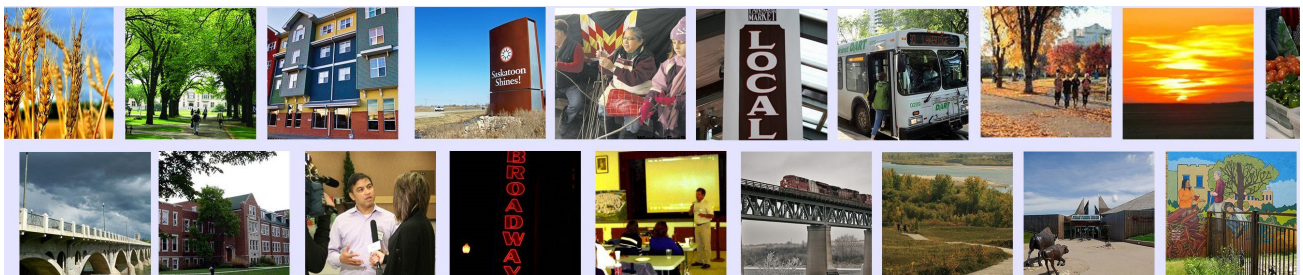




# 2022 Saskatoon Point-in-Time Homelessness Count

Machiweyi Kunzekweguta, Isobel M. Findlay,  
Michael Kowalchuk, and Anh Pham



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Canada



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Planning and implementing the 2022 Point-in-Time (PIT) Homelessness Count on April 28, 2022, was an enormous community effort involving individuals, agencies, shelters, and community-based organizations delivering services and supports as well as the SHIP and Community-University Institute for Social Research (CUISR) teams. Planning and preparation that typically proceeds over four and more months was executed within a six-week period to meet the federal deadline to complete the national, coordinated count before the end of April.

We appreciate the invaluable contributions of Michael Kowalchuk, Senior Planner II—Mapping and Research, and his team, Nancy Bellegarde, Ashley Young, Danae Taylor, Kristina Folkersen, and Obadiah Awume, at the City of Saskatoon’s Long-Range Planning, Planning and Development.

We are also thankful to those who helped deliver four training sessions for volunteers (two in-person and two online via Zoom) over two days (April 26 and 27). Special thanks to Rob Garrison, CSO Supervisor, Community Support Officer Program, and to David Fineday, Keith Sanderson, and Dennis Kissling who shared their powerful stories and deep knowledge born of lived expertise to increase understanding of those whose voices are so often left unheard, and to help reduce risk and ensure the safety and comfort of volunteer surveyors and respondents.

We are grateful too to The Saskatoon Indian and Métis Friendship Centre for hosting in partnership with SHIP the Magnet Event at the Centre where people could enjoy between 11:00 a.m. and 2:00 p.m. soup and bannock and complete surveys if they chose. We are indebted to Friendship Inn for hosting the field office once again and being as generous with space as with supports.

To all those who participated in the public perceptions component of the 2022 PIT Count, we express our gratitude. Their experience and reflections counted importantly in adding to the local portrait of housing and homelessness. We deeply appreciate those who gave their time to share their experiences of homelessness, what has helped and what has hindered in their efforts to stable, secure, affordable, and appropriate housing. Their contributions help us to get a better understanding of the barriers they face, their service use patterns, their aspirations and unmet needs, and to identify what might importantly make their housing situation better.

We also gratefully acknowledge the 70 volunteers, including those who surveyed in mobile and stationary sites, those who surveyed at shelters, and those supporting count day logistics and the Magnet Event. Our sincere thanks to our volunteer surveyors—people with lived experience, administrators, academics, students, retirees, people from the service sector, media, health, policing, and community support officers—without whom the PIT Count would not have been possible. They gave their time and expertise, participated in a required three-hour training session, and conducted interviews with participants on the streets or at shelters on April 28. We are also thankful to those volunteers who contributed to the debrief session on May 16 and helped ensure ongoing learning about how to design and implement effective PIT Counts.

On August 5, SHIP hosted a Community Appreciation Day event at Station 20 West in recognition of the significant community endeavour to ensure that everyone counts in Saskatoon. At this event the CUISR team presented the PIT Count findings.

# HIGHLIGHTS AND KEY FINDINGS

Making sure that “everyone counts” in Point-in-Time (PIT) Homelessness Counts is a key resource to address homelessness and support efforts to ensure that all Saskatoon residents have access to **safe, affordable, and appropriate housing**. Indigenous people continue to be impacted disproportionately and many households face high levels of precariousness and risk of homelessness—a reality that the COVID-19 pandemic has made starkly visible. **Despite housing as a human right** being recognized by international covenant and the 2019 National Housing Strategy Act, the health crisis has combined with such shadow epidemics as isolation, technology deficits, and food insecurity to aggravate vulnerabilities and leave many with **nowhere safe to go** and the **heightened visibility of street homelessness**.

PIT Homelessness Counts gather data to help understand factors in homelessness, to **give a human face to the statistics**, and to help design and implement effective program and policy investments and interventions. The fifth Saskatoon PIT Homelessness Count—and second as part of Employment and Social Development Canada (ESDC)’s Reaching Home national coordinated PIT Count—including an indoor and outdoor enumeration, streets needs assessment, and public perception survey, was held in Saskatoon on April 28, 2022.

The 2022 Count built on the learning from Saskatoon counts in 2008, 2012, 2015, and 2018, while adapting to the requirements of the third national coordinated PIT Count. Using a “snapshot” approach to collect the data, the PIT Count aimed to capture chronic homelessness and establish a better understanding of the trends among homeless populations, how local trends compare with national trends, and determine appropriate programs and services according to needs. To produce a **comprehensive and multi-faceted picture of homelessness** in Saskatoon, the count survey (indoor and outdoor) included these components:

- Retained a **Public Perceptions** component (Part One), a **unique feature** of the Saskatoon 2015 and 2018 counts, engaging all people encountered on count day in a **community conversation**.
- Retained the enumeration to include “**the hidden homeless**,” the provisionally accommodated or “couch surfers” without immediate prospect of permanent housing.



- Retained 17 **mobile study areas** and 6 **stationary locations**, 5 shelters, and Magnet Event (at the Saskatoon Indian and Métis Friendship Centre).
- Included the **mandatory 15 Core Questions** in Part Two—including in question 11 (at the request of Indigenous representatives on the 2020 Community Advisory Committee and the 2022 Knowledge Keepers Advisory Board) an option to list residential school/ intergenerational trauma to make it visible and a critical factor and not subsume it within mental health issues.
- Incorporated 7 **additional questions relevant to the local context** (approved by ESDC).
- Included both **an ice breaker** and **honorarium** to thank participants for their time and knowledge, respecting the principle of **Nothing about us, without us** and the principle of informed consent where honoraria are at levels that will not unduly influence.

These additional data sources are included in the discussion of results:

- Data from the Homeless Individuals and Families Information System (HIFIS) covering The Lighthouse, Salvation Army, and YWCA
- Administrative data submitted by Saskatoon Housing Coalition, OUTSaskatoon, Prairie Harm Reduction, Saskatoon Tribal Council Emergency Wellness Centre, EGADZ, John Howard Society of Saskatoon Bert’s Safe Shelter and RHP House.
- Observational data representing those who were perceived to be without shelter but wished not to be surveyed.

**N.B. Only completed surveys include the full survey data;** HIFIS data included age, gender, and ethnicity; observational reports included age and gender estimates only; and some administrative data included age, gender, and ethnicity, but some administrative data gave no demographic data. That is why the numbers (n) associated with different questions differ.

**Count Results**

A total of **550 people** were counted as without permanent shelter, including **26 children** and **84 youth**:

- 29 adults and 2 youth were counted as unsheltered in the outdoor survey; a further 76 were observed to be unsheltered (2 youth, 16 adults, 1 senior, and 57 of unspecified ages).
- 24 adults, 4 youth, and 2 children were counted as **“hidden homeless”** in the outdoor survey.
- 69 (4 children, 6 youth, 52 adults, 4 seniors, and 3 unspecified) were counted as sheltered in the indoor survey conducted

*550, including  
26 children  
and 84 youth,  
experiencing  
homelessness on  
April 28, 2022*

within collaborating shelters and transitional houses.

- 97 adults (25-44), 41 older adults (45-64), 70 youth, 20 children, as well as 116 of unspecified ages were reported staying in participating HIFIS and other shelters or transitional houses.

Numbers have increased since the 2018 count reported 475, including 11 children, although Housing First and other interventions as well as the changing definition of children may account for some differences: 0-18 up to 2015, 0-14 for 2018, and now 0-12. Without safe, reliable, and consistent housing, those experiencing hidden homelessness (though down from 2018’s high of 86) face unusual difficulties in navigating and accessing programs and services.

*48.2% first experienced homelessness as adults, 8.3% as children, and 42.6% as youth*

**First Experience of Homelessness**

While 48.2% first experienced homelessness as adults, 8.3% were children (0-12) and 42.6% were youth (13-24). Literature on Canadian homelessness indicates that those who first experience homelessness as children or youth are more likely to experience homelessness again later in life.

*59% chronic homelessness*

**Chronic Homelessness**

Of those experiencing homelessness, 59% (up from 55.3% in 2018) reported chronic homelessness (without a permanent address for more than six month), while 41% reported non-chronic homelessness.

**Emergency Shelter Use**

The average occupancy rate at emergency shelters in 2016 was 91% and approximately 14,000 Canadians slept in an emergency shelter on an average night. Even though there was a decrease in the number of people using the emergency shelters in Canada in 2016 compared to 2005, these people were using shelters for a longer period of time.

Of those surveyed, **77% reported shelter use** in the past year (up slightly from 72% in 2018), while 23% had not. This pattern is similar for adults and seniors (78% and 75% respectively), while **37.5% of youth did not use shelters**. Shelter capacity may have been an issue (many were at or over capacity) but COVID-19 may also have kept people from shelters.

**Respondent Demographics**

Saskatoon’s homelessness population is largely adult (47%)—(similar to the 2018 national coordinated count finding of 49% adult)—with youth (15.3%), children (4.7%), and seniors (0.9%). Although a relatively high percentage (32%) were unspecified in observational and administrative data, the homeless population continues to be largely male (50%) and individuals self-identifying as Indigenous (90.1%); immigrant, refugee, or refugee claimants accounted for only 1.7% and the military or RCMP for only 1.7% of respondents. Over 82.1% reported being straight or heterosexual; of 106 adults, 17.9% reported being bisexual, two-spirit, pansexual, asexual, gay, or questioning.

**47% adult**  
**20% children and youth**  
**50% male**  
**90.1% Indigenous**

**31.2% had “always” lived in Saskatoon; 58.7% had been a resident for more than 5 years**

**Length of Residence in Saskatoon**

Overwhelmingly, respondents were long-term Saskatoon residents: 31.2% had “always” lived in Saskatoon, while 58.7% had been a resident for over 5 years. The majority of respondents who indicated that they migrated to Saskatoon came from another location in Saskatchewan (77.1%) followed by Alberta (8.6%); only 1.4% came from outside Canada.

**54.8% had experience of foster care**

**Experience with Foster Care**

Consistent with national trends, 54.8% had been in foster care up only slightly from the 2018 figure of 52.6%. Studies make clear why Indigenous and LGBTQ2S+ youth are overrepresented in a child welfare system that perpetuates mainstream assessments of the best interests of children and families at the expense of Indigenous views and experiences. When youth “age out” of the child welfare system and lose system supports, they are at risk of experiencing homelessness without the same education levels and employment opportunities as their peers.

**36% reported learning or cognitive limitations; 48%, physical limitations; 53%, illness or medical condition; 53%, residential school/intergenerational trauma; 67%, mental health issue**

**Health Challenges**

It has been said that “housing is health care.” Those experiencing homelessness face many health challenges as well as significant barriers to accessing health care. A total of 36% reported learning or

cognitive limitations, 48% had a physical limitation, 53% managed an illness or medical condition, 53% experienced residential school/ intergenerational trauma, 67% had a mental health issue, and 86% reported dealing with a substance abuse issue—symptoms that, we are warned, should not be mistaken for the sources of homelessness. The category of residential school/intergenerational trauma was uniquely added to the survey in Saskatoon respecting Indigenous requests in coordination with Knowledge Keepers Advisory Board and Community Advisory Committee that the trauma not be subsumed under mental health and therefore become invisible. This trauma needs to be understood as a significant risk factor.

**Causes of Housing Loss**

The diverse reasons for housing loss are presented in three categories consistent with national trends: housing and financial issues, interpersonal and family issues, and health or corrections. **Insufficient income** was cited as the major reason for housing loss (representing 31.4% of 106 respondents). Other factors included **conflicts** with landlords (14.2%); unfit/ unsafe housing (10%), discrimination (4.7%) or complaints (4.7%), while 5.7% left the community. **Home is not always a safe place:** conflict with spouse/partner (13.2%), with friend/roommate (12.3%), and with parent/guardian (5.7%) were leading reasons. Under the health or corrections category, **substance use** (19.8%), **mental health** (12.3%), incarceration (10.4%), and physical health (8.5%) were cited as the most common reasons for housing loss, suggesting the importance of addressing health and substance use issues.

**COVID-19 and Housing Loss**

In total, **14.3 % highlighted that COVID contributed to housing loss**, though this percentage may understate indirect impacts of COVID-19 on the housing crisis.

**47.9% lost their housing in the last six months**

**When did Housing Loss Happen?**

Almost half of respondents (47.9%) lost their housing in the last 6 months, suggesting that the current economic factors such as rising cost of living and direct and indirect impacts of COVID-19 might have exacerbated the housing crisis. Worryingly, over 27.4% of the respondents lost their housing 6-12 months earlier, while another 19.2% had lost housing over a year ago and as long as 5 years earlier.

Sources of Income

Sources of income remain increasingly problematic since the 2008 count when sheltered homeless reported formal (45%) and even full-time (70%) employment. **Since 2012, “welfare” became the main source while employment reduced to 10% (2012), 8% (2015), 3.69% in 2018, and 4.2% (full-time) and 2.1% (part-time) in 2022. Most 2022 respondents (61.1%) reported welfare or social assistance for income (60.37% in 2018). Informal income (21.1%)** such as panhandling, and bottle returns were identified as the second most important source of income. **Family and friends were a source of income for 7.4%** (up from 2018’s 3.23%), while disability benefits (16.8%) and GST/HST refunds (15.8%), child and family tax benefits (6.3%), seniors’ benefits (4.2%), and veteran benefits (1.1%) indicated that government programs play an important role in the lives of those experiencing homelessness.

Count Results

Education Profile

**The largest percentage (36.5%) had completed some high school**, while another 26.9% had completed high school, **10.6% had some postsecondary, 15.4% had graduated post-secondary, and 1.0% had graduate degrees.** While total high school is down from 2018 (48.7% some and 28% graduated), post-secondary participation is higher in all categories (8.6%, 3.9%, and 0.9% respectively in 2018).

Experience of Violence

Close to 70% had experienced violence while homeless: **70% of men, 63.6% of women, 100% of transgender people, and 66.7% of two-spirit people.** The **unsheltered population (70.8%) were only marginally more likely to be victims of violence than the sheltered population at 70.7%**, followed by those who reported hidden homelessness (59.1%).

**70% men, 63.6% women, 100% transgender people, and 66.7% two-spirit people, 70.8% unsheltered, and 70.7% sheltered experience violence**

Housing Services and Barriers to Housing

Not surprisingly, most respondents indicated that **having more money (68.1%) and getting help to find affordable places (60.3%)** were most important. This is consistent with the finding that financial challenges were the major cause of homelessness. Other needs included assistance **with housing applications (52.6%), help with transportation to see housing (50.9%), and help getting I.D. (48.3%),** giving a strong sense of the barriers those in poverty face. **Health challenges**

**are also important;** respondents listed mental health support (37.1%), help in addressing health needs (31%), harm reduction support (31.9%), and managing alcohol issues (22.4%) as well as disability accessibility (20.7%).

“Social assistance doesn’t even cover rent.” -- Respondent

Interestingly, confirming a trend across the country where they have become vital community gathering spaces linking people to key resources, **libraries were the most used service** both in terms of number of **users (73%) and frequency of use (5249). Shelters were second at 72.9%, emergency room at 62%, hospital at 59.3%, food bank at 58.5%, health clinics at 52.3%, and drop-ins at 44.9% topped the lists, reinforcing the links between homelessness and health.** Drop-ins ranked second in frequency of use (1926), followed by days in jail (924), Food bank (699), health clinics (567), church (548), days in hospital (404), disability services (385), shelters (276), and emergency room (259) **underline the health and justice costs of homelessness.** In total, **44.7% reported the services helped them to find housing,** listing shelters, drop-ins, library, and Saskatoon Indian and Métis Friendship Centre as most helpful.

Waiting List for Housing

Over **39.2% reported being on a waiting list** for housing (50% had spent between 60 and 100 days on the waiting list). Quint (23.8%), Saskatoon Housing Coalition (14.3%), and SaskNative Rentals (9.5%) topped the list of housing providers.

Concluding Thoughts

Many offered final thoughts on systemic and other barriers, as well as supports that could make a difference. Some identified a **lack of affordable housing, need for more shelter funding and transitional housing, Housing First, housing with mental health supports, and more options throughout the city.** Practically, they pointed to better damage deposit and inspection policies, more health supports, including mental health supports. **Overall, they wanted less judgement, less talk, and more action.**

Public Perceptions of Homelessness

In the public perceptions section of the survey, **housed (87.9%) and unhoused (88.5%) were equally clear on the seriousness of homelessness in Saskatoon.** The results show that the community is aware of organisations that support people experiencing homelessness, including the top six:



- Lighthouse (58.2%)
- Salvation Army (29.5%)
- White Buffalo Youth Lodge (19.9%)
- Saskatoon Friendship Inn (19.5%)
- YWCA (17.2%)
- Saskatoon Indian and Métis Friendship Centre (15.7%)

The top five reasons given for homelessness were **addictions (48.3%), lack of affordable housing (34.5%), physical or mental health (28%), lack of employment (20.3%), and discrimination (16.5%)**. Additional reasons included lack of income, family issues, lack of employment, lack of support, lack of resources, COVID, and intergenerational trauma.

*Anyone and everyone, those with mental health issues, people with disabilities, youth, single parents, First Nations, Indigenous people, people with addictions, and unemployed individuals are perceived*

The public perception of those most at risk for experiencing homelessness are anyone and everyone, those with mental health issues, people with disabilities, youth, single parents, First Nations, Indigenous people, people with addictions, and unemployed individuals — **a list at odds with the findings on the deeply troubling overrepresentation of Indigenous peoples**.

**More affordable housing** was the top response to the question “what Saskatoon can do to help reduce homelessness”. More shelters, services, programs, funding, and supports, mental health and addiction services, and building better housing were other important responses. The community also understands the importance of **increasing public awareness**. The public can play a positive role in combating the challenge if they are aware of the factors leading to homelessness and the impact it has on individuals and the community at large.

**Comparing Results with 2008, 2012, 2015, and 2018 Counts**

It is important to acknowledge the limitations in comparing the findings with previous count findings in 2008 (228 adults and 32 children), 2012 (368 adults and 11 children), 2015 (405 adults and 45 children), and 2018 (475 including 11 children) given differences in research design and timing, different definitions of age groups, and different socio-economic conditions. Still, we have made significant efforts to ensure the 2022 PIT Count gives as full a picture as possible on which to act. **Some findings remain so consistent over time that they cannot be ignored. They also underline who are most impacted by systemic barriers.**

**All age groups** are impacted by homelessness. **Indigenous people are overrepresented and unduly impacted**. Service use patterns show the **human costs of heavy reliance on costly health and justice services**, although the **top service** by far was **the library** underlining what a key resource it has become for community members. The findings give opportunity to work together to address costly systemic inequities and contribute to the reconciliation narrative promoted by the Truth and Reconciliation Commission’s Calls to Action.

## INTRODUCTION

The COVID-19 pandemic has exposed and exacerbated related health and housing crises impacting those facing ongoing barriers to accessing safe, secure, affordable housing. Indeed, COVID-19 both redoubled the marginalization of those already vulnerable and **“amplified the suffering of being homeless”** in cities that were *“shut down”*, with *“nowhere to go,”* and effectively “homeless proof” (Doll et al., 2022, pp. 11-12). This housing crisis persists despite **housing being acknowledged as a human right** so critical to human development (National Housing Strategy Act, 2019; United Nations, 1966) and despite federal reinvestment in affordable housing under the National Housing Strategy after decades of disinvestment—the implications of which are still felt in ongoing **housing divides** (Spence, 2004). High-end developments put in sharp relief substandard housing, aging infrastructure from the 1970s and 1980s (CMHC, 2020), and rents insufficient to cover operating and renewal costs (Olauson et al., 2022; Sutter, 2016). The costly phenomenon of homelessness continues to rise despite **some success with Housing First, Rapid re-housing, Indigenous-led initiatives, outreach services and other prevention strategies** documented here and in the 2018 Saskatoon Homelessness Count (Findlay et al., 2018). Homelessness and housing precarity persist despite innovative collaborations including the **Safe Community Action Alliance** and the **35-person Saskatoon Inter-Agency Response to COVID-19** emerging from the pandemic to fill information and service gaps and address such shadow epidemics as isolation, technology deficits, and food insecurity (Alhassan et al., 2021; Doll et al., 2022; Safe Community Action Alliance, 2020; SPRP, 2021). Despite these collaborative efforts, housing precarity is a growing concern in Saskatoon and across Canada with outdoor or rough sleeping, encampments, even more visible in Saskatchewan and across Canada (Falvo, 2021a).

It was against this background and context that on April 28, 2022, the community led by Saskatoon Housing Initiatives Partnership (SHIP)—the Community Entity for Reaching Home: Canada’s Homelessness Strategy—and research lead Community-University Institute for Social Research (CUISR), University of Saskatchewan, mobilized to conduct the fifth Saskatoon Point-in-Time (PIT) Homelessness Count, the second completed in the context of the Reaching Home national coordinated count in an effort to **fill data gaps and put a human face** on the statistics,

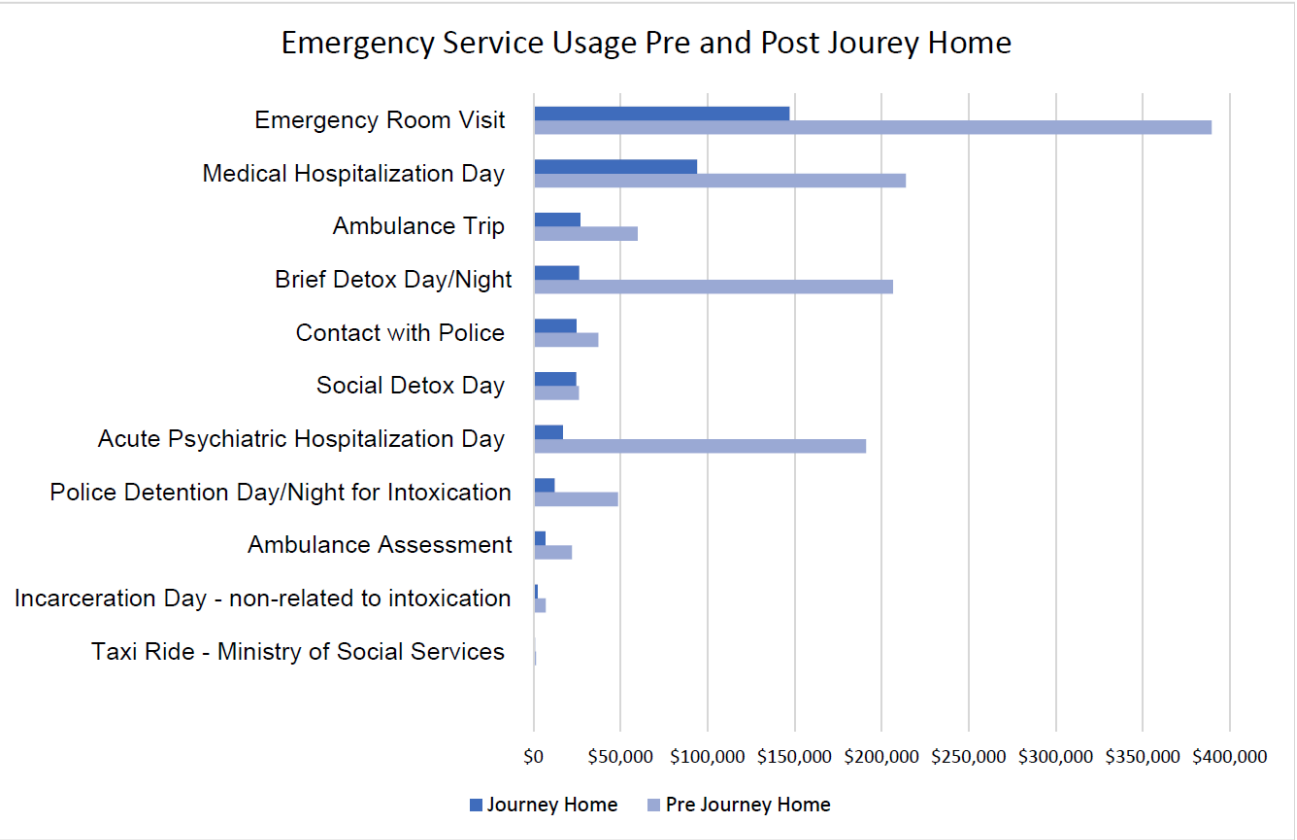
underlining who are disproportionately impacted, the challenges and barriers they face, and possible solutions to prevent, reduce, and even end homelessness.

Housing First

This evidence-based intervention takes its name from its basic principle precisely to ensure people are first housed and supported with services they need to remain housed. It is a recovery-focused and rights-based approach that makes no requirement of “readiness” but operates on the assumption that people deserve housing and “adequate housing is a precondition for recovery.” It assumes too that people should have choice in the kind of housing and where it is located and that different people have different needs and capacities (Groton, 2013; Homeless Hub, n.d.). A 2014 cross-site At Home/Chez Soi study showed that Housing First not only can effectively end homelessness for those housed and supported but also can save costs in the health and justice sectors (Falvo, 2021b).

In Saskatoon, United Way of Saskatoon and Area’s Journey Home Housing First program, for example, delivered by Saskatoon Crisis Intervention Service, reported in its *Annual Report 2021-2022* a total of 115 men and women successfully housed to date. It is important to note that Journey Home participants are largely the chronically homeless with high acuity needs and typically lacking support by mainstream service providers, yet they are housed on average within three weeks. In its 2021 *Journey Home Update*, United Way of Saskatoon and Area reported the cost avoidance of \$820,425 represented by the reduced service use by those 40 Journey Home participants who agreed to have their data tracked and shared (see Figure 1). According to one participant, Curtis, “United Way and Journey Home and all the people involved have been my saving grace during this period of my life” (United Way of Saskatoon and Area, 2021, p. 7).

Figure 1 Emergency service usage pre and post Journey Home (United Way of Saskatoon & Area, 2021)



These Housing First Initiatives along with community plans to end homelessness rely for their evidence-based program decisions on shelter data from the Homeless Individuals and Families Information System (HIFIS) and from PIT Counts across the country.

PIT Homelessness Counts

A PIT Count provides a snapshot of community homelessness that captures numbers, demographics, service usage, and other measurements—and does so quite literally at one point in time, typically a single day. The PIT methodology is a tool that enumerates and surveys those who are experiencing sheltered, unsheltered, or transitional homelessness—what Reaching Home calls the “core population” under study—in communities across Canada. PIT Counts may also include systems homelessness in hospitals, detox, detention, or jails and so-called “hidden homeless” or “couch surfers,” the provisionally accommodated without immediate prospect of permanent housing. It can also be an important means of reaching people who have not otherwise accessed services. Because PIT Counts enumerate individuals experiencing homelessness during one specific time, they are admittedly **underestimates of actual numbers because of methodological, logistical,**

**and other challenges.** Nevertheless, PIT Count estimates provide an important source of data for local program planning and monitoring on characteristics and contexts of those experiencing homelessness. If conducted over time, PIT Counts can demonstrate progress or indicate barriers towards reducing homelessness in a given community and support design of interventions based on evidence from the local context.

In addition to examining sub-populations such as youth, persons with disabilities, immigrants, veterans, and Indigenous people, the PIT Count’s enumeration aims to identify the size and composition of the **chronically homeless** population who have experienced homelessness for six months or more in the past year distinct from the **episodically homeless** who have had three or more episodes in the past year (Employment and Social Development Canada, 2019)

To establish a better understanding of the trends among homeless populations and determine appropriate programs and services according to needs, the survey’s street needs assessment also explores issues around migration and immigration, disabilities, use, accessibility, and barriers to services, orientation to systems to find housing, employment, health and education.

#### ESDC Coordinated PIT Count, 2018

In 2016, the first national coordinated count (based on standardized definitions and methods for comparability, rigour, and reliability) was conducted in 32 designated communities across Canada. With access to training, a guide, toolkit, and other online resources on the Community Workspace on Homelessness, that national count found 5,954 experiencing homelessness, including 1,417 unsheltered and 2,832 sheltered (ESDC, 2016a). The 2018 coordinated count between March 1 and April 30 expanded to 61 communities from every province and territory across Canada (urban, suburban, rural, and remote) and counted 32,005 experiencing homelessness: 14% unsheltered, 65% sheltered, and 21% in transitional facilities; 60% reported chronic homelessness, 50% reported the first experience of homelessness before the age of 25, and 59% reported living in the community always or for five or more years (ESDC, 2019). The majority (62%) were male, 36% were female, and 2% self-identified as gender diverse—of whom youth were the largest group at 21% to so self-identify (ESDC, 2019). While Indigenous people represent 5% of the Canadian population, they accounted for a disproportionate 30% of respondents and a higher 37% of those reporting unsheltered locations and 47% of those reporting hidden homelessness (ESDC, 2019). Veterans represented 4.4% of respondents; newcomers, refugees, or refugee claimants represented 14% of respondents although they were 20% of the population in the 2016 census, suggesting that they are less likely to experience homelessness (ESDC, 2019).

#### Indigenous Homelessness

As ESDC (2019) makes clear, not all individuals or groups experience or navigate homelessness in the same way: for example, Indigenous people, youth, and women are less likely to access shelters and are therefore underrepresented in administrative data. But it is important not to naturalize or pathologize these patterns but to understand the “multilayered discrimination and disadvantage Aboriginal Peoples face,” as well as the spatial and imaginative marginalization of Indigenous peoples in Canada, the uniqueness and diversity of their experiences as a result of intergenerational trauma, as well as their resilience and agency (Patrick, 2014, p. 11). Understanding the significance of “home” and “social relations” and “cultural connections” rather than housing, Patrick argues, is key to addressing the issue: **“Being without a place to call home is one of the most severe manifestations of marginalization and deprivation in our society”** (p. 11). In consultation with Indigenous scholars, knowledge keepers, elders and experts nationally and regionally, the Canadian Observatory on Homelessness published an Indigenous definition of homelessness, similarly stressing not the lack of habitation but a “composite lens of Indigenous worldviews,” as identified by the Aboriginal Standing Committee on Housing and Homelessness, 2012 (cited by Thistle, 2017, p. 6).

Thistle (2017) stresses that **“Indigenous homelessness . . . is best understood as the outcome of historically constructed and ongoing settler colonization and racism that have displaced and dispossessed First Nations, Métis and Inuit Peoples** from their traditional governance systems and laws, territories, histories, worldviews, ancestors and stories” (p. 6). **A state assault** on “Indigenous social systems, cultures and worldviews,” destabilizing and traumatizing individuals and communities, is at the heart of Indigenous homelessness causing **symptoms—“intemperance, addiction and street-engaged poverty”—that should not be mistaken for the source of that homelessness.** “Racism and discrimination” as well as chronic government underfunding add layers of “systemic and societal barriers, such as a lack of affordable and appropriate housing, insufficient and culturally inappropriate health and education services, irrelevant and inadequate employment opportunities, and a crumbling infrastructure in First Nations, Inuit, and Métis communities.” These same destructive factors undermine individual and community efforts to achieve “a healthy ‘sense of place,’ as well as a healthy sense of identity,” displacing people into “unviable, marginal geographic spaces” where disadvantage is “normalized” (Thistle, 2017, pp. 7-8). Understanding the twelve dimensions of an Indigenous definition of homelessness is vital (Thistle, 2017, pp. 10-12).

Equally important are the Truth and Reconciliation Commission’s (2015) Calls to Action endorsed by the federal government’s Advisory Committee on Homelessness (ESDC, 2018a) in guiding actions to remedy the situation of homelessness, including Indigenous homelessness and



youth homelessness discussed in the next section. The calls relevant to child welfare (Calls 1-5), education (Calls 6-12), language and culture (Call 13), health (Calls 18-24), and justice (Calls 25-42) are especially important.

### Youth Homelessness

Although youth are variously defined in the literature, for the purpose of PIT Counts, youth are defined as those aged 13 to 24 (ESDC, 2019). Youth, and especially those aging out of care, “represent **the most precariously positioned Canadians** and if left at risk, they will form the next generation of homeless Canadians sleeping rough on streets or hidden in substandard living conditions. **All orders of government have a duty to support our youth**,” according to Parliamentary Secretary to the Minister of Families, Children and Social Development Adam Vaughan, M.P. (ESDC, 2018b). Indigenous youth represent a significant portion of this population—as high as 30% in Vancouver, for example and also of the specifically “hidden homeless” (Patrick, 2014, p. 32); they represent 30.6% of overall youth homelessness (Gaetz et al., 2016). Racialized youth represent 28.2% and newcomer youth represent 10% of youth homelessness; males account for 57.6%, females for 36.4%, and those defining themselves as LGBTQ2S+ for 29.5%, and transgender or gender non-binary account for 6.1% (Gaetz, et al., 2016). In fact, researchers widely acknowledge the role of **the child welfare system as “a strong arm of colonization”** perpetuating mainstream rather than Indigenous assessments of the best interests of children and families (Baskin, 2013, p. 406).

Youth homelessness, then, has systemic, structural, and individual causes; the early experience of homelessness (over 40% report a first experience before age 16) equates with both **“increased hardship”** and **“greater adversity”** on the streets and multiple homelessness episodes reported by 75.9% (Gaetz et al., 2016, p. 7). Between 60% and 70% “leave family environments where they have experienced interpersonal violence, including physical, sexual and/or emotional abuse”; domestic violence, and exposure to addictions and mental health issues are also factors (Gaetz, et al., 2013, pp. 3-4). Youth who self-identify as LGBTQ2S+ and transgender are “more likely to report parental conflict and childhood physical, sexual, and/or emotional abuse” and child protection experience as paving the way to homelessness (Gaetz et al., 2016, p. 8). Broader systemic factors include poverty, food insecurity, inadequate housing, discrimination, and limited access to education and employment opportunities (Gaetz et al., 2013; Gaetz et al., 2016). The result traps 20% of these youth in chronic homelessness (Gaetz, et al., 2016).

Despite such disadvantage and a keen awareness of “structural injustices,” Indigenous youth often form peer support networks for survival and “a sense of community.” This is not the popular

image of youth homelessness often associated with danger and delinquency (Baskin, 2013; Gaetz, et al., 2013). Indigenous girls are at particular risk of exploitation and abuse; Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirited youth (LGBTQ2S+) representing 28% of homeless youth (Gaetz, et al., (2016) also experience “unique and intersecting forms of social suffering” (Patrick, 2014, pp. 34-35). Holistic programs to support employment and cultural reintegration have been successful in reducing homelessness (Patrick, 2014) and are a key part of Gaetz et al.’s (2016) recommendations focused on prevention, Housing First for youth, systems integration, addressing educational challenges, fostering resilience and mental health supports, and fortifying natural supports.

### Women and Homelessness

Although women represent “a small population” of the officially” homeless, they are “often the first to lose their housing and last to be housed” (ESDC, 2018b, p. 3). Still, close to 50% of those experiencing homelessness in Canada are women, girls, and the gender diverse representing different reasons for homelessness (poverty, domestic violence, abuse, addictions, mental & physical health, childcare) and ways of navigating homelessness: 90% families in emergency shelters are women-led; 25%+ of those families are in core housing need (Centre for Equality Rights in Accommodation, 2022). Based on intersecting forms of identity (race, abilities, ethnicity, immigration status), women face multiple forms of oppression as well as insufficient gender-specific, transitional and permanent affordable housing. When only 13% of shelter capacity is for women, they are more likely to turn to couch surfing (7% experience hidden homelessness)—and to face violence and exploitation (Centre for Equality Rights in Accommodation, 2022). Nevertheless, Indigenous women are still “15 times more likely to use an emergency shelter than non-Indigenous women” (Falvo, 2021b, p. 1).

### The PIT Count in Saskatoon

On April 28, 2022, in partnership, SHIP and CUISR conducted the 2022 Saskatoon PIT Count, the community’s second coordinated count as one of the over 60 communities participating in counts during the period of March - April 2022. This 2022 coordinated PIT Count built upon the findings and recommendations from the previous PIT Counts conducted from 2008 to 2018, while respecting the requirements set by Employment and Social Development Canada (2021).

The 2022 PIT Count has five main components or data sources:

- An outdoor enumeration, which surveys individuals and families experiencing homelessness, and their service use patterns and needs (street needs assessment). The

outdoor component seeks to identify the “absolute homeless” (with no permanent residence or housing alternative, including shelters, safe or transitional housing) and “hidden homeless” population (who would experience absolute homelessness if they could not stay temporarily with friends and/or family or acquaintances);

- An indoor enumeration, which counts the number of individuals and families experiencing homelessness who are staying in emergency shelters and transitional housing;
- Data from the Homeless Individuals and Families Information System (HIFIS) for April 28, 2022;
- Administrative data from participating shelters and transitional housing;
- Observational data representing those who were perceived to be without shelter but wished not to be surveyed;

The outdoor and indoor surveys also included a survey of public perceptions of and attitudes about homelessness in Saskatoon.

**N.B. Only completed surveys include the full survey data;** HIFIS data include age, gender, and ethnicity; observational reports include age and gender estimates only; and some administrative data included age, gender, and ethnicity, but some administrative data gave no demographic data. That is why the numbers (n) associated with different questions differ.

As part of the coordinated PIT Count approach, the outdoor and indoor surveys included 15 core questions supplied by ESDC with an additional seven local questions in Part Two and five community questions in Part One (see Appendix A and B). In addition, the core methodology included 11 core standards, while 5 recommended standards were designed to ensure contextual needs of each community (ESDC, 2021).

The 2022 count maintained the innovation in the 2015 and 2018 Saskatoon surveys, which aimed to give a comprehensive and multi-faceted picture of housing and homelessness in Saskatoon by including a Public Perception component. That component engaged all members of the public encountered during the outdoor portion of the PIT Count as well as all those who agreed to be surveyed in indoor locations. All individuals were asked about their perceptions and attitudes to the present state of homelessness, the main reasons for homelessness and those most impacted by it, what is being or could be done, and what has successfully been done in Saskatoon. Asking these questions of all those encountered helped introduce the goal of the 2022 State of Homelessness survey, increased public awareness and education, made surveyors’ initial contact with individuals more comfortable, and reduced potential social stigma associated with answering a PIT Count survey.

The next section presents the methodology including ethics approval, and the processes undertaken to prepare the survey instruments and train and debrief volunteers. Following the methodology section, this report presents findings from the various data sources, discussing what they mean for those individuals and families facing homelessness; for service planning, design, and delivery; and for strategies to reduce or eradicate homelessness in Saskatoon.

## METHODOLOGY

As discussed, a coordinated PIT methodology was used to count the number of individuals and families experiencing sheltered, unsheltered, transitional, and hidden homelessness in Saskatoon on Thursday, April 28th, 2022. Contextual factors, such as weather conditions and the ongoing impact of the COVID-19 pandemic, can influence who are the streets or who seek shelter. Saskatoon experienced prolonged winter conditions with the month of April continuing to experience minus temperatures overnight but the week of April 25 saw plus temperatures rising to 18 degrees Celsius on the 28th. In comparison, on April 18, 2018, the count day saw a high of 9 degrees Celsius and a low of 6 degrees Celsius; on June 22, the PIT Count day for 2015, the temperature reached a high of 26°C and a low of 7°C; while the temperature for the September 24, 2012, count ranged between 20 °C and 10°C; and the average temperature in May (2008 count) was 4.5-18.4 °C. A combination of COVID-19 effects, warm weather, and social assistance cheque day made for relatively quiet streets.

### Ethics Review

The 2022 PIT Homelessness Count was approved by amendment covering a safe research plan by the University of Saskatchewan Behavioural Research Ethics Board (BEH #18-41) on April 8, 2022. The count was conducted in adherence with all standards required under behavioural ethics institutional policies. An honorarium and icebreaker in the form of a transit pass, granola bar, and housing and services pocket card were included to thank the participants of the outdoor and indoor homelessness surveys. While they importantly respect those with lived experience, such honoraria should also respect the principle of informed consent, not be used to promote or attract participation, and should be at levels (not more than \$10) that will not unduly influence (Canadian Observatory on Homelessness, 2014, 2017).

The success of previous Saskatoon PIT Homelessness Counts depended significantly on the inter-organizational cooperation among numerous agencies forming a Community Advisory Committee (CAC) and CUISR. Reaching Home: Canada’s Homelessness Strategy’s *Everyone Counts: A Guide to Point-In-Time Counts in Canada – Edition 3.1* (ESDC, 2021) similarly recommends that a CAC be formed early and be actively engaged throughout. Unfortunately, as a

result of a late start in March 2022, it was concluded that convening and consulting a Community Advisory Committee was not feasible. As an alternative, SHIP drew on its deep networks in the housing sector and obtained feedback from community members on previous Counts while also bringing in the Knowledge Keeper Advisory Board to advise on survey questions as well as locations within the city. Additionally, Addison Docherty from Flow Community Projects Inc. provided integral knowledge and experience towards the implementation of the Count. CUISR relied on its own deep networks and long experience of conducting PIT Counts in 2008, 2012, 2015, and 2018.

### Volunteer Recruitment and Training

#### *Volunteer Recruitment*

Volunteer surveyors were recruited through a multi-pronged approach. In addition to SHIP and CUISR efforts through their networks and listservs, through social and local media, the PIT Coordinator responsible for recruitment used an online registration system on EventBrite, an event management website commonly used for local events.

These approaches ensured a skilled and committed volunteer base and the return of some experienced volunteers. Given the timing of the PIT Count and the impact of COVID-19, there were fewer volunteers, including university students preoccupied with final exams. A total of 70 volunteers registered: people with lived experience, administrators, academics, students, retirees, people from the service sector, media, health, policing, and community support officers. Because of established networks, many of the volunteers also had health, social work, or psychology backgrounds.

#### *Volunteer Training*

Comprehensive volunteer training (including Community Support Officer advice on safety) was a condition of ethical clearance from the Behavioural Research Ethics Board, University of Saskatchewan. All volunteers, regardless of background or experience, were required to attend a three-hour training session before the count. The training sessions offered at different times of the day and in different formats to accommodate volunteers took place on the following dates and locations:

- Tuesday, April 26 (9:00 a.m.-12:00 p.m.): Station 20 West Multipurpose Room.
- Tuesday, April 26 (1:00 p.m. - 4:00 p.m.): Station 20 West Multipurpose Room.
- Wednesday, April 27 (9:00 a.m.- 12:00 p.m.): Zoom
- Wednesday, April 27 (1:00 p.m. - 4:00 p.m.): Zoom

The training highlighted the historical and current literature on homelessness issues in Canada



as well as Saskatoon’s experience with four previous counts to provide volunteers with a broad background and context for their surveying duties. It also explained roles and responsibilities related to the coordinated national PIT Count. This contextual information and a panel presentation by those with lived experience was a necessary foundation to build community resources and awareness of homelessness issues and to prepare for training in administering the surveys and understanding ethical obligations. Special attention was given to ethical issues related to surveying youth given the count’s efforts to track hidden homelessness. Though PIT Counts are “designed to be minimally invasive,” they must be conducted with due regard to issues of consent, respect, equity, confidentiality, and privacy. Also, although parental consent is typically required for research participants under 18, for those experiencing homelessness, parental consent may be “neither feasible nor desirable” (Canadian Observatory on Homelessness, 2017).

Volunteer researchers were advised not to assume the role of counsellor but to direct research participants to resource cards and to counselling and other supports available at the Magnet Event at Saskatoon Indian and Métis Friendship Centre (SIMFC). Given the legal age of consent in Saskatchewan, no youth under 16 would be surveyed; those under 16 could be documented on the tally sheet. If researchers determined a child was in need of protection, was being exploited, or was in danger, there was an obligation to report to child welfare agencies and/or police (such situations overriding concerns about confidentiality). Researchers had to inform research subjects of this fact when/if they became aware of the participant’s age. In the light of possible adverse consequences, decisions would be made in consultation with street service agencies and/or police. Volunteers were also advised of debrief and counselling opportunities available for them should they experience distress.

Survey protocol training covered how to approach and interview potential respondents in a manner that does not expose either the interviewer or respondent to increased risk. In addition to reviewing the surveys (core, additional, and community questions), volunteers were also instructed on logistical matters, including what to bring (or not) and what to wear for the count. All volunteers signed an oath of confidentiality, a University of Saskatchewan waiver, and a photograph release form.

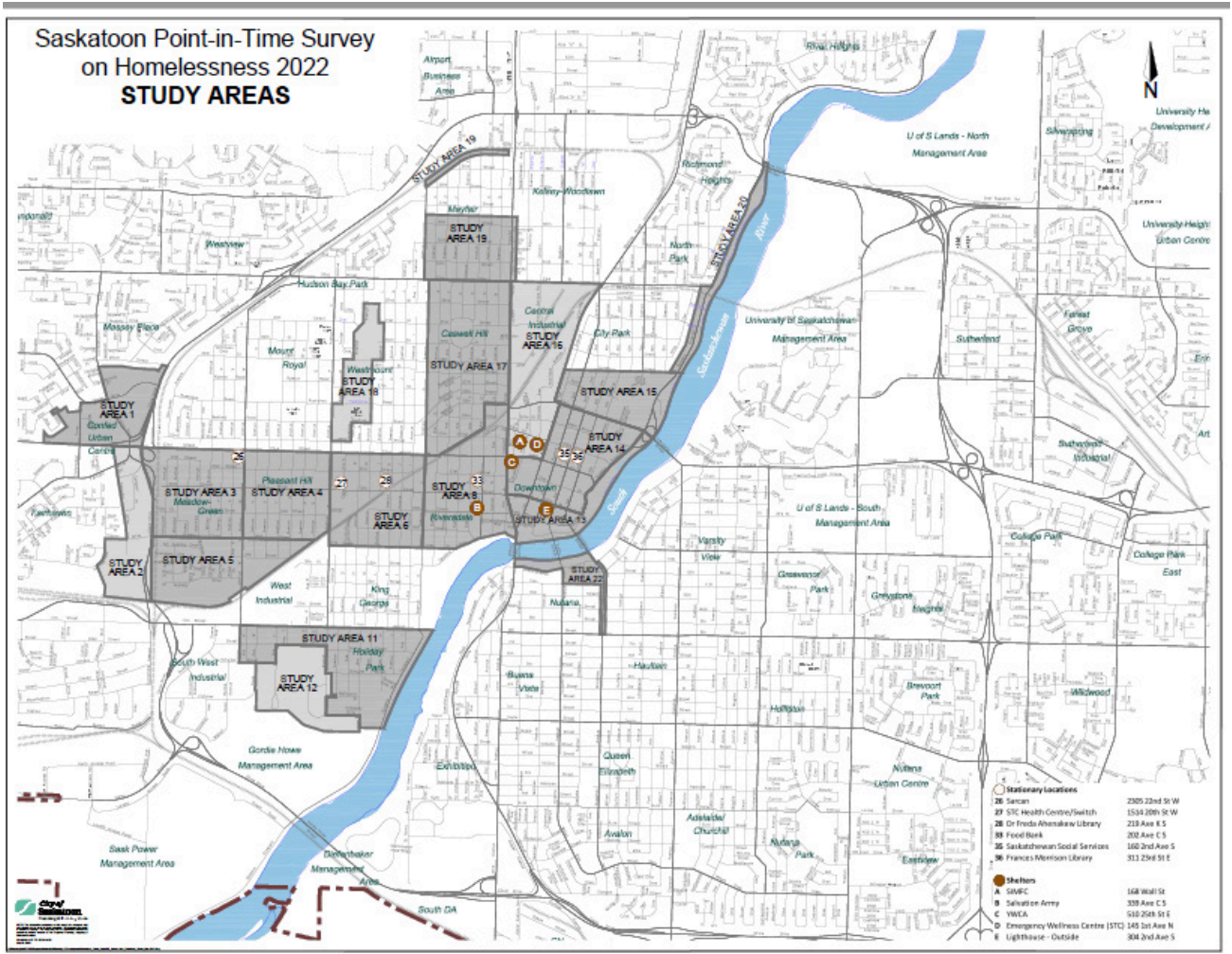
Mapping of Study Areas

To select the geographical study areas for the PIT Count, a “known-locations” street intercept approach (ESDC, 2021) was used with advice from Community Support Officers, under this approach, suggestions are made for locations where teams of volunteers will survey based on local knowledge of where those experiencing homelessness would be located. After consultations and

collaboration with Knowledge Keepers Advisory Board, the map in figure 2 (along with individual area maps to guide volunteer surveyors) was produced by the City of Saskatoon Planning and Community Development team.

The city was divided into 23 study areas plus 5 shelters (down from 44 in 2018 and 27 in 2015, but up from 19 in 2012) and for the second time included both stationary (6) and mobile (17) locations. In the case of mobile locations, the volunteer surveyors canvassed the area on foot during their shifts. The six stationary locations in gathering places and high traffic areas provided a community presence for the count and allowed people the opportunity to be counted if they wished to participate.

Figure 2. 2022 PIT Homelessness Count Map of Study Areas





## Home Base

Field staff and the PIT Coordinator at the home base served as points of contact for any questions that arose during the PIT Count day. All volunteer surveyors gathered at the home base to meet their survey team, sign in, and receive all relevant PIT Count materials. They returned to the home base with the collected surveys and participated in a debrief following the enumeration. The Saskatoon Friendship Inn acted as home base (as in 2018, 2015, 2012) because of its centralized location within the study areas of core neighborhoods and central business district.

## The Count

The count began at 10:30 a.m. and was completed at 6:30 p.m. Survey teams, consisting of at least three individuals (one of whom had professional experience) walked along every street and public place in their survey area and other locations where people were likely to be (e.g. parks, train tracks, etc.). Alternatively, teams were available for study participants at stationary locations and high traffic areas as well as at the Magnet Event hosted at SIMFC (11 a.m.-2 p.m.). Teams were instructed not to approach individuals on private property; each team had a mix of men and women, as previously recommended.

## Outdoor Survey

Volunteer surveyors approached all individuals in their study area, introduced themselves, and described the purpose of the PIT homelessness count. The survey opened with a statement assuring that participation was voluntary, names would not be recorded, and people could skip any question or stop the interview at any time. Two screening questions were asked of all participants to determine (a) that they had not already been interviewed and (b) that they were willing to answer the questions. A third screening question after the completion of part 1, the public perception questions, asked where the person would be staying that night (Appendix A). If the respondents selected response “someone else’s place”, then follow up question C1 was asked to verify and screen in for hidden homelessness. If the answer was “motel/hotel” or “hospital, jail, prison, remand centre,” again, a follow up question C1 was asked to verify whether that person is temporarily in these locations and that they have access to a permanent residence where they could safely stay as long as they wanted. If the answer was “own apartment/house,” the person was thanked and informed that the survey was complete.

For all those who answered that they were staying at the following locations—homeless shelter (emergency, family or domestic violence shelter); hotel/motel (funded by city or homeless

program), transitional shelter/housing; unsheltered public space (e.g., street, park, bus shelter, forest) encampment or abandoned building; vehicle (car, van, RV, truck, boat)—or selected unsure (and indicated probable location) were asked to participate in part 2 of the survey. Part 2 had both 15 core questions asked across all count communities (question 11 was modified at the request of Indigenous representatives on the 2020 Community Advisory Committee (endorsed by the 2022 Knowledge Keepers Advisory Board) to include an option to list residential school/intergenerational trauma to make it visible and a critical factor and not subsume it within mental health issues) and a set of 7 additional questions that were endorsed by the 2018 and 2020 CAC to provide evidence to support implementation strategies for important programs that aim to reduce or end homelessness in Saskatoon.

Because of the difficulties involved with administering consent forms to the population under study, agreeing to complete the survey constituted informed consent. However, if the individual did not provide consent or the surveyor was unable to complete the questionnaire, observation data were used in its place. Observations were recorded on a tally sheet (Appendix B). The observation tally sheet includes data on the person’s outdoor location, appearance, gender, estimated age, potential reasons for the surveyor belief that the individual may be homeless, and reasons that the survey could not be completed.

## Indoor Survey

The indoor survey (Appendix C) was conducted during the same time as the outdoor survey. The following select shelter facilities and the magnet event location at Saskatoon Indian and Métis Friendship Centre (SIMFC) were surveyed: Salvation Army, YWCA, Saskatoon Tribal Council Emergency Wellness Centre, and the Lighthouse (outside only). The survey also helps in demonstrating the number of people being turned away and who end up using a variety of non-shelter services such as emergency rooms and correctional centres.

## HIFIS Data

The Homeless Individuals and Families Information System (HIFIS) is an information system developed and supported by Employment and Social Development Canada (ESDC). HIFIS is an initiative of Reaching Home: Canada’s Homelessness Strategy committed to data collection in support of a national picture of homelessness. The HIFIS data include information about age, gender, citizenship, veteran status, Indigenous identity, and ethnicity. Individual shelters deploy the software on site to track shelter usage and share baseline data nationally and locally. On a long-term basis, the HIFIS data help in portraying a better picture of the inflow—number of shelter users who are

new to the shelter system—and the outflow or number who do not return, as well as capturing the shelter population that is “stable” (HPS, 2018). 2022 HIFIS data were collected at three locations: The Lighthouse, Salvation Army, YWCA. These were supplemented by administrative data from Saskatoon Housing Coalition, OUT Saskatoon, Prairie Harm Reduction, Saskatoon Tribal Council Emergency Wellness Centre, EGADZ, John Howard Society of Saskatoon Bert’s Safe Shelter and RHP House.

### Data Entry and Analysis

Good quality data are important for an accurate picture of homelessness in Canada to direct policy and program development and to measure the progress made by existing homelessness programs and initiatives. After data cleaning by the principal researcher (based on debriefs with teams on count day and reviewing paper surveys for inconsistencies and confusions), the data were entered in HIFIS-Lite customized by the Community Engagement Manager (HIFIS). All the mandatory core, additional, and community survey questions were entered into HIFIS-Lite. As an electronic records management database, it provided an easy means of storing and sharing data among communities, ESDC, and other researchers (ESDC, 2021). This option enabled some quick analysis right after the data were entered, given the built-in capabilities to produce reports and download entered data in various formats.

The analysis also followed the Reaching Home suggested methods and strategies. Therefore, a few suggestions and assumptions had to be built into the analysis frame for the collected survey data. For instance, all non-responses contributed by refusal to complete the questions, non-contact, or in misunderstanding survey questions were to be removed from the samples (Gideon, 2012). This step was important in cleaning the data because the informed consent gave participant the right to withdraw or skip any questions they did not choose to answer.

With the removal of non-responses from the samples, the response rates were in themselves non-weighted in reflecting the participation rates in the PIT Count survey (Groves & Lyberg, 2010; Sarndal & Lundstrom, 2005). For this reason, the sample (n) size is offered in the analysis and further explanations are also offered to clarify the changing sample size. To avoid unrealistic extrapolation, no regression analysis was performed on the data. The analysis relied on descriptive statistics and comparisons of trends among the PIT years.

To minimize data processing errors in the data entry phase that may result inadvertently from activities such as coding of open-ended questions, data entry of close-ended questions, data cleaning, imputation of missing data, and data reporting or tabulation (Bautista, 2012; Groves & Lyberg, 2010), the research assistant and research coordinator performed the data management tasks

together. Additionally, frequent sharing of the database output with the research team also occurred throughout the data entry and analysis phase. Such quality assurance and control are a necessary step in survey data entry so as to ensure accuracy and reliability (Gideon, 2012).

### Volunteer Debriefing and Feedback

A volunteer debriefing took place on May 16, 2022, just over two weeks following the PIT Count. About fifteen volunteers shared their perspectives on the execution of the PIT Count from recruitment and training to interaction with survey participants and best dissemination and uses of the data. Volunteers provided suggestions for refining the survey and training for future homeless counts. The following summarizes their recommendations and reflections:

#### *Recruitment Strategy*

- Short timelines reduced volunteering and narrowed representation.
- Faith groups might be targeted.

#### *Volunteer Training*

- Intended two-tier system would have allowed for practice and role play.
- Appreciated virtual options.
- Implement breakout rooms for role play and practice in future.
- Practising surveying needed more time.
- Screening in and out could have used more time.
- Scheduling during the workday was hard for some organizations.
- Share homelessness resources sooner.
- The lived experience panel gave a very good sense of the issues.

#### *Surveying/ Survey instrument*

- The survey proved longer to complete than anticipated.
- Respect what people want to say; they want to share their stories.
- Surveying was intense with sharing of intimate and vulnerable experiences.
- Worked very well to have one ask questions, one write, and one watching.
- Good that people followed the safety training and observed rather than risking things.
- There were no incidents this year.
- Questions around gender and sexuality were uncomfortable and were hard to explain.
- Four-hour shifts worked well.
- Avoid assigning people to their workplace to avoid conflicts regarding roles and responsibilities.

**Community Buy-in**

- Communicate with participating organizations and shelters for better buy-in.
- Donuts at the Salvation Army helped with surveying as time went by quickly.
- Most found it a good experience with community members approaching when they saw the shirts.
- Honoraria etc. much appreciated.
- Provide agency updates; share findings with municipality and province.

**Overall experience/ Final thoughts**

- Most agreed it was a good experience and they would do it again.
- “It was impactful for me personally.”
- On the last shifts we saw people carrying heavy grocery bags—they weren’t around but were doing other things.
- Host two days before cheque day!
- A colder day before cheque day would have been better!
- Acknowledge that the team were able to pull it off, especially with COVID as a barrier.
- It was a huge challenge and we got it done in a short time.
- Great to have police and community support workers there as support and volunteers.



**FINDINGS: SURVEY RESULTS**

The five main sources of data are analyzed and included in the discussion of the results:

1. An outdoor survey collected by survey teams on the streets of Saskatoon
2. Indoor survey collected by survey teams and staff at participating shelters
3. Data from HIFIS (Homeless Individuals and Families Information System)
4. Administrative data from participating emergency shelters and transitional housing
5. Observational data representing those who were perceived to be experiencing homelessness and did not wish to participate in the survey

This year, we decided not to collect additional data from the Saskatchewan Health Authority (SHA) since the data collected at the 2018 Saskatoon PIT Count was insignificant and included no demographic data or other information.

**Estimated Numbers**

In total, 550 people were surveyed, observed, or reported by the five main data collection methods in the 2022 Saskatoon PIT Count (Table 1). Of those experiencing homelessness, 179 were adults (age 25-44) (32.5%); 80 older adults (45-64) (14.5%); 5 seniors (age 65+) (0.9%); 84 youth (age 13-24) (15.3%); and 26 children (age 0-12) (4.7%). There were 176 individuals with their age group unspecified. A total of 29 adults and 2 youth were found to be unsheltered and a further 76 (2 youth, 17 adults, and 57 unspecified) recorded as unsheltered in the observational data from tally sheets used in the outdoor survey. A total of 69 (4 children, 6 youth, 52 adults, 4 seniors, and 3 unspecified) were found to be sheltered. The *HIFIS Shelter Data* and administrative data submitted by other emergency shelters and transitional housing reported 344 sheltered individuals (20 children, 70 youth, 138 adults, 116 unspecified). Hidden homelessness accounts for 30 individuals surveyed, including 2 children, 4 youth, and 24 adults.

**“I go and stay at a friend’s place when I can; you have to be a real people pleaser. You can’t live properly, and belongings get stolen.” – Respondent**



Table 1. Total number of individuals surveyed, observed or reported to experience homelessness

Age Group	Unsheltered	Sheltered	Hidden Homelessness	Unsheltered Observed	HFIS & Admin Data	Total	Percentage
Child (0-12)	0	4	2	0	20	26	4.7
Youth (13-24)	2	6	4	2	70	84	15.3
Adult (25-44)	17	37	15	13	97	179	32.5
Older adult (45-64)	12	15	9	3	41	80	14.5
Senior (65+)	0	4	0	1	0	5	0.9
Unspecified Age	0	3	0	57	116	176	32
Total	31	69	30	76	344	550	100

First Experience of Homelessness

The survey captured the age at which individuals first experienced homelessness. Table 2 shows the distribution of when individuals first experienced homelessness: 8.3% during childhood, 42.6% in their youth, 33.4% in their early adulthood, 14.8% in older adulthood, and 0.9% in their senior years. That over 50% first experienced homelessness as children or youth—slightly above the 2018 national coordinated count average of 50% (ESDC, 2019)—is significant in light of research linking that early experience with both “increased hardship” before and “greater adversity” after homelessness as well as heightened risk for multiple episodes and chronic homelessness (Gaetz et al., 2016, p. 7). As a 2022 study warned, such youth “become adults trapped in the cycle” of homelessness and/or incarceration (John Howard Society of Ontario et al., 2022).

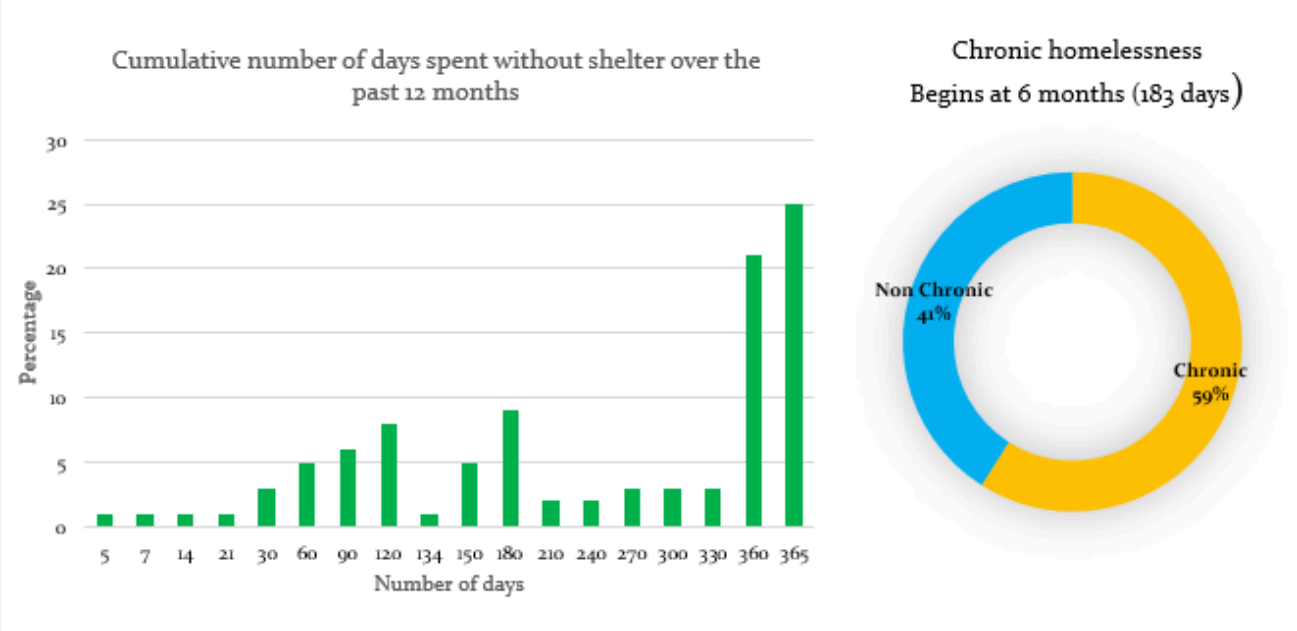
Table 2. Age group distribution at first episode of homelessness

	Unsheltered		Sheltered		Hidden Homelessness		Total	
	n	%	n	%	n	%	n	%
Child (0-12)	2	7.6	6	10.3	1	4.2	9	8.3
Youth (13-24)	12	46.2	23	39.7	11	45.8	46	42.6
Adult (25-44)	6	23.1	20	34.5	10	41.7	36	33.4
Older adult (45-64)	6	23.1	8	13.8	2	8.3	16	14.8
Senior (65+)			1	1.7			1	0.9
Total	26	100	58	100	24	100	108	100

Chronic Homelessness

The length and persistence of homelessness in the past year showed that more than half (59%) experienced chronic homelessness; that is, they were currently experiencing homelessness and had done so for more than 6 months or 183 days (Figure 3). That figure marks an increase from the 2018 figure of 55.3%.

Figure 3. Length of homelessness over the past 12 months





Emergency Shelter Use

The National Shelter Study (2005-2016) reported over 15,400 emergency shelter beds at about 400 emergency shelters across Canada (Employment and Social Development Canada, 2016b). Although the number of shelters and beds remained stable between 2005 and 2016, the demand for shelter beds increased. The average occupancy rate at emergency shelters in 2016 was 91% and approximately 14,000 Canadians slept in an emergency shelter on an average night. Even though there was a decrease in the number of people using the emergency shelters in Canada in 2016 compared to 2005, these people were using shelters for a longer period of time (Employment and Social Development Canada, 2016b).

Of the 113 people surveyed who responded to this question, a total of 77% stayed in shelters and 23% did not stay in shelters in the past year (Table 3). The distribution is similar for adults and seniors. Worryingly, a greater percentage of youth (37.5%) did not use shelters, when compared to other age groups. As we have seen in studies (Gaetz et al., 2013; ESDC, 2018b, ESDC, 2019), youth often experience homelessness in efforts to escape violence at home, but they may put themselves at further risk when opting for coping strategies outside shelters.

Table 3. Shelter use in the past year

Shelter use	Youth (13-24)		Adults (25-60)		Older adults (50-64)		Senior (65+)		Total	
	n	%	n	%	n	%	n	%	n	%
Stayed in shelters	5	62.5	53	77.9	26	77.8	3	75	87	77
Did not stay in shelter	3	37.5	15	22.1	7	21.2	1	25	26	23
Total	8	100	68	100	33	100	4	100	113	100

Who is experiencing homelessness?

This section gives an in-depth picture of the people who are currently experiencing homelessness in Saskatoon by providing demographic information, their home location before coming to Saskatoon, length of time living in Saskatoon, previous foster and/or residential school experience, and causes of homelessness.

Immigrants and Refugees

Out of 115 respondents, 1.7% indicated that they came to Canada as immigrants (Table 4). The majority (68.8%) indicated that they come from locations outside Saskatoon, and 31.2% indicated that they have “always been” in Saskatoon (Table 5).

Table 4. Did you come to Canada as an immigrant, refugee or a refugee claimant

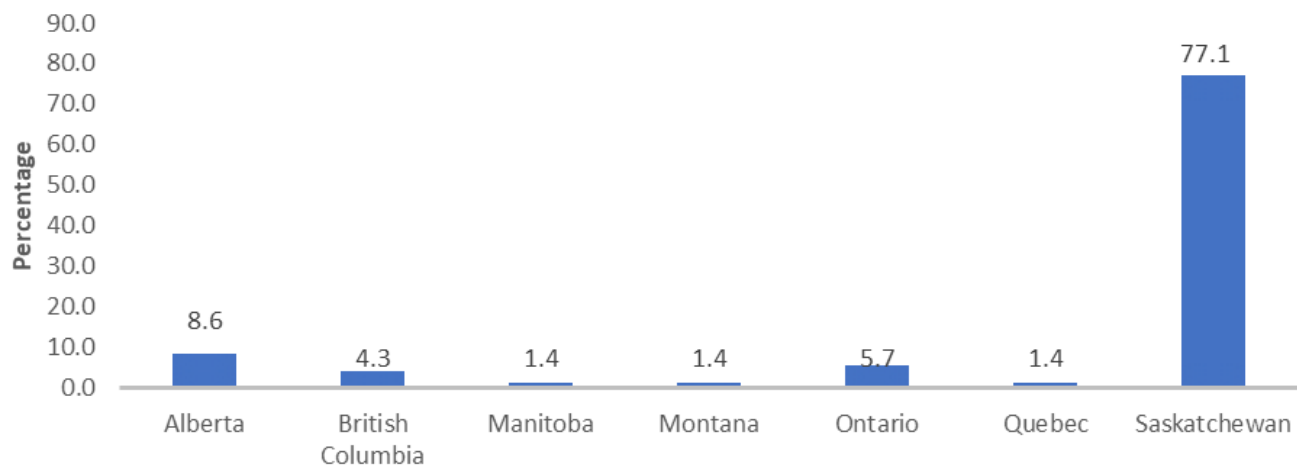
Response	Number	Percentage
No	113	98.3
Yes	2	1.7

Table 5. How long have you been in Saskatoon

Response	Number	Percentage
Always been here	34	31.2
Length of time	75	68.8

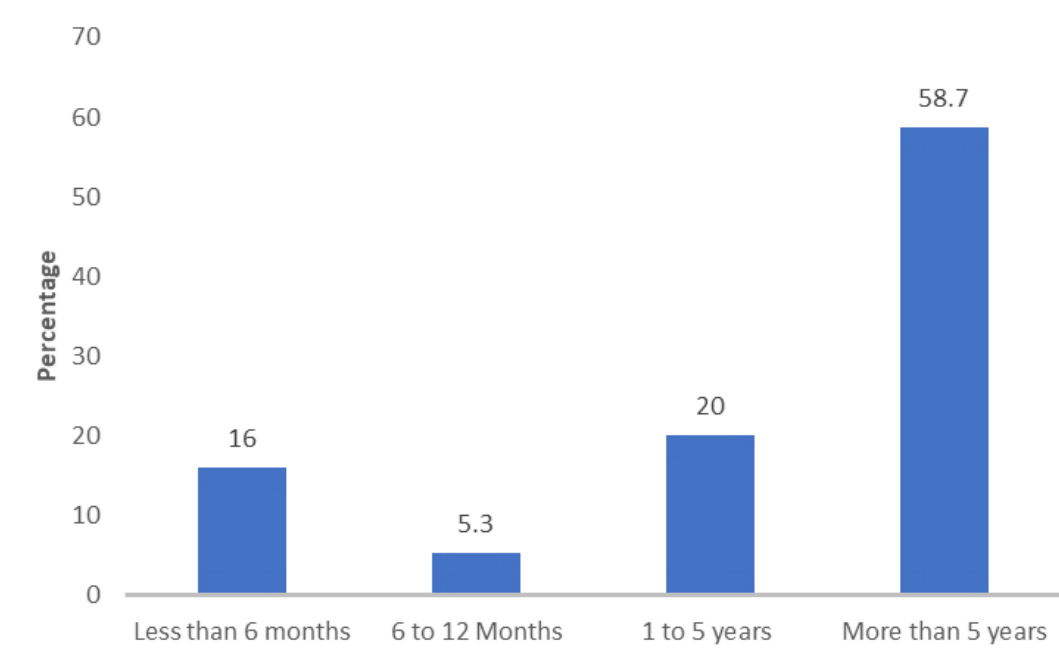
In general, the results suggest that a majority of the people who are experiencing homelessness have long-term relationships with the province and with Saskatoon in particular. Of those who migrated from places outside Saskatoon, 77.1% came from other locations in Saskatchewan (Figure 4).

Figure 4. Home location before coming to Saskatoon



In addition to the 31.2% who have “always been here,” more than half (58.7%) of those who came from other places have lived in Saskatoon for more than 5 years, 20% for 1-5 years, 5.3% for 6-12 months, and only 16% for less than 6 months. In other words, most of the respondents are long-term residents of Saskatoon (Figure 5).

Figure 5. Length of time respondents have lived in Saskatoon



Indigenous Identity

Table 6 shows the distribution of those who identified as First Nations (with or without status), having Indigenous Ancestry, Inuit, Métis, or non-Indigenous ethnicity in the three categories surveyed—unsheltered, sheltered, and hidden homelessness. Of those experiencing homelessness, 68.5% identified as First Nations, 5.4% Indigenous Ancestry, 1.8% Inuit, 14.4% Métis, and 9.9% identified as non-Indigenous. In the 2022 PIT Count, Indigenous peoples represented a disproportionate number of those experiencing homelessness (90.1%) compared to those identifying as non-Indigenous (9.9%). This marks an increase from the

2018 figure of 85.5% and continues and exacerbates the trend remarked in the 2016 State of Homelessness Report of Indigenous people being overrepresented of those who experience homelessness across Canada (Gaetz et al., 2016). By contrast, the 2018 national coordinated count included 30% reporting Indigenous identity while representing just 5% of the Canadian population.

Table 6. Indigenous identity or ancestry and non-Indigenous representation

	Unsheltered Surveyed		Sheltered Survey		Hidden Homelessness		Total	
	n	%	n	%	n	%	n	%
Yes, First Nations	19	70.4	40	66.7	17	70.8	76	68.5
Yes, Indigenous Ancestry	3	11.1	2	3.3	1	4.2	6	5.4
Yes, Inuit	1	3.7			1	4.2	2	1.8
Yes, Métis	3	11.1	10	16.7	3	12.5	16	14.4
Non-Indigenous	1	3.7	8	13.3	2	8.3	11	9.9
Total	27	100	60	100	24	100	111	100

Respondents were asked whether they identified with any other racial identities: 80.2% indicated that they identify as Indigenous only. Other racial identities were selected by few respondents: 16.2% identified as white, 0.9% Asian-East, 0.9% Asian-West, 0.9% Black-Canadian, and 0.9% Latin American (Table 7).

Table 7. Additional racial identities

Racial Identity	N	%
Identify as Indigenous Only	89	80.2
White (e.g. European, French, Ukrainian, Euro-Latinx)	18	16.2
Asian-East (e.g. Chinese, Korean, Japanese)	1	0.9
Asian-West (e.g. Iranian, Afghan)	1	0.9
Black-Canadian/American	1	0.9
Latin American (e.g. Brazilian, Mexican, Chilean, Cuban)	1	0.9
Total	111	100

Canadian Military and RCMP Veterans

According to ESDC (2019), veterans in Canada represented 4.4% of the homelessness population. Of those surveyed in Saskatoon, 1.7 % indicated that they served in the Military (Table 8)—a number down from 2.5% in 2018. Some factors that put veterans at a greater risk for homelessness are traumatic brain injury, sexual trauma (especially for women), lack of strong support networks, lack of transferrable employment skills, low living wage jobs, and shortage of affordable housing. At

times these factors are also combined with post-traumatic stress disorder and/or mental health illness or substance abuse to increase the risk of experiencing homelessness, according to the US National Alliance to End Homelessness (2021).

Table 8. Have you ever served in the Canadian Military or RCMP?

Response	Number	Percentage
No	115	98.3
Yes	2	1.7

Foster Care and Youth Group Home

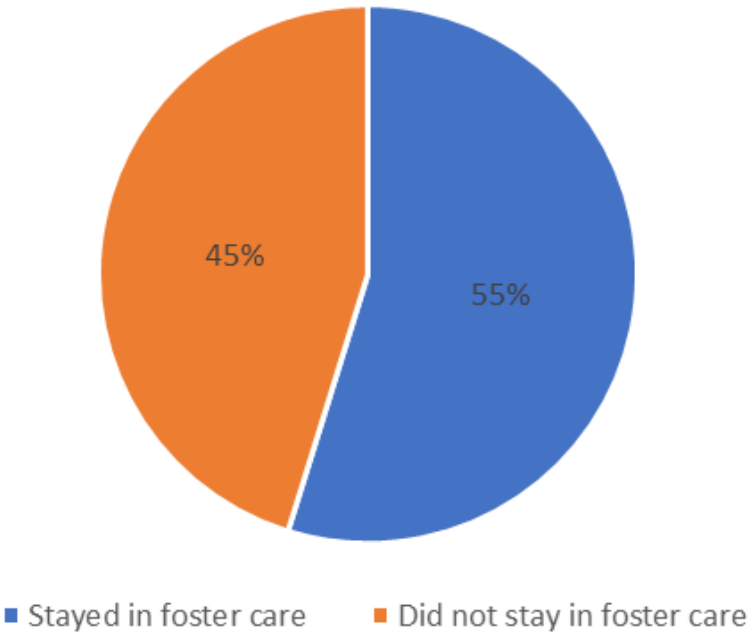
Figure 6 represents those experiencing homelessness who have been in the foster care system or a youth group home. In Saskatchewan, Foster Care “provides a safe family environment to children who have been removed from their homes because of abuse, neglect, or life-threatening conditions” (Government of Saskatchewan, 2022). Currently, there are four types of Foster Care available: 1) Emergency provides immediate care for children on short notice any time of the day or night; 2) Short-term provides care and prepares children for transition to their families, extended family, or another permanent home; 3) Long-term provides care for children who are unable to return to their natural families; 4) Therapeutic provides care for children and youth with a range of behavioural, social, developmental, and/or other special needs (Government of Saskatchewan, 2022). A group home is a “non-parental, supervisory personal care and programming for youths” provided in a single-family dwelling (Government of Saskatchewan, 2011). Despite such positive descriptions of foster care in Saskatchewan, Baskin (2013) is among those (Gaetz et al., 2016; Nichols, 2017; Nichols et al., 2017) who are clear why Indigenous and LGBTQ2S+ youth are overrepresented when the child welfare system is “a strong arm of colonization” perpetuating mainstream assessments of the best interests of children and families at the expense of Indigenous views and experiences (Baskin, p. 406).

Over half of those who reported experiencing homelessness (55%), either went through the foster care system or were in a youth group home (Figure 6). This is slightly up from 52.6% reported in 2018 Count. When children and youth “age out” of the child welfare system, they lose access to system supports while being expected to live as independent adults. As a result, these youth are at risk of experiencing homelessness when they do not have the same education levels and employment opportunities as their peers in the general population, which results in unstable income and the risk of unstable housing. Often, young people leaving foster care or a group home have no familial

support and face challenges such as multiple placements throughout their childhood, history of trauma, and mental health issues (Rosenberg & Kim, 2018). A study found that 25%-50% of youth leaving the foster care system experience precarious housing (Dworsky & Courtney, 2009). Other studies document such detrimental effects as mental or physical disability, anxiety, as well as losing cultural and community ties that could enable them to develop a balanced self-identity (Bruskas, 2008; Marquis et al., 2008; Rose, 2006). For those aging out of the foster care system, many fail to graduate from high school (44% graduate high school versus 81% in the general population), and with limited support may resort to crime and substance use that cost an estimated \$7.5 billion over ten years in lost opportunities for individuals, governments, and business (Bounajm et al., 2014).

Figure 6. Percentage of respondents with foster care or group home experience

Stay in foster care or youth group home (n=94)



Health Challenges

Those experiencing homelessness face many health challenges with 36% reporting learning or cognitive limitations, 48% had a physical limitation, 53% managed an illness or medical condition, 53% experienced residential school / intergenerational trauma, 67% had a mental health issue, and 86% reported dealing with a substance abuse issue (Table 9). The relationship between homelessness and health is complex; homelessness and poverty can contribute to health issues and people’s

health challenges can in turn contribute to poverty and homelessness (Benfer et al., 2021; Chenier, 1999). The strong link between housing and health is often overlooked— **“housing is health care”** (National Health Care for the Homeless Council, 2019). People experiencing homelessness are more susceptible to dying prematurely and may have a variety of health challenges, but also face significant barriers to accessing health care (Hwang, 2001; National Health Care for the Homeless Council, 2019). The category of residential school/intergenerational trauma was uniquely added to the survey in Saskatoon respecting Indigenous requests that the trauma not be subsumed under mental health and therefore become invisible. This trauma needs to be understood as a significant risk factor for Indigenous homelessness.

**“I first came to the city for a better home and education... Please look at me like I present myself. I lost everything. It’s a lonely life with all these health issues.” -- Respondent**

Table 9. Health challenges

Health Challenge	Number of responses			Percentage experiencing challenges
	Total	Yes	No	
Learning or Cognitive Limitation	106	38	68	36
Physical Limitation	111	53	58	48
Illness or Medical Condition	108	57	51	53
Residential School/intergenerational Trauma	105	56	49	53
Mental Health Issue	108	72	36	67
Substance Use Issue	108	93	15	86

Sexual Orientation and Gender Identity

Gender identity is defined as each person’s “internal feeling” and individual experience of gender. It is their sense of being a woman, a man, both, neither, or anywhere along the gender spectrum. A person’s gender identity may be the same as, or different from, their birth-assigned sex. A person’s understanding of their gender may change (Abramovich, 2013; Government of Canada, 2020). Sexual orientation is a “person’s physical, romantic and/or emotional attraction to, and/or intimate relations with, individuals of a different gender, the same gender, no gender, or more than one gender (Government of Canada, 2020). See Table 10 for self-reported gender identity. Half of those experiencing homelessness are males (50%), while females represented 42.7% of the group (Table 10).

Table 10. Reported homelessness and gender identity

Gender Identity	Sheltered	Unsheltered	Hidden Homelessness	Total	Percentage
Man/Male	32	11	12	55	50
Woman/Female	24	12	11	47	42.7
Two Spirit	3	0	0	3	2.7
Trans Man	0	0	1	1	0.9
Trans Woman	0	0	1	1	0.9
Non-binary	0	1	0	1	0.9
Not Specified	1	1	0	2	1.8
Number	60	25	25	110	100

Table 11 reports on the sexual orientation self-definition of those surveyed in the 2022 PIT Count. There were three respondents who identified as two-spirited, one as a trans man, another as a trans woman, and one as non-binary. Out of 106 respondents, 87 self-reported their sexual orientation as straight/heterosexual, 9 bisexual, 5 two-spirit, 2 pansexual, 1 asexual, 1 gay, and 1 questioning (Table 11). Noting increasing LGBTQQ2S+ youth homelessness, Abramovich (2013) urged more specialized services given the risk to their safety and wellbeing in the face of discrimination despite increased acceptance of sexual diversity.

Table 11. Reported homelessness and sexual orientation

Sexual Orientation	Number	Percentage
Straight/Heterosexual	87	82.1
Bisexual	9	8.5
Two-Spirit	5	4.7
Pansexual	2	1.9
Asexual	1	0.9
Gay	1	0.9
Questioning	1	0.9
Total	106	100



Causes of Housing Loss

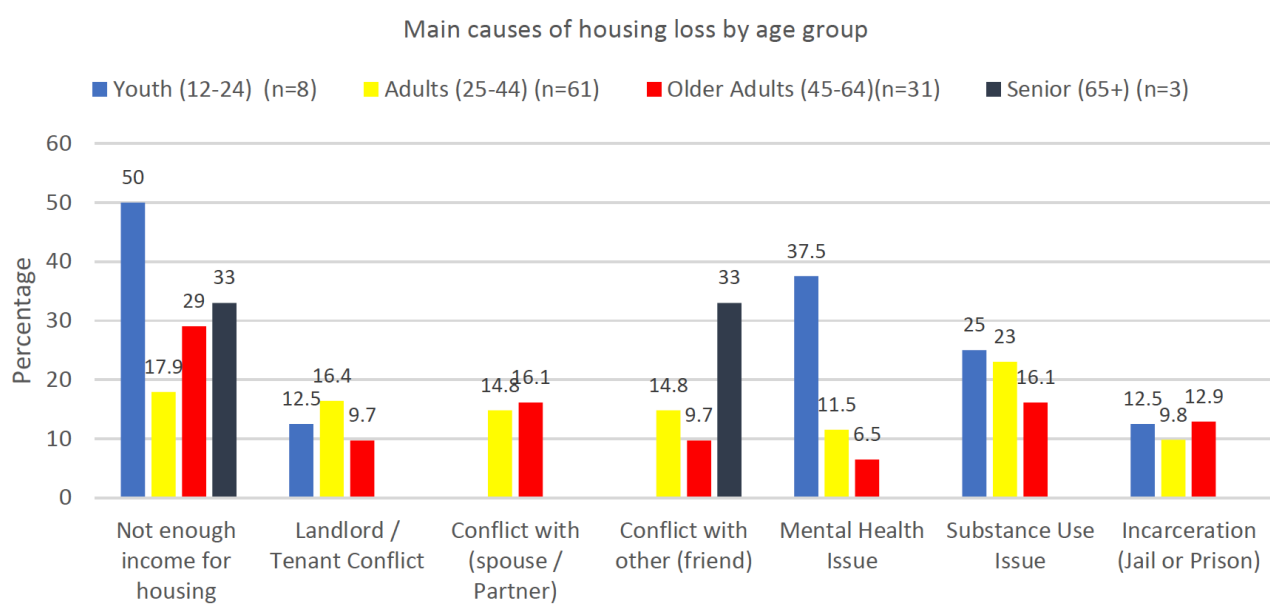
Reasons for housing loss are presented below in three categories consistent with national trends: namely, housing and financial issues, interpersonal and family issues, and health or corrections. The results presented in Table 12 confirm that the reasons for housing loss are diverse. Under the housing and financial category, the lack of income was cited as the major reason for housing loss (representing 31.4% of 106 respondents). Respondents also highlighted conflicts with landlords leading to housing loss (14.2%). Approximately 10% indicated that the housing was unsafe, while 4.7% faced discrimination. As Table 12 shows, home is not always a safe place. Conflict with spouse/partner and conflict with friend/roommate at 13.2% and 12.3% respectively led the reasons under interpersonal and family issues. Under the health or corrections category, substance use (19.8%), mental health (12.3%), and physical health (8.5%) were cited as the most common reasons for housing loss, suggesting the importance of addressing health and substance use issues. Incarceration and hospitalization were mentioned by 10.4% and 4.7% of the respondents respectively.

Table 12. Causes of recent housing loss

Classification	Reason for Housing Loss	Number (n=106)	Percentage
Housing and Financial Issues	Not enough income for housing	33	31.1
	Landlord/Tenant conflict	15	14.2
	Unfit/Unsafe housing condition	11	10.4
	Left the Community/Relocated	6	5.7
	Comlaint (e.g. pets/noise/damage)	5	4.7
	Experienced discrimination	5	4.7
	Building sold or renovated	3	2.8
	Eviction	3	2.8
	Lost ID	3	2.8
Interpersonal and Financial Issues	Owner moved in	1	0.9
	Conflict with spouse/partner	14	13.2
	Conflict with other (i.e. friend or roommate)	13	12.3
	Departure of family member	8	7.5
	Conflict with: parent/guardian	6	5.7
	Experienced abuse by other (i.e. friend or roommate)	5	4.7
	Experienced abuse by: parent/guradian	2	1.9
Health or Corrections	Experienced abuse by: spouse/partner	1	0.9
	Sexual abuse issue	21	19.8
	Mental health issue	13	12.3
	Incarceration (jail or prison)	11	10.4
	Physical health issue	9	8.5
	Hospitalization or treatment program	5	4.7

The reasons for housing loss tend to vary across age groups (Figure 7). All age groups identified financial challenges as the major cause. Mental health challenges were mostly mentioned by youth (37.5%). Substance use, conflicts with landlord and incarnation was mentioned by both youth and adults. For seniors, financial challenges along with conflict with another were the most common cause for housing loss.

Figure 7. Most common causes of housing loss



COVID-19 and Housing Loss

In total,14.3% highlighted that COVID contributed to housing loss (Table 13). It is important to note that this number may capture those who felt they were directly impacted by COVID-19, but may understate indirect impacts of COVID-19. COVID-9 worsened the housing crisis; during lockdown, economic activity slowed and some people lost their jobs (Benfer et al., 2021; Doll et al., 2022). Though the government introduced some programs such as the Canada Worker Lockdown Benefit (CWLB), Canada Recovery Sickness Benefit (CRSB), and Canada Emergency Response Benefit (CERB), for example, to cushion people, some individuals were not eligible, particularly those who relied on informal sources of income (Government of Canada, 2022a). Low-income groups and youth were disproportionately affected by the lockdowns and other measures that were put in place to contain the pandemic (Wilson, 2021).

“The pandemic resulted in poor services.” -- Respondent

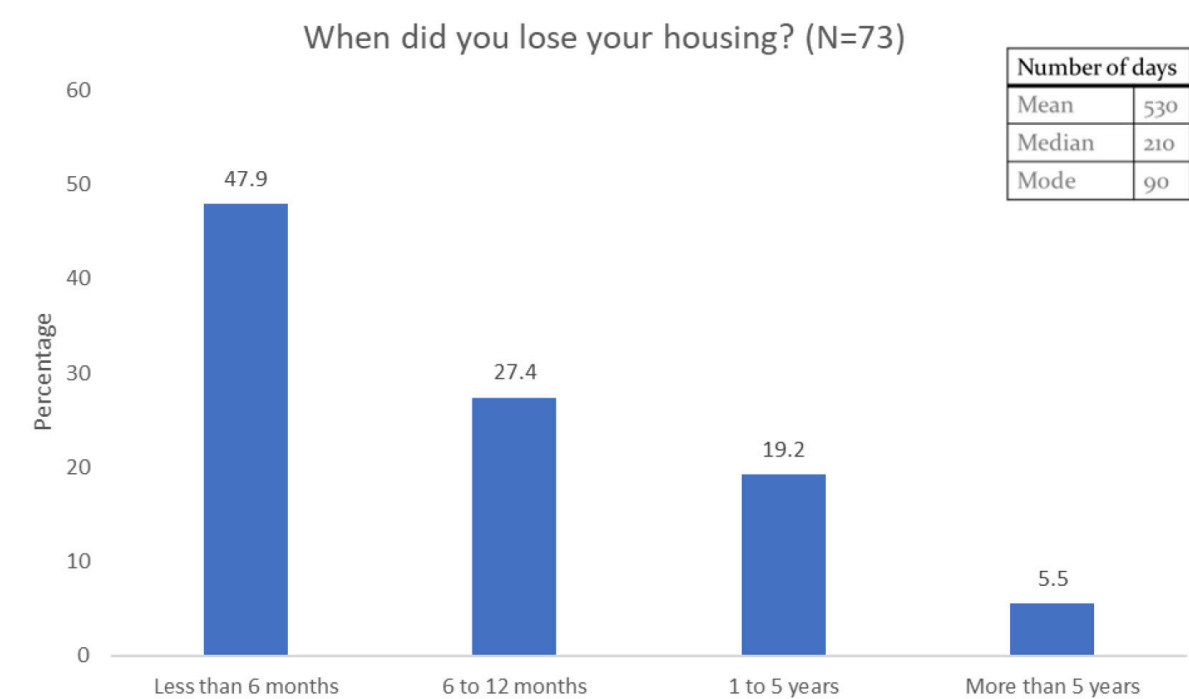
Table 13. COVID-19 and homelessness

Response	Sheltered		Unsheltered		Hidden Homelessness		All	
	n	%	n	%	n	%	n	%
Yes	9	16.4	3	13.6	2	9.5	14	14.3
No	46	83.6	19	86.4	19	90.5	84	85.7
Total	55	100	22	100	21	100	98	100

When did you lose your housing?

As can be seen in Figure 8, close to 50% of the respondents lost their housing in the last 6 months, suggesting that the current economic factors such as rising cost of living and direct and indirect impacts of COVID-19 might have exacerbated the housing crisis. Worryingly, over 27.4% of the respondents lost their housing 6-12 months earlier, while another 19.2%.had lost housing over a year ago and as long as 5 years earlier. Prolonged homelessness has direct and indirect impacts on mental health (Benfer et al, 2021; Hwang, 2001; McNeil et al., 2014). The delays in finding lasting solutions to the housing challenges might be undermining efforts to address mental and physical health and substance use issues, among other things, given causalities identified in Table 12 above.

Figure 8. When did people lose housing?



Sources of Income

Social assistance / welfare was identified as the major source of income (61.1%) in the last of the mandated core questions. Informal sources such as panhandling, and bottle returns were identified as the second most important source of income (21.1%), while disability benefits (16.8%) and GST/ HST refunds (15.8%), child and family tax benefits (6.3%), seniors’ benefits (4.2%), and veteran benefits (1.1%) offered a clear indication that government programs play an important role in the lives of low-income individuals. However, with the increasing cost of living, the income from these sources is barely sufficient to cover basic needs. A living wage in Saskatchewan is calculated to require an hourly rate of \$16.89 per hour in Saskatoon that would still give only a “bare-bones budget” and not a lavish one; the minimum wage is \$11.81 per hour, the lowest in the country in a province with the highest poverty rate at 19% compared with 16.4% nationally (Enoch, 2022, p. 6). There were few cases where individuals indicated that they get income from full-time (4.2%), part-time (2.1%), and casual employment (3.2%). Reliance on less sustainable sources of income such as money from family and friends is worrying and might perpetuate the problem of homelessness given financial challenges were identified as the most common cause of housing loss.

“Wages are not keeping up with inflation.” -- Respondent

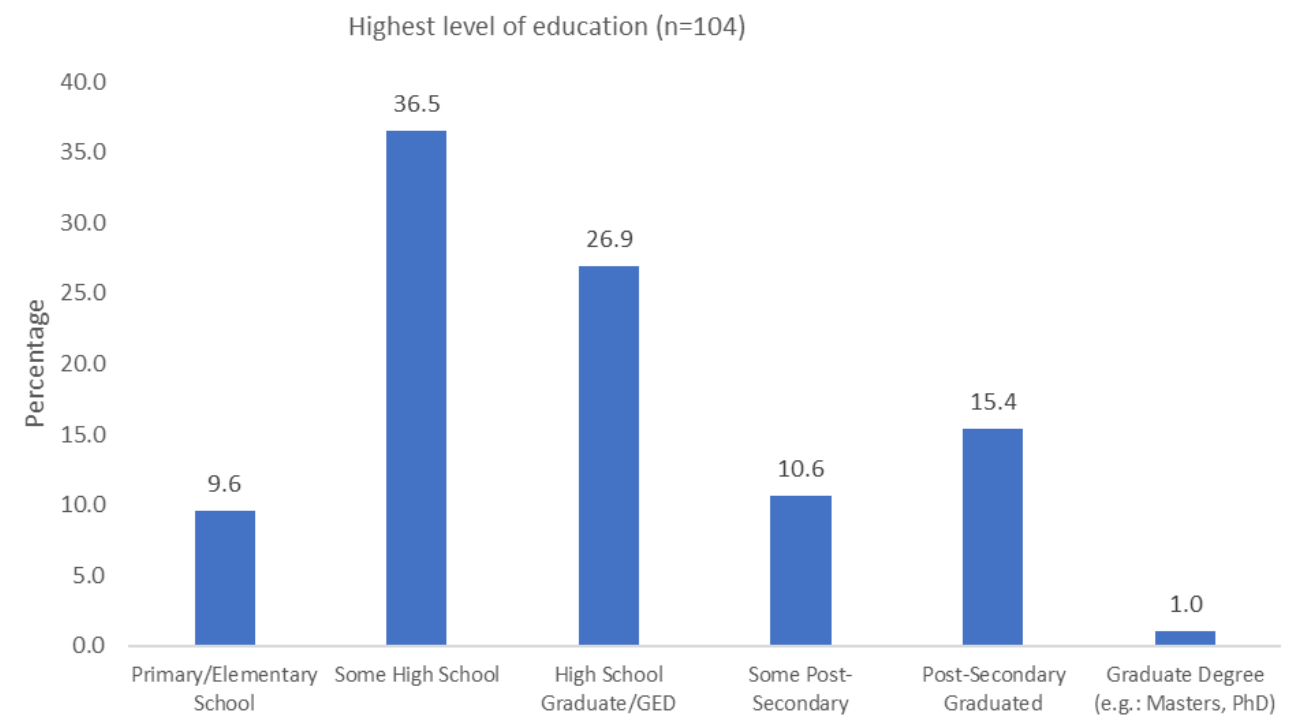
Table 14. Where do you get your money from?

Sources of Income	Number (n=95)	Percentage
Welfare/Social Assistance (provisional benefit)	58	61.1
Informal Income Sources (e.g. bottle returns, panhandling)	20	21.1
Disability Benefit (provincial benefit)	16	16.8
GST/HST Refund	15	15.8
Money from Family/Friends	7	7.4
Child and Family Tax Benefits	6	6.3
Full-time Employment	4	4.2
Seniors’ Benefits (e.g. CPP/OAS/GIS)	4	4.2
Other Money from a Service Agency	3	3.2
Casual Employment (e.g. contract work)	3	3.2
Part-time Employment	2	2.1
Veteran/VAC Benefits	1	1.1

Education Profile of Those Experiencing Homelessness

A total of 36.5% of respondents highlighted that they reached some high school (36.5%), while approximately 27% indicated that they were high school graduates (Figure 9). Cumulatively, those who did some high school and those who were high school graduates accounted for just over 63% down from the 2018 figure of 76.7%. Those who attained some post-secondary accounted for 27%, this includes individuals who had some postsecondary (10.6%), had graduated postsecondary (15.4%), or even completed a graduate degree (1%). Given that income was identified as one of the main factors, it is crucial to ensure that individuals who attained these levels of education can find employment that pays living wages.

Figure 9. Education profile of individuals experiencing homelessness



Experience of Violence

One of the concerns about homelessness is the lack of safety individuals face. Approximately 68% of the respondents indicated that they were victims of violence while experiencing homelessness (Table 15). Violence was experienced across distinct types of homelessness (Table 15) and across gender (Table 16), a clear indication that the safety of individuals experiencing homelessness is seriously compromised. Especially troubling is the 100% experience of violence by the trans community. The rising hate crimes against the LGBTQ2S+ community are among the motivations for the 5-year, \$100 million federal action plan announced in August 2022 to address the ongoing inequities and

advance the rights of Two-Spirit, lesbian, gay, bisexual, transgender, queer, intersex and additional sexually and gender diverse people in Canada (Government of Canada, 2022b).

Table 15. Victim of violence while experiencing homelessness

Response	Unsheltered Surveyed		Sheltered Survey		Hidden Homelessness		All	
	n	%	n	%	n	%	n	%
Yes	17	70.8	41	70.7	13	59.1	71	68.3
No	7	29.2	17	29.3	9	40.9	33	31.7
Total	24	100	58	100	22	100	104	100

Table 16. Gender and vulnerability to violence while experiencing homelessness

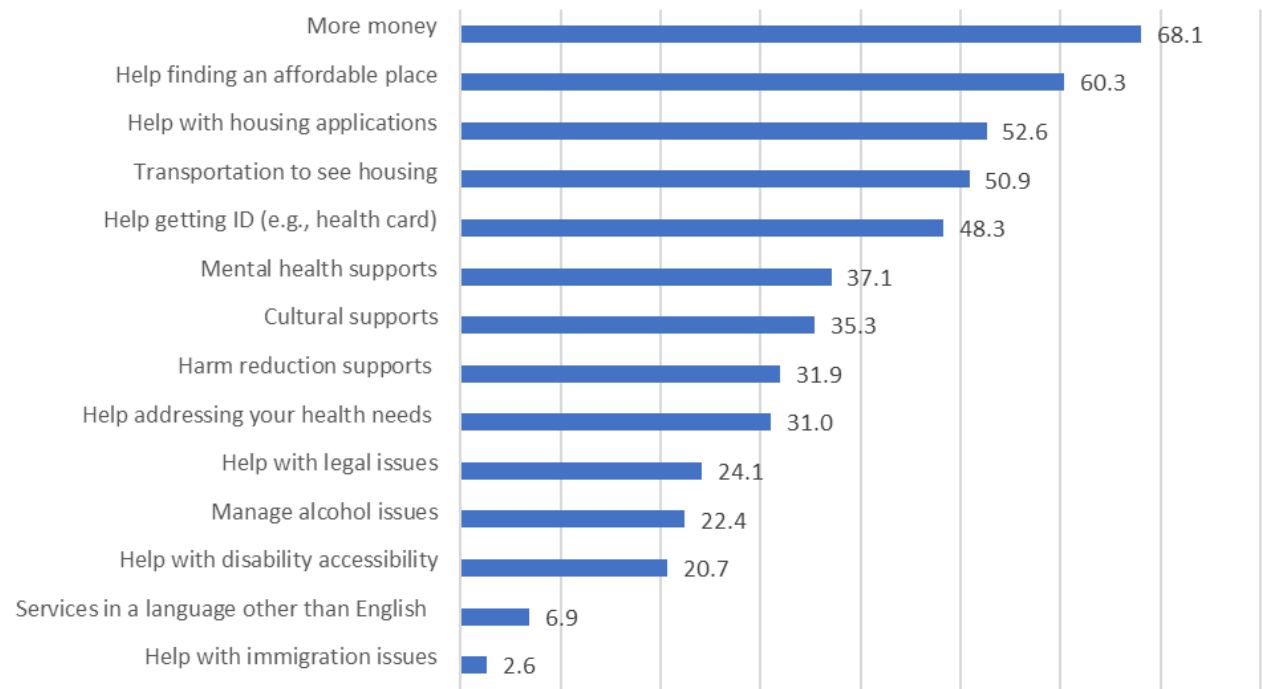
Response	Man/male		Female/Woman		Trans Man/ Woman		Two Spirit	
	n	%	n	%	n	%	n	%
Yes	35	70	28	63.6	2	100	2	66.7
No	15	30	16	36.4	0	0	1	33.3
Total	50	100	44	100	2	100	3	100

Supports to Help Secure Stable, Affordable Housing

When asked what would help them find stable, affordable housing, respondents offered several suggestions (Figure 10). Not surprisingly, most respondents indicated that having more money (68.1%) and getting help to find affordable places (60.3%) were most important. This is consistent with the finding that financial challenges were the major cause of homelessness. Other important suggestions were assistance with housing applications (52.6%) and help with transportation to see housing (50.9%), giving a strong sense of the barriers those in poverty face. If the application process is complicated, it becomes problematic for those with limited financial, technological, or other resources to get housing. For example, challenges with connectivity could limit people from completing applications online. In other instances, viewing housing could require multiple trips and this becomes an obstacle to people who are resource constrained. Another suggestion closely related to the help with the application process is the assistance needed with getting IDs (48.3%). If one

does not have ID, or if one loses pieces of ID, then one cannot access most of the services. The other suggestions are related to solving health challenges. Respondents highlighted that they need mental health support (37.1%), help in addressing health needs (31%), harm reduction support (31.9%), and managing alcohol issues (22.4%). Most of the suggested solutions directly address the problems identified in Table 9: Health Challenges and Table 12: Causes of recent housing loss.

Figure 10. Support needed to find stable housing



Services Used While Experiencing Homelessness

Of services used by people experiencing homelessness in the last year (Figure 11), the library was cited as the most used (73.1%). Individuals indicated that they visited the library almost daily, translating to approximately 5, 249 times (Figure 12). This finding is consistent with the 2018 finding and with the well-documented changing role of libraries (Wahler et al., 2019, for example) where those experiencing homelessness can find “hope, refuge, and community” (Reith & Huncar, 2014). As one would expect, shelters, emergency rooms, hospitals, food banks, health clinics, and drop-ins were among the most used services. These findings represent further testimony that when combating homelessness, a comprehensive, coordinated and not siloed approach is required—and underline the human and health services costs associated with emergency, ambulance, hospital, health clinic, mental health, and detox use.

“I’ve tried to get detox services, but couldn’t get in.” -- Respondent

Figure 11. Services that were used in the past 12 months

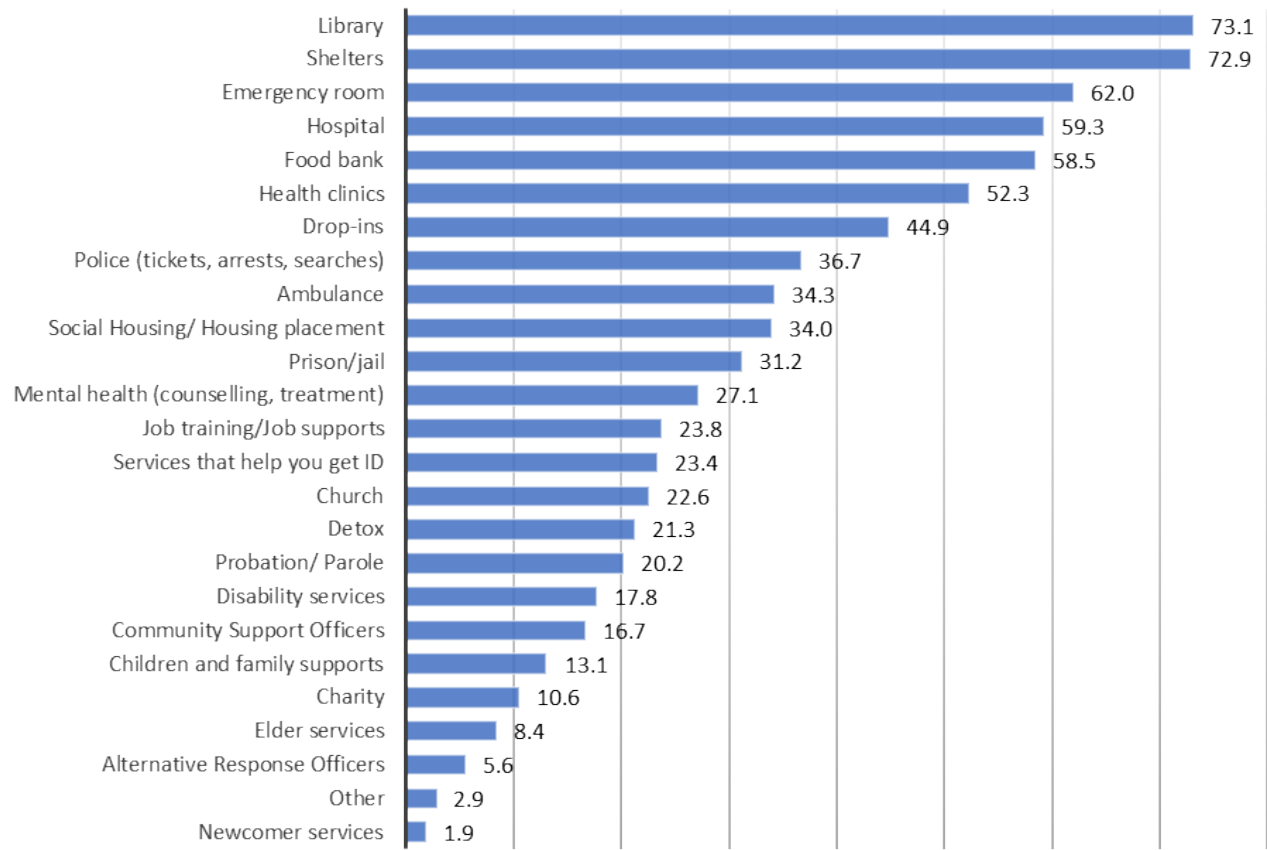
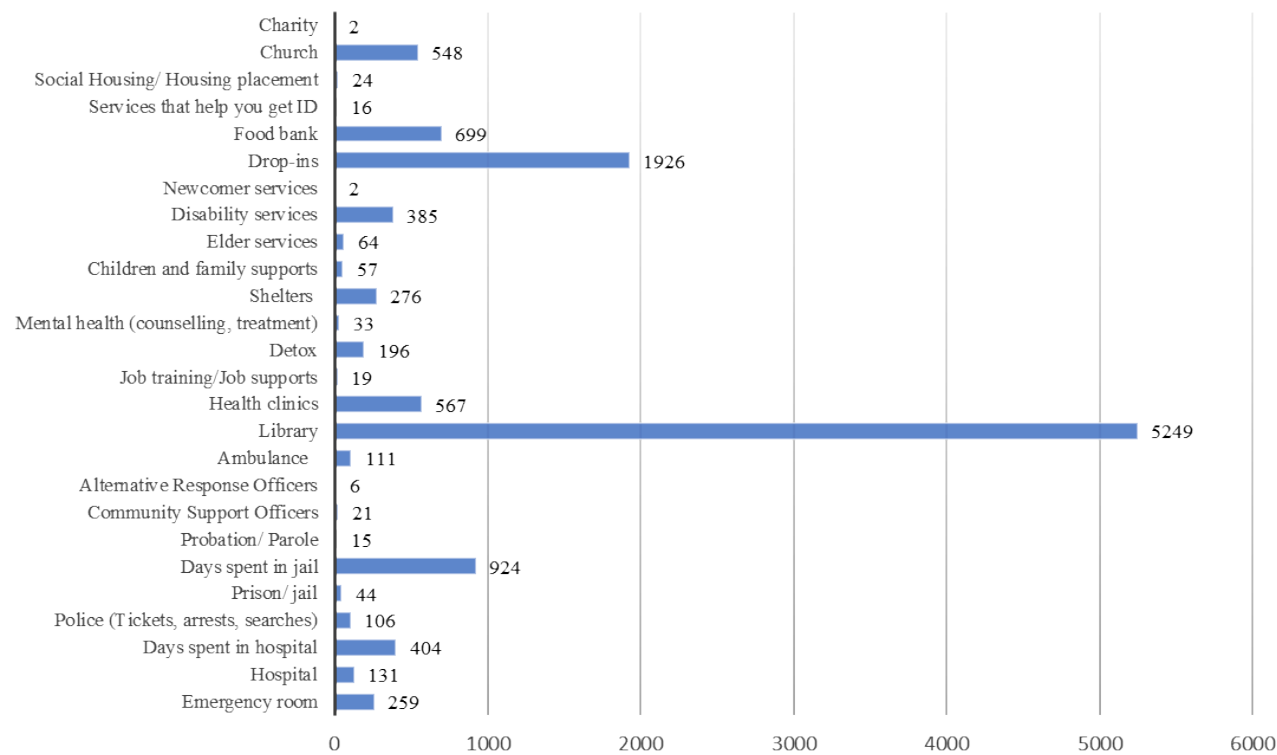




Figure 12. Number of times services were used in the past year



About 45% indicated that the services they used helped them find housing (Table 17). Again, this shows that support organizations have a direct or indirect impact on reducing homelessness. It is important to identify the links among organizations and figure out how coordination can be enhanced to combat homelessness.

Table 17. Of services used, are any helping you find housing?

Response	Sheltered	Unsheltered	Hidden Homelessness	All	Percentage
Yes	25	9	8	42	44.7
No	29	12	11	52	55.3
Total	54	21	19	94	100

Of the 24 respondents who answered the follow-up question asking to list the services that helped, 33.3% indicated that shelters help them find housing, while drop ins, library, and Saskatoon Indian & Métis Friendship Centre were mentioned by 12.5% each of the respondents (Table 18). This help could take the form of either sharing information, directing individuals to the right places, or even assisting with completing applications. It is important to equip these services with adequate resources and information so that they can effectively provide help for people who are experiencing homelessness.

Table 18. List of services helping people to find housing

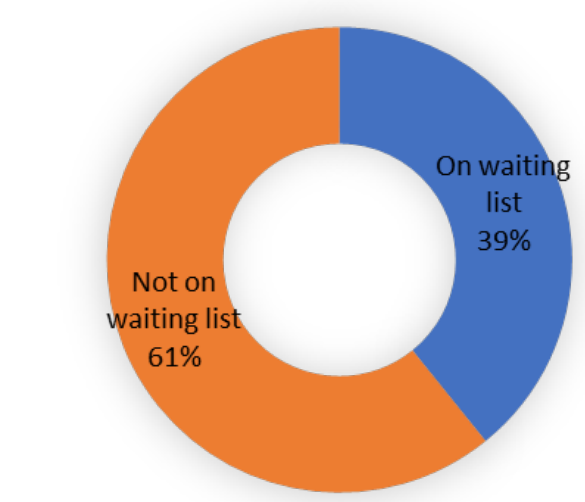
Service/Organization	Number	Percentage
Shelters	8	33.3
Drop-ins	3	12.5
Library	3	12.5
SIMFC - Saskatoon Indian & Métis Friendship Centre	3	12.5
601 Outreach Centre	1	4.2
Emergency Wellness Centre - Saskatoon Tribal Council	1	4.2
Healing Lodge	1	4.2
Mental Health Therapist	1	4.2
Prairie Harm Reduction	1	4.2
Salvation Army for Housing	1	4.2
STC - Saskatoon Tribal Council	1	4.2
Total	24	100

Waiting List for Housing

When respondents were asked whether they were on a waiting list for housing, less than half (39%) of the people who answered this question indicated that they were on a waiting list (Figure 13). A greater proportion (61%) of respondents indicated that they were not on a waiting list. This might suggest that many of the people experiencing homelessness may either be unaware of the services or face challenges in accessing these services—consistent with the emphasis on deficits of income, transportation, ID, and health and other supports that were mentioned in Figure 10: Support needed to find stable housing.

Figure 13. Respondents on waiting list to get housing

Respondents on waiting list to get housing (n=51)



Respondents who were on waiting lists (n=21) provided the name of the organisations with which they registered (Table 19). Most respondents mentioned Quint (23.8%), Saskatoon Housing Coalition (14.3%), and SaskNative Rentals (9.5%).

Table 19. Waiting list location

Organization	Number (n=21)	Percentage
Quint	5	23.8
Saskatoon Housing Coalition	3	14.3
SaskNative Rentals	2	9.5
The Bridge on 20th	1	4.8
CUMFI - Central Urban Métis Fédération Inc.	1	4.8
Davidson	1	4.8
Camponi	1	4.8
Mainstreet	1	4.8
Risa Property Management	1	4.8
Saskatoon Tribal Council - Cress Housing	1	4.8
Saskatoon Housing Authority (SHA)	1	4.8
Social Housing	1	4.8
The Lighthouse	1	4.8
STC Wellness Centre	1	4.8

Some of the people have been on the waiting list for a long time. Cumulatively, 85% of the respondents indicated that they have been on a waiting list for 60 or more days. Longer waiting periods can push people to unsafe options.

Table 20. Length of time on waiting list

Number of days	Number of responses (n=20)	Percentage
2	1	5
3	1	5
8	1	5
60	5	25
90	4	20
100	1	5
120	2	10
150	2	10
3650	2	10
1095	1	5

Concluding Thoughts of Survey Respondents

Respondents were asked if they had anything that is important to add that was not covered during the survey. Many took the opportunity to share their thoughts on the current housing situation, its symptoms and underlying causes. The responses provided were diverse (Figure 13), but they reinforce the findings that have been reported above about affordable housing / lower rentals, supports for addressing mental health, assistance in or simplifying the application process. Another striking point raised by the respondents is the need to implement practical solutions that will address the discrimination they face, that will educate the public to relocate blame for the situation, and that will make a difference in people’s lives. Limiting too quick judgment combined with sympathy and understanding could better address an issue identified by some respondents who feel that more is said about homelessness than action to solve the problem.

Figure 14. Concluding thoughts of survey respondents

- Better help with damage deposit or inspection after we leave a place
- Health support, and point in the right direction
- Mental health approved housing

- No one likes to live in poverty
- Lower rents, more options in different areas of the city
- Affordable housing, no judgemental owners
- Better follow up with clients and have sympathy
- Funding for shelters; it’s hard to get enough money
- Make sure people get housing first
- More transitional housing
- Less talk, more action

Public Perceptions of Homelessness

General questions about homelessness were asked of all the people who were intercepted on the day of the count to gauge public understanding and perceptions. The responses to these questions were obtained from 121 people who indicated that they were experiencing homelessness and 140 who were not experiencing homelessness. The results show that the community is aware of organisations that support people experiencing homelessness. The most identified organisations are the Lighthouse (58.2%), Salvation Army (29.5%), White Buffalo Youth Lodge (19.9%), and Saskatoon Friendship Inn (19.5%) (Table 21). But there was also good knowledge of many other organisations listed in the table below.

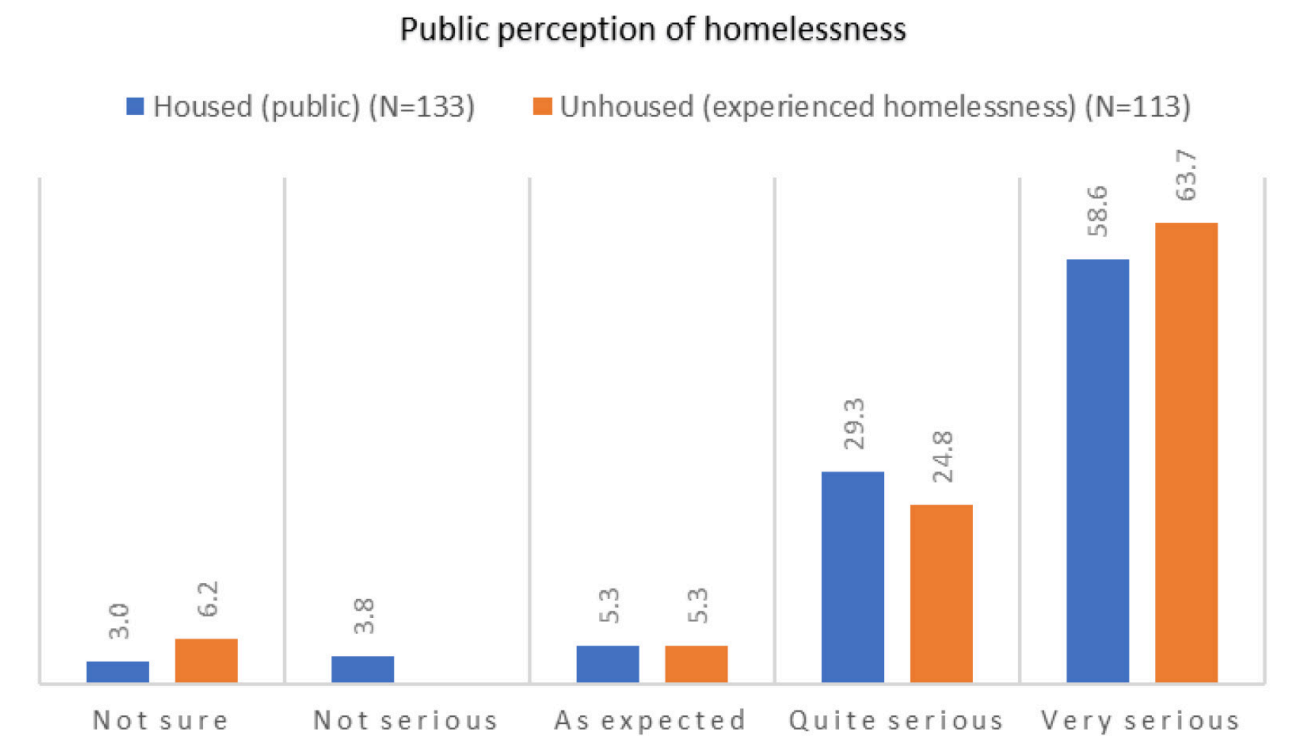
Table 21. Public awareness of organisation that help people experiencing homelessness

Organization	Number (n=261)	Percentage
The Lighthouse	152	58.2
Salvation Army	77	29.5
White Buffalo Youth Lodge	52	19.9
Saskatoon Friendship Inn	51	19.5
YWCA	45	17.2
Saskatoon Indian and Métis Friendship Centre	41	15.7
Prairie Harm Reduction	34	13
Saskatoon Food Bank & Learning Centre	34	13
YMCA	28	10.7
Saskatoon Tribal Centre - Emergency Wellness Centre	20	7.7
Saskatoon Interval House	19	7.3
CUMFI - Infinity House	19	7.3

Organization	Number (n=261)	Percentage
CUMFI - McLeod House	18	6.9
Saskatoon Crisis Nursery	9	3.4
PLWA network (Persons Living with AIDS Network)	8	3.1
The Bridge on 20th	7	2.7
EGADZ	3	1.1
Red Cross	2	0.8
City Centre Church	2	0.8

When asked if homelessness is an issue in Saskatoon, 87.9% of housed respondents said that homelessness was “very serious” or “quite serious” compared to 88.5% of those experiencing homelessness. Perceptions of homelessness has increased slightly since the Saskatoon 2018 PIT Count reporting 84% of housed and 87% of those experiencing homelessness deeming it as “very serious” or “quite serious”. Small percentages of people considered homelessness to be “not serious” or “as expected” (Figure 15).

Figure 15. Public perception of severity of homelessness



The public perception of those most at risk for experiencing homelessness are anyone and everyone, those with mental health issues, people with disabilities, youth, single parents, First Nations, Indigenous people, people with addictions, and unemployed individuals (Figure 16) —a list at odds with the findings on the significant and deeply troubling overrepresentation of Indigenous peoples.

**“People are homeless because of intergenerational trauma, depression and not fitting in.”**  
-- Respondent

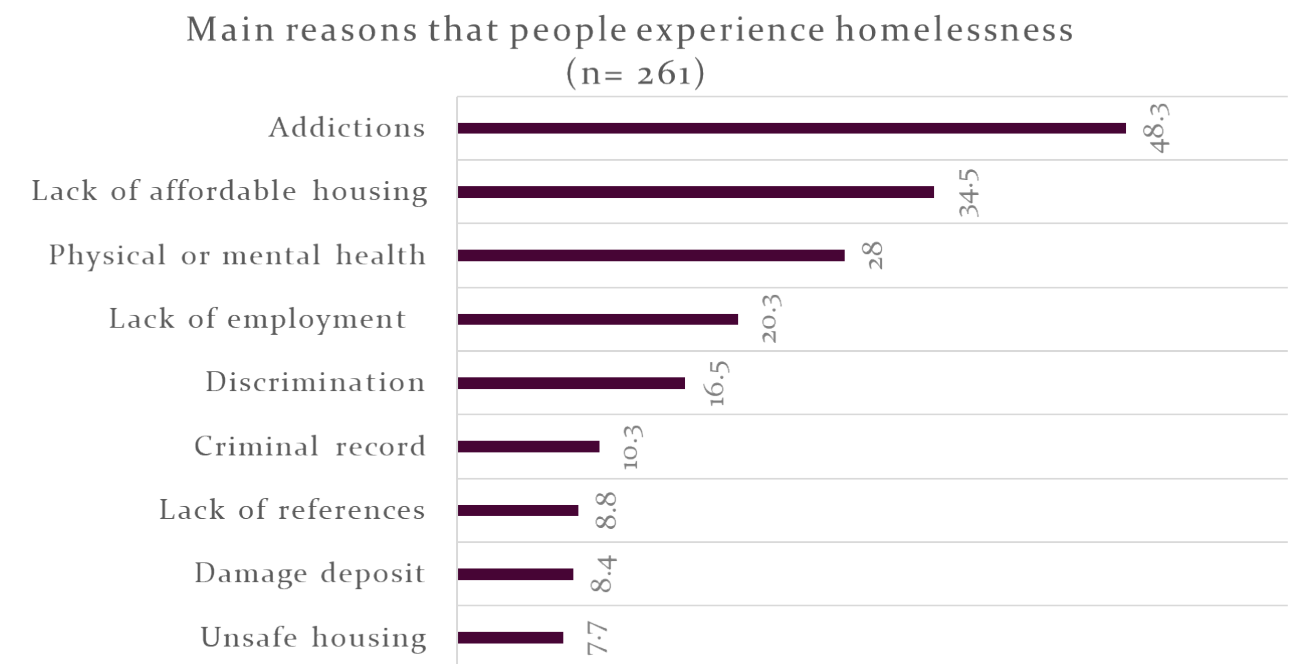
Figure 16. Perceptions of those experiencing homelessness



**“The general public doesn’t know what’s out there, I only know the Lighthouse exists because I see it in the news.” -- Respondent**

The public perceptions of the main causes of homelessness were addictions (48.3%), lack of affordable housing (34.5%), physical and mental health (28%), lack of employment (20.3%), discrimination (16.5%) and criminal record (10.3%). Lack of references, inability to pay the damage deposit, and unsafe housing were also mentioned as causes of homelessness (Figure 17).

Figure 17. Public perception of causes of homelessness



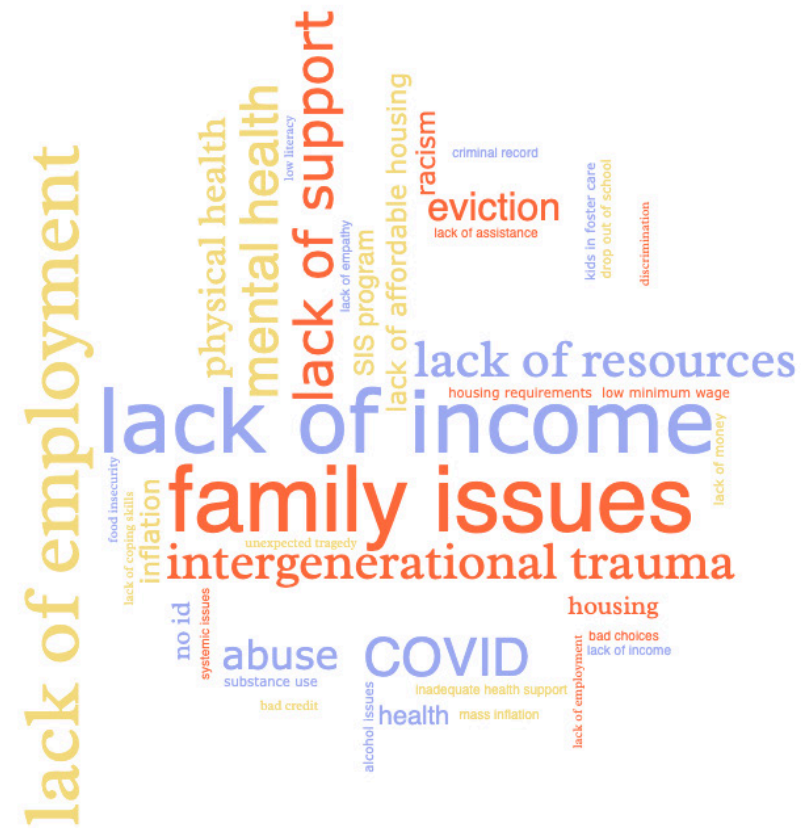
Additional causes of homelessness identified by respondents are lack of income, family issues, lack of employment, intergenerational trauma, mental health issues, COVID-19, and lack of support/resources (Figure 18). The causes identified by the public in Figure 17 and Figure 18 are similar to the reasons identified by people who were experiencing homelessness. A public awareness campaign could further strengthen the Saskatoon community's understanding of homelessness.

**“I was once there because of domestic violence, it’s hard. You feel like a dog when you are running around. When you are homeless, you walk and walk, somewhere different every day.”**

**-- Respondent**



Figure 18. Additional causes identified by respondents



Some suggested solutions for reducing homelessness from the community included affordable housing, more shelters, providing more services and programs, increased funding, mental health and addiction services, and building better housing (Figure 19). On a positive note, the community realizes the importance of increasing public awareness. The public can play a positive role in combating the challenge if they are aware of the factors leading to homelessness and the impact it has on individuals and the community at large.

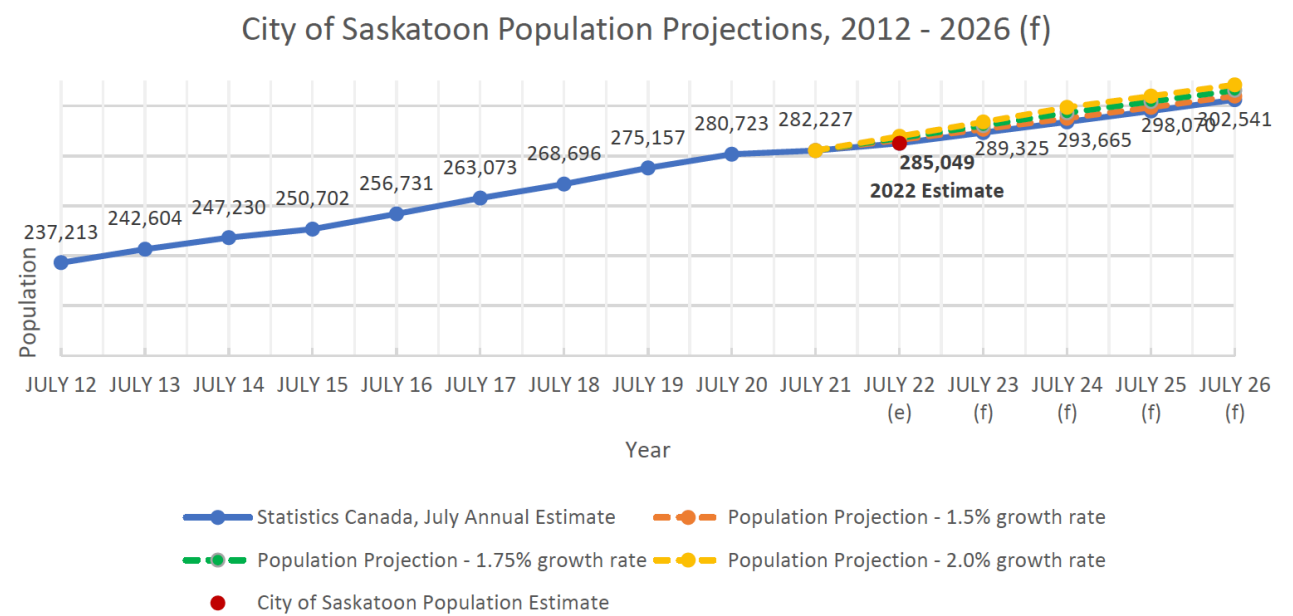
Figure 19. Suggested solutions to reducing homelessness



DISCUSSION

In the last 10 years, Saskatoon has experienced steady population growth. The City of Saskatoon (2022) reports that since 2012, the population has grown by about 47,836 with an average annual population growth rate of 1.9% (City of Saskatoon, 2022; Statistics Canada, 2022a). The population at the last PIT Count (2018) was approximately 268,696, while for 2022 it was estimated to be 285,049 (Figure 20).

Figure 20. City of Saskatoon population growth (Source: City of Saskatoon, 2022 and Statistics Canada, 2022)



Since the COVID-19 pandemic hit in early 2020, like many other cities around the world, Saskatoon has experienced stagnated population growth. In the last 2 years estimated population increases have been .5% and .9% in 2020 and 2021 respectively. With many COVID-19 restrictions being lifted, it is expected that Saskatoon’s population will steadily increase from these lows with an expectant growth rate of 1% for 2022. Something to keep an eye on moving forward is that the Saskatoon Census Metropolitan Area’s (CMA) natural increase (relative numbers of births

over deaths) since 2015 has declined from 2,416 between 2015-2016 to a low of 1,591 in 2020-2021. Some of this has undoubtedly been influenced by the pandemic with births trending lower (down to 3,870 between 2020-2021 from 4,347 in 2015-2016) and deaths trending upward (1,931 in 2015-2016 to 2,279 in 2020-2021). Net interprovincial migration has also increased steadily since 2015, with more people moving away from the CMA (1,382 in 2015-2016 to 3,462 in 2020-2021). International immigration is the main source of population growth in Saskatchewan and the Saskatoon CMA (City of Saskatoon, 2021).

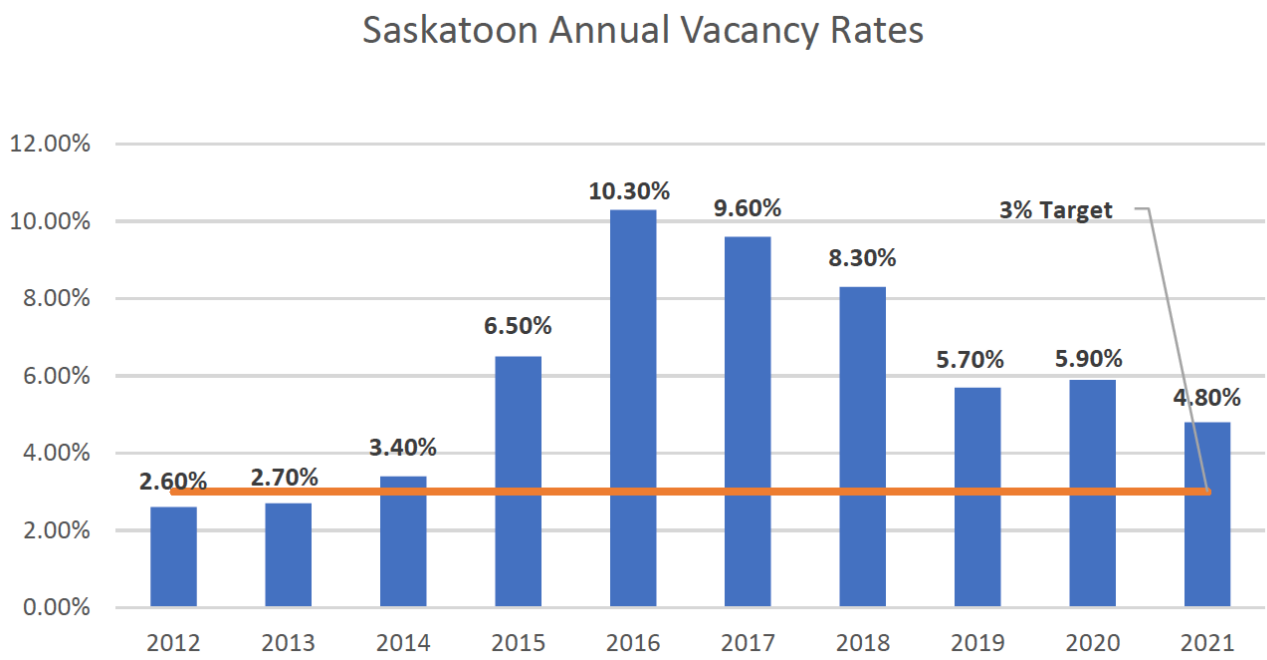
Over the last 3 years, the CMA saw close to 6,000 new housing units added to the housing stock. A large portion of this increase was driven by multi-unit dwellings (3,494) as shown in Table 22. The number of new dwellings has dropped in recent years. Previous building highs experienced during a housing boom that Saskatoon experienced, 2008-2014, have lessened as the vacancy rate increased to a high of 10.3% in 2016. Recent years have seen elevated vacancy rates, but the overall trend shows Saskatoon getting closer to balanced market (Figure 21). In 2021, the rental vacancy rate has continued to drop with a rate of 4.8% in 2021, down from 5.9% in 2020 (CMHC, 2022). It’s important to note that the vacancy rate includes market rental units and may not accurately represent affordable rental vacancy rate.

Table 22. Housing stock numbers, 2012-2022 (City of Saskatoon, 2022)

Year	2012	2013	2014	2015	2011	2017	2018	2019	2020	2021	2022(f)
Total Dwellings	3753	2980	3531	2293	1909	1915	1626	1323	1909	2640	1813
Single Unit Dwellings	2025	1658	1577	1000	1092	1078	778	639	774	965	726
Multi-Unit Dwellings	1728	1322	1954	1293	817	837	848	684	1135	1675	1088

Source: Conference Board of Canada

Figure 21. Saskatoon vacancy rates, 2012-2021 (Source CMHC Rental Market Report, February 2022)



Average rental rates in the City of Saskatoon saw a slight increase despite the decrease in the vacancy rate. Average rent for 2021 was \$1,208 (CMHC, 2022) up from the average rent of \$1,046 in 2020 (CMHC, 2022). The City of Saskatoon has continued to note affordability challenges, especially for those with low income including minimum wage earners, people with disabilities, and seniors on fixed incomes (City of Saskatoon, 2018). The 2021 statistics on sale prices (Figure 22) show the current median residential sale prices and units sold in Saskatoon. Each segment has increased substantially year over year (including \$29,793 in the lowest cost apartment condo market). This is something the City has aimed to address through investments in attainable housing units; housing that both meets household needs and costs less than 30% of gross household monthly income (see Figure 23 for 2010-2021 attainable housing units). Recent years have seen the City’s financial contributions drop for the program and targets lowered to 200 units. A revamp of the City’s Attainable Housing Program is expected to occur in 2023.

Figure 22. Median Residential Sale Price and Units Sold (Source: City of Saskatoon, 2022)

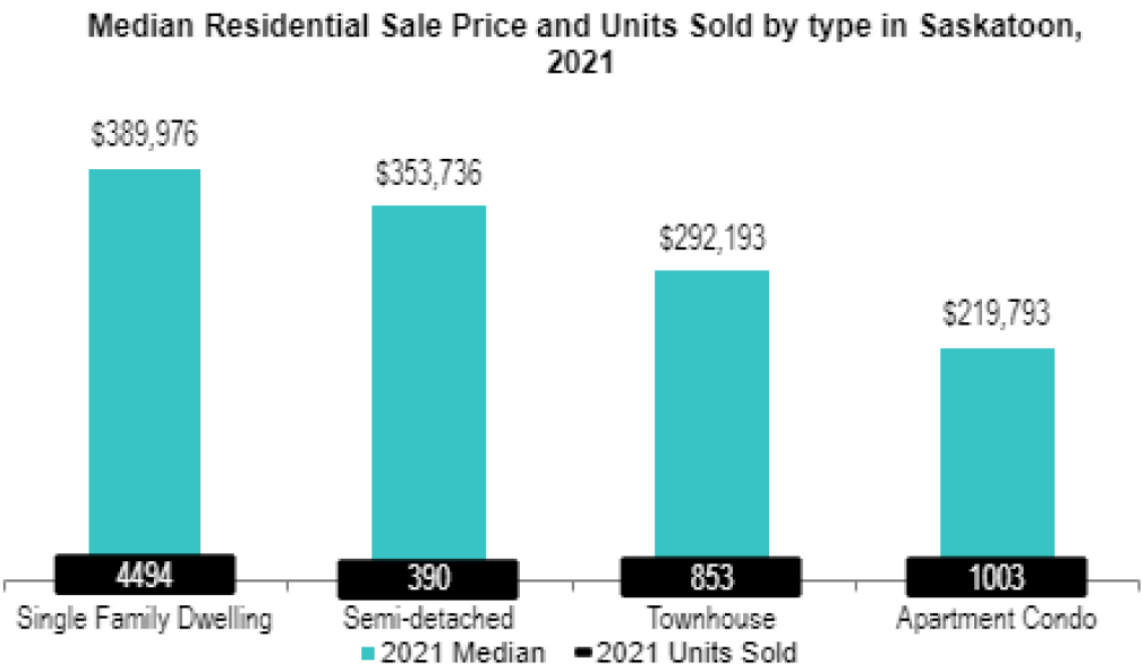
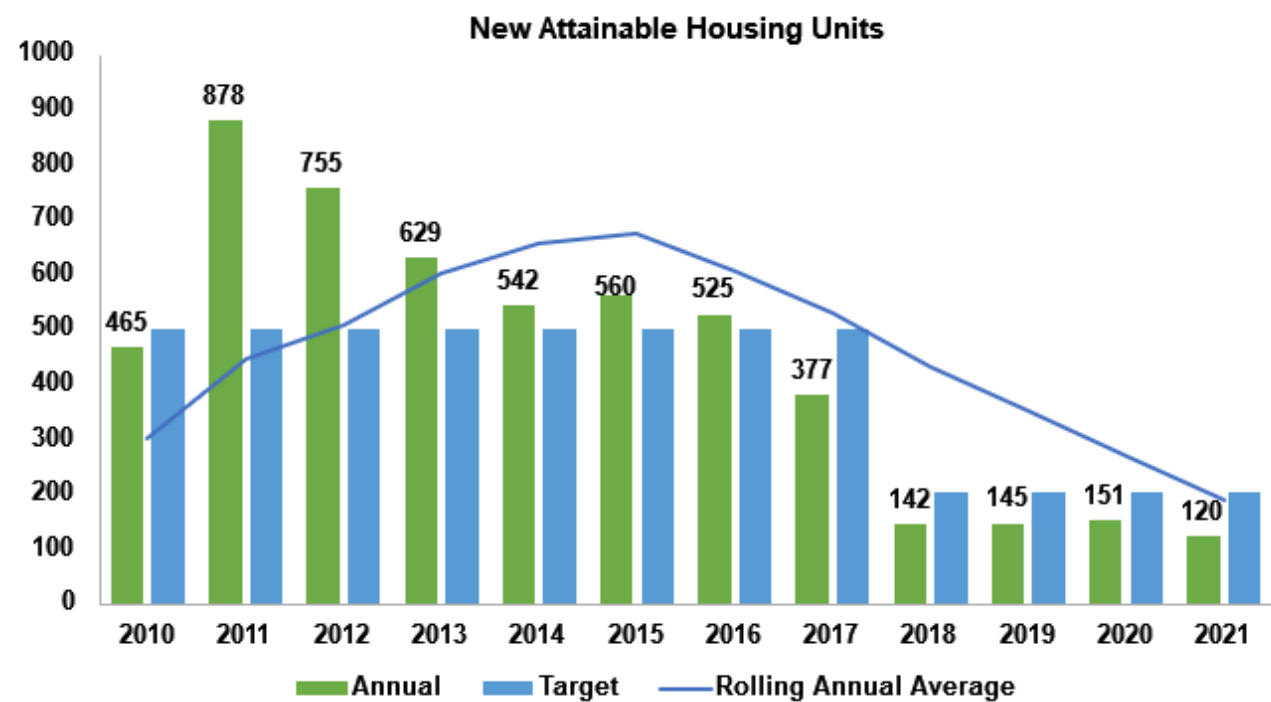


Figure 23. New attainable housing units, 2010-2021 (Source: City of Saskatoon, 2022)

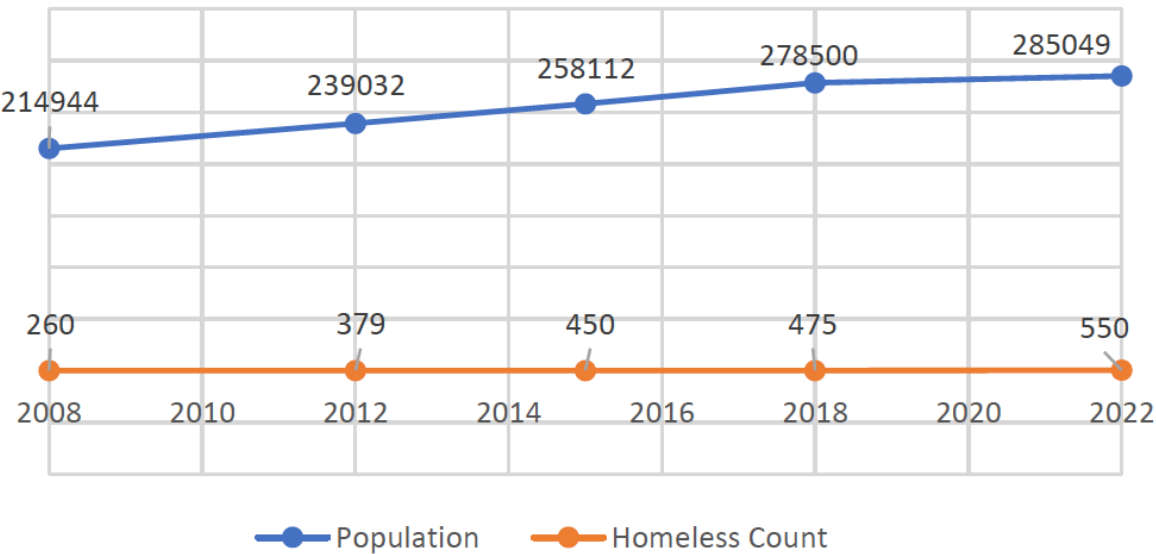


Accompanied with the increased median price of homes, there has been significant real GDP growth in 2021 for the CMA of 4.4% (with inflationary effects removed). This comes after a trying 2020 which experienced a -5.8% GDP reduction due to the COVID-19 pandemic. Increasing inflation continues to erode affordability with the consumer price index in Saskatchewan going up by 8.1% year over year (Statistics Canada, 2022b). This included a 4.9% increase in shelter costs (Statistics Canada, 2022b).

Increased capacity to respond to homelessness since the 2008, 2012, 2015, 2018, and 2022 PIT Counts need to be considered when attempting to draw comparisons across the five Saskatoon PIT Counts (see Figure 24). We also need to consider research design and scheduling changes between 2008 and 2022. Similarly, no comparisons can be drawn without understanding the limitations and the strengths of the PIT methodology.

Figure 24. Saskatoon’s population growth and PIT homelessness Counts (Source: City of Saskatoon, 2022)

Saskatoon's Population Growth and Homeless Counts



Limitations

Like all PIT homelessness counts, the 2022 Saskatoon count underestimates the number of people who are homeless at any one time. Due to the COVID-19 pandemic and a quicker turnaround time



of six weeks, the number of study areas was reduced, and the volunteer numbers declined from 150 in 2018 to 70 in 2022. To enumerate all people experiencing homelessness, it remained impossible to assign volunteers to all parts of the city for an entire day or interview all people experiencing homelessness. Some parts of the city were missed, some people did not wish to be identified as homeless, some had experienced homelessness in recent months or days but were housed on count day, and some were not possible to find.

Hence, it must be well understood when interpreting findings that a PIT methodology produces a snapshot rather than an actual or accurate number of people experiencing homelessness. Comparisons across years and jurisdictions are to be approached with caution and not as an accurate portrayal of homelessness trends despite efforts to standardize methodology, standards, definitions, screening, and questions. Longitudinal comparisons require a rigorous application of an identical methodology at each point where the research is done. While the survey instrument has been reasonably consistent over the five Saskatoon counts, other elements of the methodology such as switching seasons over time, including hidden homelessness in 2015, 2018, and 2022, adding a Magnet Event (targeting youth in 2018), and the increased ability of HIFIS to provide data in 2015, 2018, and 2022 all mean that the coverage for each survey is different and therefore makes quantitative, historical comparisons unreliable. Similarly, the 2008, 2012, and 2015 counts defined children as those 18 years of age and under and adults as those 19 and over, while the current coordinated count defined children as those 12 years and under, youth as 13-24 years old, and adults as 25-44 and older adults as 45-64 years. More significantly for a PIT methodology for homelessness counts is that the nature of the subjects means the coverage or sampling frame for research subjects can never be determined with any degree of accuracy. To illustrate this, compare the Canadian Census and National Household Survey to a PIT on homelessness. The Census/NHS are PITs; every five years the Census asks respondents to complete a survey that describes individual and household characteristics as of the Census Day. The difference of course is that the Census actually puts the survey instrument into virtually every household, a 100% sampling frame. The PIT Counts cannot achieve a known coverage.

Along with the shorter planning period (six weeks) than the 2018 count (four months), and the COVID-19 pandemic and social assistance cheque day, the time of year impacted volunteer recruitment, especially in the postsecondary sector where count day coincided with examinations. Further planning time might have supported more effective participation by local shelters and community-based organizations. More time leading up to the count is critical to raise awareness of the issue, plan promotional strategies, and ensure full participation and prioritization of the homelessness count among organizations and the public. The key to success is collaboration and participation.

## Strengths

The 2022 count continued to build on the learning from counts in Saskatoon in 2008, 2012, 2015, and 2018 while accommodating the new standards and methodology of the federal government's Reaching Home: Canada's Homelessness Strategy 2022 coordinated PIT Count—and profiting from the extensive resources on the online portal of the Community Workspace on Homelessness hosted by the Canadian Observatory on Homelessness. The homelessness count is a means for the Saskatoon community can come together in action, awareness and address homelessness-. With better understanding of the community-level service use and gaps provided by the additional contextually sensitive questions and data, organizations can respond appropriately and represent the needs in the community.

Volunteers participating in training sessions greatly strengthened research design and implementation. They helped in refining the phrasing of survey questions and clarifying their intent. Volunteer input from May 16, 2022, debriefing session further added to Saskatoon's capacity to conduct PIT Counts in the future.

When funded by the federal government, results from the counts inform decision-making and program planning at several levels. Funding allocations direct priorities and draw attention to social needs. Specifically, the national government's direction towards standardization of the homelessness survey, and continued funding for local counts will better allow comparability of findings across jurisdictions and advance the relevance and applicability of the work.

Discussing and reflecting on the findings of the research is important in order to increase public awareness and understanding of the complexity of the issue—and to reduce social stigma, while strengthening community commitment to support needed investments and change.

For all the differences across 2008, 2012, 2015, 2018 and 2022 counts (Table 23), some findings remain consistent and telling over time, reinforcing the sources and costs of factors that amplify the cycles of poverty and homelessness. All age groups are impacted by homelessness. Indigenous people are overrepresented. Service use patterns show heavy reliance on libraries, fulfilling new and important functions in communities across Canada, shelters, emergency room, hospital, Food bank, health clinics, drop-ins, as well as a range of other health services such as ambulance, mental health counselling, detox, disability services and policing, probation, parole, Community Support Officers, and Alternative Response Officers, underlining the enormous health and justice costs to all of homelessness. Reported hospital stays (404 days), ambulance use (145 times), disability services (385 times), and detox (196) and 924 days in jail in the past year were also significant.

Survey responses (55.3%) also show that most services did not help in finding housing. The major barrier remains housing affordability. Sources of income have become increasingly problematic since 2008 when formal (45%) and even full-time (70%) employment for those employed were associated with homelessness. Since then, social services or “welfare” have become the main sources of income, with informal income source (21.1%), disability benefit (16.8%), GST/HST refunds (15.8%), child and family tax benefits (6.3%), seniors’ benefits (4.2%), and veteran benefits (1.1%), underlining the importance of government programs. Family and friends are important sources at 7.4% (13% in 2012, 10% in 2015, and 3.2% in 2018) and formal employment reduced to 4.2% (full-time), 2.1% (part-time), and 3.2% (casual). In 2018, welfare was the most common source of income at (60.37%), employment was only 3.69% and informal employment was at 17.51%.

Table 23. Findings across Saskatoon PIT Homelessness Counts (2008, 2012, 2015, 2018, and 2022)

	2008	2012	2015	2018	2022
Date of the Count	May 22	September 24	June 22	April 18	April 28
Total sheltered and unsheltered	260	379	450	475	550
Outside (Adults)	17%	27%	9%	18.95%*	5.5%
Sheltered (Adults)	77%	73%	80%	56.4%**	24.4%
Total Children	12%	3%	10%	2.3%**	4.7%
Total Hidden Homelessness	-	-	35 or 7.8%	86 or 18.1%	30 or 5.5%
Total Self-Identified Indigenous Poeples	47%	66%	45%	85.5%	90.1%
On Waiting List for Housing	20%	14%	27%	26.1%	39%**

\* For the 2022 PIT Count, a child was defined within the 0-12 years range. Those from 13-24 years were defined as youth, while only those between 25 and 44 were defined as adults, those between 45 and 64 as older adults; seniors were 65+.

\*\* This rate is calculated from those who responded to question 21a of the survey, n = 51; not all those who completed part 2 of the PIT survey.

First documented in 2012, participation in the Canadian Armed Forces rose from 4.3% in 2012, 10% in 2015, 2.5%, and dropped further to 1.7% in 2022 for the military and RCMP combined.

In 2012, 38% had experienced physical violence while living outside (sheltered homeless at 28% less likely to be victimized than those living outdoors at 44% and women more likely at 48%

compared to 33% for men). In 2015, 46% had experienced violence living outdoors, while in 2018, 69.5% reported such violence (80.4% in unsheltered situations, 58.1% in sheltered situations, and 75.6% of those experiencing hidden homelessness). 2022 saw the total number reporting violence rise to 68.3% (70.8% in unsheltered situations, 70.7% in sheltered situations, and 59.1% of those experiencing hidden homelessness). High rates of victimization were reported across gender: 70% men, 63.6% women, 100% of transgender men/women, 66.7% two-spirit respondents.

Close to half of respondents in 2012 had lived with foster families during childhood (even for indoor and outdoor respondents); 16% had remained in foster care until 18 years of age. In 2015, 45% had lived with foster families during childhood while only 11% (3% outdoors and 14% indoors respondents) remained in foster care until 18 years of age. In 2018, 52.6% reported involvement with foster care or group homes and 20.3% remained there until they turned 18, while in 2022, 54.8% of those who answered the question had foster care experience (Table 24).

Table 24. Other findings across 2008-2022 PIT Counts

	2008	2012	2015	2018	2022
Veteran	-	4%	10%	2.5%	1.7%*
Victims of Physical Violence	-	38%	46%	69.5%	68.3%**
Persons Lived in Foster Care or Group Home	-	46%	45%	52.6%	54.8%***

\*Includes both military and RCMP services. Respondents n =117.

\*\* Respondents of question 17 in the survey, n =104.

\*\*\* Respondents of question 10 in the survey, n = 115.

## CONCLUSION

For a fifth time, the Saskatoon community came together to support the 2022 Point in Time Homelessness Count on April 28th—despite a short planning time and the ongoing effects of COVID-19. A snapshot of the conditions and trends of individuals at risk and experiencing homelessness, the count supports a greater understanding of the multi-faceted dimensions of this pressing national concern and the persistence of individuals experiencing homelessness, including chronic homelessness. While we have acknowledged the complexities of comparing data from previous PIT Homelessness Counts, **some findings recur with such consistency that they cannot be ignored. They underline who are most impacted by factors that exacerbate the cycles of poverty and homelessness.**

Despite some important initiatives adding to the city’s capacity to address homelessness, Saskatoon still faces significant numbers of individuals experiencing homelessness, including children, seniors, men and women, and Indigenous people. This report has **aimed to give life to the numbers** by giving voice to those experiencing homelessness so that together we can help address **costly systemic inequities** and contribute to the reconciliation narrative promoted by the Truth and Reconciliation Commission’s (2015) Calls to Action. As responses to the question about who are most impacted by homelessness make clear, **everyone is impacted and nobody escapes the human and financial costs.**

Barriers to finding permanent housing remain insufficient income and affordable housing stock, physical and mental health issues and residential school/intergenerational trauma, as well as family breakdown, discrimination, and overwhelming life stress. Transportation, lack of I.D., and family situation aggravated the housing search challenges. Service use among respondents reveals significant reliance on libraries, marking the changing role of libraries in Canadian communities, as well as shelters, emergency room, hospital, Food bank, health clinics, drop-ins, as well as ambulance, mental health counselling, detox, disability services and policing, probation, parole, Community Support Officers, and Alternative Response Officers, underlining the **enormous health and justice costs to all of homelessness.**

The public perception component added since the 2015 PIT methodology was well received. The data offered a wider perception of the prevalence, severity, sources, and possible solutions to

homelessness in Saskatoon. **Respondents across sectors understood the homelessness situation in Saskatoon to be a serious issue**, and pointed to addictions, the lack of affordable housing options, employment, and mental and physical health supports, and discrimination as key reasons individuals find themselves without permanent housing. Interestingly, public understanding of who are most impacted does not match findings in the literature or Saskatoon’s own PIT Count findings showing Indigenous peoples as disproportionately impacted. **More affordable housing** was again (as in 2015 and 2018) the top recommendation to address the homelessness issue in Saskatoon, followed by more help, shelters, better health care, and mental health services, more support and programs. If PIT Counts typically underestimate, it might be argued that efforts documented here to minimize underestimates have helped give us a fuller, more comprehensive picture in 2022—one that we can act on to rebuild our sense of community so that everyone counts in Saskatoon.

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APPENDIX A: Outdoor Survey



UNSHELTERED SCREENING TOOL

2022 Point-in-Time Homelessness Outdoor Survey

Hello, my name is \_\_\_\_\_ and I’m a volunteer for the **Saskatoon housing needs survey**. We are conducting a survey to provide better programs and services to people experiencing homelessness. The survey takes about 10 minutes to complete.

- **Participation is voluntary** and **your name will not be recorded**.
- You can choose to **skip any question** or to **stop the interview at any time**.
- Results will contribute to the understanding of homelessness across Canada and will help with research to improve services.

Screening Questions

- A. **Have you answered this survey with a person with this name tag?**  
[YES: Thank and tally]                      [NO: Go to B]
- B. **Are you willing to participate in the survey?**  
[YES: Complete Part One before Going to C]                      [NO: Thank and tally]



PART ONE: COMMUNITY QUESTIONS

1. Do you know of any organizations that help those who are experiencing homelessness in Saskatoon? (Do not read the options; may prompt.)

<input type="checkbox"/> The Lighthouse	<input type="checkbox"/> Saskatoon Indian and Métis Friendship Centre
<input type="checkbox"/> Prairie Harm Reduction	<input type="checkbox"/> Saskatoon Food Bank & Learning Centre
<input type="checkbox"/> Saskatoon Interval House	<input type="checkbox"/> Saskatoon Friendship Inn
<input type="checkbox"/> Salvation Army	<input type="checkbox"/> White Buffalo Youth Lodge
<input type="checkbox"/> YWCA	<input type="checkbox"/> PLWA Network (Persons Living with AIDS Network).
<input type="checkbox"/> YMCA	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Saskatoon Crisis Nursery	<input type="checkbox"/> Don't know
<input type="checkbox"/> CUMFI – McLeod House	<input type="checkbox"/> Decline to answer
<input type="checkbox"/> CUMFI – Infinity House	

2. Do you think homelessness is an issue in Saskatoon (on a scale of very serious to not at all serious)?

<input type="checkbox"/> Very serious	<input type="checkbox"/> Not at all serious
<input type="checkbox"/> Quite serious	<input type="checkbox"/> Not sure
<input type="checkbox"/> As expected	

3. What do you think are the main reasons that people experience homelessness? (Do not read options; may prompt.)

<input type="checkbox"/> Lack of affordable housing	<input type="checkbox"/> Lack of references
<input type="checkbox"/> Lack of employment	<input type="checkbox"/> Discrimination
<input type="checkbox"/> Physical or mental health	<input type="checkbox"/> Damage deposit
<input type="checkbox"/> Addictions	<input type="checkbox"/> Unsafe housing
<input type="checkbox"/> Criminal record	<input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/> Decline to answer

4. Who do you think are most impacted by homelessness? (prompts: single parents, people with disabilities, youth, unemployed, etc.)

5. What are important things Saskatoon can do to help reduce homelessness?

UNSHELTERED SURVEY

Survey Number:0000

Location:

–

Time:

AM/PM

Interviewer:

Contact #:

\_\_\_\_\_

C. Screening Question: Where are you staying tonight? [DO NOT READ CATEGORIES]

a. DECLINE TO ANSWER	[THANK & END SURVEY]
b. OWN APARTMENT / HOUSE	
c. SOMEONE ELSE’S PLACE	C1. Do you have access to a permanent residence where you can safely stay as long as you want? a. Yes [THANK & END] b. No (not permanent AND/OR not safe) [BEGIN SURVEY] c. Don’t Know [BEGIN SURVEY] d. Decline to answer [THANK & END]
d. MOTEL/HOTEL (SELF FUNDED)	
e. HOSPITAL	
f. TREATMENT CENTRE	
g. JAIL, PRISON, REMAND CENTRE	
h. HOMELESS SHELTER (EMERGENCY, FAMILY OR DOMESTIC VIOLENCE SHELTER)	[BEGIN SURVEY]
i. HOTEL/MOTEL (FUNDED BY CITY OR HOMELESS PROGRAM)	
j. TRANSITIONAL SHELTER/HOUSING	
k. UNSHELTERED IN A PUBLIC SPACE (E.G. STREET, PARK, BUS SHELTER, FOREST) ENCAMPMENT OR ABANDONED BUILDING	
l. VEHICLE (CAR, VAN, RV, TRUCK, BOAT)	
m. UNSURE: INDICATE PROBABLE LOCATION _____ (b. - l.)	

▪ Thank you for agreeing to take part in the survey. Please note that you will receive a transit pass as a thank you for your participation.



## BEGIN SURVEY: PART TWO CORE QUESTIONS

1. Do you have family members or anyone else who is staying with you tonight? [Indicate survey number for partners. Check all that apply]

<input type="checkbox"/> NONE		<input type="checkbox"/> OTHERS (Can include other family or friends)							
<input type="checkbox"/> PARTNER - Survey #: _____		<input type="checkbox"/> DECLINE TO ANSWER							
<input type="checkbox"/> CHILD(REN)/DEPENDENT(S)  [indicate gender and age for each]	GENDER	1	2	3	4	5	6	7	8
	AGE								

- 2. How old are you? [OR] What year were you born? [If unsure, ask for best estimate]**

○ AGE (in years) \_\_\_\_\_ **OR** YEAR BORN \_\_\_\_\_      ○ DON'T KNOW      ○ DECLINE TO ANSWER

➔ For this survey, “homelessness” means any time when 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).

- 3. How old were you the first time you experienced homelessness?**

☐ AGE (in years)\_\_\_\_\_ ☐ DON'T KNOW ☐ DECLINE TO ANSWER

4. In total, for *how much time* have you experienced homelessness over the PAST YEAR (the last 12 months)? [Does not need to be exact. Best estimate.]

☐ LENGTH \_\_\_\_\_ DAYS | WEEKS | MONTHS      ☐ DON'T KNOW      ☐ DECLINE TO ANSWER

- 5. Have you stayed in a homeless shelter in the past year? For example, (COMMUNITY NOTE:**

*Include examples of emergency shelters and extreme weather shelters for interviewers to provide).*

☐ YES                      ☐ NO                      ☐ DON'T KNOW                      ☐ DECLINE TO ANSWER

- 6. Did you come to Canada as an immigrant, refugee or a refugee claimant (made a refugee claim after coming to Canada)?**

<ul style="list-style-type: none"> <li>○ YES, IMMIGRANT -----&gt;</li> <li>○ YES, REFUGEE-----&gt;</li> <li>○ YES, REFUGEE CLAIMANT-----&gt;</li> <li>○ NO</li> <li>○ DON'T KNOW</li> <li>○ DECLINE TO ANSWER</li> </ul>	<p><b><u>If YES:</u></b></p> <p><b>How long have you been in Canada?</b></p> <ul style="list-style-type: none"> <li>○ LENGTH: _____ DAYS   WEEKS   MONTHS   YEARS</li> <li>○ OR DATE: ____/____/____ DAY / MONTH / YEAR</li> <li>○ DON'T KNOW</li> <li>○ DECLINE TO ANSWER</li> </ul>
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- 7. How long have you been in Saskatoon?**

<input type="checkbox"/> <u>LENGTH</u> _____ <u>DAYS</u> / <u>WEEKS</u> / <u>MONTHS</u> / <u>YEARS</u>	<input type="checkbox"/> <u>ALWAYS</u> <u>BEEN</u> <u>HERE</u>	<input type="checkbox"/> <u>DON'T</u> <u>KNOW</u>	<input type="checkbox"/> <u>DECLINE TO</u> <u>ANSWER</u>
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**If length is indicated, where did you live before you came here?**

☐ Indicate Community: \_\_\_\_\_ | PROVINCE/COUNTRY: \_\_\_\_\_

☐ DECLINE TO ANSWER

8. (a) Do you identify as First Nations (with or without status), Métis, or Inuit, or do you have North American Indigenous ancestry? [If yes, please specify]

o YES, FIRST NATIONS	o YES, MÉTIS	o NO	o DECLINE TO ANSWER
o YES, INUIT	o YES, INDIGENOUS ANCESTRY	o DON'T KNOW	

- 8. (b) In addition to your response in the question above, do you identify with any of the racial identities listed below?** [Show or read list/ Select all that apply]

- ARAB (e.g. SYRIAN, EGYPTIAN, YEMENI)
- ASIAN-EAST (e.g. CHINESE, KOREAN, JAPANESE)
- ASIAN-SOUTH-EAST (e.g. FILIPINO, VIETNAMESE, CAMBODIAN, MALAYSIAN, LAOTIAN )
- ASIAN-SOUTH OR INDO-CARIBBEAN (e.g. INDIAN, PAKISTANI, SRI LANKAN, INDO-GUYANESE, INDO-TRINIDADIAN)
- ASIAN-WEST (e.g. IRANIAN, AFGHAN)
- BLACK-CANADIAN/AMERICAN
- BLACK-AFRICAN (e.g. GHANAIAAN, ETHIOPIAN, NIGERIAN)
- BLACK-AFRO-CARIBBEAN OR AFRO-LATINX (e.g. JAMAICAN, HAITIAN, AFRO-BRAZILIAN)
- LATIN AMERICAN (e.g. BRAZILIAN, MEXICAN, CHILEAN, CUBAN)
- WHITE (e.g. EUROPEAN, FRENCH, UKRAINIAN, EURO-LATINX)
- NOT LISTED (PLEASE SPECIFY): \_\_\_\_\_
- IDENTIFY AS INDIGENOUS ONLY
- DON'T KNOW
- DECLINE TO ANSWER

- 9. Have you ever served in the Canadian Military or RCMP?** [Military includes Canadian Navy, Army, or Air Force]

o YES, MILITARY	o BOTH MILITARY AND RCMP	o DON'T KNOW
o YES, RCMP	o NO	o DECLINE TO ANSWER

- 10. As a child or youth, were you ever in foster care or in a youth group home (*COMMUNITY NOTE: include any other Provincial child welfare programs*)?** [Note: This question applies specifically to child welfare programs.]

☐ YES ☐ NO ☐ DON'T KNOW ☐ DECLINE TO ANSWER

- 11. Do you identify as having any of the following health challenges at this time:**

ILLNESS OR MEDICAL CONDITION [e.g. diabetes, arthritis, TB, HIV]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
PHYSICAL LIMITATION [e.g. issues with mobility, physical abilities or dexterity, difficulty moving or walking]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
LEARNING OR COGNITIVE LIMITATION [e.g. dyslexia, autism spectrum disorder or as a result of ADHD or an acquired brain injury]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
MENTAL HEALTH ISSUE [e.g. depression, post-traumatic stress disorder (PTSD), bipolar disorder]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
SUBSTANCE USE ISSUE [e.g. tobacco, alcohol, opiates]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
RESIDENTIAL SCHOOL/INTERGENERATIONAL TRAUMA	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER

12. What gender do you identify with? [Show list.]

<input type="radio"/> MAN	<input type="radio"/> TRANS WOMAN	<input type="radio"/> NOT LISTED: _____
<input type="radio"/> WOMAN	<input type="radio"/> TRANS MAN	<input type="radio"/> DON'T KNOW
<input type="radio"/> TWO-SPIRIT	<input type="radio"/> NON-BINARY (GENDERQUEER)	<input type="radio"/> DECLINE TO ANSWER

13. How do you describe your sexual orientation, for example straight, gay, lesbian? [Show list.]

<input type="radio"/> STRAIGHT/HETEROSEXUAL	<input type="radio"/> BISEXUAL	<input type="radio"/> ASEXUAL	<input type="radio"/> NOT LISTED: _____
<input type="radio"/> GAY	<input type="radio"/> TWO-SPIRIT	<input type="radio"/> QUESTIONING	<input type="radio"/> DON'T KNOW
<input type="radio"/> LESBIAN	<input type="radio"/> PANSEXUAL	<input type="radio"/> QUEER	<input type="radio"/> DECLINE TO ANSWER

14. What happened that caused you to lose your housing most recently? [Do not read the options. Check all that apply. “Housing” does not include temporary arrangements (e.g., couch surfing) or shelter stays. Follow up for the reason if the respondent says “eviction” or that they “chose to leave”.]

A: HOUSING AND FINANCIAL ISSUES	B: INTERPERSONAL AND FAMILY ISSUES	C: HEALTH OR CORRECTIONS
<input type="checkbox"/> NOT ENOUGH INCOME FOR HOUSING (E.G. LOSS OF BENEFIT, INCOME, OR JOB)	<input type="checkbox"/> CONFLICT WITH: SPOUSE / PARTNER	<input type="checkbox"/> PHYSICAL HEALTH ISSUE
<input type="checkbox"/> UNFIT/UNSAFE HOUSING CONDITION	<input type="checkbox"/> CONFLICT WITH: PARENT / GUARDIAN	<input type="checkbox"/> MENTAL HEALTH ISSUE
<input type="checkbox"/> BUILDING SOLD OR RENOVATED	<input type="checkbox"/> CONFLICT WITH: OTHER (_____)	<input type="checkbox"/> SUBSTANCE USE ISSUE
<input type="checkbox"/> OWNER MOVED IN	<input type="checkbox"/> EXPERIENCED ABUSE BY: SPOUSE / PARTNER	<input type="checkbox"/> HOSPITALIZATION OR TREATMENT PROGRAM
<input type="checkbox"/> LANDLORD/TENANT CONFLICT	<input type="checkbox"/> EXPERIENCED ABUSE BY: PARENT / GUARDIAN	<input type="checkbox"/> INCARCERATION (JAIL OR PRISON)
<input type="checkbox"/> COMPLAINT (e.g. PETS/NOISE/DAMAGE)	<input type="checkbox"/> EXPERIENCED ABUSE BY: OTHER (_____)	
<input type="checkbox"/> EXPERIENCED DISCRIMINATION	<input type="checkbox"/> DEPARTURE OF FAMILY MEMBER	
<input type="checkbox"/> LEFT THE COMMUNITY/RELOCATED		
<input type="checkbox"/> OTHER REASON: _____	<input type="checkbox"/> DON'T KNOW	<input type="checkbox"/> DECLINE TO ANSWER

Was your most recent housing loss related to the COVID-19 pandemic?

<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW	<input type="checkbox"/> DECLINE TO ANSWER
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How long ago did that happen (that you lost your housing most recently? (Best estimate)

<input type="checkbox"/> LENGTH _____ DAYS   WEEKS   MONTHS   YEARS	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
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15. Where do you get your money from? [Reminder that this survey is anonymous. Read list and check all that apply]

<input type="checkbox"/> FULL TIME EMPLOYMENT	<input type="checkbox"/> EMPLOYMENT INSURANCE	<input type="checkbox"/> CHILD AND FAMILY TAX BENEFITS
<input type="checkbox"/> PART TIME EMPLOYMENT	<input type="checkbox"/> DISABILITY BENEFIT [Name of PROV. DISABILITY BENEFIT]	<input type="checkbox"/> GST/HST REFUND
<input type="checkbox"/> CASUAL EMPLOYMENT (e.g. CONTRACT WORK)	<input type="checkbox"/> SENIORS BENEFITS (e.g. CPP/OAS/GIS)	<input type="checkbox"/> MONEY FROM A SERVICE AGENCY
<input type="checkbox"/> INFORMAL INCOME SOURCES (e.g. BOTTLE RETURNS, PANHANDLING)	<input type="checkbox"/> WELFARE/SOCIAL ASSISTANCE [Prov. Benefit]	<input type="checkbox"/> OTHER SOURCE: _____
<input type="checkbox"/> MONEY FROM FAMILY/FRIENDS	<input type="checkbox"/> VETERAN/VAC BENEFITS	<input type="checkbox"/> NO INCOME
		<input type="checkbox"/> DECLINE TO ANSWER

PART TWO ADDITIONAL QUESTIONS

16.What is the highest level of education you completed?

<input type="checkbox"/> Primary/Elementary School	<input type="checkbox"/> Post-Secondary Graduated
<input type="checkbox"/> Some High School	<input type="checkbox"/> Graduate Degree (e.g: Masters, PhD)
<input type="checkbox"/> High School Graduate/GED	<input type="checkbox"/> Don’t Know
<input type="checkbox"/> Some Post-Secondary	<input type="checkbox"/> Decline to answer

17. Have you been a victim of violence while experiencing homelessness? (This can include any encounter that they consider to be violent)

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don’t know	<input type="checkbox"/> Decline to answer
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18. Which of the following would help you find stable, affordable housing? (Read list and ask yes or no for each question and check their response to each)

<input type="checkbox"/> More money
<input type="checkbox"/> Help getting ID (e.g., health card)
<input type="checkbox"/> Help finding an affordable place
<input type="checkbox"/> Help with housing applications
<input type="checkbox"/> Help with immigration issues
<input type="checkbox"/> Harm reduction supports (e.g., methadone, needle exchange, alcohol or drug treatment)
<input type="checkbox"/> Transportation to see housing
<input type="checkbox"/> Help with legal issues
<input type="checkbox"/> Help addressing your health needs
<input type="checkbox"/> Help with disability accessibility
<input type="checkbox"/> Manage alcohol issues
<input type="checkbox"/> Mental health supports
<input type="checkbox"/> Cultural supports
<input type="checkbox"/> Services in a language other than English
Other (specify): _____

19. In the past year (12 months) have you used these services: [ASK RESPONDENTS TO GIVE THEIR ESTIMATE OF HOW MANY TIMES]

1. Emergency room	Y	N	#	Times
2. Hospital	Y	N	#	Times
Days you have spent hospitalized				
3. Police (Tickets, arrests, searches)	Y	N	#	Times
4. Prison/ jail	Y	N	#	Times
Days you have spent in prison/jail				
5. Probation/ Parole	Y	N	#	Times
6. Community Support Officers	Y	N	#	Times
7. Alternate Response Officers	Y	N	#	Times
8. Ambulance	Y	N	#	Times
9. Library	Y	N	#	Times
10. Health clinics	Y	N	#	Times
11. Job training/Job supports	Y	N	#	Times
12. Detox	Y	N	#	Times
13. Mental health (counselling, treatment)	Y	N	#	Times
14. Shelters	Y	N	#	Times

15. Children and family supports	Y	N	#	Times
16. Elder services	Y	N	#	Times
17. Disability services	Y	N	#	Times
18. Newcomer services	Y	N	#	Times
19. Drop-ins	Y	N	#	Times
20. Food bank	Y	N	#	Times
21. Services that help you get ID	Y	N	#	Times
22. Social Housing/ Housing placement	Y	N	#	Times
23. Churches	Y	N	#	Times
24. Charities	Y	N	#	Times
Other (specify):	Y	N	#	Times
<input type="checkbox"/> None of the above				
<input type="checkbox"/> Decline to answer				

20 a. Of the services you have used, are any helping you find housing?

☐ Yes

☐ No

☐ Don't know

☐ Decline to answer

20 b. If yes, please enter code or list (if other):

21 a. Are you currently on a waiting list for housing?

☐ Yes

☐ No

☐ Don't know

☐ Decline to answer

21 b. If yes, where?

21c. If yes, how long have you been on the waiting list(s)?

<input type="checkbox"/> Length ____days/weeks/months/years	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> Decline to answer
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22. Is there anything else you would like to add that we did not talk about that is important and would make your own or other people's housing situation better?

Volunteer Closing Script (Please read):

That concludes our survey. Thank you for participating. Your answers will help service providers in the city of Saskatoon better plan services for people experiencing homelessness. (*Leave pocket card with information about services*).

I am leaving you with a pocket card with information about agencies that may help you to get housing or other services if you're interested in contacting them.

Thank you again for your assistance. Here is the transit pass to thank you for completing the survey and sharing your knowledge and experience.

APPENDIX B: Tally Sheet

UNSHELTERED TALLY SHEET

Area: \_\_\_\_\_ Time: \_\_\_\_\_  
\_\_\_\_\_to\_\_\_\_\_Interviewer: \_\_\_\_\_ Contact  
phone #: \_\_\_\_\_

Instructions: For those who are *not surveyed*, please fill in the sheet below indicating the reason. For those who DECLINE or are OBSERVED only, but who are clearly homeless, please also indicate the reason you believe they are homeless (e.g., asleep outside with belongings).

#	Location (e.g., building, park, nearest intersection)	Reason not Surveyed			*Observed Homelessness	
		Declined*	Already Responded	Screened Out (Response to C)	Observed*	Observed Homeless
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

APPENDIX C: Indoor Shelter Survey



SHELTERED SCREENING TOOL

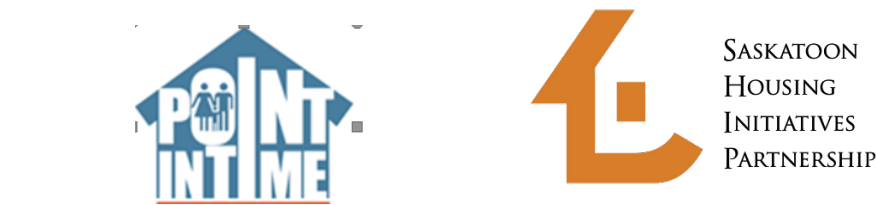
**2022 Saskatoon Point-in-Time Homelessness Shelter Survey**

Hello, my name is \_\_\_\_\_ and I’m a volunteer for the **Saskatoon housing needs survey**. We are conducting a survey to provide better programs and services to people experiencing homelessness. The survey takes about 10 minutes to complete.

- **Participation is voluntary** and **your name will not be recorded**.
- You can choose to **skip any question** or to **stop the interview at any time**.
- Results will contribute to the understanding of homelessness across Canada, and will help with research to improve services.

Screening Questions

- A. Have you answered this survey with a person with this (*identifier*)?**  
[YES: Thank and tally]                      [NO: Go to B]
- B. Are you willing to participate in the survey?**  
[YES: Complete Part One before Going to screening question C]                      [NO: Thank and tally]



PART ONE: COMMUNITY QUESTIONS

**1. Do you know of any organizations that help those who are experiencing homelessness in Saskatoon?** (Do not read the options; may prompt.)

<input type="checkbox"/> The Lighthouse	<input type="checkbox"/> Saskatoon Indian and Métis Friendship Centre
<input type="checkbox"/> Prairie Harm Reduction	<input type="checkbox"/> Saskatoon Food Bank & Learning Centre
<input type="checkbox"/> Saskatoon Interval House	<input type="checkbox"/> Saskatoon Friendship Inn
<input type="checkbox"/> Salvation Army	<input type="checkbox"/> White Buffalo Youth Lodge
<input type="checkbox"/> YWCA	<input type="checkbox"/> PLWA Network (Persons Living with AIDS Network).
<input type="checkbox"/> YMCA	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Saskatoon Crisis Nursery	<input type="checkbox"/> Don't know
<input type="checkbox"/> CUMFI – McLeod House	<input type="checkbox"/> Decline to answer
<input type="checkbox"/> CUMFI – Infinity House	

**2. Do you think homelessness is an issue in Saskatoon** (on a scale of very serious to not at all serious)?

<input type="checkbox"/> Very serious	<input type="checkbox"/> Not at all serious
<input type="checkbox"/> Quite serious	<input type="checkbox"/> Not sure
<input type="checkbox"/> As expected	

**3. What do you think are the main reasons that people experience homelessness?** (Do not read options; may prompt.)

<input type="checkbox"/> Lack of affordable housing	<input type="checkbox"/> Lack of references
<input type="checkbox"/> Lack of employment	<input type="checkbox"/> Discrimination
<input type="checkbox"/> Physical or mental health	<input type="checkbox"/> Damage deposit
<input type="checkbox"/> Addictions	<input type="checkbox"/> Unsafe housing
<input type="checkbox"/> Criminal record	<input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/> Decline to answer

- 4. Who do you think are most impacted by homelessness?** (*prompts: single parents, people with disabilities, youth, unemployed, etc.*)
- 5. What are important things Saskatoon can do to help reduce homelessness?**



SHELTERED SURVEY

Survey Number: 2000

Facility/Program Name:	—	Time:
Interviewer:		Contact #:

Screening Question

C. Are you staying here tonight?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
[BEGIN SURVEY & NOTE h. - j. ON SURVEY, AS APPROPRIATE]	[ASK RESPONDENT TO SPECIFY LOCATION]

a. DECLINE TO ANSWER b. OWN APARTMENT / HOUSE	} [THANK & END SURVEY]	
c. SOMEONE ELSE’S PLACE d. MOTEL/HOTEL (SELF FUNDED) e. HOSPITAL f. TREATMENT CENTRE g. JAIL, PRISON, REMAND CENTRE		
C1. Do you have access to a permanent residence where you can safely stay as long as you want?		
a. Yes [THANK & END]		
b. No (not permanent AND/OR not safe) [BEGIN SURVEY]		
c. Don’t Know [BEGIN SURVEY]		
d. Decline to answer [THANK & END]		
h. HOMELESS SHELTER (EMERGENCY, FAMILY OR DOMESTIC VIOLENCE SHELTER) i. HOTEL/MOTEL (FUNDED BY CITY OR HOMELESS PROGRAM) j. TRANSITIONAL SHELTER/HOUSING k. UNSHELTERED IN A PUBLIC SPACE (E.G. STREET, PARK, BUS SHELTER, FOREST) ENCAMPMENT OR ABANDONED BUILDING l. VEHICLE (CAR, VAN, RV, TRUCK, BOAT) m. UNSURE: INDICATE PROBABLE LOCATION (b. - l.)		} [BEGIN SURVEY]

▪ Thank you for agreeing to take part in the survey. Please note that you will receive a transit pass as a thank you for your participation.

BEGIN SURVEY

1. Do you have family members or anyone else who is staying with you tonight? [Indicate survey numbers for partners. Check all that apply]

<input type="checkbox"/> NONE	<input type="checkbox"/> OTHERS (Can include other family or friends)							
<input type="checkbox"/> PARTNER - Survey #:	<input type="checkbox"/> DECLINE TO ANSWER							
<input type="checkbox"/> CHILD(REN)/DEPENDENT(S)	1	2	3	4	5	6	7	8
[indicate gender and age for each]								

2. How old are you? [OR] What year were you born? [If unsure, ask for best estimate]

<input type="radio"/> AGE (in years) _____	<input type="radio"/> OR YEAR BORN _____	<input type="radio"/> DON’T KNOW	<input type="radio"/> DECLINE TO ANSWER
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➔ For this survey, “homelessness” means any time when 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).

3. How old were you the first time you experienced homelessness?

<input type="checkbox"/> AGE in years _____	<input type="checkbox"/> DON’T KNOW	<input type="checkbox"/> DECLINE TO ANSWER
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4. In total, for how much time have you experienced homelessness over the PAST YEAR (the last 12 months)? [Does not need to be exact. Best estimate.]

<input type="checkbox"/> LENGTH _____ DAYS   WEEKS   MONTHS	<input type="radio"/> DON’T KNOW	<input type="radio"/> DECLINE TO ANSWER
---	----------------------------------	---

5. Have you stayed in a homeless shelter in the past year? For example, (COMMUNITY NOTE: Include examples of emergency shelters and extreme weather shelters for interviewers to provide).

<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON’T KNOW	<input type="checkbox"/> DECLINE TO ANSWER
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6. Did you come to Canada as an immigrant, refugee or a refugee claimant (made a refugee claim after coming to Canada)?

<input type="radio"/> YES, IMMIGRANT -----> <input type="radio"/> YES, REFUGEE-----> <input type="radio"/> YES, REFUGEE CLAIMANT-----> <input type="radio"/> NO <input type="radio"/> DON’T KNOW <input type="radio"/> DECLINE TO ANSWER	<b>If YES:</b> <b>How long have you been in Canada?</b> <input type="radio"/> LENGTH: _____ DAYS   WEEKS   MONTHS   YEARS OR DATE: ____/____/____ DAY / MONTH / YEAR <input type="radio"/> DON’T KNOW <input type="radio"/> DECLINE TO ANSWER
---	--

7. How long have you been in Saskatoon)?

<input type="checkbox"/> LENGTH _____ DAYS / WEEKS / MONTHS / YEARS	<input type="checkbox"/> ALWAYS BEEN HERE	<input type="checkbox"/> DON’T KNOW	<input type="checkbox"/> DECLINE TO ANSWER
---	---	-------------------------------------	--

If length is indicated, where did you live before you came here?

<input type="checkbox"/> INDICATE COMMUNITY _____ AND PROVINCE/COUNTRY
<input type="checkbox"/> DECLINE TO ANSWER

8. (a) Do you identify as First Nations (with or without status), Métis, or Inuit, or do you have North American Indigenous ancestry? [If yes, please specify]

<input type="radio"/> YES, FIRST NATIONS	<input type="radio"/> YES, MÉTIS	<input type="radio"/> NO	<input type="radio"/> DECLINE TO ANSWER
<input type="radio"/> YES, INUIT	<input type="radio"/> YES, INDIGENOUS ANCESTRY	<input type="radio"/> DON'T KNOW	

8. (b) In addition to your response in the question above, do you identify with any of the racial identities listed below? [Show or read list/ Select all that apply]

<input type="radio"/> ARAB (e.g. SYRIAN, EGYPTIAN, YEMENI)
<input type="radio"/> ASIAN-EAST (e.g. CHINESE, KOREAN, JAPANESE)
<input type="radio"/> ASIAN-SOUTH-EAST (e.g. FILIPINO, VIETNAMESE, CAMBODIAN, MALAYSIAN, LAOTIAN )
<input type="radio"/> ASIAN-SOUTH OR INDO-CARIBBEAN (e.g. INDIAN, PAKISTANI, SRI LANKAN, INDO-GUYANESE, INDO-TRINIDADIAN)
<input type="radio"/> ASIAN-WEST (e.g. IRANIAN, AFGHAN)
<input type="radio"/> BLACK-CANADIAN/AMERICAN
<input type="radio"/> BLACK-AFRICAN (e.g. GHANAIAN, ETHIOPIAN, NIGERIAN)
<input type="radio"/> BLACK-AFRO-CARIBBEAN OR AFRO-LATINX (e.g. JAMAICAN, HAITIAN, AFRO-BRAZILIAN)
<input type="radio"/> LATIN AMERICAN (e.g. BRAZILIAN, MEXICAN, CHILEAN, CUBAN)
<input type="radio"/> WHITE (e.g. EUROPEAN, FRENCH, UKRAINIAN, EURO-LATINX)
<input type="radio"/> NOT LISTED (PLEASE SPECIFY): _____
<input type="radio"/> IDENTIFY AS INDIGENOUS ONLY
<input type="radio"/> DON'T KNOW
<input type="radio"/> DECLINE TO ANSWER

9. Have you ever served in the Canadian Military or RCMP? [Military includes Canadian Navy, Army, or Air Force]

<input type="radio"/> YES, MILITARY	<input type="radio"/> BOTH MILITARY AND RCMP	<input type="radio"/> DON'T KNOW
<input type="radio"/> YES, RCMP	<input type="radio"/> NO	<input type="radio"/> DECLINE TO ANSWER

10. As a child or youth, were you ever in foster care or in a youth group home (COMMUNITY NOTE: include any other Provincial child welfare programs)? [Note: This question applies specifically to child welfare programs.]

<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW	<input type="checkbox"/> DECLINE TO ANSWER
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11. Do you identify as having any of the following health challenges at this time:

ILLNESS OR MEDICAL CONDITION [e.g. diabetes, arthritis, TB, HIV]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
PHYSICAL LIMITATION [e.g. issues with mobility, physical abilities or dexterity, difficulty moving or walking]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
LEARNING OR COGNITIVE LIMITATION [e.g. dyslexia, autism spectrum disorder or as a result of ADHD or an acquired brain injury]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
MENTAL HEALTH ISSUE [e.g. depression, post-traumatic stress disorder (PTSD), bipolar disorder]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
SUBSTANCE USE ISSUE [e.g. tobacco, alcohol, opiates]	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
RESIDENTIAL SCHOOL/INTERGENERATIONAL TRAUMA	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER

12. What gender do you identify with? [Show list.]

<input type="radio"/> MAN	<input type="radio"/> TRANS WOMAN	<input type="radio"/> NOT LISTED: _____
<input type="radio"/> WOMAN	<input type="radio"/> TRANS MAN	<input type="radio"/> DON'T KNOW
<input type="radio"/> TWO-SPIRIT	<input type="radio"/> NON-BINARY (GENDERQUEER)	<input type="radio"/> DECLINE TO ANSWER

13. How do you describe your sexual orientation, for example straight, gay, lesbian? [Show list.]

<input type="radio"/> STRAIGHT/HETEROSEXUAL	<input type="radio"/> BISEXUAL	<input type="radio"/> ASEXUAL	<input type="radio"/> NOT LISTED: _____
<input type="radio"/> GAY	<input type="radio"/> TWO-SPIRIT	<input type="radio"/> QUESTIONING	<input type="radio"/> DON'T KNOW
<input type="radio"/> LESBIAN	<input type="radio"/> PANSEXUAL	<input type="radio"/> QUEER	<input type="radio"/> DECLINE TO ANSWER

14 What happened that caused you to lose your housing most recently? [Do not read the options. Check all that apply. “Housing” does not include temporary arrangements (e.g., couch surfing) or shelter stays. Follow up for the reason if the respondent says “eviction” or that they “chose to leave”.]

A: HOUSING AND FINANCIAL ISSUES	B: INTERPERSONAL AND FAMILY ISSUES	C: HEALTH OR CORRECTIONS
<input type="checkbox"/> NOT ENOUGH INCOME FOR HOUSING (E.G. LOSS OF BENEFIT, INCOME, OR JOB)	<input type="checkbox"/> CONFLICT WITH: SPOUSE / PARTNER	<input type="checkbox"/> PHYSICAL HEALTH ISSUE
<input type="checkbox"/> UNFIT/UNSAFE HOUSING CONDITION	<input type="checkbox"/> CONFLICT WITH: PARENT / GUARDIAN	<input type="checkbox"/> MENTAL HEALTH ISSUE
<input type="checkbox"/> BUILDING SOLD OR RENNOVATED	<input type="checkbox"/> CONFLICT WITH: OTHER (_____)	<input type="checkbox"/> SUBSTANCE USE ISSUE
<input type="checkbox"/> OWNER MOVED IN	<input type="checkbox"/> EXPERIENCED ABUSE BY: SPOUSE / PARTNER	<input type="checkbox"/> HOSPITALIZATION OR TREATMENT PROGRAM
<input type="checkbox"/> LANDLORD/TENANT CONFLICT	<input type="checkbox"/> EXPERIENCED ABUSE BY: PARENT / GUARDIAN	<input type="checkbox"/> INCARCERATION (JAIL OR PRISON)
<input type="checkbox"/> COMPLAINT (E.G. PETS/NOISE/DAMAGE)	<input type="checkbox"/> EXPERIENCED ABUSE BY: OTHER (_____)	
<input type="checkbox"/> LEFT THE COMMUNITY/RELOCATED	<input type="checkbox"/> DEPARTURE OF FAMILY MEMBER	
<input type="checkbox"/> EXPERIENCED DISCRIMINATION		
<input type="checkbox"/> OTHER REASON: _____		<input type="checkbox"/> DON'T KNOW
		<input type="checkbox"/> DECLINE TO ANSWER

Was your most recent housing loss related to the COVID-19 pandemic?

<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW	<input type="checkbox"/> DECLINE TO ANSWER
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How long ago did that happen (that you lost your housing most recently)? [Best estimate]

<input type="checkbox"/> LENGTH _____ DAYS   WEEKS   MONTHS   YEARS	<input type="radio"/> DON'T KNOW	<input type="radio"/> DECLINE TO ANSWER
---	----------------------------------	---

15. Where do you get your money from? [Reminder that this survey is anonymous. Read list and check all that apply]

<input type="checkbox"/> FULL TIME EMPLOYMENT	<input type="checkbox"/> EMPLOYMENT INSURANCE	<input type="checkbox"/> CHILD AND FAMILY TAX BENEFITS
<input type="checkbox"/> PART TIME EMPLOYMENT	<input type="checkbox"/> DISABILITY BENEFIT [SAID PROV. DISABILITY BENEFIT]	<input type="checkbox"/> GST/HST REFUND
<input type="checkbox"/> CASUAL EMPLOYMENT (E.G. CONTRACT WORK)	<input type="checkbox"/> SENIORS BENEFITS (E.G. CPP/OAS/GIS)	<input type="checkbox"/> OTHER MONEY FROM A SERVICE AGENCY
<input type="checkbox"/> INFORMAL INCOME SOURCES (E.G. BOTTLE RETURNS, PANHANDLING)	<input type="checkbox"/> WELFARE/SOCIAL ASSISTANCE [SIS Prov. Benefit]	<input type="checkbox"/> OTHER SOURCE: _____
<input type="checkbox"/> MONEY FROM FAMILY/FRIENDS	<input type="checkbox"/> VETERAN/VAC BENEFITS	<input type="checkbox"/> NO INCOME
		<input type="checkbox"/> DON'T KNOW
		<input type="checkbox"/> DECLINE TO ANSWER

PART TWO ADDITIONAL QUESTIONS

16.What is the highest level of education you completed?

☐ Primary/Elementary School

☐ Some High School

☐ High School Graduate/GED

☐ Some Post-Secondary

☐ Post-Secondary Graduated

☐ Graduate Degree (e.g: Masters, PhD)

☐ Don't Know

☐ Decline to answer

17 Have you been a victim of violence while experiencing homelessness? (This can include any encounter that they consider to be violent)

☐ Yes

☐ No

☐ Don't know

☐ Decline to answer

18. Which of the following would help you find stable, affordable housing? (Read list and ask yes or no for each question and check their response to each)

☐ More money

☐ Help getting ID (e.g., health card)

☐ Help finding an affordable place

☐ Help with housing applications

☐ Help with immigration issues

☐ Harm reduction supports (e.g., methadone, needle exchange, alcohol or drug treatment)

☐ Transportation to see housing

☐ Help with legal issues

☐ Help addressing your health needs

☐ Help with disability accessibility

☐ Manage alcohol issues

☐ Mental health supports

☐ Cultural supports

☐ Services in a language other than English

Other (specify):

19. In the past year (12 months) have you used these services: [ASK RESPONDENTS TO GIVE THEIR ESTIMATE OF HOW MANY TIMES]

1. Emergency room	Y	N	#	Times
2. Hospital	Y	N	#	Times
Days you have spent hospitalized				
3. Police (Tickets, arrests, searches)	Y	N	#	Times
4. Prison/ jail	Y	N	#	Times
Days you have spent in prison/jail				
5. Probation/ Parole	Y	N	#	Times
6. Community Support Officers	Y	N	#	Times
7. Alternate Response Officers	Y	N	#	Times
8. Ambulance	Y	N	#	Times
9. Library	Y	N	#	Times
10. Health clinics	Y	N	#	Times
11. Job training/Job supports	Y	N	#	Times
12. Detox	Y	N	#	Times
13. Mental health (counselling, treatment)	Y	N	#	Times
14. Shelters	Y	N	#	Times

15. Children and family supports	Y	N	#	Times
16. Elder services	Y	N	#	Times
17. Disability services	Y	N	#	Times
18. Newcomer services	Y	N	#	Times
19. Drop-ins	Y	N	#	Times
20. Food bank	Y	N	#	Times
21. Services that help you get ID	Y	N	#	Times
22. Social Housing/ Housing placement	Y	N	#	Times
23. Churches	Y	N	#	Times
24. Charities	Y	N	#	Times
Other (specify):	Y	N	#	Times
<input type="checkbox"/> None of the above				
<input type="checkbox"/> Decline to answer				

20 a. Of the services you have used, are any helping you find housing?

☐ Yes

☐ No

☐ Don't know

☐ Decline to answer

20 b. If yes, please enter code or list (if other):

21 a. Are you currently on a waiting list for housing?

☐ Yes

☐ No

☐ Don't know

☐ Decline to answer

21 b. If yes, where?

21c. If yes, how long have you been on the waiting list(s)?

☐ Length \_\_\_\_days/weeks/months/years

☐ No

☐ Don't know

☐ Decline to answer

22. Is there anything else you would like to add that we did not talk about that is important and would make your own or other people's housing situation better?

Volunteer Closing Script (Please read):

That concludes our survey. Thank you for participating. Your answers will help service providers in the city of Saskatoon better plan services for people experiencing homelessness. (Leave pocket card with information about services).

I am leaving you with a pocket card with information about agencies that may help you to get housing or other services if you're interested in contacting them.

Thank you again for your assistance. Here is the transit pass to thank you for completing the survey and sharing your knowledge and experience.




## LIST OF PUBLICATIONS

### COMMUNITY-UNIVERSITY INSTITUTE FOR SOCIAL RESEARCH

- Allan, Nancy, & Michael Gertler. (2006). *Remaking the Links: Fair Trade for Local and Global Community Development*. Saskatoon: Community-University Institute for Social Research.
- Amankwah, Dinah. (2003). *Integrative Wraparound (IWRAP) Process Training*. Saskatoon: Community-University Institute for Social Research.
- Avis, Kyla, & Angela Bowen. (2004). *Postpartum Depression Support Program Evaluation*. Saskatoon: Community-University Institute for Social Research.
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- Banks, Christopher. (2004). *The CoSt of Homophobia: Literature Review on the Economic Impact of Homophobia On Canada*. Saskatoon: Community-University Institute for Social Research.
-  Basualdo, Maria, & Kangayi, Chipo. (2010). *Cypress Hills Abilities Centres, Inc: Exploring Alternatives. A Research Report*. Saskatoon: Centre for the Study of Co-operatives and Community-University Institute for Social Research.
- Battiste, Marie, Isobel M. Findlay, Joe Garcea, Jania Chilima, and Ryan Jimmy. (2018). *Maximizing the Potential of Urban Aboriginal Students: A Study of Facilitators and Inhibitors within Postsecondary Learning Environments*. Saskatoon: Community-University Institute for Social Research and UAKN Prairie Regional Research Centre. [http://uakn.org/wp-content/uploads/2016/10/NAFC-UAKN-PHASE-2-National-Report\\_Prairie-Region\\_Saskatchewan-Final-Report-.pdf](http://uakn.org/wp-content/uploads/2016/10/NAFC-UAKN-PHASE-2-National-Report_Prairie-Region_Saskatchewan-Final-Report-.pdf)
- Berntson, Ron. (2003). *Peer Victimization Experiences in High School*. Saskatoon: Community-University Institute for Social Research.
- Bidonde, Julia. (2006). *Experiencing the Saskatoon YWCA Crisis Shelter: Residents' Views*. Saskatoon: Community-University Institute for Social Research. Please contact Clara Bayliss at the YWCA at 244-7034, ext. 121 or at [info@ywcaskatoon.com](mailto:info@ywcaskatoon.com) for copies of this report.

-  Bidonde, Julia, & Catherine Leviten-Reid. (2011). *"A Place to Learn, Work, and Heal": An Evaluation of Crocus Co-operative*. Saskatoon: Centre for the Study of Co-operatives and Community-University Institute for Social Research.
-  Bidonde, Julia, Mark Brown, Catherine Leviten-Reid, & Erin Nicolas. (2012). *Health in the Communities of Duck Lake and Beardy's and Okemasis First Nation: An Exploratory Study*. Saskatoon: Centre for the Study of Co-operatives and Community-University Institute for Social Research.
- Bowditch, Joanne. (2003). *Inventory of Hunger Programs in Saskatoon*. Saskatoon: Community-University Institute for Social Research.
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