

# HOMELESSNESS ENUMERATION IN THE COCHRANE DISTRICT

Evaluation and Comparison of Methodologies

Report prepared for the Ontario Trillium Foundation  
and the Local Poverty Reduction Fund  
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*Living on the Outside: A Photo Exhibition on the Realities of Home*

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# HOMELESS ENUMERATION IN THE COCHRANE DISTRICT

## TABLE OF CONTENTS

<b>Acknowledgements</b> .....	<b>iii</b>
<b>List of Tables</b> .....	<b>vi</b>
<b>List of Figures</b> .....	<b>vii</b>
<b>Infographic</b> .....	<b>viii</b>
<b>Executive Summary</b> .....	<b>xi</b>
<b>Methods</b> .....	<b>xi</b>
<b>Results</b> .....	<b>xii</b>
Methods of Enumeration in Timmins: PiT and PPC.....	xii
Ability of Stakeholders to Utilize the PPC Method .....	xii
Comparison of Results: Past and Current Enumeration Studies .....	xii
Regional Results: Period Prevalence Count.....	xiii
Measure of Hidden Homelessness .....	xiii
Community Response to Enumeration Data .....	xiii
Study Robustness.....	xiv
<b>Recommendations</b> .....	<b>xiv</b>
<b>Introduction</b> .....	<b>1</b>
Local Poverty Reduction Fund .....	2
<b>Background</b> .....	<b>3</b>
<b>Theory of Change</b> .....	<b>6</b>
<b>Methods</b> .....	<b>7</b>
Data Collection Instrument.....	8
Agency and Participant Recruitment.....	9
Knowledge Mobilization .....	11
Reliability and Validity .....	11
Outcome Evaluation .....	12
<b>Results</b> .....	<b>13</b>
<b>Methods of Enumeration in Timmins: PiT and PPC</b> .....	<b>13</b>

<b><i>Ability of Stakeholders to Utilize the PPC Method.....</i></b>	<b>17</b>
Positive Reception .....	18
Barriers to Recruitment .....	19
Participant Efforts to Complete a Survey more than Once.....	20
<b><i>Comparison of Results: Current and Previous Enumeration Studies.....</i></b>	<b>21</b>
<b><i>Regional Results: Period Prevalence Count.....</i></b>	<b>24</b>
Overall Number of Participants .....	24
Indigenous and Racialized Identity .....	25
Gender and Sexuality.....	28
Age .....	30
Chronicity and Frequency of Homelessness.....	30
Family Homelessness .....	32
Source of Income .....	33
Military Service and Child Welfare Involvement .....	35
Reasons for Homelessness .....	36
<b><i>Measure of Hidden Homelessness .....</i></b>	<b>39</b>
Regional Differences in Hidden Homelessness.....	40
Current Lodging by Type of Homelessness.....	43
Sociodemographic Characteristics by Type of Homelessness.....	44
<b><i>Community Response to Enumeration Data .....</i></b>	<b>46</b>
Immediate Community Response .....	46
Short-Term Community Response.....	49
Long-Term Community Response.....	53
Media Coverage .....	61
<b><i>Study Robustness.....</i></b>	<b>64</b>
Cultural Safety.....	64
Local Training .....	64
Alignment with Provincial Standards.....	64
<b>Discussion .....</b>	<b>65</b>
<b>Recommendations .....</b>	<b>68</b>
Methods of Enumerating Homelessness.....	68
Action Strategies to Address Homelessness in the Cochrane District.....	69
<b>Conclusion.....</b>	<b>71</b>

<b>Sustainability .....</b>	<b>75</b>
<b>References .....</b>	<b>77</b>
<b>Appendix A: Recruitment List of Community Organizations.....</b>	<b>80</b>

## LIST OF TABLES

Table 1. Comparison of results from the PiT and PPC in Timmins, Ontario .....	13
Table 2. Number of unduplicated individuals in the period prevalence count.....	22
Table 3. Comparison of total counts, 2011-2013 and 2018 .....	23
Table 4. Indigenous, racialized and non-Indigenous identity by location .....	27
Table 5. Language by Location.....	29
Table 6. Gender identity by location .....	29
Table 7. Sexuality by location .....	31
Table 8. Age by location.....	31
Table 9. Chronicity and frequency of homelessness in the year prior by location .....	32
Table 10. Family homelessness by location.....	33
Table 11. Income sources by location.....	34
Table 12. Military service and child welfare involvement by location .....	36
Table 13. Reasons for homelessness by location .....	37
Table 14. Forms of hidden homelessness in the Cochrane District.....	40
Table 15. Types of homelessness by location.....	41
Table 16. Hidden homelessness by location.....	42
Table 17. Current lodging/homelessness by type of homelessness.....	44
Table 18. Age, cultural background, gender and military service .....	45
Table 19. Rank-order of recommendations.....	50

## LIST OF FIGURES

Figure 1. Map of study communities in the Cochrane District .....	x
Figure 2. Percentage of participants in the PiT versus PPC in Timmins by type of homelessness ..	14
Figure 3. Number of adolescent and adult participants in the study communities .....	25
Figure 4. Reasons for homelessness, Indigenous participants in Moosonee, Cochrane & Timmins .....	38

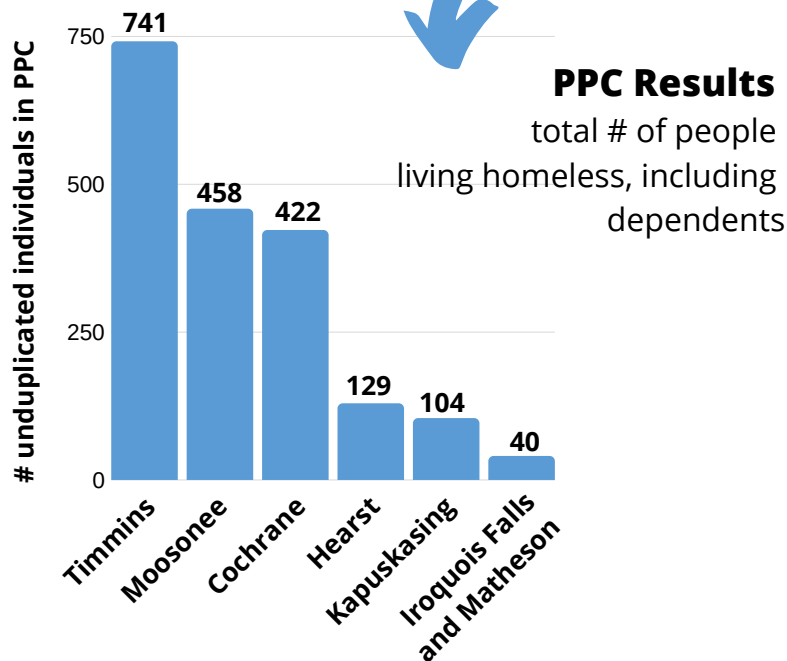
# HOMELESS COUNT IN THE COCHRANE DISTRICT

**Project Aim:** Compare the Point in Time (PiT) and Period Prevalence Count (PPC) methods of enumerating people living homeless in rural and urban communities



## Spring 2018 PPC Data Collection

- Cochrane
- Hearst
- Kapuskasing
- Iroquois Falls
- Matheson
- Moosonee
- Timmins



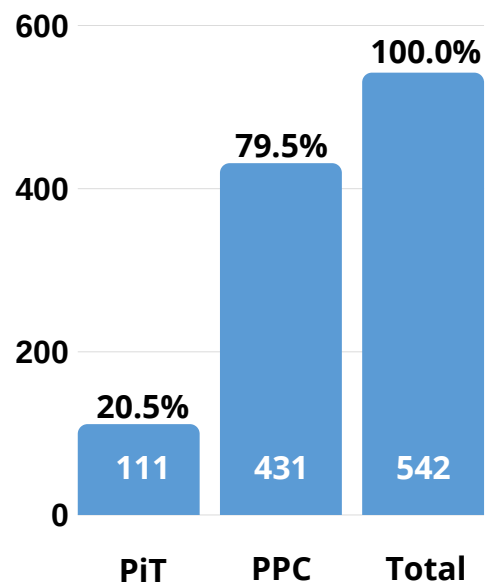
“ I think it’s worth the investment and doing it over a [longer] period. ... When we saw the difference between the enumerations and the approaches, we got a much better sense and a lot better information about the needs [with the PPC]. ... And this is an important investment. ”



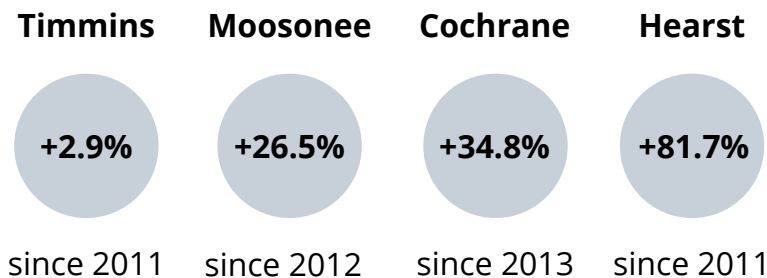
**Service Provider in the Cochrane District**

## PiT vs. PPC Results in Timmins, ON

# of people living homeless counted with each method, excluding dependents



## Increase in Homeless Population



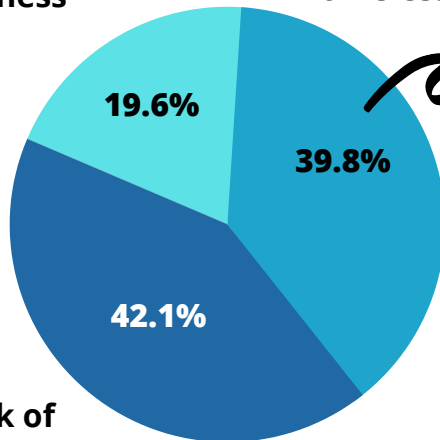


## Forms of Homelessness in the Cochrane District

Absolute Homelessness

Hidden Homelessness

for example:



28.8%

couch surfing with friends or family



15.2%

sleeping outdoors, in a bush camp, or camper



15.2%

staying in a hotel or single room



8.0%

living in a place without running water or unfit for human habitation

At Risk of Homelessness

### Community Forums

*Timmins, Moosonee, and Cochrane*

- Shared enumeration findings with public
- Developed and prioritized a set of 34 recommendations for

## Action Strategies to Address Homelessness



Provide more supportive housing



Enhance services in areas of greatest need



Work with Indigenous communities



Develop new social housing initiatives

## Partners

**Social Justice**  
**Justices sociale**

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Laurentian University  
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Cochrane District Social Services Administration Board



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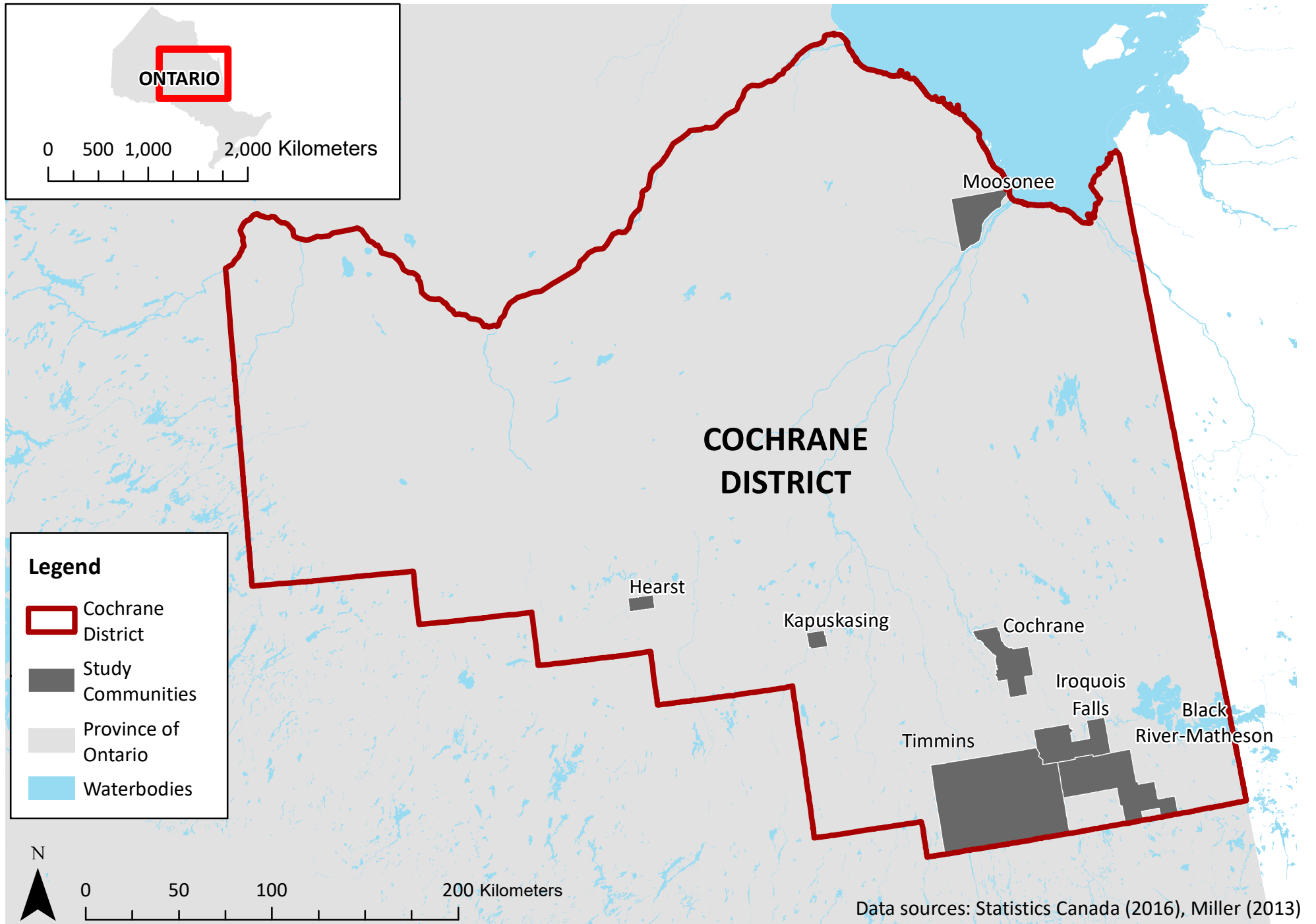
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Fondation Trillium de l'Ontario

Figure 1. Map of study communities in the Cochrane District



## EXECUTIVE SUMMARY

In 2015, the Government of Ontario announced the Local Poverty Reduction Fund (LPRF), a \$50 million investment over six years to support “innovative, local, community-driven solutions that measurably improve the lives of those most affected by poverty” (Ontario Trillium Foundation, n.d.). Funded by the LPRF, this project evaluated and compared the Point-in-Time (PiT) and Period Prevalence Count (PPC) methods of enumeration in northern urban and rural communities to determine their comparative usability by communities, as well as their effectiveness, reliability and validity in collecting data on homelessness and hidden homelessness and in measuring reductions in homelessness. The theory of change that guided the project was the theory and practice underlying Participatory Action Research (PAR) and community based participatory research (CBPR).

### Methods

The 2018 PPC involved data collection in Timmins, Hearst, Kapuskasing, Iroquois Falls, Matheson, Cochrane, and Moosonee. In order to allow for a comparison of the PiT and PPC methods, in Timmins, a PiT count was held on May 23<sup>rd</sup> (Day 1), followed by a PPC from May 24<sup>th</sup> to 30<sup>th</sup> (Days 2-8). The results of the two methods were used to compare the PiT and PPC methods. Using a service-based methodology, data were collected from homeless persons with a structured questionnaire in order to identify their background, experiences, and forms of homelessness. The data collection activity addressed all requirements specified by the Province of Ontario, as well as questions on health, mental health, migration, and history of homelessness.

Following the data collection, entry and analysis phases, knowledge transfer and mobilization activities were conducted in 2018 and 2019. Community members from all study communities were invited to the community forum held in Timmins on World Homeless Day 2018 (October 10, 2018), and additional forums that took place in the Towns of Cochrane and of Moosonee. After the forums, interviews and focus groups were conducted with service providers (n= 20) and people with lived experience of homelessness (n= 30) from study communities. Semi-

structured guides were used to facilitate discussions about the community's understanding of the extent and scope of homelessness, changes in attitudes, knowledge, and cultural safety within the community, the state of public education on homelessness, and the use of enumeration findings to improve services and inform strategies to address homelessness.

## Results

### Methods of Enumeration in Timmins: PiT and PPC

The data show that the PiT method severely undercounted the homeless population, as only a fifth of the population (20.5%) experiencing homelessness in Timmins were enumerated using this method. The differences between the results generated by the PiT and PPC methods are dramatic and suggest that the PiT method results in extreme undercounting. Both service providers and people with lived experience of homelessness preferred the PPC method over the PiT method. Participants believed that the PPC method gave people experiencing homelessness greater opportunity to participate, resulting in more information about the prevalence of homelessness being captured and greater representation of various subgroups in the data collected.

### Ability of Stakeholders to Utilize the PPC Method

Given the service pressures and limited staff resources to collect the data, research assistants (RAs) were made available to administer the questionnaire in most agencies. Analysing the field notes from RAs in all study communities reveals that the survey was generally well received, although RAs noted some barriers to participation and attempts by some participants in all communities to participate more than once.

### Comparison of Results: Past and Current Enumeration Studies

Little change occurred between counts in Timmins (2.9%), moderate change occurred between counts in Moosonee and Cochrane (26.5% and 34.8%, respectively), and the largest change between counts occurred in Hearst (81.7%).

### Regional Results: Period Prevalence Count

The number of questionnaires completed by adults or youth in the PPC study was 1,224. Considering the rate of homelessness expressed as a percentage of the total population, homelessness was highest in Moosonee, Cochrane, Hearst and Timmins. The lowest rates were found in Iroquois Falls and Matheson.

### Measure of Hidden Homelessness

The most common forms of hidden homelessness involved couch surfing with friends or family members; this type of accommodation was cited by over three-quarters of cases. The rates of hidden homelessness were similar for Hearst and Timmins at 43 percent and Moosonee at 41 percent. In Cochrane and Kapuskasing, close to a quarter to a third of the respondents were living with hidden homelessness. This study shows that the hidden homeless population is larger than the absolutely homeless subgroup in the Cochrane District.

### Community Response to Enumeration Data

There was generally a good response to the study. Examining RAs' field notes reveals impressions of the study communities as being open and receptive to the study; both agency staff involved in data collection and prospective participants were extremely welcoming to RAs and expressed positive attitudes towards the goals of the enumeration study.

Service providers in the study communities highlighted the role of the enumeration in raising the communities' awareness of the scope and extent of homelessness within the Cochrane District. However, despite the level of awareness raised, they believe that issues remain within the general public, which stigmatizes individuals experiencing homelessness. In response to the prevailing misconceptions surrounding homelessness and its causes, the Cochrane DSSAB initiated community engagement activities throughout the District. Moreover, plans have been made to offer formal cultural safety training opportunities to service providers in Timmins.

There are many examples of how the enumeration findings have been applied to improving services throughout the District. Having reliable, valid, and accurate data to express the need that exists in the District was, and still is, instrumental to making the case for funding to introduce new services and expand existing services. At the District level, having reliable data to

draw upon has led to a stronger focus on partnerships with homelessness providers and First Nations communities given the prevalence of the Indigenous population in the homelessness count.

### Study Robustness

A number of measures were included in the study's design to ensure its robustness in producing valid, reliable, and accurate counts of each community's homeless population. The research team included Anglophone, Francophone, and Indigenous faculty members and students from varied schools and departments, reflecting the district's cultural and linguistic diversity. All members of the local research teams were trained in each study community in order to ensure familiarity with and adherence to the study protocols. Moreover, the study design aligned with provincial standards for conducting enumerations of homelessness as prescribed by the Ministry of Housing (2018).

### Recommendations

The PPC method can provide more complete data on the prevalence of homelessness, particularly in small, rural, remote and northern communities where homelessness is less visible. Using the PPC method, the following elements should be included: (1) conducting the enumeration over a span of 7 days or longer, allowing for word of mouth to spread; (2) collecting data at a variety of services, service locations, street stations, and other known locations frequented by people experiencing homelessness; and (3) considering the use of a neighbourhood door-to-door survey to capture the prevalence of hidden homelessness or those at-risk of homelessness.

At community forums, recommendations for action strategies were prioritized using a "dotmocracy" activity. The top three recommendations in Timmins and Cochrane emphasized providing supportive housing services, enhancing services in areas of greatest need, and working with Indigenous communities to address homelessness. In Moosonee, participants indicated the importance of counselling services and income supports/emergency funding.

## INTRODUCTION

In recent years, much attention has been given to measuring or enumerating homelessness in Ontario and Canada. Although the specific questions asked in enumeration surveys vary, generally they produce sociodemographic information about the population experiencing homelessness (for example, age, race/ethnicity, gender identity, family composition, education), as well as information about the length of time one has been homeless, reasons for homelessness, and the types of services and supports used (Williams, 2011). For more than a decade, several communities in Canada have conducted periodic enumerations of homelessness, with varying definitions of the groups that are included as homeless. Moreover, variations occur in the questions that are asked, as well as the time of year and time of day when the count occurs (Employment and Social Development Canada, 2017). Deciding which groups of people will be defined as homeless and which methods will be used to find and count a stigmatized population directly influence whether a reliable, valid, and accurate representation of the prevalence of homelessness can be established (Williams, 2011). Enumeration studies of homelessness thus provide important information about the number and characteristics of people living with homelessness at the local level, but can only do so when designed to produce reliable, valid, and accurate data.

In order to capture the full magnitude of homelessness in formal enumeration studies, especially in northern, rural and small communities, extra effort must be taken to include people living with *hidden* homelessness. There has been a growing awareness of the presence of homelessness in communities where it was not previously recognized. Several studies in northern Ontario have indicated that the rate of homelessness is high and that forms of hidden homelessness are prevalent (Kauppi et al., 2017). In its report, *A Place to Call Home* (2015, p. 7), the Government of Ontario highlighted the scope of hidden homelessness in small and rural areas, stating that hidden homelessness is “estimated to represent 80 per cent of those who have no place to call home.” In addition to substandard housing and overcrowding, hidden homelessness takes many forms in northern and rural communities including living in tents,

bush camps or RVs, motels, hotels, exchanging sex or other services for temporary accommodation, or couch surfing and other time-limited shelter arrangements within informal familial or social networks (Kauppi et al., 2017). Hidden homelessness occurs away from public visibility, outside the scrutiny of formal services, and affects people who do not have access to alternate accommodations despite exposure to violence or abuse within the residence, or whose housing costs consume meagre financial resources to the detriment of other basic needs.

The definition of homelessness used and the method of enumeration employed matter greatly, not only as to the results that are produced, but also for the impact those results have on the policy process. Based on the information gathered in enumeration studies, local, provincial, and federal decision-makers choose how to direct available resources, modify existing services, and devise new supports (Belanger, Awosoga, & Weasel Head, 2013). Based on patterns in the results as well as on self-reported needs, enumeration results can provide an evidence-based response to debates about why and how people come to experience homelessness and how best to serve them. When repeated consistently, the data generated from regular enumeration studies can provide insights into changes or fluctuations in the size of the population experiencing homelessness; thus, they can be a valuable tool to inform policy effectiveness and program responsiveness (Belanger, Awosoga, & Weasel Head, 2013).

### Local Poverty Reduction Fund

In 2015, the Government of Ontario announced the Local Poverty Reduction Fund (LPRF), a \$50 million investment over six years to support “innovative, local, community-driven solutions that measurably improve the lives of those most affected by poverty” (Ontario Trillium Foundation, n.d.). The LPRF, situated under the government’s *Poverty Reduction Strategy*, recognized that solutions to address homelessness require transformation possible only with the right information and tools (Government of Ontario, 2014). As such, the development of effective methods and measures to track homelessness in Ontario are needed to inform strategies to end homelessness in Ontario. The LPRF funded this project to evaluate the Point-in-Time (PiT) and Period Prevalence Count (PPC) methods of enumeration in northern urban and rural communities in order to determine their comparative usability by communities, as well as their



effectiveness, reliability and validity in collecting data on homelessness and hidden homelessness and in measuring reductions in homelessness.

This report first outlines the PiT and PPC methods of enumeration and details the dominant critiques of the PiT method. Next, it compares the results generated by both methods in an urban setting (Timmins, Ontario), as well as in rural/remote communities in the Cochrane District of northeastern Ontario. It also discusses the effectiveness of the PPC method in terms of reliability and validity. The report is organized according to the research questions guiding this project. Finally, the report concludes with recommended standards to consider when employing the PPC method and with a discussion of the implications of the study's findings.

## BACKGROUND

In 2014, the Government of Ontario established an Expert Advisory Panel with the mandate to “give advice on how to define and measure homelessness in Ontario, how to prioritize and set targets for ending homelessness, and how to build the evidence base and capacity to implement best practices around the province” (Government of Ontario, 2015, p. 1). In its 2015 report, the panel stated that although the problem of homelessness is serious and rising in magnitude, there is a lack of “high quality, comparable province-wide data on homelessness” to inform policy and program decisions (Government of Ontario, 2015, p. 7).

The most frequently used method to enumerate homelessness in Canada, in both urban and rural communities is the PiT. The Ontario government formally supported the PiT method and described it as a “snapshot of the population experiencing homelessness on one day of the year” (Ministry of Housing, 2018, p. 6). PiT counts are conducted by trained volunteers who locate, count, and collect data from people experiencing homelessness. However, the method only counts unsheltered and emergency sheltered populations, not those experiencing forms of hidden homelessness. In addition to canvassing streets, volunteers conduct surveys at emergency shelters, violence against women (VAW) shelters, service organizations, and magnet events. The Ontario government recognized that, since the PiT method provides information only for a single point in time, it is “not intended to be a measure of everyone who experiences

homelessness in a community over time,” and “will not include some people who cycle in and out of homelessness,” (Ministry of Housing, 2018, p. 7). The Ontario government also acknowledged that, since the PiT method focuses on unsheltered and emergency-sheltered populations, it is “not intended to provide a count of people experiencing hidden homelessness,” (Ministry of Housing, 2018, p. 7). In their study in New York City, Hopper, Shinn, Laska, Meisner, & Wanderling (2008, p. 1442) showed that the PiT method results in the serious underestimation of the size of a homeless population: “It is important to recognize that 1-night street counts represent only a small proportion of those affected by homelessness.” Despite its shortcomings, the PiT method is most often used in enumeration studies in the USA and Canada.

Beyond the study of the PiT method conducted by Hopper et al. (2008), its methodological challenges have led many to conclude that it produces inaccurate results (Baptista et al., 2012; Busch-Geertsema, Culhane, & Fitzpatrick, 2016; Busch-Geertsema, et al., 2010; Hall, 2017; Pleave, 2016; Rabinovitch, 2015; Schneider, Brisson, & Burnes, 2016; Williams, 2011). First, PiT counts tend to overrepresent those who experience chronic rather than episodic homelessness and those with high service needs. By definition, those who experience episodic homelessness cycle in and out of various forms of homelessness. Therefore, based solely on the chosen day of data collection, a PiT count may miss counting many who are on the streets one night, in a shelter another, and staying at a friend’s place the next (Baptista et al., 2012). Moreover, PiT counts are limited in the depth of information that they can gather from each individual surveyed. Given the shorter time span in which to complete the enumeration, surveyors have less time to spend with each participant if they are to cover all the ground necessary to generate an accurate count. As a result, a PiT count may yield superficial information about individual circumstances that does not illuminate the interactions between individual and structural factors causing homelessness in a given community (Williams, 2011). Furthermore, according to Pleave (2016), the PiT method produces data that underrepresents women in the total population experiencing homelessness. He argued that women’s homelessness can be more difficult to study as women are less likely to be seen in highly visible forms of homelessness, such as ‘living rough’ on the street or using emergency accommodation. He

noted that women who live rough are more likely than men to conceal themselves to enhance their personal safety, less likely to use homeless services, more likely to be in precarious situations of hidden homelessness, and thus less likely to be captured in PiT counts (Pleace, 2016).

A key factor distinguishing the PPC method from the PiT is the length of time over which the enumeration takes place. While PiT counts generally occur over the span of 24 hours (or less in some instances), PPCs typically take place over 7 consecutive days, or longer if a neighbourhood door-to-door survey is also used. Continuing the PPC for 7 days, while collecting information allowing for the elimination of duplicate cases (de-duplication), yields more complete data than studies/counts that take place over a shorter time via the PiT method. PPCs capture the experiences of people who are unsheltered, emergency sheltered, using varied community services such as community meal programs or food banks, or experiencing hidden homelessness.

The PPC method was recently described in the *Period Prevalence Counts of People Experiencing Homelessness: A Guide for Service Managers in Rural and Northern Communities* (Kauppi, 2017), and the guide was made available for use by Service Managers in Ontario. The PPC guide provides information about the PPC approach as one of the accepted enumeration methods to be used by Service Managers in 2018 and how to implement it. This methodology was promoted by the Ministry of Housing as it can capture most of the homeless population and is deemed useful in northern and rural communities. At its heart is community outreach and the involvement of agencies, including food banks, offering front-line services and programs to people experiencing forms of homelessness. As the PPC casts a larger net, it is more likely to include people experiencing hidden homelessness. Word of mouth can spread through informal social networks as the survey is conducted over seven days, raising awareness of the enumeration. Vulnerable subgroups experiencing hidden homelessness, including women, LGBTQ2S communities, Indigenous peoples, immigrants, racialized people, and youth, have more opportunity to participate in a PPC that is conducted over several days than they would in a PiT count conducted over 24 hours.

Despite its use in 15 enumeration projects in rural and urban communities in northeastern Ontario between 2000 and 2015, the PPC method had never been compared to the PiT method through systematic evaluation. This project endeavours to fill that gap in our knowledge by comparing and evaluating the PiT and PPC methods as they are applied in the same time-frame within the same community (Timmins, Ontario), by evaluating how well urban and rural communities are able to use the PPC method, by testing a measure of hidden homelessness through its incorporation into PiT and PPC approaches, and by examining the effectiveness of community efforts to utilize enumeration results to tackle the problem of homelessness at the local level. The expertise of university and community members can be helpful in exploring the sensitivity of enumeration approaches to several target groups. Determining the best methods of enumerating people who are living with homelessness in northern and rural communities will provide communities with evidence-informed understandings about the appropriate method(s) to use in order to obtain information about the extent and nature of homelessness. Comprehensive, accurate information about homelessness and hidden homelessness can help communities to target action in the areas required to reduce and eliminate homelessness.

### Theory of Change

The theory of change that guided the project was the theory and practice underlying Participatory Action Research (PAR) and community based participatory research (CBPR). A fundamental principle of the theory is that collaborative, community-based research can result in action and social change. As CBPR underscores community involvement, it is the specific approach and theory of change used here. While the theory is often thought of as a research method, much recent emphasis is on its theoretical development (Bradbury, 2015; Kindon, Pain & Kesby, 2008). A substantial literature has emerged in recent decades discussing this new paradigm; it is an appropriate approach for use with marginalized groups and Indigenous people (Liamputtang, 2010). Findings produced using CBPR can lead to change at personal, community and policy levels because it values local knowledge and gives to local inhabitants ownership over the process and solutions generated.

## METHODS

The 2018 PPC involved data collection in Timmins, Hearst, Kapuskasing, Iroquois Falls, Matheson, Cochrane, and Moosonee. The study covered regions of the Cochrane District in which approximately 85 percent (67,446 people) of the total population (79,682) resides. In order to allow for a comparison of the PiT and PPC methods, in Timmins, a PiT count was held on May 23<sup>rd</sup> (Day 1), followed by a PPC from May 24<sup>th</sup> to 30<sup>th</sup> (Days 2-8). Both the PiT and PPC methods were used to compare the results of the two methods. The PPC in 2018 was the first study of homelessness conducted in the communities of Kapuskasing, Iroquois Falls, and Matheson<sup>1</sup>. In contrast, enumeration studies in the form of PPCs had been conducted between 2011, 2012, and 2013, in Timmins, Cochrane, Hearst, and Moosonee. The results of the prior PPCs enable comparisons with the 2018 results in these communities.

The project was guided by the following six research questions:

1. Is one method—PiT or PPC—more effective in gathering data about and decision-making about homelessness from the perspectives of community stakeholders, CDSSAB, and researchers?
2. Are there differences between Group A towns (Kapuskasing, Iroquois Falls, and Matheson which have never [prior to 2018] enumerated homelessness) and Group B (where PPCs were conducted — Timmins and Hearst in 2011, Moosonee in 2012, and Cochrane in 2013) with regard to the ability of community stakeholders to utilize the PPC method? Do the results from 2011, 2012, and 2013 for Timmins, Hearst, Moosonee, and Cochrane differ from the results obtained for these communities in 2018? If so, how and why?
3. How do the seven communities in the Cochrane District differ in the results obtained using PPC methods? What community-level factors may account for any differences (e.g., demographics, socio-economic factors, migration patterns)?

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<sup>1</sup> Note that the results for Iroquois Falls and Matheson have been combined due to the small numbers of people identified as living homeless in these communities.

4. How effective is the new measure of *hidden homelessness* in gathering data from people living in urban and rural centres in the Cochrane District?
5. How do communities in the Cochrane District respond to the new data on homelessness and hidden homelessness? Do local stakeholders in the six communities respond in similar or different ways to the results?
6. How robust is the research study examining enumeration methods, based on evaluation?

### Data Collection Instrument

Using a service-based methodology, data were collected from homeless persons with a structured questionnaire in order to identify their background, experiences, and forms of homelessness. The data collection activity addressed all requirements specified by the Province of Ontario including the following types of information:

- type of current housing/lodging;
- reasons for homelessness;
- number of chronically homeless persons;
- number of episodically homeless persons;
- number of persons with Indigenous identity;
- number of persons with racialized identity;
- age and number of youths under the age of 18 not connected to a family unit;
- family homelessness and number of women and children;
- number of veterans;
- gender identity, sexual orientation, number of LGBTQ2S persons; and
- physical and mental health.

The data collection instrument used included the questions specified by the Province of Ontario and the Homelessness Partnering Secretariat (Ministry of Housing, 2018), as well as questions on health, mental health, migration, and history of homelessness. The definitions of homelessness used were consistent with the Canadian definition of homelessness published by the Canadian Observatory on Homelessness (2012) and incorporated its four major categories

of (i) unsheltered, (ii) emergency sheltered, (iii) provisionally accommodated, and (iv) at risk of homelessness. Measures of hidden homelessness were also included. Questions of interest to partners were added, such as level of education, sources of income, survivorship of the 60s to 80s scoop (for Indigenous people), description of mental and physical health problems, children accompanying participants and custody of children, food insecurity, life-limiting illnesses and use of health services.

The data collection instrument also allowed for the identification of duplicate cases. De-duplication procedures were conducted by examining the first, middle, and last initials as well as the date of birth, gender, and sociocultural/linguistic background. Individuals with identical information were considered to be the same person and duplicated cases were eliminated from further analysis. Most individuals provided the information required to identify duplicate cases. The Research Ethics Board (REB) at Laurentian University reviewed the procedures for the study and approved them in early 2018. Approval was also sought, and received, to require the provision of the deduplication information as part of the consent process.

### Agency and Participant Recruitment

A preliminary list of service providers was developed from existing lists of programs and services, and it was expanded early in 2018 to ensure that all organizations serving this population, within the designated communities, were invited to participate. Searches were conducted to identify and locate additional services, notably food banks. Using the internet, telephone directories, and the networks of identified service providers, a list of services was produced (see Appendix A for the recruitment list). Providers known to serve extremely poor and homeless people were contacted by telephone in order to explain the study and to set a date and time for a meeting or teleconference. The purpose of the meeting was to review the information to be collected in the study and to determine how the data could be collected from that agency. Following the telephone contact, a letter explaining the objectives of the study and the need for participation from all providers was delivered to the agencies along with a copy of the data collection instrument to be used for the count. By involving service providers in discussions about the data collection, strategies were developed to reduce the level of intrusiveness of the data collection and to maximize confidentiality. A few service providers

(e.g., some jails/prisons and police services) decided not to participate due to limited resources or to a reluctance to allow research assistants to collect data on the agency premises. However, those that did not participate stated that they informed people accessing their services about the survey and locations where they could complete the questionnaire.

Given the service pressures and limited local staff resources to collect the data, research assistants were made available to administer the questionnaire in most agencies. The research team members were trained and closely supervised to ensure that the study protocols were followed. Data collection stations were located in services within each community, such as the District Services Board offices, public libraries, Friendship Centres, shelters and food services. A substantial proportion of the participants completed the survey at locations such as hospitals, front-line drop-ins or food services and other local social programs. Teams also conducted door-to-door surveys in low income areas where homelessness had been identified as most likely to be concentrated. Surveys were also conducted at magnet events, such as community dinners provided to low income people. One or more surveys were completed at all service locations. The staff were trained to give attention to the goal of limiting participation to a single completed survey from each individual as the honorarium of \$5.00 was an incentive for participation.

There are inherent difficulties in conducting research involving people experiencing forms of homelessness. Every enumeration of homelessness will underestimate its true prevalence, as some people living with homelessness will choose not to participate or may not be aware of the enumeration. The widespread persistence of hidden homelessness that is often invisible and unrecognized as a type of homelessness by many also contributes to the underestimation. In order to overcome these difficulties and to create an accurate snapshot of the homeless population, a strategy of working with local service providers was adopted. The participation of a large majority of service providers offering services to poor and homeless people made it possible to obtain a reasonable estimate of the homeless population.



## Knowledge Mobilization

Knowledge transfer and mobilization activities were conducted in 2018 and 2019 following the data collection, data entry, and analysis phases. Data collection examined community responses to the data and translation of project findings into action strategies. Enumeration findings were presented in study communities, and quantitative and qualitative data were collected at community forums. Community members from all study communities were invited to the community forum held in Timmins on World Homeless Day 2018 (October 10, 2018), and additional forums that took place in the Towns of Cochrane (February 28, 2019) and Moosonee (February 27, 2019).

After the forums, interviews and focus groups were conducted with service providers (n= 20) and people with lived experience of homelessness (n= 30) from study communities. Semi-structured guides were used to facilitate discussions about perceptions of service providers of the community's understanding of the extent and scope of homelessness, about changes in attitudes, knowledge, and cultural safety within the community, about the state of public education on homelessness, about the use of enumeration findings to improve services, and about the recognition of good data as an aspect of strategies to address homelessness. Discussion with individuals with lived experience of homelessness centered on understanding their perceptions of homelessness in the community, of the different methods to enumerate homelessness, and of the means to address homelessness. As people with lived experience were willing to participate in group discussions, focus groups replaced individual interviews.

## Reliability and Validity

Reliability of the PPC method is examined by analyzing existing data from the 2011 PPC in Timmins compared to the new data from the 2018 PPC. The analysis takes into account contextual variables (such as migration, socio- economic and housing factors) that may impact on the PPC results in 2018. This analysis can provide information about the extent to which the PPC method provides a reliable estimate of the levels of homelessness amongst particular subgroups such as Indigenous people, Francophones, men, women, families, seniors, or youth.

The analysis also assesses measures of validity; face validity is assessed through interviews and focus groups with two stakeholder groups: people with lived experience of homelessness and service providers in the Cochrane District. Following the enumeration study, 7 focus groups and 4 interviews, each 1 hour long, were conducted in Timmins and Cochrane in July 2019. In total, 30 people with lived experience of homelessness and 20 service providers participated.

Discussions centred on observations of homelessness in the community, perceptions of change in the population, strategies for reducing or eliminating homelessness, and views of the two methods of conducting enumeration, PiT and PPC. Participants with lived experience of homelessness were recruited from the Living Space Hub in Timmins and were compensated \$20.00 for their participation. The participants at Living Space were from various First Nations and towns in the Cochrane District. Service providers were recruited based on their involvement with the enumeration study in the spring. Participants gave their consent for the discussions to be audio recorded and recordings were used to produce transcripts that were later thematically analysed.

### Outcome Evaluation

An outcome evaluation of the research study examined the strengths of the study for carrying out the comparison of the PiT and PPC methods, the strengths of their implementation and of their results, the effectiveness of the methods for enumerating hidden homelessness, and the effectiveness of the enumeration itself. The evaluation was based on a critical review of the design, of the study methods used, of the data collection, and of the results generated.

Quantitative and qualitative methods were used for the outcome evaluation of the research study.

## RESULTS

### Methods of Enumeration in Timmins: PiT and PPC

*Question 1. Is one method—PiT or PPC—more effective in gathering data and decision-making about homelessness from the perspectives of community stakeholders, CDSSAB, and researchers?*

Table 1 shows the number of individuals experiencing homelessness enumerated with each method. The first column shows the size of the population experiencing homelessness as captured by each method, both as the number of people enumerated and as a percentage of all those enumerated in the 8 days of the study. The data show that the PiT method severely undercounted the homeless population, as only a fifth of the population (20.5%) experiencing homelessness were enumerated using this method. The second column shows size of the population experiencing homelessness as a percentage of the total population of Timmins (41,788). Using the PiT method, the rate of homelessness in Timmins appears considerably lower than when both methods are combined; the difference is notable.

*Table 1. Comparison of results from the PiT and PPC in Timmins, Ontario*

	Population Experiencing Homelessness		Percentage of Total Population <sup>a</sup>
	n	%	%
Point in Time (PiT) Count	111	20.5	0.3
Period Prevalence Count (PPC)	431	79.5	1.0
Total Enumerated	542	100	1.3

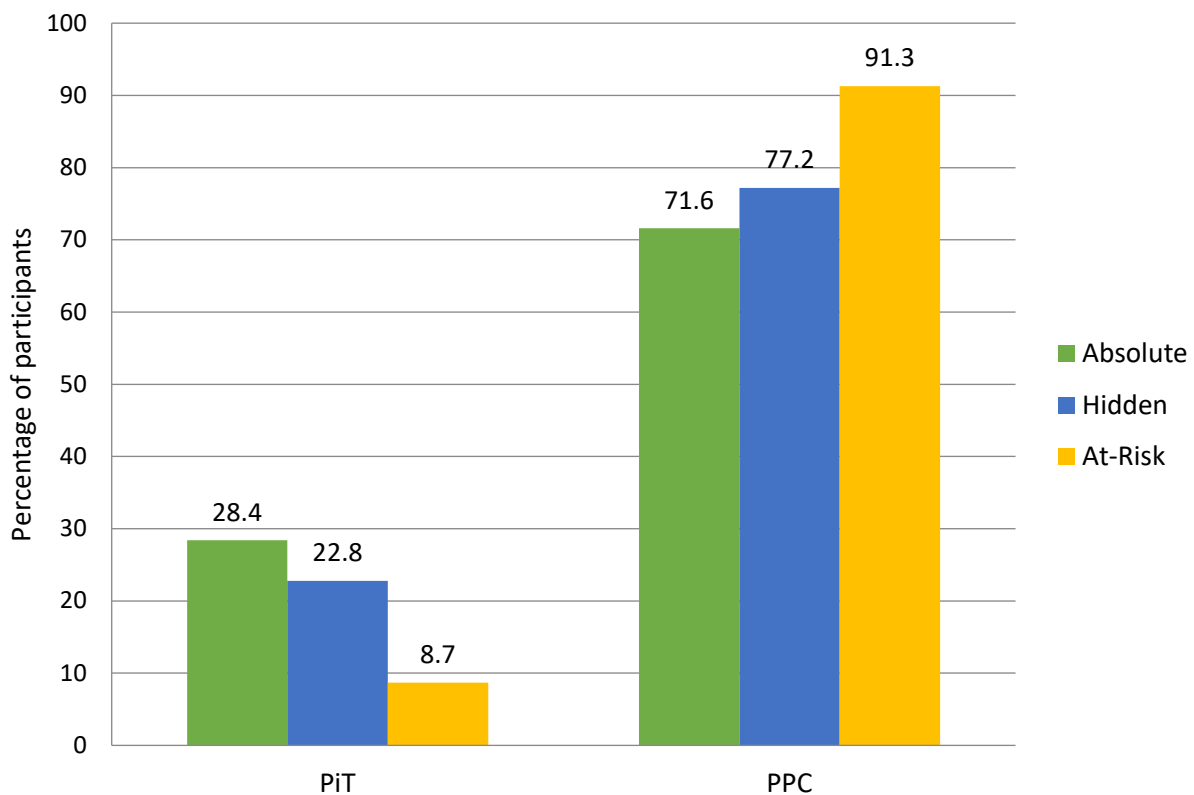
Note: <sup>a</sup> Based on the total population of Timmins (41,788).

<sup>b</sup> This table does not include dependents.

Furthermore, Figure 2 shows the percentage of participants in each form of homelessness (absolute, hidden, at-risk) who participated in the PiT and PPC. A somewhat larger percentage of those who were absolutely homeless (28.4%) participated in the PiT count (Day 1) compared to those who were in hidden homelessness (22.8%) or at-risk of homelessness (8.7%). Some people who were absolutely homeless were likely accessing services and present at

street/community locations where the enumeration survey was being conducted. Therefore, they may have had more awareness of the study. It takes longer for awareness by word of mouth to spread to those who are living with hidden homelessness or at risk of homelessness; most people in these groups participated on the subsequent days when the PPC was being conducted. The differences between the results generated by the PiT and PPC methods are dramatic and suggest that the PiT method results in severe undercounting.

Figure 2. Percentage of participants in the PiT versus PPC in Timmins by type of homelessness



Both service providers and people with lived experience of homelessness preferred using the PPC method over the PiT method. Participants believed that the PPC method gave people experiencing homelessness greater opportunity to participate, resulting in more information about the prevalence of homelessness being captured and greater representation of various subgroups in the data collected.

*“I think it’s worth the investment and doing it over a [longer] period because when we saw the difference between the enumerations and the approaches, we got a much better sense and a lot better information about the needs. And this is an important investment I think.” (Indigenous Service Provider)*

*“(I: Do you think that one day versus seven days is better? Which one would you suggest?) Seven days. ... Because you get to know those people. You get to talk with them. Because you can’t go one day and try to understand—I don’t know. You got to live, maybe you got to live with them a couple days.” (Individual with Lived Experience of Homelessness)*

*“(I: So there’s two different ways that you can do an enumeration. ... Do you have an opinion on which way you think is better?) I would go with seven days. You can’t – when I came to Timmins, I thought I knew all the homeless people. And after time came... people show up and I was like, I didn’t know you were homeless.” (Individual with Lived Experience of Homelessness)*

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Service providers especially voiced concern over relying only on a PiT count to enumerate homelessness, with the perception that a count conducted over a 24-hour period would underestimate the population.

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*“I think you miss so many people with the Point-in-Time count. Especially in a community like this, people are moving around, and I really think – I mean I’ve read about your [period] prevalence count. I read about when you used it back in 2011 as well and I think that in a community like ours, it’s essential to count for a week.” (Anglophone Service Provider)*

*« Moi j'trouve pour une semaine, y a plus de chance de voir tout le monde, parce que si tu fais une journée t'a pas la chance de voir tous les gens qui sont disponibles – comme qui sont sans abri. » (Francophone Service Provider)*

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Given the various services in the community that are offered on specific days of the week, participants worried that, based on the day the PIT was conducted, the count could miss a segment of the population that does not access services that day.

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*“And if you do it in one day, I think you’ll miss a large number of people too. Because not all people go to the same agencies, so some people may come to the Friendship Centre and they don’t go to Lord’s Kitchen.” (Indigenous Service Provider)*

*“Because you see the whole week, there’s different services every day. There’s different people that might not use the other services that day.” (Anglophone Service Provider)*

*“(I: Do you have an opinion on which way you think is better?) Seven days. ... Because some people don’t come out from where they are, only once in a while, for one thing. Some people don’t walk around, just stay in one place. ... What you’re doing is pretty good, though. Go to the homeless shelters and asking questions. ... It’s pretty hard to find people on the streets. They’ll walk away from you.” (Individual with Lived Experience of Homelessness)*

*« C’est drôle à dire, mais vraiment ça dépend de la journée, right? Donc si tu prends disons un mardi, on sait que mardi à Temiskaming Friendship Centre y vont faire un dîner pour le monde. Donc probablement tu vas rejoindre une plus grosse population des sans-abris si tu vas au TNFC les mardis, tandis que si tu vas au Projet Love telles et telles journées où s’qui vont offrir des soupers*

*si qui fait froid dehors, si qu'il pleut, hmmm, faut tu prennes tout ça en considération, où que le monde va s'éparpiller un ti-peu, tout par tout, pour savoir qu'est-ce qu'ils ont besoin comme soutient. So, une semaine j'pense ça serait l'idéal pour pouvoir rejoindre une plus grande population. »*  
(Francophone Service Provider)

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Overall, there is broad support for using the PPC method from people with lived experience of homelessness and service providers involved in the enumeration. Service providers especially voiced concern over the accuracy and representativeness of data collected using the PiT method.

### Ability of Stakeholders to Utilize the PPC Method

*Question 2. Are there differences between Group A towns (Kapuskasing, Iroquois Falls, and Matheson which have never enumerated homelessness) and Group B (where PPCs were previously conducted—Timmins and Hearst in 2011, Moosonee in 2012, and Cochrane in 2013) with regard to the ability of community stakeholders to utilize the PPC method?*

Given the service pressures and limited staff resources to collect the data, research assistants (RAs) were made available to administer the questionnaire in most agencies. Agencies were asked whether they would collect data or whether they wanted an RA to collect the data on the agency premises. Most agencies indicated a preference for RAs to be present to collect data. These RAs were trained and closely supervised by the research team to ensure that the study protocols were followed. RAs were required to keep field notes documenting their interactions with the public, with agencies, and with participants, and recording any observations of challenges or successes with the survey protocol itself. Analysing the field notes from RAs in all study communities reveals that the survey was generally well received, although RAs noted some barriers to participation and attempts by participants in all communities to participate more than once.

## Positive Reception

RAs in all communities where enumeration took place reported that the survey was generally well received when explained to potential participants and even those who did not meet the criteria for recruitment were appreciative of the study and its objectives. During the week of the week of the study when RAs were in the community, they noticed awareness of the survey spreading through word of mouth.

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*“In the morning, I approached people entering the library foyer to determine if they were willing and eligible to participate. However within an hour, people were approaching us because previous participants had passed on the word to them.” (Timmins, May 23)*

*“Attended the employment office with [RA] ... Advised her of the work we were doing and if they could support us in any way; she advised they would advertise for us and send people over to the DSSAB office if they were accessing services here.” (Hearst, May 28)*

*“After the first two people completed surveys, they left and told people outside about it. Many people who came in heard about the survey from those who had already taken it. Even the cashiers were telling individuals ... about why we were there.” (Moosonee, June 19)*

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Regardless of the community surveyed, team members, community members and agencies showed support for the project, and both members of the community and agency personnel actively participated in spreading awareness of the project by word-of-mouth. Recruitment by word-of-mouth is a key attribute associated with utilizing the PPC method; the fact that awareness of the survey spread in this way in both Group A and Group B communities points to the ability of communities newly exposed to the method to effectively conduct a PPC



enumeration. It is important to note, however, that the research team provided support within all communities.

### Barriers to Recruitment

The RAs observed few barriers preventing greater participation by the target population in both Groups A and B communities. When RAs were stationed at community agencies or transportation hubs, some prospective participants declined to complete the survey due to a lack of time, with many stating that they were catching a bus, on their way to an appointment, or simply too busy.

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*“One woman began but withdrew after reading the consent form because she didn’t have enough time.” (Timmins, May 29)*

*“Most indicated they had already completed the survey. A few others indicated they did not have time.” (Moosonee, June 29)*

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This observation was noted with door-to-door surveying as well, with some individuals ignoring the RAs’ knock on the door or declining the survey stating that they didn’t have the time.

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*“In a few houses, people peeked through the curtains, but still did not answer. Of the few that did answer, they declined the survey. Most stated that they just didn’t have time.” (Moosonee, June 21)*

*“Door knocking on Riverside. Knocked on 10 doors. No answer. Some homes run down. No answer. Few opened their blinds but did not answer the doors.” (Kapuskasing, June 1)*

*“Ash Street. Knocked on 4 apartment buildings. 16 doors. 8 did not answer. The other 8 respectfully declined. Three small families. Two elderly. One fellow who did not have time.” (Kapuskasing, June 3)*

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Some potential participants had trouble reading the questions, either due to vision loss or illiteracy. While many accepted assistance from RAs in completing the survey, some felt uncomfortable verbally sharing their responses and declined to participate. The level of willingness to share their experiences with RAs is an important issue in research on homelessness, as this affects participation rates.

The barriers to completing the survey that prospective participants gave for declining to participate were consistent across Group A and Group B communities. As such, the fact that these prospective participants declined to complete the survey does not reflect on Group A communities' ability to utilize the PPC method, but rather on the reality of conducting an enumeration study; regardless of the method used or the community's familiarity with the method, there will always be a segment of the population experiencing homelessness that will wish not to participate, as discussed in the previous section. The size of the community may also be a factor in participation. Iroquois Falls and Matheson were the smallest Group A communities enumerated (Iroquois Falls: 2 955; Matheson: 2 438); this may have resulted in a lower count as people may have sought to avoid being stigmatized when seen participating in the study. However, it should be noted that Moosonee has the smallest population of the seven communities enumerated; difficulty in recruiting was not an issue there and that may be due to some particular characteristics—such as the cultural differences between Moosonee and other towns. It is primarily an Indigenous community and the results of the study in Timmins and Cochrane indicated that Indigenous people did not show as much hesitation to participate in enumeration studies compared with Anglophones and Francophones.

#### **Participant Efforts to Complete a Survey more than Once.**

In several of the communities, RAs observed that some individuals attempted to complete the survey more than once in order to receive additional monetary incentives for participation.

While some of these individuals were recognized and refused by RAs to complete the survey again, a few were not recognized in Timmins and were able to participate for a second time. However, as previously discussed, individuals were required to provide their first, middle, and last initials, as well as their date of birth, gender, and sociocultural/linguistic background, such that duplicate cases could be identified and removed from analysis. When RAs refused to administer a second survey to those who had already completed one, they noted that some individuals became angry, aggressive, and/or hostile towards them.

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*“However, there were a few people who claimed they hadn’t already filled in a survey, but we were certain they had, so they got angry when we told them no.” (Timmins, May 27)*

*“One man tried to do another survey though he did one earlier. He [appeared to be] very intoxicated.” (Moosonee, June 19)*

*“Many individuals attempted to do the survey a second time, and a few, when told they couldn’t, were clearly upset.” (Timmins, May 28)*

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As time progressed, RAs in each community developed strategies to recognize and explain the importance of avoiding duplication to those attempting to repeat the survey. Utilizing the PPC method requires additional effort to avoid counting individuals more than once over the span of the enumeration period and also collecting data for de-duplication. The fact that RAs in all communities, Group A and Group B, were able to do so points to their ability to effectively utilize this method.

### Comparison of Results: Current and Previous Enumeration Studies

*Question 3. Do the results from 2011, 2012, and 2013 for Timmins, Hearst, Moosonee, and Cochrane differ from the results obtained for these communities in 2018? If so, how and why?*

Table 2 presents the results from the 2018 study for each community. The results reflect the community size as the largest number of participants was in Timmins. However, Moosonee has a considerably smaller population than Cochrane but the number of participants was similar to Cochrane indicating the particular issues with housing shortages, overcrowding and mobility on the James Bay.

*Table 2. Number of unduplicated individuals in the period prevalence count*

	<b>Total</b>	<b>Cochrane</b>	<b>Hearst</b>	<b>Iroquois Falls and Matheson</b>	<b>Kapuskasing</b>	<b>Moosonee</b>	<b>Timmins</b>
	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>
Youth and adult respondents	1224	230	83	27	70	269	545
Dependent children 0-17	601	171	38	11	29	169	183
Dependents 18-24	69	21	8	2	5	20	13
<b>Total</b>	<b>1894</b>	<b>422</b>	<b>129</b>	<b>40</b>	<b>104</b>	<b>458</b>	<b>741</b>

Table 3 compares the results from previous enumeration studies conducted in 2011 and 2013 and includes the percentage increase in the total count from 2011/2013 to 2018, as well as the number with and without dependents 18 to 24 years of age. The column titled “Percent Change 2011/2013 to 2018” expresses the difference between the results from previous enumeration studies and the current enumeration study as a percent change (i.e.  $(T2-T1)/T1$ ).

It is notable that little change occurred between counts in Timmins (2.9%), moderate change occurred between counts in Moosonee and Cochrane (26.5% and 34.8%, respectively), and the largest change between counts occurred in Hearst (81.7%).

Homeless Enumeration in the Cochrane District

Table 3. Comparison of total counts, 2011-2013 and 2018

	Population 2011 <sup>a</sup>	Population 2016 <sup>a</sup>	Total count 2011 to 2013	Total count 2018	Percent Change 2011/2013 to 2018	2018 Count (without Dependents age 18-24)		Absolute & Hidden Population 2018	
	n	n	n	n	%	n	%	n	%
Timmins	43,165	41,788	720	741	2.9	728	1.7	372	0.9
Cochrane	3,648	3,709	313	422	34.8	401	10.8	93	2.5
Hearst <sup>b</sup>	3,818	3,835	71	129	81.7	119	3.1	53	1.4
Moosonee <sup>b</sup>	1,632	1,405	362	458	26.5	433	30.8 <sup>c</sup>	133	9.5
Iroquois Falls & Matheson <sup>d</sup>	3,071 <u>2,410</u> 5,481	2,955 <u>2,438</u> 5,393	–	40	–	38	0.7	7	0.1
Kapuskasing	7,250	7,378	–	104	–	99	1.3	31	0.4
<b>Total</b>	<b>64,994</b>	<b>63,508</b>	<b>1,466</b>	<b>1,894</b>	<b>29.2</b>	<b>1,818</b>	<b>2.9</b>	<b>689</b>	<b>1.1</b>

<sup>a</sup> According to Statistics Canada.

<sup>b</sup> In 2006, according to Statistics Canada, the population of Moosonee was 2 006. The number of private dwellings used by residents in 2016 was 460. According to the Town of Moosonee, there are more than 700 homes and the population of Moosonee is approximately 3,000. The Town says that its population is slightly smaller than the total population of Moose Factory Island which, it says, is more than 4,000. Our previous study on migration showed that there is constant movement of people moving in and out of Moosonee. If the population is 3,000, as the Town states (personal communication, 27 February 2019), the rate of homelessness as a percentage of the total population is 14% rather than 31% as indicated in Table 19.

<sup>c</sup> If the population of Moosonee is approximately 3,000, the calculation of the rate of absolute and hidden homelessness as a percentage of the population for 2018 is 4.43%.

<sup>d</sup> Population of Iroquois Falls and Black River-Matheson, separately and combined. The results have been combined due to small numbers.

The column titled “2018 Count (without dependents 18-24)” shows the total count without the dependents in this age group because our prior studies did not include this age group in the results. The percentage column under “2018 Count (without dependents 18-24)” expresses the number of homeless people as a percentage of the total population of the community. This column allows for a comparison of the rate of homelessness in each community. It is notable that the rates of homelessness are highest in Moosonee and Cochrane. They are lowest in Iroquois Falls/Matheson and Kapuskasing. The last column in Table 3 is based only on the absolutely homeless and hidden homeless populations in each community, as these are the two groups given consideration by the Province of Ontario.

### Regional Results: Period Prevalence Count

*Question 4. How do the communities in the Cochrane District differ in the results obtained using PPC methods? What community-level factors may account for any differences (e.g., demographics, socio-economic factors, migration patterns)?*

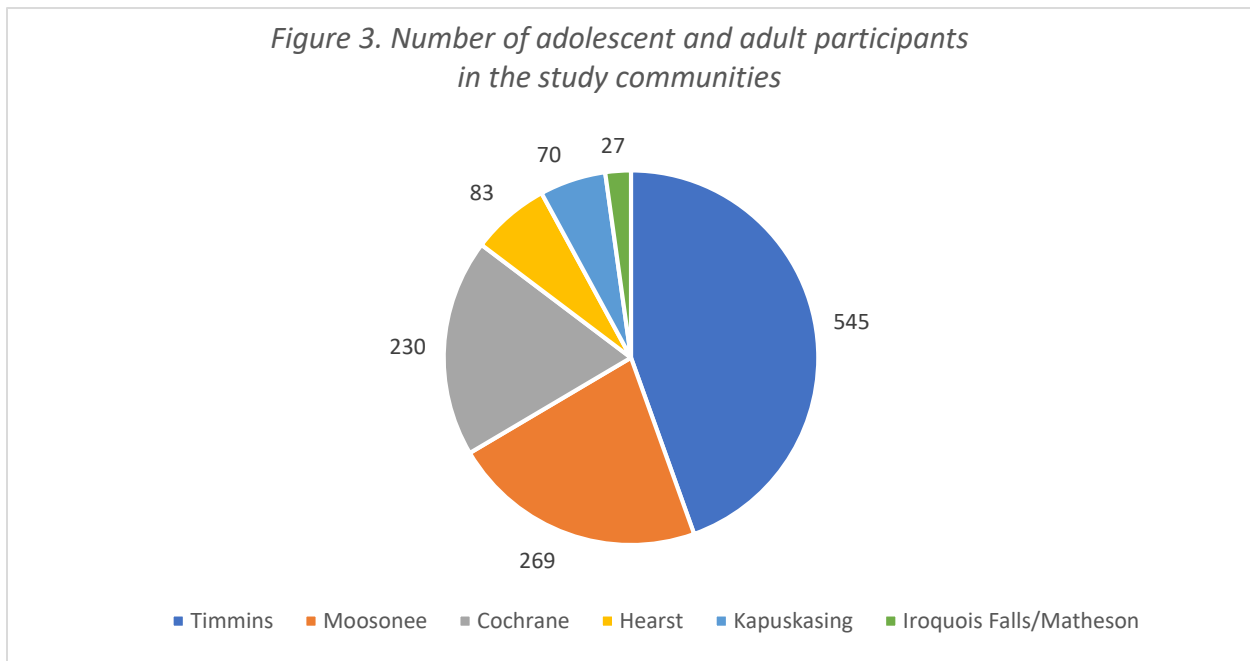
### Overall Number of Participants

The number of questionnaires completed by adults or youth in the PPC study was 1,224 (Table 2). The questionnaire asked participants to indicate the age and gender of dependents. Table 2 shows the unduplicated results, based on 1,224 adult and youth participants, in addition to their 601 dependent children under the age of 18 who were in the custody of a participant. and 69 dependents up to age 24 for a total count of 1,894. Included are seven pregnant mothers who listed their unborn babies as dependents. The age range for dependent children was 0 to 17 and one or more children were in all age groups up to age 24. It should be noted that parents/guardians identified 62 dependents over age 24 who were accompanying them, but these 62 dependents have not been included in the total count. Further analysis indicates that the fewest participants with dependents were absolutely homeless (17%), while the greatest proportion with dependents were those at risk of homelessness (44%). The percentage of people living with hidden homelessness who had dependent children was 39 percent (not shown).

Table 3 shows the overall counts for Timmins (i.e. PiT and PPC combined) and the other towns in the Cochrane District. As Table 3 shows, considering the rate of homelessness expressed as a percentage of the total population, homelessness was highest in Moosonee, Cochrane, Hearst and Timmins. The lowest rates were found in Iroquois Falls and Matheson. As noted above, non-participation in the enumeration survey as a strategy to avoid stigmatization may be a more challenging issue for enumeration in towns with populations less than 3,000.

Figure 3 shows the total number of participants surveyed in each community. Over three-quarters of the sample was surveyed in Timmins, Moosonee, and Cochrane (85.3%).

Kapuskasing, Hearst, and Iroquois Falls/Matheson accounted for 14.7 percent of the sample.



### Indigenous and Racialized Identity

Table 4 shows the results for Indigenous and racialized identity for the locations enumerated. It is important to note that the analysis was based on the multiple responses for racialized identity and for language. Participants gave up to four responses for racialized identity and three for language, as cultural and linguistic identity is complex. Some Indigenous people indicated both Indigenous heritage and Caucasian. Those who self-identified as Indigenous

were categorized in this group, regardless of their second or third choices in the question on racialized identity.

As we have consistently found in prior studies in northeastern Ontario, Indigenous people (including First Nations and Métis) were present within the study in proportions much greater than their numbers in the total population according to 2016 census data (Statistics Canada, 2017). Indigenous people are reportedly 16 percent of the Cochrane District population according to Statistics Canada, but they comprised 64.8 percent (n=740, excluding dependents) of the participants who provided information about Indigenous identity (n=1142 or 93.3% of participants) in the enumeration study.

A relatively small subgroup of the racialized homeless population in the Cochrane District (n=59) participated in the enumeration study; they were 5.1 percent of the sample. In the group who self-identified as being in a racialized group, 17 were living with absolute homelessness, 14 were hidden homelessness group, and 27 at-risk. Statistics Canada's 2016 Census Profile of the Cochrane District indicates that "visible minorities" were 1.6 percent of the total population. Using this indicator, they were over-represented in the enumeration results for every location except Kapuskasing. In contrast, Caucasians, the dominant group in the Cochrane District, were under-represented, constituting less than a third of the respondents.



Homeless Enumeration in the Cochrane District

Table 4. Indigenous, racialized and non-Indigenous identity by location

	Total		Cochrane		Hearst		Iroquois Falls and Matheson		Kapuskasing		Moosonee		Timmins	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Indigenous	740	64.2	114	53.3	29	36.8	7	26.9	30	46.1	217	88.6	343	64.8
Racialized	59	5.1	18	8.4	6	7.5	1	3.8	-	-	8	3.2	26	4.9
Caucasian	319	27.7	69	32.2	42	53.2	18	69.2	34	52.3	19	7.8	137	25.9
Don't know	35	3.0	13	6.1	2	2.5	-	-	1	1.5	1	0.4	18	3.4
Total	1153	100	214	100	79	100	26	100	65	100	245	100	524	100

Notes: n=participants only; dependent children excluded. Origins are multiple for many individuals. Indigenous people include Aboriginal, Metis and Inuit. Racialized people include Arab, Black or African-Canadians, Asians and Hispanic or Latin Americans. In general, Indigenous people constitute more than half of the homeless population. According to Statistics Canada, 2016 census data for Moosonee, 1,455 people (82% of the population) identify as Aboriginal and 320 (12%) as Non-Aboriginal. In Timmins, people who identify as Indigenous constitute 2/3 of the homeless population. Totals may not sum to 100 due to rounding error.

In comparison to Indigenous people who comprise a smaller proportion of the total population but a majority of people living with homelessness, French speakers comprise 57 percent of the population of the Cochrane District, according to Statistics Canada (2017). As Table 5 shows, however, French speakers were, on average, 13.6 percent of the total sample of homeless people. Their proportion varied by community, however. In Hearst, a largely Francophone town, they were 52.3 percent of the homeless population, while in Moosonee, they were a small group (2.7%). In Timmins, they were 10.4 percent.

### Gender and Sexuality

Table 6 shows the results for gender. Overall, males outnumbered others, at 50 percent. However, the proportion of women and adolescent girls was similar, at 47.5 percent. Women outnumbered men in Cochrane, Kapuskasing, and Moosonee. In other places, a majority were men. Dependents are not included in Table 7, but it is important to note that 60 percent of the participants who reported dependents were women (not shown). Thus, women and their dependents were a majority in all communities. In addition, 29 participants self-identified their gender as two-spirit (2S), transgender, or genderqueer (2.5%). Except for Iroquois Falls and Matheson, one or more participants who self-identified as LGBTQ2S were present in the homeless populations in every community.

Regarding sexuality, a large majority of participants identify as heterosexual; 89.7 percent stated that they were heterosexual while 5.2 percent self-identified as gay, lesbian, or 2S and 5.1 percent stated that they were bi-sexual (Table 7). There was relatively little variation from the overall pattern, except in Kapuskasing where a slightly larger proportion of participants self-identified as gay, lesbian, 2S or bi-sexual. However, in every town except Iroquois Falls/Matheson, some people identified as LGBTQ2S.

Homeless Enumeration in the Cochrane District

Table 5. Language by Location

	Total		Cochrane		Hearst		Iroquois Falls and Matheson		Kapusksing		Moosonee		Timmins	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
English	1074	77.3	205	78.8	42	47.7	23	74.2	54	64.2	248	82.4	502	80.3
French/no preference	190	13.6	37	14.2	46	52.3	8	25.8	26	30.9	8	2.7	65	10.4
Other	113	8.1	17	6.5	-	-	-	-	3	3.6	44	14.6	49	7.8
Don't know/decline	12	0.9	1	0.4	-	-	-	-	1	1.2	1	0.3	9	1.4
<b>Total</b>	<b>1389</b>	<b>100</b>	<b>260</b>	<b>100</b>	<b>1849</b>	<b>100</b>	<b>3798</b>	<b>100</b>	<b>84</b>	<b>100</b>	<b>301</b>	<b>100</b>	<b>625</b>	<b>100</b>

Notes: n=participants only; dependent children excluded. Some participants indicated no preference for either English or French (i.e., they speak both languages). The results are based on multiple responses (up to 3 responses); therefore, the number of responses may be greater than the number of participants. Figures may not sum to 100 due to rounding error.

Table 6. Gender identity by location

	Total		Cochrane		Hearst		Iroquois Falls and Matheson		Kapusksing		Moosonee		Timmins	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Male	584	50.0	108	48.8	46	58.2	14	53.8	27	41.5	104	41.4	285	54.2
Female	555	47.5	110	49.8	30	38.0	12	46.2	37	56.9	139	55.4	227	43.1
Two-spirit (2S), trans, genderqueer	29	2.5	3	1.4	3	3.8	-	-	1	1.5	8	3.2	14	2.7
<b>Total</b>	<b>1168</b>	<b>100</b>	<b>221</b>	<b>100</b>	<b>79</b>	<b>100</b>	<b>26</b>	<b>100</b>	<b>65</b>	<b>100</b>	<b>251</b>	<b>100</b>	<b>526</b>	<b>100</b>

Notes: n=participants only; dependent children excluded.

The Ministry of Housing has specified that individuals at risk of homelessness are to be removed from the database to be submitted to it.

Women constitute a majority of the homeless population in Moosonee and Kapuskasing and close to half in most other places.

Columns may not sum to 100 due to rounding error. Due to some missing data on type of homelessness, the number of participants is smaller than in Table 1.

Missing values are within acceptable parameters.

## Age

As is shown in Table 8, there was general consistency in the age of participants across locations as the range was from adolescence to old age. The overall mean age was 39.9 years. In Timmins and Cochrane, some young adolescents who were not connected with a family unit were present in the homeless population, as indicated in the age range. In addition, it is a concern that 178 youth up to age 24 are living with homelessness in the Cochrane District, with 66 in Timmins and 44 in Moosonee. To prevent youth homelessness, it is vital to secure housing and services for them as soon as possible after they become homeless. Moreover, 311 adults aged 50 years and older were living with forms of homelessness in the Cochrane District, with over a third (35.4%) living homeless in Timmins. Most older adults in the Cochrane District were at risk of experiencing homelessness (n=174, 56.5%); however, in Hearst, the majority of older adults were experiencing hidden homelessness (n=12, 50.0%). Further examination of the backgrounds of older adults (50+) revealed that the majority were Indigenous people (n=176, 59.0%). The oldest participants (aged 85+) resided in Cochrane, Moosonee, and Timmins.

## Chronicity and Frequency of Homelessness

Every town or city has some severe cases of prolonged homelessness, either in the form of chronic or episodic homelessness (Table 9). Most of these people are in Timmins (over half) but Cochrane and Moosonee also have substantial numbers of people living with extended periods or repeated episodes of homelessness. The federal and provincial governments have identified chronic and episodic homelessness as particularly serious, requiring attention to eliminate these forms of homelessness.

Homeless Enumeration in the Cochrane District

Table 7. Sexuality by location

	Total		Cochrane		Hearst		Iroquois Falls and Matheson		Kapusksing		Moosonee		Timmins	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Heterosexual	1013	89.7	189	86.3	68	90.7	23	88.5	51	82.3	231	96.2	451	89.0
Gay or lesbian, 2S	59	5.2	14	6.4	4	5.3	3	11.5	5	8.0	3	1.3	30	5.9
Bi-sexual	57	5.1	16	7.3	3	4.0	-	-	6	9.7	6	2.5	26	5.1
<b>Total</b>	<b>1129</b>	<b>100</b>	<b>219</b>	<b>100</b>	<b>75</b>	<b>100</b>	<b>26</b>	<b>100</b>	<b>62</b>	<b>100</b>	<b>240</b>	<b>100</b>	<b>507</b>	<b>100</b>

Notes: n=participants only; dependent children excluded. Columns may not sum to 100 due to rounding error. Missing values are within acceptable parameters.

Table 8. Age by location

	Total	Cochrane	Hearst	Iroquois Falls and Matheson	Kapusksing	Moosonee	Timmins
Age range	13-89	14-87	18-76	19-79	16-79	16-86	13-89
Mean	39.85	40.54	39.63	41.81	41.43	41.60	38.44
Youth aged 13-24 (n)	178	31	18	4	15	44	66
Adults aged 50+ (n)	311	64	24	9	25	79	110

Note: n=participants only; dependent children excluded. Some unaccompanied youth aged 13 to 24 were participants in the enumeration study.

Chronic homelessness was identified by slightly more individuals in every study community compared to episodic homelessness. Episodic homelessness is defined as 3 or more episodes of homelessness within the previous year. Percentages were calculated based on the number of adolescent and adult participants (n=1,224). The rate of chronic homelessness was lower than that reported in 2019 for Ontario by Employment and Social Development Canada (50%) while the rate of episodic homelessness was higher (10%). Differences in the rates of chronic and episodic homelessness between the Cochrane District and Ontario (ESDC, 2019) may be due to differences in the methods used—i.e., PiT for the ESDC results versus PPC for the Cochrane District.

*Table 9. Chronicity and frequency of homelessness in the year prior by location*

	<b>Chronically homeless</b>	<b>Episodically Homeless</b>
Cochrane	51	47
Hearst	15	12
Iroquois Falls/Matheson	5	4
Kapuskasing	14	5
Moosonee	37	31
Timmins	185	120
<b>Total n (%)</b>	<b>307 (25.1)</b>	<b>219 (17.9)</b>

Note: Chronic homelessness is defined as continuous homelessness for 6 months or more whereas episodic homelessness is defined as 3 or more distinct episodes within the year.

### Family Homelessness

A third to half of the participants were staying alone at the time of the enumeration study (Table 10). In Timmins, a majority reported that no one was staying with them (53%). In Kapuskasing, close to half were alone, while in other communities, about a third were on their own. Participants who were with others most often stated that children or adolescents were with them, followed by partners or other adults.

Table 10. Family homelessness by location

	Cochrane		Hearst		Iroquois Falls and Matheson		Kapuskasing		Moosonee		Timmins	
	n	%	n	%	n	%	n	%	n	%	n	%
None	94	33.1	35	36.1	15	37.5	31	44.3	104	32.5	314	53.2
Partner	55	19.4	25	25.8	11	27.5	18	25.7	55	17.2	97	16.4
Other Adult	44	15.5	7	7.2	1	2.5	3	4.3	69	21.6	65	11.0
Child or children	91	32.0	30	30.9	13	32.5	18	25.7	92	28.8	114	19.3
<b>Total</b>	<b>284</b>	<b>100</b>	<b>97</b>	<b>100</b>	<b>40</b>	<b>100</b>	<b>70</b>	<b>100</b>	<b>320</b>	<b>100</b>	<b>590</b>	<b>100</b>

Notes: n=participants only; dependent children excluded. The results are based on multiple responses; therefore, the number of responses may be greater than the number of participants. Columns may not sum to 100 due to rounding error.

### Source of Income

In Table 11, the sources of income for participants in the various communities are shown. An important reality reflected in the results is that people often have more than one source of income and the participants indicated up to six sources. Yet, six percent reported that they had no income. Most participants (98.5%) reported at least one source of income, 80 percent reported two, but only 6 percent reported three while two percent reported four sources. Less than one percent listed five or six sources.

A primary source of income support for people living with homelessness is Ontario Works (OW) or social assistance (Table 11). Overall, more than a third of the participants identified it as a source of income. Approximately half of those in Timmins reported that OW was a source of income, while employment was a source of income for only a small proportion (less than 10%). In every town, some people had some employment that provided an income source. The largest proportion with employment income was in Hearst (39%), followed by Cochrane (37%). The smallest proportion having employment income was in Timmins. The third main source of income was disability benefits but, in Timmins, this was the second most prevalent income source.

Homeless Enumeration in the Cochrane District

Table 11. Income sources by location

	Total		Cochrane		Hearst		Iroquois Falls and Matheson		Kapusksing		Moosonee		Timmins	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Social assistance/OW	433	36.0	54	23.7	18	22.0	6	23.1	20	29.0	81	30.8	262	48.6
Employment	277	23.0	85	37.3	32	39.0	7	26.9	19	35.4	92	35.4	47	8.7
Disability benefit	236	19.6	30	13.2	17	20.7	8	30.8	19	27.5	27	10.4	141	26.2
Child and family tax benefits	81	6.7	23	10.1	3	3.7	1	3.8	4	5.8	25	9.6	30	5.6
GST refund	80	6.6	27	11.8	3	3.7	-	-	6	8.7	10	3.8	36	6.7
Seniors benefits	77	6.4	23	10.1	3	3.7	-	-	8	11.6	22	8.5	21	3.9
No income	73	6.1	14	6.1	7	8.5	2	7.7	5	7.2	11	4.2	40	7.4
Other source	66	5.5	20	8.8	2	2.4	-	-	2	2.9	10	3.8	38	7.1
Employment insurance	58	4.8	23	10.1	3	3.7	2	7.7	3	4.3	9	3.5	18	3.3
Money from family/friends	52	4.3	7	3.1	2	2.4	1	3.8	5	7.2	10	3.8	29	5.4
Informal/self-employment	42	3.5	6	2.6	4	4.9	1	3.8	-	-	15	5.8	18	3.3
Decline	39	3.2	5	2.2	1	1.2	1	3.8	1	1.4	16	6.2	17	3.2
<b>Total</b>	<b>1514</b>	<b>126</b>	<b>317</b>	<b>139</b>	<b>95</b>	<b>116</b>	<b>29</b>	<b>111</b>	<b>92</b>	<b>141</b>	<b>328</b>	<b>126</b>	<b>697</b>	<b>129</b>

Note: The results are based on multiple responses (up to 6); therefore, the number of responses may be greater than the number of participants. Percentages exceed 100 because they are based on multiple responses. n=participants only; dependent children excluded.



Taken together, a substantial number of participants also reported receiving government benefits in the form of child and family tax benefits (for example, Canada Child Benefit), GST refunds, and seniors' benefits (for example, Old Age Security [OAS] and/or Guaranteed Income Supplement [GIS]). Small proportions had some income from employment insurance, family or friends or informal/self employment. The latter may come from panhandling or other ways of obtaining money. It is notable that some people in every community stated that they had no income.

### Military Service and Child Welfare Involvement

As shown in Table 12, one or more persons with prior military, RCMP service or peacekeeping experience were present in the communities enumerated. In total, 41 participants had served in the military, RCMP or peacekeeping operations. According to Veterans Affairs Canada (2018), the percentage of veterans who are homeless is 4.3 percent but in other countries it has been found to range between 3 to 7 percent. The primary factors linked to homelessness were mental health challenges and addictions, according to Veterans Affairs. The rate in the Cochrane District, at 3.4 percent, is slightly lower than the average that has been previously found in Canada, but it is within the range reported by Veterans Affairs Canada. Further analysis shows that 39 percent of those with military/RCMP service reported mental health challenges and 39 percent reported addictions (not shown).

Involvement with child welfare (foster care or group homes) has been identified as a factor leading to homelessness. A quarter of the participants (25.2%) in the Cochrane District enumeration reported previous child welfare involvement. This proportion is slightly higher than the 20 percent reported in a national study (Gaetz, O'Grady, Kidd & Schwan, 2016). The indication that 10 percent of the participants were part of the Sixties Scoop shows that the reality of child welfare involvement extends beyond foster care and group homes. The Sixties Scoop era extended from the 1950s to the 1980s when Indigenous infants and children were apprehended in substantial numbers by child welfare authorities and typically placed with non-Indigenous families. The results indicate that involvement with child welfare and the sixties scoop affected many more people than did military involvement. However, 37 percent had

experienced one or more (i.e., military experience, child welfare involvement or sixties scoop survivor).

*Table 12. Military service and child welfare involvement by location*

	<b>Cochrane</b>	<b>Hearst</b>	<b>Iroquois Falls and Matheson</b>	<b>Kapuskasing</b>	<b>Moosonee</b>	<b>Timmins</b>	<b>Total</b>
	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>
Military	9	1	2	2	4	23	41
Child welfare	53	12	5	10	62	155	297
Sixties Scoop	30	5	2	2	29	45	113
<b>Total</b>	<b>92</b>	<b>18</b>	<b>9</b>	<b>14</b>	<b>95</b>	<b>223</b>	<b>451</b>

Note: n=participants only; dependent children excluded.

### Reasons for Homelessness

The underlying reasons for homelessness are complex and often multiple. The enumeration survey allowed participants to indicate up to 11 reasons for homelessness. Most indicated one or two reasons, but 44 participants cited four reasons. As Table 13 shows, overall, the largest number stated that addiction or substance use was the main reason for homelessness. It must be recognized that the forces related to substance use and addictions are complex. This survey could not uncover whether substance abuse led to homelessness or began as a way to cope with homelessness. According to literature cited by Coumans and Spreen (2003), substance use may be understood as an outcome of homelessness. Thus, it is thought that people become homeless and then use substances to cope with their circumstances. Data in the current study cannot address the causality. However, it is important to recognize that many housed people use substances. Furthermore, the fact that people living with homelessness acknowledge addictions and substance use as issues they face clearly indicates the need for more community services to enable people to receive treatment. This issue is also addressed in other sections below.

Homeless Enumeration in the Cochrane District

Table 13. Reasons for homelessness by location

Reasons	Cochrane		Hearst		Iroquois Falls and Matheson		Kapuskasing		Moosonee		Timmins		Total
	n	%	n	%	n	%	n	%	n	%	n	%	n
Addiction or substance use	13	4.9	5	5.0	1	4.5	40	29.4	27	9.4	160	16.8	246
Unable to pay rent or mortgage	25	9.4	9	8.9	2	9.1	10	7.4	27	9.4	118	12.4	191
Job loss	21	7.9	7	6.9	2	9.1	14	10.3	17	5.9	113	11.9	174
Illness or medical conditions	11	4.1	11	10.8	-	-	22	16.2	9	3.1	75	7.9	128
Conflict with spouse/partner	19	7.1	5	5.0	1	4.5	3	2.2	17	5.9	72	7.6	117
Unsafe housing conditions	16	6.0	4	4.0	2	9.1	6	4.4	14	4.9	72	7.6	114
Experienced abuse by spouse/partner	12	4.5	5	5.0	1	4.5	2	1.5	13	4.5	43	4.5	76
Conflict with parent/guardian	6	2.3	5	5.0	1	4.5	5	3.7	13	4.5	45	4.7	75
Incarcerated	8	3.0	2	2.0	-	-	-	-	4	1.4	36	3.8	50
Hospitalization or treatment program	10	3.8	2	2.0	-	-	1	0.7	2	0.7	31	3.3	46
Experienced abuse by parent/guardian	4	1.5	5	5.0	1	4.5	2	1.5	5	1.7	16	1.7	33
Other, don't know	121	45.5	41	40.5	11	50.0	31	22.8	139	48.4	170	17.9	513
<b>Total</b>	<b>266</b>	<b>100</b>	<b>101</b>	<b>100</b>	<b>22</b>	<b>100</b>	<b>136</b>	<b>100</b>	<b>287</b>	<b>100</b>	<b>951</b>	<b>100</b>	<b>1763</b>

Note: n=participants only; dependent children excluded.

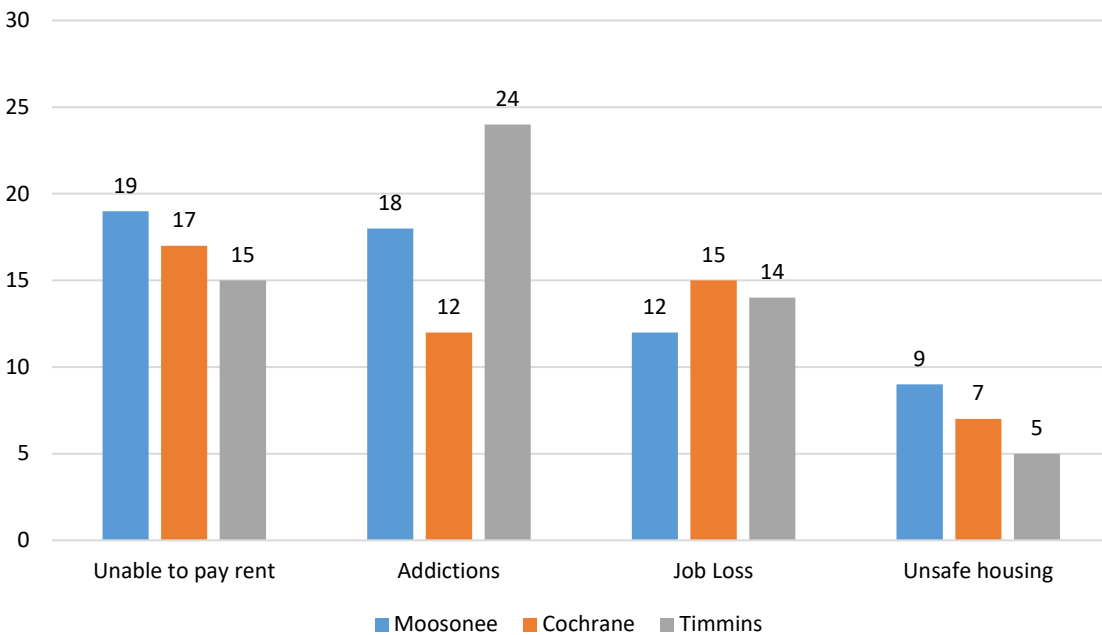
The results are based on multiple responses; therefore, the number of responses may be greater than the number of participants.

Columns may not sum to 100 due to rounding error.

Structural factors such as the inability to pay rent or mortgage, job loss and unsafe housing conditions were also cited by substantial numbers of participants—approximately a third overall. Illness as well as conflict or abuse by a spouse or parents/guardians were other factors of importance. Considering four measures of conflict or abuse as indicators of domestic violence leading to homelessness, 301 of the participants (36% of 847 who provided reasons) were homeless due to conflict or abuse with partners/spouses or parent/guardians.

Figure 4 shows the main reasons for homelessness given by Indigenous participants (percentage) by location in Moosonee, Cochrane and Timmins (sites with the largest number of Indigenous participants). In order of importance, the primary reasons in Moosonee were inability to pay rent/mortgage, addictions/substance use, job loss and unsafe housing. The order of importance of the reasons given by Indigenous people in Cochrane was similar to Moosonee but job loss was cited slightly more frequently in Cochrane.

*Figure 4. Reasons for homelessness, Indigenous participants in Moosonee, Cochrane & Timmins*



The main difference for Timmins is that addictions were the primary reason for homelessness given by Indigenous people. Importantly, taken together, four measures of conflict and abuse accounted for the largest percentage of responses (33%, Moosonee; 35%, Cochrane; 23%,

Timmins). In Timmins, abuse and conflict accounted for a similar proportion as addiction amongst Indigenous people (not shown).

### Measure of Hidden Homelessness

*Question 4. How effective is the new measure of hidden homelessness in gathering data from people living in urban and rural centres in the Cochrane District?*

The study procedures and analysis were designed to allow for data collection on hidden homelessness, as well as the absolute and at-risk groups. Screening questions for hidden homelessness were included. Importantly, the inclusion of a new measure of hidden homelessness within the survey allowed for an enumeration of people living with hidden homelessness and an exploration of histories of living circumstances when homeless. One difference between absolute homelessness and hidden homelessness is that the latter are invisible to services providers, hidden from view; while without a home, they often stay with others who have a place to live and. Studying this group is important because it is now recognized that, in northern and rural places, much homelessness is largely invisible, as many people cope with homelessness by finding others who allow them to stay temporarily, such as through “couch surfing,” living in bush camps and other strategies to remain hidden (Kauppi et al., 2017).

Table 14 shows the overall results for histories of hidden homelessness in the Cochrane District. The question asked whether participants had ever lived in these housing circumstances. The results are based on multiple responses, as participants could indicate all types that applied to them. The most common forms of hidden homelessness involved couch surfing with friends or family members; this type of accommodation was cited by over three-quarters of cases. After couch surfing, sleeping outdoors was identified by approximately half the cases, while over 40 percent indicated that they had lived in housing that was unfit for human habitation. Over 40 percent also indicated that they had stayed in a motel room or in a single room. Well over a third had lived in a vehicle or had squatted. A third reported living in a bush camp or camper (RV). About a quarter to a third had been in an institution or had offered services in exchange for accommodation, which included sex work or some type of personal services. Table 14 shows

the forms of hidden homelessness experienced by participants in the various study communities. The results show that, collectively, participants had experienced all forms of hidden homelessness shown. Included in Table 14 is the indication that close to half of the respondents had stayed in a shelter—a form of absolute homelessness (shaded row). The results on hidden homelessness shown in Table 14 indicate that it was more prevalent than absolute homelessness. The new measure of hidden homelessness was an effective tool for examining the prevalence of hidden homelessness.

*Table 14. Forms of hidden homelessness in the Cochrane District*

<b>Forms of Hidden Homelessness</b>	<b>n</b>	<b>%</b>	<b>% of cases</b>
Couch surfing with friends	732	14.5	78.1
Couch Surfing with family	722	14.3	77.1
Slept outdoors	459	9.1	49.0
Lived in a place with no running water/unfit for human habitation	403	8.0	43.0
Stayed in a motel room	382	7.6	40.8
Stayed in a single room	383	7.6	40.9
Lived in a Vehicle	362	7.2	38.6
Was squatting	331	6.5	35.3
Lived in a bush camp/camper	311	6.1	33.2
Stayed in a hospital, emergency department or other institution	295	5.8	31.5
Offered services in exchange for shelter (sex, personal services/care)	224	4.4	23.9
Absolute homelessness: stayed in a shelter	453	9.0	48.3
<b>Total</b>	<b>5057</b>	<b>100.0</b>	<b>539.7</b>

Note: n=participants only; dependent children excluded.

Data are based on the number of multiple responses. Some participants did not answer all questions while others gave multiple responses.

Percentages do not sum to 100 due to the multiple responses provided, indicating that participants reported on the various forms of hidden homelessness they have experienced.

### Regional Differences in Hidden Homelessness

Table 15 provides information about the classification of participants into the three categories of homelessness—absolute, hidden, and at-risk of homelessness—by study community. The

rates of hidden homelessness were similar for Hearst and Timmins at 43 percent and Moosonee at 41 percent. In Cochrane and Kapuskasing, close to a quarter to a third of the respondents were living with hidden homelessness. The proportion of people at risk of homelessness was highest in Cochrane at 59 percent and Kapuskasing at 56 percent, and lowest in Timmins at 29 percent and Hearst at 35 percent. However, these categories are highly interconnected as the circumstances for people who experience less severe forms of homelessness may change within any given year.

*Table 15. Types of homelessness by location*

	Absolute Homelessness		Hidden Homelessness		At-Risk of Homelessness		Total	
	n	%	n	%	n	%	n	%
Cochrane	23	10.2	70	31.0	133	58.8	226	100
Hearst	18	22.2	35	43.2	28	34.6	81	100
Iroquois Falls/Matheson	5	18.5	2	7.4	20	74.1	27	100
Kapusksasing	14	20.0	17	24.3	39	55.7	70	100
Moosonee	25	9.5	108	40.9	131	49.6	264	100
Timmins	148	28.4	224	42.9	150	28.7	522	100
<b>Total</b>	<b>233</b>	<b>19.6</b>	<b>456</b>	<b>38.3</b>	<b>501</b>	<b>42.1</b>	<b>1190</b>	<b>100</b>

Note: n=participants only; dependent children excluded; 34 cases could not be classified into absolute, hidden or at-risk groups. Due to some missing data on type of homelessness, the number of participants, for some communities, is smaller than other tables as 34 could not be classified. Missing values are within acceptable parameters.

The results in Table 16 show that, in all locations, individuals in the homeless population had experienced the varied forms of hidden homelessness listed. In every community, the number of participants experiencing hidden homelessness was larger than the number who had stayed in a shelter.

Similar to the overall results (in Table 14), the most commonly reported forms of hidden homelessness, in all communities, were couch surfing with friends or family members. Other forms varied somewhat between communities (Table 16). In Timmins, Hearst and Moosonee the third most common form of hidden homelessness involved sleeping outdoors. Other

frequently mentioned forms of hidden accommodation involved staying in motels or other single rooms, vehicles, or bush camps/campers. Less often mentioned were institutions, squatting or providing services in exchange for accommodation. As was also noted above, fewer participants reported that they stayed in shelters (absolutely homeless) compared with the numbers reporting forms of hidden homelessness.

*Table 16. Hidden homelessness by location*

Hidden homelessness	Cochrane	Timmins	Hearst	Kapuskasing	Moosonee	Iroquois Falls and Matheson	Total
	n	n	n	n	n	n	n
Family Couch Surfing	129	374	50	38	123	8	722
Friends Couch Surfing	116	411	47	32	121	5	732
Motel	67	222	30	20	40	3	382
Sleeping Outdoors	62	280	28	16	71	2	459
Vehicle	55	209	27	15	55	1	362
Single Room	51	228	26	22	54	2	383
Bush Camp/Camper	45	181	23	17	43	2	311
No Running Water/Unfit	44	257	21	16	60	5	403
Hospital Emergency/Institution	29	196	16	12	41	1	295
Squatting	24	226	13	9	57	2	331
Offering Services for Shelter	20	154	8	8	32	2	224
Absolutely homeless: Slept in a shelter	51	312	17	12	57	4	453
<b>Total</b>	<b>160</b>	<b>488</b>	<b>70</b>	<b>48</b>	<b>163</b>	<b>8</b>	<b>937</b>

Note: n=participants only; dependent children excluded. Results are based on multiple responses. Percentages do not sum to 100 due to the multiple responses provided, indicating that participants reported on the various forms of hidden homelessness they have experienced.

In Table 16, the totals indicate the number of participants in each community who reported on their prior experiences. For example, in the Town of Cochrane, 160 individuals reported on



their experiences with the 12 forms of accommodation. It should be noted that hidden homelessness overlaps with forms of absolute homelessness, but individuals may not be visible to the general public or to service providers when they stay in vehicles, sleep in bush camps, tuck into hidden locations outdoors or exchange services for accommodation.

### Current Lodging by Type of Homelessness

Table 17 provides information about experiences of housing or shelter among those who participated in the survey. The responses to the mandatory question about current lodging suggested that many people did not know where they would stay at night. Amongst those living with hidden homelessness, the dominant response was that they would stay at someone else's place (i.e., couch surfing). While many indicated that they had an apartment or house, they were classified as hidden homeless if they stated that the place was not safe (which is an accepted definition of homelessness); 113 individuals provided information that their apartment or house was unsafe.

It is worth noting that many people pay rent to stay in accommodation that is severely substandard and not appropriate for human habitation. Alternatively, their existing home may not meet basic standards or requires major repairs. The dominant responses of people who were absolutely homeless were that, 1) they did not know where they would stay or, 2) they intended to stay at someone else's place, in an emergency or domestic violence shelter, or in a transitional shelter. However, these should be viewed as potential plans and not firm decisions as many indicated a number of possibilities. Some of those who were categorized as at-risk appeared to be living with hidden homelessness as their responses on the survey indicated that their home was not safe for them. The existing, published definitions of homelessness reflect the view that having an unsafe home is a form of homelessness (Canadian Observatory on Homelessness, 2012).

Table 17. Current lodging/homelessness by type of homelessness

	Absolute		Hidden		At-Risk	
	n	%	n	%	n	%
Own apartment or house	-	-	113	24.8	488	100
Someone else's place	44	18.9	304	66.7	-	-
Motel/hotel	6	8.1	37	8.1	-	-
Hospital, jail, prison, remand	6	2.6	8	1.8	-	-
Emergency or DV shelter	76	32.6	1	0.2	-	-
Transitional shelter	43	18.5	1	0.2	-	-
Public space	16	6.9	-	-	-	-
Vehicle	13	5.6	-	-	-	-
Makeshift shelter, tent, shack	19	8.2	1	0.2	-	-
Abandoned/vacant building	14	6.0	-	-	-	-
Other unsheltered location	26	11.2	-	-	-	-
Do not know/decline	90	38.6	22	37.3	-	-

Note: Data are based on the number of multiple responses. Some participants did not answer all questions while others gave multiple responses.

Percentages do not sum to 100 due to the multiple responses provided, indicating that participants reported on the various locations where they were staying. People living with absolute homelessness reported the largest number of lodgings.

### Sociodemographic Characteristics by Type of Homelessness

The results in Table 18 indicate that hidden homelessness is a prevalent form of homelessness in the Cochrane District. However, the number of people living with the risk of homelessness is often similar to or higher than the number living with hidden homelessness in various communities and on different variables. Indigenous people were most often in circumstances of hidden homelessness while the largest group of individuals with a racialized identity were at risk of homelessness. Young people who were not connected to a family unit when they participated in the survey tended to be living with hidden homelessness. Women were most often at risk of homelessness while men and LGBTQ people—including two-spirit (2S), gender queer, and those who did not know their gender—were in hidden homelessness. Chronic homelessness (homelessness for 7 months or more in a year) was more often experienced than

episodic homelessness (3 or more episodes of homelessness within a year). There is overlap between these two severe types of homelessness as a quarter of those who experience either chronic or episodic homelessness also report both types. Therefore, some people appear to live with an extended period of homelessness (chronic), periods in which they have accommodation, interspersed with shorter periods of homelessness (episodic). In depth and perhaps longitudinal research may be required to study the types of homelessness experienced over a period of time.

*Table 18. Age, cultural background, gender and military service*

	<b>Absolutely Homeless</b>	<b>Hidden Homeless</b>	<b>At-Risk</b>	<b>Total</b>
	<b>n</b>	<b>n</b>	<b>n</b>	<b>n</b>
Indigenous identity (including Inuit)	137	331	244	712
Racialized identity (e.g., Asian, Arab, Black, Filipino, Hispanic)	17	14	27	58
Youth under 18 not connected to a family unit	1	10	6	17
Youth aged 18-24 not connected to a family unit	28	78	52	158
Female/women	80	198	260	538
Male/men	128	232	213	573
Trans, two-spirit, genderqueer, don't know, not listed	7	10	5	22
Chronic	102	140	59	301
Episodic	54	116	45	215
Was in foster care or group home	46	123	121	290
Survivor of the 'Sixties Scoop'	29	38	46	113
Veterans/military	11	14	14	39

Notes: Missing values are within acceptable parameters (less than 5%). Percentages are calculated using the number of respondents for each variable. E.g., 28 Indigenous people could not be classified by type of homelessness.

Raw numbers may differ from other tables due to missing data on type of homelessness (n=34 cases not classified).

As noted above, chronic homelessness is defined as continuous homelessness for 7 months or more within the previous year. Episodic homelessness is defined as 3 or more episodes of homelessness within the previous year. Ten individuals reporting chronic and episodic homelessness could not be classified by type of homelessness due to missing data for

classification. However, these individuals were likely experiencing absolute or hidden homelessness, as chronic and episodic homelessness are considered to be severe types.

This study shows that the hidden homeless population is larger than the absolutely homeless subgroup in the Cochrane District. While the former group is very similar, on many measures, to those who are absolutely homeless, nevertheless, in some ways it is more disadvantaged. Compared to individuals who are absolutely homeless, more of those living with hidden homelessness are Indigenous, young and staying alone. More individuals report having experienced conflict and abuse and unsafe housing conditions. On several measures, they are similar to people living with absolute homelessness. As relatively little has been known about people living with hidden homelessness, the findings of the current enumeration study provide information to better understand the issues and needs of this subgroup of the homeless population within small, northern communities.

### Community Response to Enumeration Data

*Question 5. How do communities in the Cochrane District respond to the new data on homelessness and hidden homelessness? Do local stakeholders in the communities of Timmins, Kapuskasing, Hearst, Cochrane, Iroquois Falls, and Matheson respond in similar or different ways to the results?*

#### Immediate Community Response

There was generally a good response to the study. Examining field notes of observations during the enumeration reveals RAs' impressions of the study communities as being open and receptive to the study. Both agency staff involved in data collection and prospective participants were extremely welcoming to RAs and expressed positive attitudes towards the goals of the enumeration study.

The following are excerpts from field notes recorded by RAs during the enumeration study.

*“We were situated at the exit; perfect location to catch everyone on their way out of the store. The manager was very accommodating and welcoming, as were the employees of the store.” (Moosonee, June 19)*

*“The first day of surveying was very welcoming; people were very receptive of us being there trying to get an accurate count of people who are homeless and vulnerable housed.” (Moosonee, n.d.)*

*“At 8:30am, I met with security, who set me up in a location, at a kitchen table. Very pleasant to deal with, and appreciative of our presence; thanked me three times for what we are trying to accomplish with the surveys. Met with the manager ... who was very accommodating and open to answering any questions.” (Timmins, May 24)*

*“In order to enter the Jubilee Centre, I had to ring the bell for service. I was greeted pleasantly by the secretary and shown a room down the hall where I could set up. Within 20 minutes, I met two individuals. ... Upon completing the survey, one participant expressed his gratitude and discussed how important this study was to individuals such as himself.” (Timmins, May 25)*

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In interactions with members of the public who did not meet the eligibility criteria for the study, RAs noted that many were aware of the issues with homelessness in their communities. In situations where members of the public had little knowledge of homelessness, they were open and receptive to learning from the RAs.

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*“Spoke to an interesting older lady for a while about the area and reasons why people might become homeless and the harsh living conditions. ... Another older gentleman seemed really interested in the different circumstances and situations leading to and during periods of homelessness.” (Cochrane, May 10)*

*“Completed 4 surveys with familiar faces. They had questions about the survey and why it was being conducted. Some did not meet the definition of homelessness. Had to explain to them that Moosonee has boil water advisories, abandoned homes, and a long waitlist for the non-profit housing. Then they understood [the] situation a little better and said that they do need a men’s shelter.” (Moosonee, June 21)*

*“Surveyed three people. One younger girl. A single mother. And a youth. [RA] surveyed an older gentleman. Spoke about hidden homelessness and how it is becoming more prevalent as the economy slows.” (Kapuskasing, May 30)*

*“Steady trickle of people through lobby taking survey. Many people stopping to chat and share about lack of housing and mental health services in community. A person stopped to chat about food waste in community, brainstormed ideas for food distribution, etc.” (Timmins, May 29)*

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Moreover, the enumeration study prompted dialogue in communities about how best to serve the needs of the homeless population. Notably, in Moosonee, this dialogue repeatedly centered around the community’s need for an emergency shelter for men.

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*“Attended police station. ... Advised he has had to use creative ways to house people under the MHA [Mental Health Act]. Need men's shelter desperately. Willing to work and collaborate.” (Moosonee, June 19)*

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In Timmins, RAs conducting the enumeration study were able to locate individuals living in bush camps that had not been previously recognized by local service providers. As a result of the enumeration study, staff from Project LOVE were made aware of these individuals and reached out to offer services and supports.

### Short-Term Community Response

On World Homeless Day 2018, a community forum was held in Timmins. The invitation to attend had been extended throughout the Cochrane District. The results of the enumeration were presented to over 80 people at this public forum. Recommendations were developed in advance based on the responses of the participants regarding health needs and general needs, as well as other issues that have been identified through this enumeration project. The attendees participated in an activity to rate each recommendation through a “dotmocracy” activity. In this activity, the participants individually reviewed all recommendations and then provided feedback by identifying the recommendations that they viewed as most important by applying colour-coded dots to the list of recommended strategies for change.

Subsequently, forums were held in Moosonee (27 February 2019) and Cochrane (28 February 2019). The results provide a rank-ordering of the recommendations to establish priorities for each community. Prioritizing the recommendations can ensure that the pressing needs of homeless people are met based on the views of local residents and that they are supported effectively in obtaining and retaining housing, employment, education, and services.

Table 20 shows the rank-order of the recommendations and the scoring for the forums in Cochrane, Moosonee, and Timmins. All recommendations were supported by one or more participants who attended the community forums. The order of recommendations in Table 20 is based on the results for Timmins. The top three recommendations in Timmins and Cochrane are the same but in a different order; the emphasis is on providing supportive housing services, enhancing services in areas of greatest need, and working with Indigenous communities to address homelessness. In Moosonee, participants indicated the importance of counselling services (# 2) and income supports/emergency funding (# 3).

Table 19. Rank-order of recommendations

Rank Order			Recommendations
Cochrane	Timmins	Moosonee	
2	1	8	Provide more <b>supportive housing services</b> in order to reduce the risk of chronic and episodic homelessness.
1	2	1	<p><b>Enhance services</b> in the areas of greatest need for homeless families:</p> <ul style="list-style-type: none"> <li>• supportive housing and income security;</li> <li>• basic necessities including food, clothing and transportation;</li> <li>• addictions;</li> <li>• employment services;</li> <li>• education;</li> <li>• trauma and counselling;</li> <li>• domestic violence;</li> <li>• mental health, including trauma resolution;</li> <li>• physical health; and</li> <li>• culturally appropriate services for Indigenous families</li> </ul>
3	3	4	Work with Indigenous communities to develop strategies for supporting <b>Indigenous people who move</b> from their First Nations communities into urban centres. Culturally appropriate services must be developed to assist with basic needs, education, and employment.
5	4	5	Develop <b>new social housing initiatives</b> by taking action to access federal government funds from the National Housing Strategy (i.e. create more subsidized housing).
7	5	13	Provide more <b>community-based services</b> to people with mental illness in order to prevent periodic or chronic homelessness.
11	6	2	Provide homeless people with access (e.g., transportation and free service) to <b>counselling services</b> in the settings they inhabit (e.g. shelters, soup kitchens, and other emergency services). Find ways to acknowledge trauma among homeless people and strategies to address the trauma.
12	7	6	Develop <b>standards on food security</b> to ensure that people living with homelessness have access to nutritious food. (e.g., needs are not met when individuals and families can only access food banks once per month and when homeless people are not permitted to use food banks due to the requirement to produce proof of residence).
14	8	16	Develop and support programs/services that can address the <b>social exclusion of homeless people</b> . Many homeless people do not have access to family or friends who can assist and support them. People overcoming addictions often need to form new networks of friends in order to avoid relapse. Programs that strengthen ties between homeless people and others in the community must be designed to prevent marginalization and social exclusion.



Homeless Enumeration in the Cochrane District

Rank Order			Recommendations
Cochrane	Timmins	Moosonee	
17	9	14	Develop the service system for the provision of services addressing the <b>basic needs</b> of food, shelter, clothing, and medical care for homeless people so that there are enough services to meet the needs.
6	9	4	Provide sufficient funding to agencies serving homeless people to ensure that <b>adequate staffing</b> is available to meet the needs of individuals and families.
4	10	14	<b>Study the local housing market</b> and develop strategies to create more safe, decent, and affordable private housing, including room and board accommodation.
23	11	15	Provide enhanced funding for community-based prevention programs <b>for youth</b> with a focus on family violence, abuse, sexual assault, and bullying in order to reduce youth homelessness.
16	11	9	Identify barriers to receiving social assistance benefits in order to prevent homelessness among people who are denied benefits, disintitiled or face other barriers.
9	12	11	Examine how services can be made more responsive to the <b>needs of adolescents</b> . Homeless youth are among those who are least well served by community agencies and most often do not have access to income support from government programs.
20	13	14	Take steps to <b>address racism</b> as a cause of homelessness to ensure that Indigenous people can gain access to services and obtain rental housing, education, and employment.
8	14	17	Provide funding for the <b>creation of shelters and services</b> for couples with children as well as lone-parents/caregivers with dependent children/adolescents.
25	14	16	Develop and distribute materials to <b>educate service providers</b> and the general public about the complex individual and structural causes of homelessness, including the high prevalence of victimization and trauma among homeless people.
25	14	16	Develop and distribute materials to <b>educate service providers</b> and the general public about the complex individual and structural causes of homelessness, including the high prevalence of victimization and trauma among homeless people.
12	15	12	Engage in <b>outreach work</b> to enable homeless people to be aware of programs and services available to them.
17	16	3	Establish income and housing supports that can <b>prevent individuals and families from losing their housing</b> and their possessions. For example, provide funding for an emergency fund for rent arrears, deposits, storage, and moving supports.
19	17	13	Develop, support and implement <b>more harm reduction programs</b> for people with addictions.

Homeless Enumeration in the Cochrane District

Rank Order			Recommendations
Cochrane	Timmins	Moosonee	
26	18	18	Provide funding to agencies so that they have <b>sufficient beds available</b> to serve homeless families.
20	10	10	Provide <b>more funding support</b> for services to address this form of trauma (i.e., abuse and violence), especially among women and adolescents, given the primacy of domestic violence as a cause of homelessness.
28	19	17	Adopt a <b>definition of homelessness</b> that takes into account experiences of people in rural and northern Ontario by recognizing the prevalence of hidden homelessness and the risk of homelessness in addition to absolute homelessness.
9	20	-	Provide <b>training</b> for agency staff to sensitize them to issues for homeless people and to ensure that homeless family members are treated with respect and dignity.
29	20	-	Develop linguistic and culturally appropriate services for Indigenous and Francophone people.
14	21	6	Increase funding for <b>outreach and prevention programs</b> to address domestic violence and abuse among all age groups, including adolescents, women and seniors.
26	21	11	Create <b>new services and programs</b> specifically designed for homeless families, including parents or grandparents, young parents, guardians and children.
22	22	16	<b>Educate landlords</b> in order to reduce discrimination against key groups (e.g. people with mental illness, women who have experienced domestic violence and Indigenous people). Develop an initiative to consult with landlords to address the requirements for references from previous landlords.
33	23	7	Develop—and lobby for—local, provincial, and national initiatives to address the <b>structural problems of unemployment</b> , lack of jobs, and low wages for vulnerable people.
29	24	18	Examine and implement strategies to ensure that people living with homelessness can access health services.
23	25	16	Study how the system of emergency services may be developed to reflect the <b>characteristics of the homeless populations</b> (e.g. more women, children, youth, LGBTQ2S, Indigenous people).
31	26	11	Provide suitable <b>space in shelters</b> so that parents can visit with their children.
-	-	26	Develop and increase spiritual awareness.

## Long-Term Community Response

### *A. Community understanding of the scope and extent of homelessness*

Service providers in the study communities highlighted the role of the enumeration in raising the communities' awareness of the scope and extent of homelessness within the Cochrane District, as the results provided concrete evidence of the many individuals that homelessness affects. The level of awareness it has brought, however, has varied from community to community. For example, in Timmins, although service providers report that homelessness is more visible now than in years prior, there is still a prevailing 'disbelief' among some members of the community that the number of people experiencing homelessness is really as high as is reported. However, they noted that this perception likely stems from a lack of understanding among members of the general public of the full spectrum of what constitutes homelessness, namely a lack of understanding of hidden homelessness. In Moosonee, a service provider shared the understanding that, prior to the enumeration, there was a perception within the community that homelessness was not an issue at all, largely due to the extent of hidden homelessness in this community. Following the presentation at the community forum, the enumeration findings served to dispel the myth within the community that its constituents were unaffected by homelessness. In Hearst, the enumeration has made an impact on increasing awareness of homelessness, to an extent; members of the general public are exposed to and do recognize the visible forms of homelessness that exist within the community, but are still surprised when confronted with the knowledge that homelessness has increased in this community since 2011.

At the district level, the community forums were instrumental in starting conversations about the issue of homelessness. A service provider recalled a story told at a forum in Timmins by an older gentleman who was the primary caregiver for his grandchildren. He responded emotionally to the presentation, as he stated that, although he did not know what should be done to address mental health and addictions within the community, some action was desperately needed. He emphasized his 'exhaustion' over caring for both his adult children, who were struggling with mental health and addictions issues, as well as caring for his grandchildren. He felt that there was a lack of support to help families like his. This service

provider felt that the community, and in particular staff from community agencies and organizations, needed to hear stories of lived experience like this to drive home the importance of developing solutions to address these issues.

*B. Positive changes in attitudes, knowledge, and cultural safety*

Despite the level of awareness raised by the enumeration and its findings, service providers in the study communities still believe that there are issues with the general public stigmatizing individuals experiencing homelessness. A service provider noted that, although *awareness* has been raised generally, this awareness has not come with increased *understanding* of homelessness and its root causes; they perceived that the general public still clings to misconceptions about the homeless population, namely the conception that it is associated with violence and substance abuse. Without the deeper understanding of the root causes of homelessness among the general public, some people in the community may believe that homelessness would “go away” if only the shelter and accompanying services were to close. In Timmins, a service provider noted that there is a “split” in the community. Some members who show strong support for developing strategies that address homelessness through supportive means while others believe that the town is being “flooded” with people coming from different areas to access services in Timmins that should be addressed through less supportive, or even punitive, means (i.e. through the criminal justice system). The service provider perceived that this division is also being fuelled by discrimination and racism, with some members of the general public attempting to differentiate between people who are and are not deserving of support.

Many other service providers gave echo to this perception that the general public still largely stigmatizes homelessness; they believe that there is still much progress to be made on changing attitudes towards both the homeless and Indigenous populations. A key informant in Hearst noted that although there are some services in the community to support the homeless population, there is still “pushback” from the community when attempts are made to expand supports, for example, those targeted at assisting single men. Another service provider shared the view of stigma as a “top 5” killer, as it presents a barrier for people experiencing homelessness to seek or access support.

Service providers in Timmins specifically cited the need and want in the community for formal training opportunities to enhance cultural safety for Indigenous people and people of colour. In a focus group with service providers held in July 2019, one participant noted complaints about racism within the community:

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*“The Human Rights Commission was in Timmins last summer or the summer before because of complaints of racism. We’ve been identified as a racist community. So, these poor people [migrants] are coming to us and coming to a community that’s not welcoming. Not just the Indigenous, but [also racialized] students, some of the stories that you hear from those poor students is awful.” (Anglophone Service Provider)*

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This service provider is referencing incidents in Timmins that led to the deaths of two Indigenous people in 2018; subsequently the Ontario Human Rights Commission (OHRC) filed charges against the Timmins Police Service, Timmins and District Hospital, Cochrane District Social Services Administration Board, and other social service agencies in 2020 (Ontario Human Rights Commission, 2020). The OHRC media release of February 5, 2020 states that the commission is

“seeking a variety of public interest remedies including the requirement of respondents to:

- engage with Indigenous communities to understand their concerns and needs
- develop policies and provide training to ensure that their services are delivered in a culturally competent and safe manner, free of discrimination
- develop a human resources plan to promote and expand the hiring and promotion of Indigenous staff
- collect human rights-based data to identify problems and monitor solutions.” (Ontario Human Rights Commission, 2020).”

In response to this need, the Timmins Native Friendship Centre has developed a plan to provide training for all employees and all service providers of CDSSAB programs, in partnership with and facilitated by the Federation of Indigenous Friendship Centres. Currently within Timmins, service providers feel there are few formal training opportunities for organizations and members of the general public to further develop cultural safety and competencies. They believe that the enumeration project and its findings have played a role in promoting their knowledge of Indigenous peoples' overrepresentation among the homelessness population and the need for long-term, multi-sector planning, as the issue cannot be "fixed overnight." Moving forward, service providers expressed the hope that training will enable frontline service providers to understand how best to engage with Indigenous people in a culturally safe way. Moreover, the intent is for training to ensure that organizations have the capacity to think critically about how their policies and procedures may present barriers for Indigenous people. A service provider noted that this process will be best informed by the inclusion and meaningful participation of those accessing services in the community. To this end, a service provider in Timmins has applied for federal funding under an anti-racism action program to develop internal policies and procedures to incorporate cultural safety and to help other community organizations to do the same.

In Hearst, a service provider noted that although the town still has issues with racism and discrimination against Indigenous peoples, there are positive changes happening. For example, a community park is being developed with engagement from the neighbouring First Nation's community to ensure that the infrastructure will support Indigenous people's cultural needs and practices. The feedback provided resulted in a shift in plans from centering the park on the town's French heritage to one more inclusive that acknowledges the First Nation's presence. They believe that the area will be a destination within the town for schools and universities to visit to get more information on First Nations in the area. To further strengthen the town's approach to cultural safety, however, it was noted that an Indigenous cultural centre or Native Friendship Centre is needed.

*C. Better public education on homelessness*

In response to the prevailing misconceptions surrounding homelessness and its causes, the Cochrane DSSAB initiated community engagement activities throughout the District. In meetings with the Timmins Downtown Improvement Group, the Chamber of Commerce, and disgruntled neighbours and stakeholder groups, they provided public education on homelessness. Although the onus for attitudinal change will rest with these stakeholder groups, taking action to provide them with new information may help them better articulate and understand the issues, rather than repeating inaccurate information. However, it is important to note that, as many service providers acknowledge that people living with homelessness still experience stigma, further public education is needed to instill a compassionate understanding of homelessness within the general public.

In Timmins, it was stated that the enumeration results have been helpful in communications and marketing plans to enable better public education on homelessness. A service provider noted that the enumeration findings have been useful and that it has drawn upon them to engage the general public; they noted that citing the enumeration lends credibility, as the findings are drawn from a university-led study understood by the public to produce accurate results. Having a third-party, independent source to draw upon when highlighting the community's current context allows for those in opposition to see the statistics for what they are, rather than being clouded by the perception of bias if internal statistics are reported instead.

*D. Use of enumeration findings to improve services*

Throughout the Cochrane District, there are many examples of how the enumeration findings have been applied to improving services. Having reliable, valid, and accurate data to express the need that exists in the District was, and still is, instrumental to making the case for funding to support the introduction of new services and the expansion of existing services. In Timmins, the enumeration findings helped with rationalizing the need to create an emergency drop-in shelter and with justifying and providing legitimacy to the work already being done by a number of service providers. Importantly, the recognition of the need that exists in Timmins was met with financial backing to recognize the efforts of these groups. Service providers

perceive the enumeration results to be helpful in applications for support from the provincial and federal governments for funding to put programs in place that respond to the community's needs; a service provider noted that the study's findings formed the basis for applying for designation under Canada's *Reaching Home* strategy, as Timmins was identified as having among the highest per capita rates of homelessness in the country. Opportunities like this and others enable better collaboration between partners to respond to the intersecting needs of people who are homeless.

Community-run groups, including Project LOVE and the Lord's Kitchen, upon recognizing the extent of homelessness within the community, responded by increasing the frequency of its hot meal service. As this change was implemented, a service provider noted that it was immediately met with increased attendance, showing that the need was always there. A food rescue program was also established with a local Food Basics and the support of the Porcupine Health Unit, allowing the grocery store to donate food that would otherwise go to waste if unsold (i.e. for cosmetic reasons or if the product is near but not past expiration). Another community-run group has come together to offer the community a furniture bank—to those who might not otherwise be able to afford it—by collecting donations from the community and offering furniture to those in transitional housing or other low-income housing. In response to the findings of the enumeration highlighting the overrepresentation of Indigenous people in the District's homeless population, the Ontario Aboriginal Housing Services opened an office in Timmins to assist First Nations, Metis, and Inuit people living off-reserve in Ontario with accessing housing.

In Moosonee, the increased awareness within the community has led organizations to take further steps to engage with the homeless population. A service provider noted that the community forum was an "eye opening" experience that served to highlight just how many individuals are affected by homelessness in this community. In response to this new level of awareness and realizing that its services were not targeting nor reaching a segment of the population, Keewaytinok Native Legal Services took several steps to better serve those experiencing homelessness in Moosonee. A Community Legal Worker engaged with the community of people experiencing homelessness to better understand their needs and how



services within Moosonee could meet them. This process resulted in the establishment of a fee waiver program to make identification documents accessible to those experiencing homelessness or on low income and the establishment of an identification document bank to make copies of ID and safely store originals at the legal clinic. The enumeration project and its findings played a role in fostering the establishment of these initiatives, as they formed the basis for expressing the need in Moosonee for these kinds of supports.

Service providers also noted other ways the findings could be used to improve services within the District that have yet to happen. For example, the findings could be used to compare the prevalence of homelessness within the Cochrane District to that within other parts of the province in order to demonstrate the unequal amount (i.e., lesser amount) of funding it receives. Other service providers believe that more outreach work could be done with organizations within the District that may not be aware of the enumeration project and its findings; engaging local contacts and networks of service providers could help to further raise awareness of homelessness and support further service improvement within the District.

*E. Recognition of good data as an aspect of strategies to address homelessness, advancing the role of enumeration*

At the District level, having reliable data to draw upon has led to a strengthened focus on partnerships between homelessness providers and First Nations communities given the prevalence of the Indigenous population in the homelessness count. Seeing the need to address the root causes of homelessness identified by the enumeration has helped to hold service delivery partners accountable and ensure they focus adequate attention on addressing issues such as substance use disorders and mental health issues. Moreover, the enumeration project and its findings have helped to raise the importance of addressing these issues.

The district's focus on addressing mental health and addictions specifically comes from the recommendations from the enumeration study and is in alignment with the province's priority to address community safety and well-being in terms of social development, risk prevention and intervention, and incident response (Ministry of Community Safety and Correctional Services, 2018). As of 2019, legislative requirements related to "mandating community safety and well-being planning" under the *Police Services Act* require municipalities to develop and

adopt community safety and well-being plans working “in partnership with a multisectoral advisory committee comprised of representation from the police service board and other local service providers in health/mental health, education, community/social services and children/youth services” (Ministry of Community Safety and Correctional Services, 2018, p. 5). The Ministry expects to see a number of benefits resulting from the increased collaboration among community partners, including:

- “increased understanding of and focus on priority risks, vulnerable groups, and neighbourhoods;
- transformation of service delivery, including realignment of resources and responsibilities to better respond to priority risks and needs;
- increased engagement of community groups residents, and the private sector in local initiatives and networks; [...]
- increased awareness, coordination of, and access to services for community members and vulnerable groups;
- more effective, seamless service delivery for individuals with complex needs; [and]
- new opportunities to share multi-sectoral data and evidence to better understand the community through identifying trends, gaps, priorities, and successes[.]”

This focus on community safety and well-being has been communicated at the local level in the Cochrane District. A service provider in Timmins noted that the new Mayor, Mr. George Pirie, has emphasized addressing homelessness at the municipal level; they feel that Pirie wants to help as much as he can and that his attendance at workshops, talks, and conferences that address homelessness and its root causes demonstrates his commitment to better understanding the current context and the strategies that might be effective. Another service provider in Timmins highlighted the perception of the CDSSAB’s commitment to continually monitor the scope and extent of homelessness within the district through regular enumeration studies, even without the Ministry of Housing and Municipal Affairs’ requirement to do so. They emphasized Timmins’ involvement in the *Built for Zero Canada* initiative aimed at ending

chronic homelessness with emphasis on collecting “quality, real-time data;” the community has been designated as an “on deck” community that will be provided support to get data collection mechanisms in place to monitor the scope and extent of homelessness, working towards the goal of absolute zero.

### Media Coverage

Analysing local media sources shows that there was good coverage of both the enumeration study itself and of the community’s response to addressing homelessness. A search of the Timmins Daily Press, a local news source for both the Timmins community and others in the Cochrane District, revealed 65 published news articles on homelessness between January 2018 and January 2020. Those published range from coverage of the enumeration study, local government initiatives to address homelessness, charitable activities in the community to raise funds and awareness for homelessness, and updates to existing services that support the community’s homeless population.

Between October 2, 2018 and December 26, 2019, there were 7 articles published in the Timmins Daily Press (n=6) and the Cochrane Times-Post (n=1) about the enumeration study; coverage ranged from translating the study’s principal findings to promoting and sharing responses from the community forums held in Timmins on World Homelessness Day in 2018 and in Cochrane in February 2019 (Gillis, 2018; Grech, 2018; 2019a; 2019b; Horrobin, 2019; Morin, 2019; The Daily Press Timmins, 2018). An article published on December 26, 2019 highlighted the study’s impact within and beyond the Cochrane District; MP Charlie Angus (NDP, representing Timmins-James Bay) was said: “The homeless issue is certainly really unprecedented to have the kind of numbers we’re seeing in Timmins. When I talk to people in other regions, they’re shocked by the numbers we have in Timmins” (as cited in Grech, 2019b). He also detailed the need for action at the local level based on the study’s findings:

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*“We have a number of particular issues because of people who are coming into Timmins that’s putting a strain on our system here. ... So, I’ve certainly been speaking with the mayor (George Pirie) about this. Now that parliament*

*has reconvened, there are a number of ministers—we're going to be sitting down to talk with about how we actually take the pressure off the city, and take the pressure off the front-line organizations. ... I would say the response from the people of Timmins has been staggering in terms of volunteerism — Project Love, Living Space, everybody is going full out. But we need bigger support to deal with the housing and homelessness crisis here. ... It is not sufficient to handle it through volunteers and local organizations. There has to be a larger provincial and federal component, and that's something that we'll be focusing on a lot" (as cited in Grech, 2019b).*

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His sentiments were echoed by those who attended the community forum in Timmins. Kaylee Morissette, then-Executive Director of the Cochrane District Social Planning Council, noted that the findings may come as a surprise to the general public:

*"I think that people still don't understand what homelessness is. Because they're not seeing 700 people sleeping outside in alleyways and downtown, they don't acknowledge that homelessness is an issue here. ... I think what we're seeing is an increase in some panhandling activity downtown. That might be between five and eight individuals people are seeing. So they might acknowledge that there's a dozen homeless people, but not the numbers we actually know exist. ... It is a community issue that constituents should be aware of and should be helping to implement solutions for."*  
*(as cited in Gillis, 2018).*

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In the months following the enumeration study, there were a number of news articles published that highlighted the local government's response to the crisis of homelessness within the Cochrane District. The most recent article, published January 23, 2020, includes statements from the City of Timmins' Mayor, George Pirie, that draw from the enumeration findings. In his

annual State of the City address to approximately 200 attendees, the Mayor spoke about the current state of homelessness and the challenges that lay ahead to address it:

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*“[A majority of our] homeless are Indigenous. ... Many of these individuals arrive here with effects of generations of failed attempts at social engineering initiated by senior levels of government. These types of problems are generational. These types of problems demand significant resources, resources that we in this region are not receiving. ... There are two issues here. The first and most obvious is that we need more provincial funding. Secondly, we need more federal funding. ... The whole brand of that is taking homelessness, being able to apply the resources to the individuals that will see them be productive members of our society” (as cited in De Luigi, 2020).*

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While there may be limited awareness of the full scope of homelessness in the community, media coverage of the community response via charitable activities shows a community that is willing to put forward their own solutions; 21 news articles were published by the Timmins Daily Press between January 2018 and January 2020 detailing charitable activities hosted in the community to address homelessness. The activities reported included donation drives to support the food banks and shelters, community dinners for those experiencing or at risk of homelessness, an annual ‘Coldest Night of the Year’ walk raising funds and awareness, and the community’s mobile warming station. Notably, coverage included an outpouring of support following a fire at the Good Samaritan Inn in late 2018 that displaced all of its residents, shows that members of the public are invested in supporting those experiencing homelessness. Overall, the media coverage signals a community that is active in reducing the burden of homelessness on those who experience it in their community.

## Study Robustness

### *Question 6. How robust is the study examining enumeration methods?*

A number of measures were included in the study's design to ensure its robustness in producing valid, reliable, and accurate counts of each community's homeless population.

## Cultural Safety

Staff from the Centre for Research in Social Justice and Policy were assisted by staff and volunteers hired locally in study communities and recruited from community agencies to conduct the enumeration study. In total, the research team comprised over 40 members, including research assistants from the Cochrane District who were hired and trained to work on the project. The research team included Anglophone, Francophone, and Indigenous faculty members and students from varied schools and departments, reflecting the district's cultural and linguistic diversity. Further, the data collection tool was translated into French and both versions (English and French) were offered to all prospective participants so that they could participate in the official language of their choice.

## Local Training

All members of the local research teams were trained in each study community in order to ensure their familiarity of and adherence to the study protocols. The lead university researchers were from the School of Social Work, the Department of Indigenous Studies, the Department of Law and Justice, and the School of Nursing. The project team had the required skills and knowledge to conduct the project activities, including bilingual capacity and connections to the key cultural communities in the Cochrane District (i.e. Francophones, Indigenous people, and Anglophones).

## Alignment with Provincial Standards

The study design aligned with provincial standards for conducting enumerations of homelessness as prescribed by the Ministry of Housing (2018). The survey tool included the core set of common questions required by the Ministry of Housing, including those on type of current housing/lodging, chronicity and frequency of homelessness, reasons for

homelessness/housing loss, age, Indigenous/racialized identity, gender identity, sexual orientation, language, family homelessness, military service, health, child welfare involvement, and income source. The survey tool further supplemented the core questions with additional questions pertaining to hidden homelessness, questions specified by the Government of Canada's (2017) Homelessness Partnering Strategy, as well as questions to identify experiences with chronic illness and histories of homelessness. Questions were also asked about life-limiting illnesses and use of medical services.

An external evaluation by Dr. Gayle Broad of NORDIK Institute at Algoma University assessed the project. Her report supports the view that the study was robust in terms of the design, conduct and results.

## DISCUSSION

This study compared data for the City of Timmins in which the PiT and PPC methods were both used. First, according to the study findings, the PiT method produces counts that are very low as it appears to consistently underestimate the size of the homelessness, only identifying about one third or as little one tenth of people experiencing homelessness compared to the PPC method. Second, these results are important in order to inform the provincial and federal governments about the concerns regarding under-counting when the PiT method is used. Undercounting distorts the extent of homelessness, the demographic makeup of the homeless population, and the nature of programs required to address homelessness. Third, the PiT method may be of limited utility in enumerating homelessness in rural and northern places. Government initiatives that promote the PiT methodology should be limited to large cities in southern regions of Canada. While PPCs are more expensive to conduct, they could be used less frequently, such as every 5 or 6 years, to determine the size of the homeless population in northern and rural places.

This study showed that a substantial proportion of the participants—55 percent of those absolutely homeless and 44 percent of those in hidden homelessness—were living with addictions or substance use. Moreover, in identifying their needs, more than a quarter of the

participants stated that they require services to deal with their addictions. These results offer confirmation of media reports about the addiction crisis in northern Ontario (cf. CBC News, 2017; Gemmill, 2018). These findings raise concerns about the gravity of the situation pertaining to substance use. There is evidence from the published literature that most substance use amongst people living with homelessness arises from the need to cope with the living circumstances of homelessness (Coumans & Spreen, 2003; Minaker & Hogeveen, 2009). Therefore, addressing, preventing and eliminating homelessness can go a long way towards resolving or preventing the problem of addictions. It is vital that decisions about how to tackle homelessness do not focus exclusively on substance use and addictions. Participants identified other issues very pressing issues, such as the need for affordable housing, employment, supports for abuse and violence, and physical and mental health services.

The prevalence of conflict and violence in relationships is an important factor linked to homelessness in the current study. In identifying reasons for homelessness, responses to four questions provide evidence about the extent to which homelessness is connected to conflict and violence or abuse from spouses/partners or parents/guardians. Combining the responses regarding reports of conflict and abuse as reasons for homelessness reveals the extent to which homelessness results when people flee from conflict, abuse and violence. Supplementary analysis showed that 26 percent of those living with hidden homelessness and 18 percent of those absolutely homeless had experienced conflict and abuse (not shown above).

The results of this study also indicate that gender issues are central to understanding the nature of homelessness in the Cochrane District. Women and their dependents constituted a majority of the participants in the enumeration study as most dependents were with women. This finding shows that old stereotypes and beliefs about homelessness as primarily a male phenomenon are inaccurate. Policies and practices need to be developed to address the needs of women, children, and adolescents.

The indication that Indigenous people are a strong majority of those who are homeless in the Cochrane District underscores the importance of ensuring that policies and procedures are sensitive to the cultural differences between Indigenous and non-Indigenous people in this



region. It is vital to work with Indigenous communities to develop policies and procedures that will be effective in supporting Indigenous people throughout the District.

The data provide for insights into the survival strategies of people living with homelessness in the Cochrane District. The responses to the question in the current enumeration about current lodging should be interpreted as likely places where participants may stay, but they are not definite indications of their accommodations. Each case was carefully reviewed. The examination of the totality of the data in the questionnaire provided insights into the circumstances for people who indicated that they had a place of their own. In numerous cases, individuals could not stay in these accommodations because they had been evicted or because it was not safe for them to stay there. Some people stated that they could not stay in a housing unit for these reasons. This finding shows that their status may change from at risk to hidden or even absolutely homeless. It is important to review individual results carefully in order to appropriately match the classification with their circumstances.

We must recognize that participants may not share the researchers' definitions of homelessness. We should see in the data for the Cochrane District information about the complexity of homelessness and the need for policymakers, service providers and researchers to learn about the true nature of the circumstances experienced. Also affecting the categorization of individuals as absolutely homeless, hidden homeless or at risk is the participants own perspective on homelessness. Many people do not want to think of themselves as homeless and respond to survey questions according to these beliefs. For example, a participant in a prior study stated that he had a home—it was the railyard. Others have shared the view that a bush camp was their home. While these participants do not necessarily view themselves as homeless, they fit its prevailing definitions.

Importantly, the findings of this enumeration project must be placed into context by comparing them to those from prior studies. Calculating the rate of homelessness as a percentage of the local population provides an indication of the extent of the problem. The calculation shows that, regardless whether the dependents aged 18 to 24 or the at-risk population are excluded, the rates of homelessness in the Cochrane District are high. The highest rates are in Cochrane and Moosonee. While most prior studies in Canada have used the PiT rather than the PPC

method, the published rates for all studies reported by Gaetz et al. (2013) for Vancouver, Kelowna, Red Deer, Lethbridge and Toronto are lower than the rate for the Cochrane District. Even if those results are multiplied by a factor of 3 or 4, most places in the Cochrane District have rates of homelessness that are at the high end of the continuum of homelessness.

The enumeration activities are intended to provide information that leads to the development of strategies to address and end homelessness. The results of the 2018 enumeration provide data about the issues and needs of people living with homelessness in the Cochrane District. Hidden homelessness is a relatively new aspect of homelessness that has emerged in recent years (Kauppi et al., 2017). Emphasis placed on forms of absolute, chronic, and episodic homelessness may distract from the extensive problems linked to hidden homelessness. Hidden homelessness often brings the same deleterious health outcomes as absolute homelessness yet is less often included in enumeration studies. Substandard housing—an important social determinant of health—needs to be more widely understood and acted upon. Poverty is linked to inadequate, substandard, and poor housing; it impacts on health cumulatively over the life-course and significantly contributes to morbidity and mortality (Aldrige et al., 2018; KREATSOULAS & ANAND, 2010; ROSS ET AL., 2012). Learning how to address the needs of this population can enable the Cochrane District to develop sound strategies for supporting people who are vulnerable and marginalized in small, rural, northern communities. Adopting and pursuing the goal of reducing or eliminating all forms of homelessness in the future can aid with the development of policies and practices that will enable the CDSSAB to meet the needs of people struggling with homelessness in the region.

## RECOMMENDATIONS

### Methods of Enumerating Homelessness

As the results show, the PPC method can provide more complete data on the prevalence of homelessness, particularly in small, rural, and northern communities where homelessness is less visible. Using the PPC method, the following elements should be included: (1) conducting the enumeration over a span of 7 days or longer, allowing for word of mouth to spread; (2)

locating at a variety of services, service locations, street stations, and other known locations frequented by people experiencing homelessness; and (3) considering the use of a neighbourhood door-to-door survey to capture the prevalence of hidden homelessness or those at-risk of homelessness. Together, these strategies can produce more accurate data on the prevalence of homelessness in a given community, thus providing a more solid foundation upon which to inform effective local decision-making and policy.

Based on our research team's experience with the PPC method, the following are recommended standards to keep in mind when conducting an enumeration study using this method:

1. Establish a coordinating committee.
2. Engage community partners.
3. Develop methodology and protocols.
4. Adopt a definition of homelessness.
5. Develop the questionnaire.
6. Adopt a data collection protocol that ensures privacy and safety of both enumerators and participants.
7. Train staff and volunteers.
8. Keep good records and prepare a report on methods.
9. Collect data for 7 consecutive days or longer with a community survey.
10. Collect data for de-duplication.

### Action Strategies to Address Homelessness in the Cochrane District

Based on the findings of the PiT and PPC studies in all seven communities, the following recommendations pertain to areas for action identified by the research team and prioritized by community members in forums held in late 2018 in Timmins and early 2019 in Cochrane and Moosonee. A full list of the rank-ordered recommendations is provided in Table 18 above.

While there are some differences in how the action strategies are ranked between communities, there is good alignment among the top four recommended actions strategies between Cochrane, Timmins, and Moosonee. These recommendations address the need to:

- (a) provide more supportive housing services in order to reduce the risk of chronic and episodic homelessness.
- (b) enhance services in the areas of greatest need for homeless families (e.g. supportive housing and income security; basic necessities including food, clothing and transportation; addictions; employment services; education; trauma and counselling; domestic violence; mental health, including trauma resolution; physical health; and culturally appropriate services for Indigenous families);
- (c) work with Indigenous communities to develop strategies for supporting Indigenous people who move from their First Nations communities into urban centres (including developing culturally appropriate services to assist with basic needs, education, and employment); and
- (d) develop new social housing initiatives by taking action to access federal government funds from the National Housing Strategy.

These four recommendations were prioritized highly in the community forums, despite some differences in the exact rank ordering. For example, the need to provide supportive housing services (ranked #8 in Moosonee) was eclipsed by a focus on providing people with access to counselling services in the settings they inhabit and finding ways to acknowledge and address trauma among homeless people. This recommendation was prioritized lower in Timmins and Cochrane (#6 and #11, respectively). Moosonee is a community that is often the first destination for Indigenous people moving from communities on the James Bay coast, with many experiencing the effects of generational/historical trauma. It makes sense, then, that the community would prioritize supports for addressing trauma.

Moreover, community members in Moosonee prioritized the establishment of income and housing supports that can prevent individuals and families from losing their housing and their employment (e.g., providing funding for an emergency fund for rent arrears, deposits, storage, and moving supports). This recommendation, ranked highly in Moosonee (#3), was ranked quite low in Timmins and Cochrane (#16 and #17, respectively). Emergent themes from RAs' field notes in Moosonee reveal that community members are concerned about the need for more housing stock in the community along the housing spectrum, from emergency shelter and transitional housing to social, affordable and market housing. Many expressed a concern over

the use of a portion of the community's housing stock by businesses with a local presence for their own staff. With a lack of sufficient, adequate and affordable housing options in the community, it is evident that the community prioritizes supports that would enable community members to remain housed in this unstable housing context.

There are other outlying recommendations prioritized highly in one community that were seen as less important in the other communities. In Timmins, the provision of more community-based services to people with mental illness in order to prevent periodic or chronic homelessness was ranked highly, despite its lower ranking in Cochrane and Moosonee (#5 in Timmins, vs. #7 and #13 in Cochrane and Moosonee, respectively). In Cochrane, the recommendation to study the local housing market and develop strategies to create more safe, decent, and affordable private housing, including room and board accommodation, was prioritized much more highly (#4) than in Timmins and Moosonee (#10 and #14, respectively).

The findings showing that Indigenous people in the Cochrane District are disproportionately represented in the homeless population must be highlighted. That Indigenous people are a strong majority of those who are homeless in the Cochrane District underscores the importance of ensuring that policies and procedures are sensitive to the cultural differences between Indigenous and non-Indigenous people in this region. It is vital, in working towards implementing these action strategies, that attention is paid to incorporating cultural safety for Indigenous people and to considering how supports can be implemented or adapted to be culturally appropriate for Indigenous people.

## CONCLUSION

Enumeration studies of homelessness provide important information about the number and characteristics of people living with homelessness at the local level, but can only do so when designed to produce reliable, valid and accurate data. For more than a decade, several communities in Canada have conducted periodic enumerations of homelessness, with varying definitions of the people that are included as homeless, with varying the questions in the survey, and with varying the time of year and time of day when the count occurs (Employment

and Social Development Canada, 2017). Recently, there has been a growing awareness of the presence of homelessness in communities where it was not previously recognized. Several studies in northern Ontario have indicated that the rate of homelessness is high and that forms of hidden homelessness are prevalent (Kauppi et al., 2017). The definition of homelessness used and method of enumeration employed matter greatly to not only the results that are produced, but also the impact those results have on the policy process, including how funds are directed and how policy and program decisions are made.

PiT counts are most frequently used as the method to enumerate homelessness in Canada, in both urban and rural communities; however, there is much discussion in the literature of methodological challenges that lead many to believe they produce inaccurate results (Baptista et al., 2012; Busch-Geertsema, Culhane, & Fitzpatrick, 2016; Busch-Geertsema, et al., 2010; Hall, 2017; Hopper et al., 2008; Pleace, 2016; Rabinovitch, 2015; Schneider, Brisson, & Burnes, 2016; Williams, 2011). As the results show, the PPC method can provide more complete data on the prevalence of homelessness, particularly in small, rural, and northern communities where homelessness is less visible. By comparison, the PiT method may consistently and dramatically underestimate the size of the homelessness, identifying about one third or as little one tenth of people experiencing homelessness compared to the PPC method. As such, the PiT method may be of limited utility in enumerating homelessness in northern rural and remote communities. Both service providers and people with lived experience of homelessness prefer the use of the PPC method over the PiT method; they believe that the PPC method gives people experiencing homelessness greater opportunity to participate, resulting in more information about the prevalence of homelessness being captured and greater representation in the data collected. Overall, a number of measures were included in the study's design to ensure its robustness in producing valid, reliable, and accurate counts of each community's homeless population. The research team included Anglophone, Francophone, and Indigenous faculty members and students from varied schools and departments, reflecting the district's cultural and linguistic diversity. All members of the local research teams were trained in each study community in order to ensure their familiarity with and adherence to the study protocols. Furthermore, the study design aligned with provincial standards for conducting enumerations of homelessness as

prescribed by the Ministry of Housing (2018); the survey tool included the core set of common questions required by the Ministry of Housing, including those on type of current housing/lodging, chronicity and frequency of homelessness, reasons for homelessness/housing loss, age, Indigenous/racialized identity, gender identity, sexual orientation, language, family homelessness, military service, health, child welfare involvement, and income source. In addition, the protocols for PiT and PPC methods were used to conduct the enumeration study.

Analysing the field notes from research assistants (RAs) in Group A communities (which have never [prior to 2018] enumerated homelessness) against those of Group B communities (where PPCs were previously conducted in 2011, 2012, and 2013) reveals there were no substantial differences in communities' ability to utilize the PPC method in each of these settings. RAs in all communities where enumeration took place reported that the survey was generally well received when explained to potential participants and even those who did not qualify were appreciative of the study and its objectives. There were a few barriers that RAs observed in all communities, both Group A and Group B, that prevented greater participation by the target population; however, these were consistent across Group A and Group B communities and thus not a reflection of the communities' ability to utilize the PPC method.

Within the Cochrane District, there was generally a good response to the study; 58 community organizations were included in the study as community partners. Examining field notes of observations during the enumeration reveals RAs' observations of both agency staff involved in data collection and prospective participants as extremely welcoming to RAs and receptive to the goals of the enumeration study. Following data collection, community forums held in Timmins, Moosonee, and Cochrane gave each community the opportunity to prioritize action strategies towards reducing or eliminating homelessness; the emphasis within these communities was on providing supportive housing services, enhancing services in areas of greatest need, working with Indigenous communities to address homelessness, providing counselling services to acknowledge and address trauma, and establishing income and housing supports to prevent the loss of housing.

After the forums, interviews and focus groups conducted with people with lived experience of homelessness, service providers, and key informants from study communities revealed the

communities' response to the enumeration project, focusing on the understanding of homelessness, changes in attitudes, knowledge, and cultural safety, and the use of enumeration findings to improve services and inform strategies to address homelessness. Participants highlighted the role of the enumeration in raising the communities' awareness of the scope and extent of homelessness within the Cochrane District, as the results provided concrete evidence of the many individuals that homelessness affects. Despite the level of awareness raised by the enumeration and its findings, service providers in the study communities believe that the general public continues to stigmatize homelessness. Service providers in Timmins specifically cite the need and want in the community for formal training opportunities to enhance cultural safety for Indigenous people and people of colour. Since the enumeration, there have been many examples of how the findings have been applied to improving services throughout the Cochrane District. Having reliable, valid, and accurate data to express the need that exists in the District was, and still is, instrumental to making the case for funding to support new services being introduced and existing services to expand. At the District level, having reliable data to draw upon has led to a strengthened focus on partnerships with homelessness providers and First Nations communities given the prevalence of the Indigenous population in the homelessness count. Seeing the need to address the root causes of homelessness identified by the enumeration has helped to hold service delivery partners accountable and ensure they focus adequate attention on addressing substance use disorders and mental health issues.

Analysis of local media sources shows that there was good coverage of both the enumeration study itself and of the community's response to addressing homelessness. A search of the Timmins Daily Press, a local news source for both the Timmins community and others in the Cochrane District, revealed 65 published news articles on homelessness between January 2018 and January 2020. Those published range from coverage of the enumeration study, local government initiatives to address homelessness, charitable activities in the community to raise funds and awareness for homelessness, and updates to existing services that support the community's homeless population.



Overall, this study represents the first systematic comparison of the PiT and PPC methods of enumerating homelessness, evaluating each through their application in the same timeframe within the same community (Timmins, ON). Moreover, this study has served (1) to evaluate how well urban and rural communities in the Cochrane District are able to use the PPC method, (2) to demonstrate the effectiveness of a new measure of hidden homelessness through its incorporation into PiT and PPC approaches, and (3) to show the effectiveness of community efforts to utilize enumeration results to tackle the problem of homelessness at the local level. Together the expertise and efforts of university and community members have identified the PPC method as the best approach to enumerating people who are living with homelessness in northern and rural communities. Ultimately, this study has equipped these communities with locally specific and comprehensive information about homelessness and appropriate methods to use to obtain information about the extent and nature of homelessness. The generated knowledge has facilitated communities' tailoring of homeless services and action strategies; it has also fueled multi-sectoral conversations about the elimination of homelessness in northeastern Ontario.

## SUSTAINABILITY

The Local Poverty Reduction Fund has supported us in fostering new relationships with community partners and in enriching existing relationships between members of the research team and community partners in the Cochrane District. Stemming from these relationships and our partners' demonstrated enthusiasm for engaging in community-based participatory research, the Centre for Research in Social Justice and Policy applied and received funding from *Making the Shift: A Youth Homelessness Social Innovation Lab* to continue its work on homelessness in the Cochrane District and the City of Greater Sudbury. The rationale for this project draws from the present enumeration findings that highlight the number of youth living homeless unaccompanied by a family unit and the region's high representation of Indigenous people in the homeless population. With little research on homelessness amongst Indigenous and non-Indigenous youth in urban, rural, and remote communities of northeastern Ontario,

there is limited understanding of appropriate strategies for detecting risk, intervening early, and supporting a sustainable exit from homelessness. As such, the proposed research will leverage data from the 2018 enumeration database from Sudbury (based on a separate enumeration study in 2018), Timmins, and Cochrane, extracting 512 cases of youth aged 13-24 from these communities for secondary analysis. Interviews with youth over the next three years will provide an in-depth, complementary perspective, illuminating prior experiences, factors linked to homelessness, and views on solutions for female, male, and genderqueer Indigenous youth and their non-Indigenous counterparts. Focus groups with service providers in these communities will center on viable ways to develop a coordinated system of services to address youth homelessness. Recognizing patterns among pathways into and out of homelessness will enable the identification of risk factors and strategies for prevention, early intervention, and sustainable exits from homelessness. Through enhanced knowledge, services can be tailored to be effective in serving youth in remote, rural, and urban places in northeastern Ontario. Ultimately, the goals of the proposed research align with both the objectives of the research presented in this report and those of the Local Poverty Reduction Fund: supporting “innovative, community-driven projects that measurably improve the lives of those most affected by poverty,” (Ontario Trillium Foundation, n.d.).

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## APPENDIX A: RECRUITMENT LIST OF COMMUNITY ORGANIZATIONS

- Aboriginal Peoples Alliance of Northern Ontario, Cochrane
- Access Better Living Inc, Timmins
- Anti-Hunger Coalition, Timmins
- Apatisawin Employment Training Centre, Cochrane
- Canadian Mental Health Association Cochrane-Timiskaming
- Canadian Red Cross, Cochrane
- Centre Civique de Kapuskasing Civic Centre
- Centre Partenaires pour l'Emploi, Hearst
- Centre Passerelle pour Femmes du nord de l'Ontario, Timmins
- City of Timmins Non-Profit Housing
- Cochrane District Social Planning Council
- Cochrane District Social Services Administration Board
- Cochrane Food Bank
- Cochrane-Temiskaming Resource Centre
- Community Living Timmins Integration Communautaire
- Community Mobilization/Situation Table, Timmins
- Corporation de logements à but non-lucratif de Hearst / Hearst Municipal Non-Profit Housing
- Équipe de santé familiale Nord-Aski, Hearst
- First Baptist Church Soup Kitchen, Cochrane
- Gah Beh Shoo In Men's Shelter, Cochrane
- Genesis Housing Co-Operative Corporation, Timmins
- Goldridge Co-Operative Homes Inc, Timmins
- Habitat Interlude, Kapuskasing
- Ininew Friendship Centre, Cochrane
- Intégration Communautaire, Hearst
- Iroquois Falls Food Bank - The Friendly Warehouse
- Jubilee Centre, Timmins
- Kaleidoscope Co-Op Homes, Timmins
- Kapuskasing Indian Friendship Centre
- Kenneth Crescent Non Profit Housing, Timmins
- Lady Minto Hospital, Cochrane
- Le Foyer Des Aînés Francophones de Timmins
- Living Space, Timmins
- Maisons Co-Op Des Pin Gris, Timmins
- March of Dimes, Cochrane
- Matheson Food Bank
- Mennonite Central Committee, Timmins
- Metis Nation of Ontario, Cochrane, Timmins
- MICs Group of Health Services, Matheson, Iroquois Falls, Cochrane
- Minto Counselling Centre, Cochrane, Iroquois Falls
- Misiway Milopemahtesewin Community Health Centre, Timmins
- Mocrebec Housing, Moosonee
- Monteith Correctional Complex, Iroquois Falls

## Homeless Enumeration in the Cochrane District

- Mushkegowuk Council Employment and Training, Timmins
- New Post First Nations Health Center
- North East Local Health Integration Network, Timmins
- Ontario Probation and Parole - Northeastern Ontario
- Porcupine Health Unit
- Project LOVE, Timmins
- Salvation Army Thrift Store, Timmins
- Seizure and Brain Injury Centre, Timmins
- Service de counselling pour adultes de Hearst
- Service de toxicomanie Cochrane-Nord Inc., Hearst
- Services familiaux Jeanne Sauvé, Hearst
- South Cochrane Addiction Services, Timmins
- South Porcupine Food Bank
- The Good Samaritan Inn, Timmins
- The Lord's Kitchen, Timmins
- Timmins and Area Women in Crisis
- Timmins and District Victim Services
- Timmins District Hospital
- Timmins Economic Development Corporation
- Timmins Food Bank
- Timmins Health Links
- Timmins Native Friendship Centre, Timmins, Moosonee
- Timmins Native Non Profit Housing
- Timmins Police Service  
Victim/Witness Assistance Program
- Timmins Public Library
- Timmins Women's Action Coalition
- Tisdale Whitney Housing Co-operative, Timmins
- Town of Moosonee
- Tranquility House Woman's Shelter, Matheson