigenous Community Entity, and Toronto Aboriginal Support Services Council. SSHA's Senior Management Team also provided oversight and final approval for the project. An Indoor Study Reference Group of front-line staff from Cityadministered sites was also established to inform operational planning and support for the 2021 SNA.

Date and Weather

The 2021 SNA was conducted between April 19 and 27, 2021. This time of the year is consistent with previous SNAs. The Indoor and Outdoor Count took place on Wednesday, April 21 with a dry run conducted on Wednesday, April 7. The Outdoor Count was conducted from 9 am to 12 pm for encampment areas and 7 pm to 12 am for non-encampment areas. The average temperature was 4.3 degrees Celsius with 3.4 cms of snow in a 24 hour-period. This was lower than in 2018 which was 10.7 degrees Celsius and no rain.

The Indoor Survey took place over one week from April 19 to 23. The Outdoor Survey took place on April 27 from 9 am to 12 pm for encampments and 7 pm to 12 am for non-

encampment areas. The average temperature was 11.4 degrees Celsius with 3.6 mm of rain in a 24-hour period. Outreach staff noted that people staying outdoors were less interested in participating in the survey due to the rain.

Definition of Homelessness

For the purposes of the SNA, homelessness is defined as any individual who on the night of April 21, 2021, was sleeping outdoors or staying in City-administered emergency/transitional shelters and shelter motels/hotels (including COVID-19 response sites and isolation/recovery programs), 24-hour respite sites (including 24-hour women's drop-ins) as well as provincially-administered Violence Against Women shelters, individuals in health, crisis or treatment (including post-treatment) facilities identified as homeless, as well as individuals in correctional facilities who listed their previous residence as 'no fixed address' or a known shelter location. This definition of homelessness excludes the "hidden" homeless (e.g., staying temporarily with family or friends) which is challenging to measure. Certain groups such as Indigenous people, 2SLGBTQ+ people, and people with disabilities are more likely to experience hidden homelessness and may be underrepresented in these results.

Conducting the SNA Safely during COVID-19

The approach developed in 2020 was modified to ensure all public health measures and guidelines could be followed and the initiative be delivered safely for everyone involved. Toronto Public Health and the City's Occupational Health and Safety section were consulted on the planning and implementation of this year's SNA. In addition, the federal government provided communities with possible adaptations and mitigation strategies to conduct their point-in-time counts safely within the current COVID-19 context based on level of risk and severity of impact of the pandemic.

The initiative was led by staff from City-administered shelters and outreach agencies, as well as staff in provincially-administered sites. Due to the COVID-19 pandemic and the public health guidance to limit non-essential visitors, volunteers were not recruited for this year's SNA. In addition, all training was provided online rather than in person and surveys were administered electronically.

Surveys were conducted by staff adhering to appropriate COVID-19 public health protocols including:

- Mandatory face coverings and personal protective equipment (PPE) as per the City's <u>Shelter Directive</u>
- Use of barriers (i.e., Plexiglass) where available when conducting surveys
- Staff screening using the <u>COVID-19 Staff and Visitor Screening Form for</u> Homelessness Service Settings
- Conducting surveys with clients who have been screened using the COVID-19
 Client Screening Tool for Homelessness Service Settings
- Maintaining 6 ft (2 m) physical distance during administration of survey
- No physical contact with respondents
- Performing hand hygiene

Frequently cleaning and disinfecting of surfaces

More details on COVID-19 protocols can be found on the SNA 2021 training page.

Indoor Study

The Indoor Study consists of a count and survey of people staying in City-administered emergency and transitional shelters, 24-hour respite sites, 24-hour women's drop-ins, and COVID-19 response and recovery/isolation site. Surveys were conducted over one week (known as Indoor Survey Week) from April 19 to 23 by staff working at these sites.

Surveys were not conducted in health and treatment facilities due to the COVID-19 pandemic. The plan to conduct surveys in the two Toronto correctional facilities in collaboration with the John Howard Society of Toronto and the Native Men's Residence Native Inmate Liaison Officer was cancelled the week before Indoor Survey Week as the professional visitation areas was closed due to COVID-19 outbreaks.

Outdoor Study

The Outdoor Study consists of a count and survey of people staying outdoors including in encampments. The count and the survey were conducted on separate days to ensure outreach teams had sufficient time to canvass all assigned areas. The count was held on April 21 along with a dry-run to test out this new approach two weeks prior on April 7. The survey was conducted on April 27.

The Outdoor Study was conducted by staff from City of Toronto Streets to Homes and funded outreach agencies. These are specialized teams who engage with people living outdoors in Toronto by providing and advocating for a range of services to minimize the impacts of street homelessness on individuals and the community. The survey and count of people staying outdoors was conducted between 7 pm and 12 am. Specialized encampment teams from Streets to Homes and partner outreach agencies conducted the count and survey with people staying in encampments in the morning from 9 am to 12 pm.

Point-in-Time Count

The SNA employs a point-in-time methodology for enumerating homelessness that is now the standard for most major American and Canadian urban centres. While the approach to implementing the 2021 SNA changed, the methodology is the same used in 2018.

Indoor Count

An enumeration was conducted of individuals staying in City-administered emergency and transitional shelters, 24-hour respite sites, 24-hour women's drop-ins, COVID-19 response and recovery/isolation site, and provincial institutions. Occupancy data on the number of individuals staying in City-administered sites were extracted from the City's Shelter Management Information System (SMIS). Occupancy data on the number of

individuals staying in provincially-administered VAW shelters were provided by the participating VAW shelters. Occupancy data were collected from all of the 22 health, crisis, and treatment (including post-treatment) facilities/networks who participated (provided by staff contacts in each facility) for individuals staying overnight with no fixed address or a shelter address. Three smaller sites did not participate. In the 2018 SNA, two of these sites participated and reported a combined 16 people experiencing homelessness. Occupancy data were collected from correctional facilities (provided by the provincial Ministry of the Solicitor General) for individuals coming from a Toronto court with no fixed address or a shelter address.

Outdoor Count and Estimation

The approach for Toronto's outdoor point-in-time count follows both the national coordinated point-in-time count standards developed in collaboration with the Canadian Observatory on Homelessness, as well as the New York City's Department of Homeless Services approach to the annual Hope Outreach Population Estimate. Specifically, Toronto employs a direct count method for the count of people experiencing unsheltered homelessness. While this method is more resource intensive, it is also considered to be more comprehensive and accurate than the alternative – which strictly relies on service interactions.

To facilitate the outdoor study, Toronto was divided into study areas based on the 2016 Statistics Canada census tracts. A sample of study areas that could be covered by outreach teams was selected. A total of 54% of Toronto's study areas (295 out of the 544 census tracts) were surveyed on the night of April 21, 2021.

A combination of full coverage, selection of known locations, and random sampling approaches was used to select outdoor study areas. All study areas that are considered "high density" (where 3 or more people experiencing homelessness are known to be staying based on consultation with City and community partner outreach staff) were selected for surveying, representing 229 out of the 295 study areas. Encampments were assumed to be "high density" areas. 66 areas considered "low density" areas (where 1 to 2 people experiencing homelessness are known to be staying) were randomly selected to be surveyed, stratified to ensure proportional distribution across Toronto's four Community Council Areas. This year, since there were more than 295 study areas that were identified as high density or low density, areas with no people experiencing homelessness ("no density" areas) were not randomly selected.

Outreach teams were provided with a map of study areas that were roughly aligned to their usual outreach catchment areas. Native Men's Residence was provided with a map of study areas where a greater number of Indigenous people experiencing homelessness were known to be staying outdoors based on consultation in advance with their outreach team. The YMCA outreach team was provided with a map of study areas where a higher number of youth experiencing homelessness were known to be staying.

Outreach teams canvassed encampments in these study areas in the morning from 9 am to 12 pm and non-encampment study areas from 7 pm to 12 am on the night of April

21, 2021. Teams were instructed to survey on foot or by vehicle all public spaces within high density study areas systematically so that every location is covered only once. For low density areas, they were instructed to go to the location where they know people experiencing homelessness are likely to be staying and count them avoiding areas they know there are no people staying.

Public spaces included all streets and public squares. Subway and TTC stations, schools, government buildings, private property including inside commercial establishments were excluded. Outdoors included sidewalks, streets, alleyways/laneways, parks, bus shelters, forests, encampments, ravines, vehicles, abandoned/vacant building.

People known to outreach staff as staying outdoors that night were counted via an online CheckMarket Form. Data from these forms were reviewed and used to derive the count of 'encountered' homeless individuals for each study area.

Once the counts of encountered individuals experiencing homeless were completed, a calculated adjustment is made to account for those individuals not encountered but experiencing homelessness on the night of April 21 based on extrapolation to non-surveyed areas of Toronto. Given that outreach staff were leading the implementation of the Outdoor Count, no control group was deployed to assess the likelihood that individuals experiencing homelessness were visited and surveyed by study teams according to the correct methodology.

A total of 450 individuals (163 of whom were staying in encampments) identified as experiencing outdoor homelessness were encountered by outreach teams in the 295 study areas surveyed. Extrapolation to the remaining unsurveyed areas yields an estimate of 292 individuals not encountered but sleeping outdoors on April 21, 2021. This provides a total estimate of 742 individuals staying outdoors on the night of the SNA (Table 2).

Survey Design and Administration

Two versions of the survey (outdoor and indoor) were developed with slight changes to local questions to ensure applicability to these groups. A copy of the outdoor survey is found in Appendix B. Surveys were developed through consultation and input from the SNA Steering Committee and SSHA's Senior Management Team. Some local questions had been used in previous SNA surveys and were developed through extensive research and consultation with experts from other jurisdictions and local stakeholders.

The Indoor Survey was translated into French for a Francophone VAW shelter and telephone interpretation was used at sites where a need had been pre-identified.

Any individual who was at least 16 years old or older and staying overnight in a program for people experiencing homelessness on any night during Indoor Survey Week or on Outdoor Survey Night was eligible to complete the survey. Dependents were eligible to participate even if they were accompanied by a parent or guardian as long as they were over the age of 16.

Surveys were administered for the first time using an online survey tool, CheckMarket, to eliminate handling of paper surveys and to enhance data quality and ease of administration.

Indoor Survey

Each site participating in the Indoor Survey identified a Study Coordinator during the planning of the SNA. The Study Coordinator was the person identified at all of the organizations participating in the 2021 SNA as the main point of contact for coordinating the survey at their site and providing on-the-ground support and leadership to Indoor Study Leads. Indoor Study Leads were staff members identified at each site that assisted with the administration of surveys.

For the 2021 SNA, all City-administered sites were eligible to participate (in 2018, a sample of sites was selected). Almost all (98%) City-administered sites participated in the SNA Indoor Survey; only two sites who had planned to participate were unable to due to COVID-19 outbreaks. These sites had survey targets that were low (combined total of 20 surveys). Three sites were unable to participate as they were in a state of transition (e.g., clients relocating to COVID-19 hotel program) due to the COVID-19 response. These sites also had low survey targets.

Provincially-administered VAW shelters participated on a voluntary basis. There was lower participation among VAW shelters in 2021 due to the COVID-19 pandemic with 9 out of 14 shelters (64%) taking part in the survey at their sites.

Sites were provided with survey targets for completion during Indoor Survey Week which were approximately 50% of their capacity. Staff in City-administered sites and VAW shelters conducted surveys with clients who were eligible and consented to participate in the survey based on their responses to screening questions. All individuals who participated in the survey received a \$10 gift card to acknowledge their time and contribution.

Telephone survey support was provided by 11 SSHA head office staff to four City-administered sites, including the COVID-19 recovery/isolation programs, who had resource constraints associated with the COVID-19 pandemic and required additional support to meet survey targets. Telephone Survey Leads conducted surveys over the telephone with 129 clients (out of a total of 2,629) who consented to participate.

In order to prevent individuals from completing the survey more than once over the course of the week, an "SNA Participant Tracker" field was added to the Shelter Management Information System. This enabled shelter staff to indicate the survey participation status of the client so as not to survey them more than once if the client moved from one shelter to another during the week.

Outdoor Survey

The survey was conducted by outreach staff approximately one week after the count on April 27 in study areas assigned for the Outdoor Count. Surveys were conducted over a

period of approximately 5 hours (from 7 pm to 12 am) and with encampment residents in the morning of the same day (from 9 am to 12 pm).

Outreach staff conducted surveys with individuals who were eligible and consented to participate in the survey based on their responses to a screening tool. All individuals who participated in the survey received an honoraria to acknowledge their time and contribution. This year, SSHA piloted the use of \$10 cash honoraria in lieu of food gift cards. Feedback from both outreach staff and clients was very positive.

Survey Response Rates

We spoke with the largest number of people experiencing homelessness for the 2021 SNA (2,629), providing a strong level of confidence in the integrity of the results. The large number of surveys completed demonstrates that people experiencing homelessness want to participate in the survey and have a direct voice in identifying their service needs. It is also a reflection of the commitment and dedication of shelter and outreach staff to this important initiative.

The overall response rate for the 2021 SNA survey was 45% (Table 8). Response rates were highest among respondents in the base shelter system compared with the COVID-19 response and recovery/isolation sites. The lower participation of VAW shelters in the 2021 SNA resulted in a low response rate for this group and the small number of surveys did not permit more detailed analysis.

Indoor response rates were calculated as the number of completed surveys divided by the total number of eligible people (16 years or older) who were staying in sites. Outdoor response rates were calculated as the number of surveys completed with individuals staying outdoors divided by the total number of individuals encountered outdoors who were identified as homeless.

Table 8: 2021 SNA Response Rates for Surveyed Groups

	2021 Response	Number of Surveys	Total Eligible
Surveyed Groups	Rate	Completed	Population
Outdoors	32%	145	450
City-administered sites:	46%	2,437	5,305
Base emergency and transitional			
shelters (including temporary refugee			
response)	53%	1,255	2,378
Base system – 24 hour respite sites			
(includes 24-hour drop-ins)	53%	133	250
COVID-19 response sites –			
motel/hotel/shelter/24-hour respite sites	40%	1,008	2,548
COVID-19 recovery/isolation sites	32%	41	129
VAW shelters	40%	47	117
Total	45%	2,629	5,872

Support from Community Partners

This year the SNA was led exclusively by City and community partner agency staff and involved over 200 sites and partners. No volunteers were recruited in accordance with public health guidance to limit non-essential visitors. The SNA would not be possible without the support of staff from City-administered shelters, 24-hour respite sites, and COVID-19 response and recovery/isolation sites, City-administered outreach agencies, provincially-administered VAW shelters, and the Ministry of the Attorney General (who coordinated occupancy counts for correctional facilities in Toronto). We are also grateful for the support of staff from the John Howard Society of Toronto and the Native Men's Residence Native Inmate Liaison Officer for their assistance in planning the SNA survey in correctional facilities which unfortunately was cancelled due to the COVID-19 pandemic.

Engagement with Indigenous Partners

The City of Toronto is committed to reconciliation and supporting Indigenous peoples' right to self-determination by working inclusively with Indigenous communities to achieve equitable outcomes within their communities and day to day lives.

In recognition of this and the need for Indigenous-led solutions, the City collaborated with the Toronto Indigenous Community Advisory Board (TICAB) throughout the planning, implementation, and reporting stages of the SNA. The City also provided funding to the Toronto Aboriginal Support Services Council (TASSC) to develop online Indigenous Cultural Safety Training that was made available for all staff involved in implementing the SNA. In addition to ongoing engagement, leadership from the TICAB, the Toronto Indigenous Community Entity, and TASSC participated on the SNA Steering Committee.

Engagement followed principles in the City's <u>Meeting in the Middle Engagement</u> <u>Strategy and Action Plan</u>, co-developed with Indigenous partners in the housing and homelessness sector to more meaningfully address Indigenous homelessness in Toronto. The guidance and participation from Indigenous partners was critical to the success of the initiative and is greatly appreciated.

Online Training

All training was delivered online. All participants involved in implementing the SNA were required to complete a self-directed online micro-learning series covering: SNA 101, Indoor Study Health and Safety, Indoor Survey Basics, Outdoor Study Health and Safety, Outdoor Survey Basics, and Outdoor Count Methodology. Study Coordinators were required to attend a one and a half hour virtual instructor-led training session.

The City funded TASSC to develop online Indigenous Cultural Safety Training to support a culturally safe SNA for Indigenous people experiencing homelessness. The training was designed to help staff better understand the lived experience of Indigenous people experiencing homelessness in Toronto and included a variety of components and features stories from Indigenous people with lived experience of homelessness. All

participants involved in implementing the 2021 SNA were required to complete this online training.

In addition, a one-hour online webinar "Creating an LGBTQ2S Inclusive and Affirmative Street Needs Assessment" was delivered by Dr. Alex Abramovich from the Centre for Addiction and Mental Health. The webinar focused on definitions of gender identity and sexual identity; background on the intersection of LGBTQ2S identity and homelessness; and how to ask survey questions on sexual identity and gender identity in respectful, inclusive, and affirming ways.

More details on these training materials and resources can be found on the SNA 2021 training page.

SNA Participant Feedback

Overall, feedback on the new approach to the 2021 SNA was overwhelmingly positive. Staff and community partners felt that the approach which leveraged the expertise of agency staff was a more effective and manageable approach.

A feedback form was distributed to participants involved in the SNA and found that:

- 91% rated their overall experience with the SNA as excellent or good
- 100% rated the quality of communication as very high or high
- 87% rated the quality of the micro-learning modules as very high or high
- 100% rated the quality of the Outdoor Count and Outdoor Survey virtual instructor led training as excellent or good
- 66% felt the Indigenous cultural safety training provided them with new insights or skills in connecting with Indigenous people experiencing homelessness

An online debrief was held with Telephone Survey Leads to obtain feedback on the new approach to implementing the SNA. The most commonly reported challenge was that it was difficult to get in touch with clients (likely due to the higher support needs of clients staying at these sites) and that the survey needed to be adapted for a telephone survey context. In addition, TSLs felt that the training should be customized for this different implementation process.

Street Needs Assessment 2021: Outdoor Survey PDF

Appendix B: 2021 SNA Survey, Outdoor Population

STREET NEEDS ASSESSMENT

Outdoor Survey

* 1.	Study Area Number:			
<u>Open</u>	ing Script [Read]:			
Hi, my	name is and I am a survey lead with <i>[enter name of you</i>	agency]:	·	
The C	ity of Toronto is conducting a survey with people experiencing homelessing.	ness, who	are 16 years or older, about what would help to obtain	
Resul home	ts will contribute to the understanding of homelessness in Toronto and a less.	ross Can	ada, and will help to improve services for people who are	
The s	urvey will be conducted using my mobile device.			
* 2.	Have you already been interviewed by someone using the fo	llowing	identifier? [show screen to person]	
	STREETNEEDS	A	SSESSMENT	
	○ Yes (End Survey)		○ No	
	Decline to answer (End Survey)			
* 3.	Are you staying outdoors tonight?			
	○ Yes		O No (End Survey)	
	O Decline to answer (End Survey)			
* 4.	Where are you staying tonight?			
	 Encampment (e.g., outdoor area where an individual or a group of people live in homelessness together, often in tents or other temporary built structures) 	bed v	ne (e.g., small, narrow steep sided valley usually near water where people experiencing homelessness are living in an mpment-like setting)	-
	Laneway or alleyway (e.g., a narrow roadway or passageway)	O Vehic	cle (car, van, RV, truck, boat)	
	Abandoned/vacant building		r outdoor space (e.g., street, park, bus shelter, forest, valk, square)	
	Opening to answer (End Survey)	Other	r unsheltered location (specify)	

[Rea	d Script Below]			
★ Th	ne survey takes about 10 - 1	5 minutes to complete		
★ Yo	our participation is voluntary	and will not affect services you r	eceive	
★ Yo	ou will not be identified and ber, address)	please do not include any perso	onal informati	ion in your responses (i.e., your name, telephone
★ Yo	ou can skip any question or	stop the survey at any time		
★ Yo	ou will receive a \$10 honora	ria as a thank you for your particip	ation	
* 5.	Are you willing to partici	pate in the survey?		
	O Yes	O No (End Survey)		
[If w	illing to participate in the s	survey]:		
Give	individual a <u>three-layer cl</u>	oth mask and encourage them to	o wear it duri	ng the survey to facilitate a safe survey experience
* 6.	What family members ar and/or other family mem		eck all that ap	oply if staying with partner, children/dependents
	None		Partne	r
	Child(ren)/Dependent(s)		Don't k	now
	Decline to answer		(DO No	adult family member, please specify: OT RECORD NAMES, record only the RELATIONSHIP of reson staying with the respondent)
7.	Stop Survey			
	O Yes			
8.	If respondent indicated a this survey tonight?	a partner or family member(s): D	id your partn	er and/or adult family member(s) already complete
		Yes	No	If known, enter SURVEY # of partner and/or adult family member:
	Partner	0	0	li
	Adult family member 1		0	

Adult family member 2

Adult family member 3

Adult family member 4					
Stop Survey					
○ Yes					
If respondent indicated children/depewith you tonight?	ndents: Ca	an you tel	I me the ag	e and gender of	the child(ren)/dependent(s) stag
	Male	Female	Gender not listed	Decline to answer	Age, please specify
Child/Dependent 1	0	0	0	0	
Child/Dependent 2				0	
Child/Dependent 3				0	
Child/Dependent 4				0	
Child/Dependent 5				0	
Child/Dependent 6				0	
Child/Dependent 7				0	
Child/Dependent 8				0	
Ston Sumay					
Stop Survey Yes					
- 100					
How old are you? OR What year were respondent is 15 years or younger]	you born?	lf unsur	re, ask for b	est estimate] [S	urvey will be terminated if
15 years or younger (End Survey)Don't know				Enter Age or Decline to an	
				Decline to an	SWEI

* 14.	How old were you when you first	experienced homelessne	ss?				
	Enter Age:		Opn't know				
	Decline to answer						
15.	Stop Survey						
	○ Yes						
* 16.	Over the past 12 months, how <u>mu</u>	<u>ch time</u> in total have you	experienced homelessness? [Best estimate]				
	Entire 12 months	Enter time (if les	ss than 12 months):				
	Opn't know	Decline to answ	•				
	DOTT KNOW	O Decline to answ	GI				
17.	Stop Survey						
	○ Yes						
	100						
* 18.	Over your LIFETIME, how much time in total have you experienced homelessness? [Best estimate]						
	Entire life	Enter time (if less than en	tire life):				
	O Don't know	Decline to answer					
19.	Stop Survey						
	○ Yes						
* 20.		using" does not include	t recently? [Do not read categories. Check all that apply temporary arrangements (e.g., couch surfing) or shelter stays. or that they "chose to leave"]				
	GREEN: Housing and Financial Is PURPLE: Interpersonal and Famil ORANGE: Health or Corrections						
	Not enough income for housing (e.g job)	., loss of benefit, income or	☐ Unfit/unsafe housing condition				
	☐ Building sold or renovated		Owner moved in				
	Landlord/tenant conflict		Complaint (e.g., pets/noise/damage)				
	Left the community/relocated		Conflict with spouse/partner				
	Conflict with parent/guardian		Conflict with other				
	Experienced abuse by spouse/partn	er	Experienced abuse by parent/guardian				
	Experienced abuse by other		Departure of family member				
	Experienced discrimination		Physical health issue				
	Mental health issue		☐ Substance use issue				

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

	Hospitalization or treatment program	Incarceration (jail or	prison)							
	☐ Don't know	Decline to answer								
	Other (specify):									
21.	Stop Survey									
	○ Yes									
	- 100									
* 22.	Was your most recent housing loss related	ed to the COVID-19 pandemic?								
	○ Yes	O No								
	On't know	Decline to answer								
23.	Stop Survey									
	○ Yes									
* 24	How long ago did that hannen (that you k	ost your housing most recently\? [Rest	ostimatol							
24.	How long ago did that happen (that you lost your housing most recently)? [Best estimate]									
	Enter time:	O Don't	know							
	O Decline to answer									
25.	Stop Survey									
	Yes									
* 26.		vernight in any of the following location	s while homele	ss? [Read a	and show list.					
	Check all that apply]									
					Decline to					
			Yes	No	answer					
	Emergency shelter									
	24-hour respite site									
	24-Hour respite site									
	24-hour women's drop-in									
	COVID-19 response site									
	Warming centre									
	Outdoors									
	Encampment									
	Епоатрион									

* 28.	If YES to sheltered location a to live in an encampment bed	and YES to outdoors/encampment: Did you leave the sheltered location to live outdoors OR cause of the COVID-19 pandemic?
	Yes	○ No
	O Don't know	O Decline to answer
29.	Stop Survey	
	○ Yes	
* 30.	Did you come to Canada as a	nn immigrant, refugee, or refugee claimant?
	Yes, Immigrant	○ Yes, Refugee
	Yes, Refugee Claimant	Temporary Resident (i.e., temporary worker, international student)
	O No	O Don't know
	O Decline to answer	Other (specify)
31.	Stop Survey	
	○ Yes	
* 32.	If respondent is an immigran Canada?	t, refugee, refugee claimant, temporary resident or other: How long have you been in
	Enter time:	Opon't know
	O Decline to answer	
33.	Stop Survey	
	○ Yes	
* 34.	How long have you been in T	oronto? [If person has been living off and on in Toronto, ask about most recent time]
	Always been here	Enter time (if person did not always live in Toronto):
	I don't live in Toronto	O Don't know
	O Decline to answer	
35.	Stop Survey	
	○ Yes	
	o ies	

O Yes

	Enter location prior to Toronto (below)	O Decline to answer
37.	Stop Survey	
	○ Yes	
* 38.	[Specify the location]	
	Other Ontario community/City:	
	or Canadian Province:	
	or Country:	
* 39.	If respondent indicated that they lived elsewhere PRIOR to coming to Toronto or did you become	re prior to Toronto: Were you homeless in the community you lived in homeless AFTER arriving in Toronto?
	○ Was homeless PRIOR to coming to Toronto	 Became homeless AFTER arriving in Toronto
	O Don't know	O Decline to answer
40.	Stop Survey	
	○ Yes	
* 41.	If respondent indicated that they lived elsewher you use shelter services in this community?	re prior to Toronto <u>and</u> was homeless PRIOR to coming to Toronto: Did
	○ Yes	○ No
	O Decline to answer	
42.	Stop Survey	
	○ Yes	
* 43.	If respondent indicated that they lived elsewher [Check all that apply]	re prior to Toronto: What is the main reason(s) you came to Toronto?
	☐ To access emergency shelters(s)	Could not access shelter in previous community
	☐ Was barred from a shelter in previous community	☐ Encampment was cleared in previous community
	☐ To access services and supports	☐ To access substance use treatment program
	☐ To be closer to cultural supports and connections	Family moved here
	☐ To visit friends/family	Was evicted from my housing in previous community
	☐ To find housing	☐ To seek employment
	☐ To secure employment (received job offer)	☐ To attend school
	☐ Fear for safety	☐ Don't know
	Decline to answer	Other reason(s):

44.	Stop Survey		
	○ Yes		
* 45.	Do you identify as First Nations (with or without	status), Méti	s, or Inuit?
	Yes, First Nations (with or without status)		Yes, Métis
	○ Yes, Inuit		○ No
	O Don't know		O Decline to answer
46.	Stop Survey		
	○ Yes		
* 47.	If respondent did not identify as First Nations (w American Indigenous ancestry?	ith or withou	t status), Métis or Inuit: Do you identify as having North
	○ Yes	O No	
	O Don't know	O Decline to	answer
48.	Stop Survey		
40.			
	○ Yes		
* 49.	Do you identify with any of the racial identities li	sted below?	[Read and show list. Check all that apply]
	Arab (examples: Syrian, Egyptian, Yemeni)		East Asian (examples: Chinese, Korean, Japanese)
	South East Asian (examples: Filipino, Vietnamese, Ca Malaysian, Laotian)	ambodian,	South Asian or Indo-Caribbean (examples: Indian, Pakistani, Sri Lankan, Indo-Guyanese, Indo-Trinidadian)
	☐ West Asian (examples: Iranian, Afghan)		Black-Canadian/American
	Black-African (examples: Ghanaian, Ethiopian, Nigeria	an)	Black-Afro-Caribbean or Afro-Latinx (examples: Jamaican, Haitian, Afro-Brazilian)
	Latin American (examples: Brazilian, Mexican, Chilea	n, Cuban)	White (examples: European, French, Ukrainian, Euro-Latinx)
	First Nations (with or without status) Métis or Inuit		Don't know
	Decline to answer		Not listed, please specify:
50.	Stop Survey		
	○ Yes		
	U TES		

* 51. Have you ever served in the Canadian Military or RCMP? Military includes Canadian Navy, Army, or Air Force. [Do not read list. Select based on person's response]

	Yes, Canadian Military	○ Yes, RCMP				
	 Both Military and RCMP 	○ Military outside of Cana	da			
	O No	O Don't know				
	O Decline to answer					
52.	Stop Survey					
	○ Yes					
* 53.	As a child or youth, have you	ever been in foster care, kin care and/or in a youth g	roup hom	e?		
	○ Yes	O No				
	O Don't know	O Decline to answer				
54.	Stop Survey					
04.	Yes					
	o res					
* 55.	Do you identify as having any	of the following health challenges at this time? [Rea	nd and sho	w list]		
						Decline to
			Yes	No	Don't know	Answer
	Illness or medical condition (e.g., diabetes, arthritis, TB, HIV)					
	Physical limitation (e.g., challenges with mobility, physical	sical abilities or dexterity)				
	Learning or cognitive limitations (e.g., dyslexia, autism spectrum dis	sorder, or as a result of ADHD or an acquired brain injury)				
	Mental health issue (e.g., depression, Post traumatic st	ress disorder (PTSD), bipolar disorder)				
	Tobacco use issue (e.g., cigarettes, cigars, chewing to	bacco)				
	Substance use issue (e.g., alcohol, opioids, or other drug	g use)				
56.	Stop Survey					
	Yes					
* 57.	If respondent indicated that th issue?	ey have a substance use issue: Are you currently re	eceiving tr	eatment	for a subst	ance use
	O Yes			\circ 1	No	
	Yes Decline to answer			01	No	

58.

Stop Survey

	○ Yes				
* 59. If respondent indicated No to current treatment: Are you interested in accessing alcohol or other drug u					
	O Yes	○ No			
	O Don't know	O Decline to answer			
60.	Stop Survey				
	○ Yes				
* 61.	What gender do you identify with? [Read and show list. Check all that apply]				
	☐ Male/Man	☐ Female/Woman			
	☐ Trans Male/Trans Man	☐ Trans Female/Trans Woman			
	Two-Spirit	Non-Binary (Genderqueer)			
	Don't know	Decline to answer			
	Not listed:				
62.	Stop Survey				
	○ Yes				
* 63.	How do you describe your sexual o	orientation, for example straight, gay, lesbian? [Read and show list. Check all that			
	Straight/Heterosexual	Gay			
	Lesbian	Bisexual			
	☐ Two-Spirit	Pansexual			
	Asexual	Questioning			
	Queer	☐ Don't know			
	Decline to answer	Not listed:			
64.	Stop Survey				
	○ Yes				
* 65.	65. Do you identify as LGBTQ2S+ (lesbian, gay, bisexual, transgender, queer, questioning, 2-spirit, + refers gender diverse identities not represented in the acronym)?				
	○ Yes	○ No			
	O Don't know	O Decline to answer			

66.	Stop Survey					
	○ Yes					
* 67.	What are your sources of income? [Reminder that this survey is anonymous. Read and show list. Check all that apply. Do not record specific employer or work location]					
	☐ Full-time employment		Part-time employment			
	☐ Casual or seasonal employment (e.g., contract work)		Informal income sources (e.g., bottle returns, panhandling)			
	☐ Money from family/friends		Employment Insurance			
	Ontario Disability Support Program (ODSP)		Seniors Benefits (e.g., CPP/OAS/GIS)			
	Ontario Works (OW)		Veteran/VAC Benefits			
	Canada Child Benefit (CCB)		GST/HST Refund			
	Other money from a service agency		No income			
	□ Don't know		Decline to answer			
	Other (specify):					
68.	Stop Survey					
	○ Yes					
* 69.	I'm going to read a list of services that you may or may not need. Please tell me which services would help you personally find and maintain housing. [Read and show list. Check all that apply based on person's response]					
	☐ More affordable housing		Subsidized housing or a housing allowance			
	Help finding an affordable place		Money/more money from Ontario Works/Ontario Disability Support Program (OW/ODSP)			
	☐ Help with transportation		Help with housing applications			
	Help to keep housing once you have it		Help finding employment or job training			
	☐ Help with physical disability or serious/ongoing medical condition		Help getting identification			
	☐ Help with settlement and immigration issues		Mental health supports			
	Culturally safe housing supports		Services in a language other than English			
	☐ Help with overdose prevention (e.g., someone to monitor me when I use drugs, naloxone)		Help accessing withdrawal management (detox) services			
	☐ Help accessing substance use treatment		Access to harm reduction supports (e.g., safer use supplies such as needles, pipes, etc.)			
	Access to supervised consumption services		Access to safer opioid supply program			
	☐ Landlord support/mediation services		Supportive housing (specialized housing and supports, including harm reduction supports)			
	□ Don't know		Decline to answer			
	Other, please specify:					
	None of the above					

70.	Stop Survey						
	○ Yes						
* 71.	* 71. What do you think is the ONE most important thing that would help you get housing?						
72.	Stop Survey						
	○ Yes						
* 73.	In the past 12 months, have you: [Read and sho	w list]					
						Decline to	
			Yes	No	Don't know	answer	
	Been to an emergency room						
	Been hospitalized						
	Used an ambulance (as a patient)						
	Been to prison/jail/detention centre						
	Been to a substance use treatment facility						
	Used a supervised consumption service						
74.	Stop Survey						
	○ Yes						
* 75.	What is your highest level of education?						
	O Primary school	Some high school					
	High school graduate/GED	Some post secondary					
	Post secondary graduate	Graduate degree (e.g., Masters, Ph.I	D.)				
	No formal education	O Don't know					
	O Decline to answer						
76.	Are you currently in school?						
	○ Yes			O N	No		
	Decline to answer						
77.	Stop survey						
	○ Yes						

* 78.	. Do you have any pets?					
	○ Yes	○ No				
	O Decline to answer	O Please specify type of pet and how many:				
79.	Stop Survey					
	○ Yes					
That is the end of our survey - thank you for participating!						
Your answers will help the City of Toronto plan better programs and services.						
[GIVE \$10 HONORARIA TO INDIVIDUAL]						
23-0257 2021-03						

Have a good (day or evening)!