



2020 GREATER VICTORIA
POINT-IN-TIME COUNT

2020 GREATER VICTORIA POINT-IN-TIME HOMELESS COUNT AND HOUSING NEEDS SURVEY

Greater Victoria is a vibrant, fast-growing region; however, it faces complex challenges with housing vulnerable citizens who are homeless.

We would like to extend a special thank-you to all of those experiencing the challenges of homelessness who so generously shared your personal and often difficult stories. Those stories paint a detailed backdrop that will help to support our efforts and those of our community and government partners to prevent, reduce, and end homelessness.

2020 GREATER VICTORIA POINT-IN-TIME HOMELESS COUNT AND NEEDS SURVEY

Community Report / July 2020 / For detailed data results, download the Technical Appendix at crd.bc.ca/about/what-we-do/regional-housing/research-and-planning

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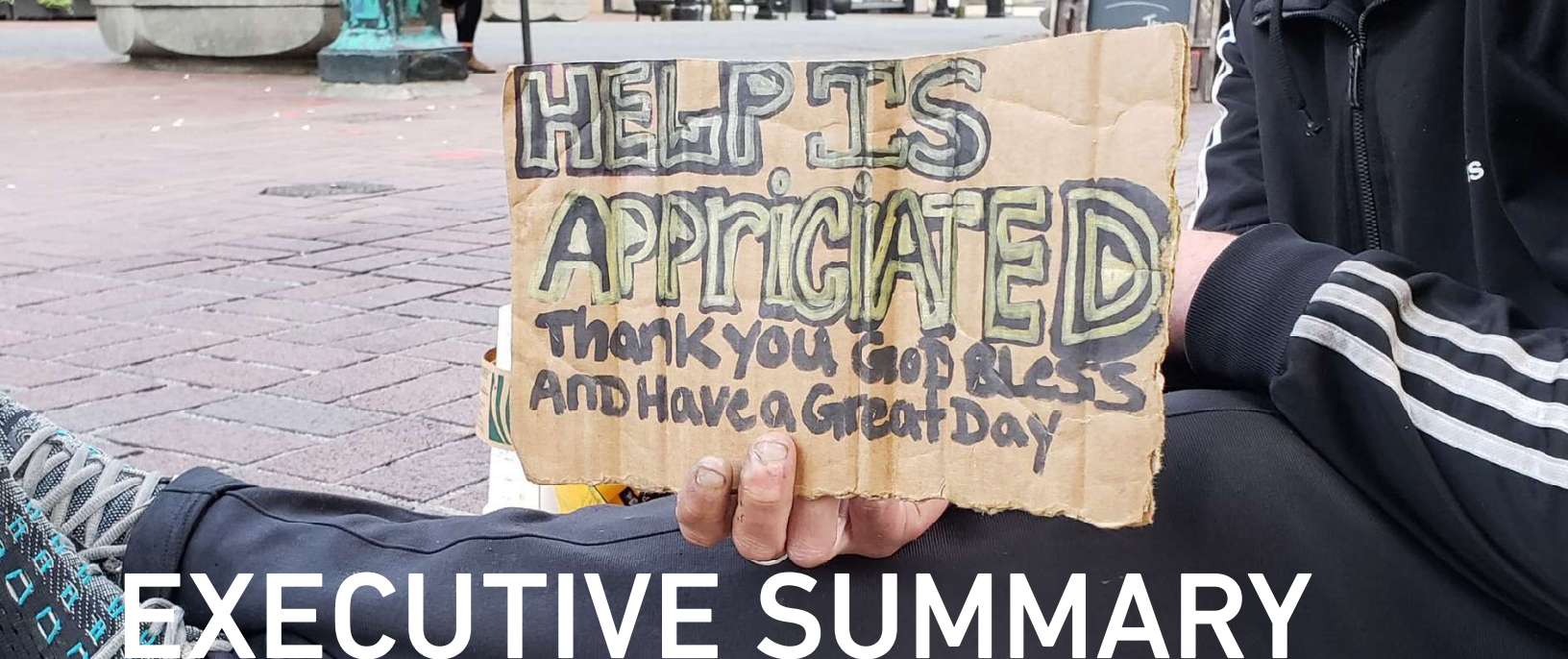
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EXECUTIVE SUMMARY

BETWEEN MARCH 11 AND 12, 2020, over 175 citizen volunteers and staff, along with a cross-sector of service agencies and community partners, participated in the Capital Region's third Point-in-Time Homeless count and survey. This extensive effort counted at least 1,523 individuals who experienced homelessness on the night of March 11, 2020. On March 12, volunteers conducted over 850 surveys with people experiencing homelessness across the region, providing an invaluable set of personal histories, experiences, and needs.

This year's Point-in-Time (PiT) count occurred at a unique time in history, during the local emergence and response to the global COVID-19 pandemic. Although a formal pandemic response from homeless supporting agencies and federal, provincial and local governments occurred a few days following the enumeration, awareness and information were circulating about the pandemic at the time of the count that could have influenced people's decisions to isolate out of doors or attend PiT count-related events. More recent initiatives put into place, such as repurposing hotel rooms to allow individuals to safely shelter in place, will have shifted the numbers between unsheltered and provisionally sheltered since the PiT count.

The Point-in-Time project is much more than a tool used to count the number of people experiencing homelessness on a given night. It is a strategy

used to provide insight into the nature and extent of homelessness within a community. The survey collects data about the demographics, history, and service needs of those experiencing homelessness to help guide decision-makers, planners, and service providers in directing resources to areas of greatest need.

ENUMERATION RESULTS FOR THE NIGHT OF MARCH 11, 2020

This PiT count should be treated as an under-estimate. Some individuals value their privacy and prefer not to participate in the survey while others experiencing "hidden" homelessness are difficult to reach and, therefore, would not be included in this count.

- At least 270 individuals were unsheltered
- At least 350 were emergency sheltered
- At least 145 were couch-surfing
- At least 743 were provisionally accommodated in transitional housing and institutions
- At least 15 stayed in unknown locations

Homelessness is a fluid experience where one's shelter circumstances and options can change quite dramatically night-to-night, and one may move in and out of homelessness over time. For example, a significant number of those couch surfing on March 11 had stayed in a homeless shelter in the past year.

KEY HIGHLIGHTS

PIT COUNT

The night of March 11, 2020 at least **1,523** people were experiencing homelessness in Greater Victoria.

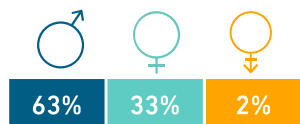


15 WERE IN UNKNOWN LOCATIONS

On the night of March 12, 2020, **854** individuals participated in the homeless needs survey, representing over half of those enumerated.

GENDER

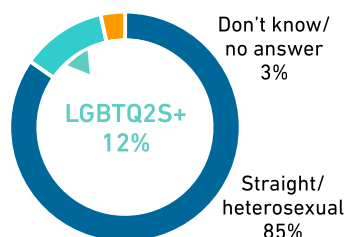
Two thirds identified as male.



SEXUAL ORIENTATION

12% identify as LGBTQ2S+

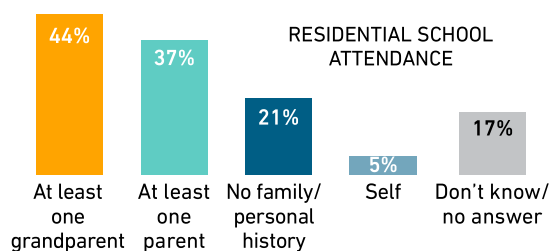
Among youth, the number rose to 30%.



INDIGENOUS

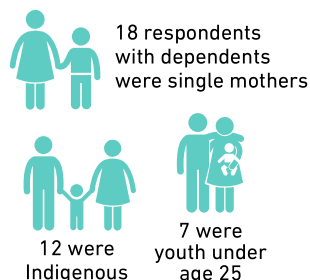
35% are Indigenous, compared to 5% of the Greater Victoria population. 44% are **women**, 59% first experienced homelessness as a **youth**, and 55% have experiences with **foster care**—which are all higher rates than the general survey population.

62% have personal or close family history of attending **residential school**.



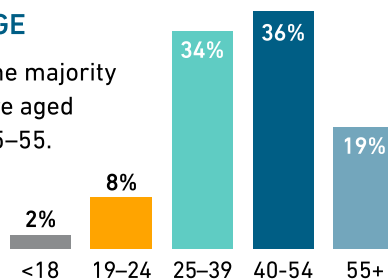
FAMILIES

30 individuals had children with them. Of the 42 children/dependents, 28% were unsheltered or slept in vehicles.



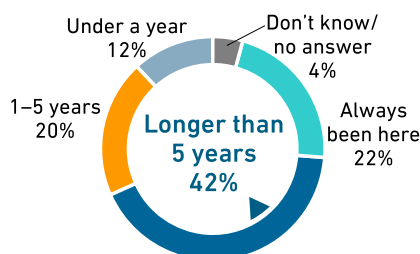
AGE

The majority are aged 25–55.



TIME IN GREATER VICTORIA

Only 12% have lived in the region for less than one year.



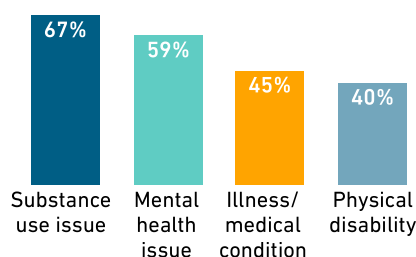
EXPERIENCES OF FOSTER CARE

1 in 3 were in government care as a child or youth. A third became homeless within a month of leaving care.



HEALTH CHALLENGES

90% have at least one health challenge, including 29% with an acquired brain injury. Research indicates that homelessness exacerbates some health challenges, such as substance use.



LONG-TERM HOMELESSNESS

- **1 in 2** respondents first experienced homelessness as youth (under 25).
- **82%** have been homeless for a total of 6 months or longer over the past year—this is an increase from the previous PIT survey (72%).

INCOME SOURCES

- **94%** have at least one source of income, with the most common being welfare/social assistance (37%), disability benefits (36%), employment, including full-time, part-time and casual (17%), and informal sources of income (16%).

NEED FOR HOUSING AND SERVICES

- **92%** want permanent housing.
- The top three obstacles to finding housing: **high rent, low income, and lack of available options.**
- Top three needed services include primary care services, services for substance use, and mental health supports.



INTRODUCTION

BETWEEN MARCH 11 AND 12, 2020, over 175 citizen volunteers and staff, along with a cross-sector of service agencies and community partners, participated in the Capital Region's third Point-in-Time Homeless Survey.

Over 50 shelter, transitional housing and health facilities provided data, and surveys were conducted at nearly 50 facility locations and walking routes. This extensive effort resulted in counting at least 1,523 individuals who experienced homelessness on the night of March 11, 2020. On March 12, volunteers conducted over 850 surveys with people experiencing homelessness across the region, providing an invaluable set of personal histories, experiences, and needs.

The PiT project happened just as the COVID-19 pandemic was breaking across the region. The enumeration between unsheltered and emergency sheltered will have changed as a result of the reduced number of shelter beds to accommodate social distancing (which will have increased the unsheltered). Additionally, the repurposing of hotels and other temporary shelters for those in the camps will have impacted the number of people who are provisionally accommodated for the time being.

The Point-in-Time (PiT) project is much more than a tool used to count the number of people experiencing homelessness on a given night. The PiT count project is a strategy to help provide insight into the nature and extent of homelessness within a community. The PiT project collects community information about the demographics, history, and service needs of those experiencing homelessness.

While enumeration provides a snapshot of the numbers, the homeless needs survey provides valuable data to guide decision-makers, planners, and service providers in directing resources to areas of greatest need.

DEFINITION OF HOMELESSNESS

The Canadian Observatory on Homelessness defines Homelessness in Canada as the inability of an individual, family or community to access or acquire stable, safe, permanent and appropriate housing (COH 2012). Homelessness describes a range of housing and shelter circumstances and encompasses a range of physical living situations, including:

- **UNSHeltered** – Absolute homelessness and living on the streets or in places not intended for human habitation (e.g., public spaces, vehicles, abandoned buildings).
- **EMERGENCY SHELTERED** – Those staying in overnight shelters for people who are homeless, or in shelter for those impacted by family violence.
- **PROVISIONALLY ACCOMMODATED** – Staying in accommodation that is lacking security of tenure (e.g., transitional housing with a maximum stay of three years, living in hotels/motels, staying at someone else's place or couch-surfing, staying at treatment/mental health/corrections facilities with no secure permanent housing to return to).
- **AT RISK FOR HOMELESSNESS** – People who are not homeless, but current economic and/or housing situation is precarious or does not meet public health and safety standards.

The Greater Victoria 2020 PiT count definition of homeless aligns with this widely-accepted definition of homelessness and includes people who are unsheltered, emergency sheltered, and provisionally accommodated. The PiT project does not enumerate or survey people who are at risk of homelessness.



BACKGROUND

HOMELESSNESS IS A CONCERN across the country, affecting an estimated 35,000 Canadians on a given night, and at least 235,000 Canadians in a given year (Rech 2019). The widespread nature of homelessness and the growing length of periods of homelessness for many Canadians, sparked the Government of Canada to launch the National Poverty and Housing strategy to reduce homelessness nation-wide (Rech 2019). To help reach its goal of reducing homelessness by 50% by 2028, the Government of Canada's Reaching Home Program funds Nationally Coordinated Point-in-Time counts and surveys to help track the extent and experiences of homelessness in various communities across the country.

The Point-in-Time approach includes core standards and a consistent methodology to guide communities in gathering essential information to help provide a national, provincial, and local lens of people experiencing different types of homelessness. PiT homeless data only represents people staying in participating facilities and those who are approached and consent to participating in the survey. Therefore, the PiT enumeration is known to be an undercount of the homeless population in the community. Although the enumeration is a minimum count of people experiencing homelessness, the detailed PiT survey provides valuable data to guide decision-makers, planners, and service providers in directing resources to areas of greatest need.

Under the leadership of the Capital Regional District and with coordination by the Community Social Planning Council of Greater Victoria, the region has participated in the biennial PiT count and survey since the first national PiT count in 2016.

HOMELESSNESS IN GREATER VICTORIA

The Victoria Census Metropolitan Area (CMA), commonly referred to as Greater Victoria, contains 13 municipalities, spans the territories of approximately 20 First Nations, and is home to nearly 380,000 people (for a map of the region, see the [Technical Appendix](#)). The region is thriving with vibrant urban and non-urban communities where residents work, play, and have access to a diverse range of services. But Greater Victoria is also known to have some of the least affordable housing and rental markets in Canada.

High rental housing costs, low vacancy rates, lack of affordable housing, the long waitlist for BC Housing, and inadequate incomes make it challenging for many local community members to afford housing, find housing, and meet the costs of daily living, contributing to homelessness.

As of October 19, 2019, the vacancy rate in Victoria CMA was at 1.0% (CMHC 2020). Although there have been some improvements in that rate with new purpose-built rental housing (up from 0.5% in 2016), it falls short of the 3.0% threshold for a healthy vacancy rate (RBC Economics 2019). The average 2019 rent for private apartments in the Victoria CMA was \$1221, which is 30% higher than in 2017 (CMHC 2020). Income has not increased apace. Since 2018, the minimum wage has increased by 8.6% and falls far short of the region's living wage. Most recent figures are that one-fifth of the CRD's households were in Core Housing Need, spending over 30% of their income on rent and utilities (Statistics Canada, 2016 Census).

These housing market and income factors are exacerbated by other systemic, economic, structural, societal, and personal contributing factors that affect many homeless and at-risk residents in the area. People experiencing homelessness in Greater Victoria

are diverse in age, gender, and ethnic backgrounds; have unique experiences and needs for services; and have varied incomes, household arrangements and reasons for becoming homeless. This report reflects that diversity while drawing out important trends.

PIT PROJECT METHODOLOGY

A high-level summary of the methods is included in this report, but for those seeking a more detailed methodology, data set or the survey forms, see the Technical Appendix.

The Greater Victoria Point-in-Time count and survey took place over a 24-hour period, providing a snapshot of homelessness across the region for that particular night. The 2020 PiT project followed the methodology of previous Greater Victoria PiT counts and the national and provincial guidelines. There is one notable change from the 2018 PiT count and survey method: respondents were asked where they slept the night before instead of where they anticipated sleeping that night. This was done to avoid the high level of “don’t know” responses on the 2018 survey

The two key components of the PiT project include the enumeration and the homeless needs survey.

ENUMERATION METHODS

The enumeration component of the PiT project provides the minimum number of people staying in emergency shelters, transitional housing, on the streets, staying in public systems without permanent housing, and people experiencing hidden homelessness such as couch surfing or staying with family and friends because they have nowhere else to go (see page 6 for definition of homelessness).

The PiT count uses two key methods for enumeration:

- **ADMINISTRATIVE DATA:** Administrative staff from participating homeless shelters, transitional housing facilities, and institutional settings (health, treatment and correctional facilities) filled out an enumeration form,

providing the number of individuals experiencing homelessness who spent the night of March 11 at their facilities.

- **SURVEY DATA:** Individuals who stayed in an unsheltered location (e.g., outdoors, vehicle), or with someone else were reached by volunteers conducting surveys the following day.¹

HOMELESS NEEDS SURVEY

The homeless needs survey aims to connect with as many people as possible that were experiencing homelessness on the night of March 11, using a community effort involving staff and volunteers. A team of approximately 175 trained community volunteers, people with lived experience, service providers and homelessness outreach workers conducted over 850 surveys from early morning to late evening on March 12. The survey included a short set of screening questions based on the PiT definition of homelessness. The survey was conducted by volunteers and staff in outdoor locations, temporary housing/shelter facilities, homeless and non-homeless serving agencies (e.g., food banks, meal programs), and magnet events.

LIVED EXPERIENCE

The PiT project engaged people with lived experience in the following ways:

- A third of the CSPC PiT staff team have lived experience of homelessness, including a lived experience work placement through the Victoria Immigrant and Refugee Centre Society (VIRCS).
- Outreach through the Greater Victoria Coalition to End Homelessness’s Lived Experience

¹ If survey respondents reported spending the night of March 11 in a sheltered facility, they were not counted in the enumeration, since they would have already been captured in the administrative data provided directly from the facility for that night—these individuals still would have been surveyed, however, to collect the broader survey information not covered in the facility enumeration form.

committee (survey design, volunteer recruitment and a training session for the lived experience researchers).

- Lived experience volunteers participated in the survey, supporting survey teams and conducting surveys.

This engagement led to survey modifications, an increase in the honoraria to reflect the living wage, and a team of lived experience volunteers to support survey teams on March 12.

CONNECTING WITH POPULATIONS WITH UNIQUE EXPERIENCES AND NEEDS

While structural and socioeconomic factors often contribute to experiences of homelessness, each incidence is a unique experience. There are, however, some specific population groups that are particularly impacted by the factors that contribute to homelessness and, therefore, experience higher rates of homelessness than the general population. The Greater Victoria Point-in-Time project focuses efforts on making contact with populations that have higher rates of experiencing hidden homelessness, including Indigenous people, newcomers to Canada, and youth. Specific efforts were undertaken to engage more deeply with these groups to make the survey more inclusive, to reach out to hidden homelessness, and to engage them in conducting the homeless needs survey (see Appendix A for more detail on the engagement strategies used). The PiT count and survey team also made special efforts to reflect the geographic diversity of the region including outlying areas such as Sooke.

Indigenous people: In recognition that Indigenous people are disproportionately represented among the total population experiencing homelessness, the 2020 Greater Victoria PiT count project partnered closely with the Aboriginal Coalition to End Homelessness (ACEH). The CSPC and ACEH worked to significantly improve engagement with Indigenous people by using a much stronger cultural focus and greater targeted

outreach. This included: involvement in survey design, cultural sensitivity training for volunteers, targeted outreach with local Indigenous serving agencies, increased participation of Indigenous people conducting surveys in Indigenous-specific areas, Elder participation in the training sessions and opening the headquarters, Indigenous cleansing offered for volunteers, and medicine bags for volunteers and survey participants (see Appendix A for more detail).

LIMITATIONS

The PiT count enumeration is not meant to reflect the experiences of homelessness through a year, or the complete scope of homelessness within the region. Homelessness is a fluid experience where one's shelter circumstances and options can change quite dramatically night-to-night due to personal and external factors, and one may move in and out of homelessness over time.

Furthermore, the PiT count enumeration cannot provide a completely accurate count of the people experiencing homelessness in a region—it is not meant to be a census. People experiencing homelessness may not always identify as homeless, may not access typical shelters or services designed for homeless populations, and may not be at indoor and outdoor survey locations on the day of the PiT project survey activities, making it challenging to reach out to, count, and survey every person experiencing homelessness in the region. Further, fluctuations in numbers might, in some part, be due to an increase or decrease in response rates of individuals, which could be driven by methodological changes or other external factors that have caused a higher or lower number of unsheltered individuals completing the survey.

Because of these limitations, data from successive PiT counts and surveys cannot be used to suggest trends in the types of homelessness being experienced from year to year in the region and must take into consideration a variety of contextual factors each time a count and survey takes place.

ENUMERATION

GREATER VICTORIA POINT-IN-TIME COUNT 2020

AT LEAST

1,523 people were experiencing homelessness in Greater Victoria on the night of March 11, 2020

270

UNSHELTERED



270 stayed in an unsheltered location, such as a public space, park, tent, vehicle, or other place not intended for human habitation

350

EMERGENCY SHELTERS



350 in emergency shelters, seasonal shelters, youth shelters, and domestic violence shelters for emergency accommodation

145

COUCH SURFING



At least 145^a stayed with a friend, family member, or stranger, or at a hotel/motel, because they do not have a secure place of their own

198

PUBLIC SYSTEMS



198 stayed in public system settings with no home to return to, such as correctional halfway houses, hospitals, and treatment centres

545

TRANSITIONAL HOUSING



545 stayed in transitional housing, a temporary type of accommodation meant to bridge the gap from homelessness to permanent housing

In total, **620** people were unsheltered and emergency sheltered

A total of **888** were provisionally accommodated

Another **15** spent the night in an unknown sleeping location.

^aThe total number of people counted to be couch surfing is a gross undercount as it solely relies on the survey outreach methodology. There are likely many couch surfing individuals not accessing services who did not know about the count.

CHANGES OVER TIME

The table below illustrates the minor changes between unsheltered, emergency sheltered, provisionally sheltered, and total homeless individuals identified by the PiT count enumeration over time. The higher number of people experiencing homelessness identified in the 2020 count from the first PiT count completed in 2016 is due to improved survey and enumeration outreach methods and community participation, rather than a demonstration of any increase in the number of people experiencing homelessness.

Between 2018 and 2020, the total number of people experiencing homelessness may appear to remain the same. However, there is a notable fluctuation in the types of homelessness people are experiencing—this is due to methodology changes and external factors that are beyond the control of the researchers, such as COVID-19. On the night of March 11, 2020, a higher number of people sleeping outdoors were contacted by PiT survey volunteers than in the previous 2018 PiT enumeration. This increase in unsheltered

Between 2018 and 2020, the total number of people experiencing homelessness may appear to remain the same; however, there is a notable fluctuation in types of homelessness.

homelessness may have been the result of the growing fear and rapid spread of COVID-19 that may have been interpreted to be in confined, crowded locations.

Rather than seeking to draw information from what appears to be slight variations from year to year, the real value must be seen in the collection of data from the comprehensive survey completed with a high proportion of the people identified as experiencing homelessness from the enumeration. As the community continues to regularly complete PiT counts and surveys with improved methodology efforts, the data will continue to provide valuable insight into the progress towards preventing and addressing homelessness in the region.

Sleeping location	2020	2018	2016
UNSHeltered in outdoor locations, vehicles, and other places not intended for human habitation	270	158	192
EMERGENCY SHELTERED in seasonal and emergency shelters, including domestic violence shelters	350	359	333
COUCHING SURFING (without secure housing and sleeping at someone else's places or in a self-funded hotel/motel) ^a	145	95	74
PUBLIC SYSTEMS temporary stay with no permanent housing of own	198 ^b	248	150
TRANSITIONAL HOUSING (typically a maximum stay of three years)	545	588	573
Unknown Sleeping location	15	77	40
TOTAL (minimum number of people counted)	1,523	1,525	1,362

^aThe survey does not accurately measure hidden homelessness such as couch surfing. This is a gross underestimate but provides important data on experiences and needs.

^bVancouver Island Regional Correctional Centre was not able to participate in the 2020 Greater Victoria PiT Count, which likely explains the lower number counted in correctional facilities this year. In 2018, 84 individuals were counted at VIRCC.

BEHIND THE NUMBERS

GREATER VICTORIA PiT 2020 SURVEY FINDINGS

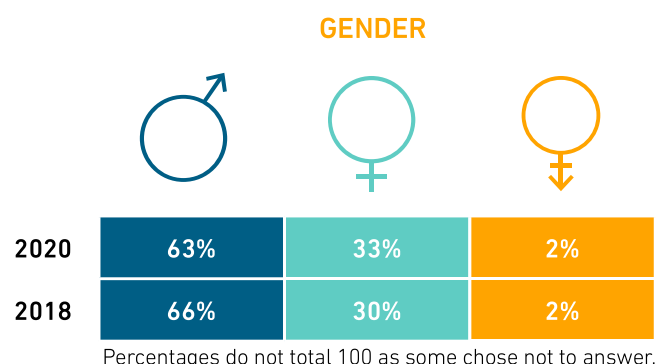
THE FOLLOWING RESPONSES are taken from the 854 people who answered the Point-in-Time Homeless needs survey between March 11 and March 12, 2020 (refer to the [Technical Appendix](#) for the survey questions and data tables). The number of surveys represents over half of the population enumerated, meaning the results can be considered a good representation of the broader homeless population in the region.

The graphs in this section are based on all 854 respondents, unless otherwise indicated. Some figures are based on sub-populations, such as youth or Indigenous survey respondents. Any charts or figures based on these subpopulations are noted.

GENDER

Respondents to the 2020 PiT mostly identified as male: 63.1% male, 32.6% female, and 2.2% another gender identity.² This is similar to the 2018 survey; both years over-represent men in experiencing homelessness in the Greater Victoria Region.

There are notable differences in the type of sheltering location by gender. The table below shows that substantially more women were provisionally accommodated than emergency sheltered or unsheltered; whereas, men's sheltering locations were relatively even between the three sheltering categories. In contrast, there were considerably more individuals who identify as another gender identity sheltered outdoors than in an indoor location.



Two thirds identify as male.

	Unsheltered	Emergency sheltered	Provisionally sheltered	Total
Man/male	35.1%	28.6%	36.4%	63.1%
Woman/female	29.1%	20.9%	50.0%	32.6%
Another gender identity	50.0%	22.2%	27.8%	2.1%
Don't know/no answer ^a	31.6%	31.6%	36.8%	2.2%

^aThe exact percent is not identified in some areas to protect the identity of the respondents.

Unsheltered = unsheltered in a public space, vehicle, unsure, don't know/unclear answers. **Emergency sheltered** = emergency shelters, domestic violence shelters, seasonal shelters, and hotel/motel vouchers funded by homeless program). **Provisionally sheltered** = transitional housing, someone else's place, self-funded hotel/motel, hospital, and treatment centre.

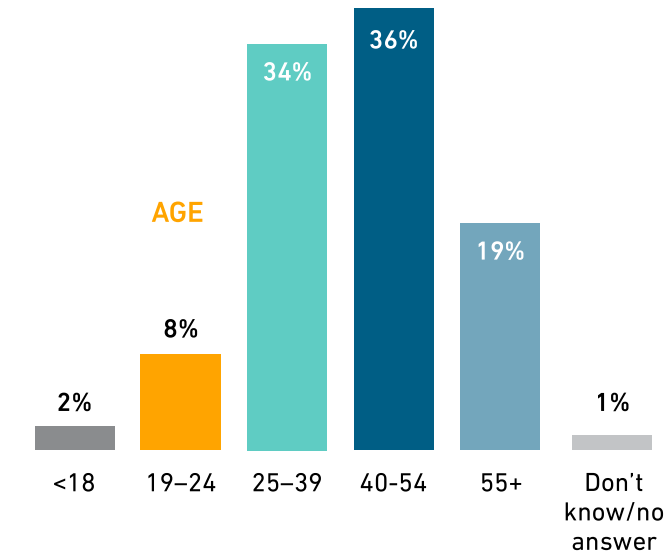
² Other gender identities include two-spirit, trans female/trans woman, trans male/trans man, and others.

AGE

A wide range of ages are represented in the survey population, with the youngest age 16 and the oldest age 78 (as part of the research ethics, surveys were not conducted with anyone under the age of 16). The majority (70.7%) are adults between the ages of 25 and 54. The ageing population on the street is a growing concern, and the survey reinforces that: nearly one-fifth (19%) of survey respondents were aged 55 and older.

Summaries of youth and senior’s experiences of homelessness are outlined later in this report.

A higher percentage of those between 25 and 39 were unsheltered, whereas, for all other age groups, there was a higher percentage of people sleeping indoors on the night of March 11.



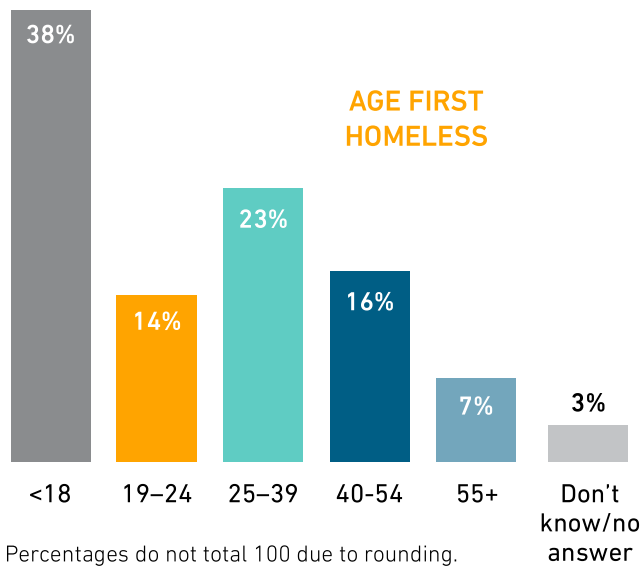
The majority are aged 25-55.

	Unsheltered	Emergency sheltered	Provisionally sheltered	Total
Youth (16-24)	20.2%	25.0%	54.8%	9.8%
25 to 39	42.5%	16.7%	40.8%	34.4%
40 to 54	30.0%	28.1%	41.9%	36.3%
55+	28.8%	40.0%	31.3%	18.7%
Don't know/decline	66.7%	16.7%	16.7%	0.7%

AGE OF FIRST HOMELESS EXPERIENCE

For the survey questions related to experiences of homelessness, respondents were provided with the following definition of homelessness: “any time an individual has been without a secure place to live, including sleeping in shelters, on the streets, or living temporarily with others.”

More than one third were homeless by the age of 19.



Consistent with previous PiT surveys, a large portion of respondents had their first experience with homelessness as a youth. For 51.4% of survey respondents, that first experience happened as youth under the age of 25 with a considerable number (37.6%) first experiencing homelessness as a teenager under the age of 19.

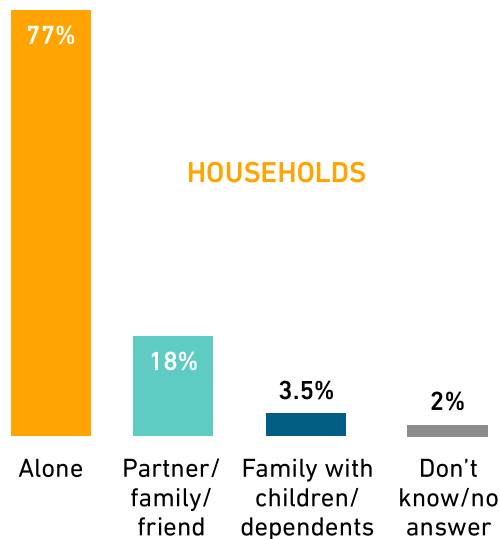
Similar to the 2018 PiT homeless needs survey results, a notable number of respondents had their first experience of homelessness as older adults age 55 and above (7.1% in 2020 and 7.6% in 2018).

More than one in three were homeless by the age of 19.

HOUSEHOLDS

More than three quarters of respondents were single or had no family members staying with them the night of March 11, while 21% were accompanied by a partner, friend, family member, or child(ren)/dependents.

Most spent the night alone without a partner, family member, or friend.



Reflects who the survey respondent stayed with on the night of March 11, 2020. Percentages do not add to 100 due to rounding.

FAMILIES WITH CHILDREN

Families with children experiencing homelessness account for 30 (3.5%) of the survey respondents and include 42 children/dependents.

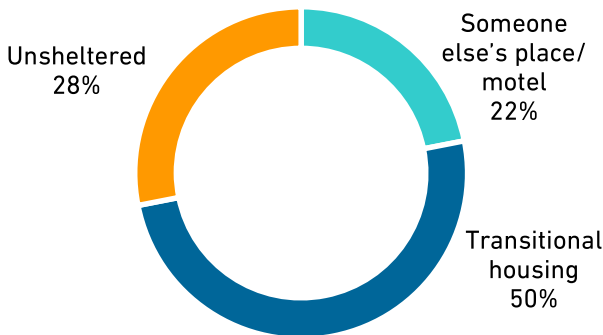
For the night of March 11, of those 30 survey respondents with dependents: 24 were single, 18 were single mothers, 6 were male, 21 were female (3 identified as other gender identities), 12 were Indigenous, and 7 were youth under the age of 25.



While half of the children under 16 stayed with parents in transitional housing, 28% were unsheltered or slept in vehicles.

Of the 42 dependent children, one quarter (32) were under the age of 16. While 50% of these children under the age of 16 stayed with parents in transitional housing, 28% were unsheltered or slept in vehicles.

WHERE FAMILIES WITH CHILDREN SPENT THE NIGHT



This chart is based on the 32 children who were under the age of 16 and stayed with a parent/family member on the night of March 11, 2020.

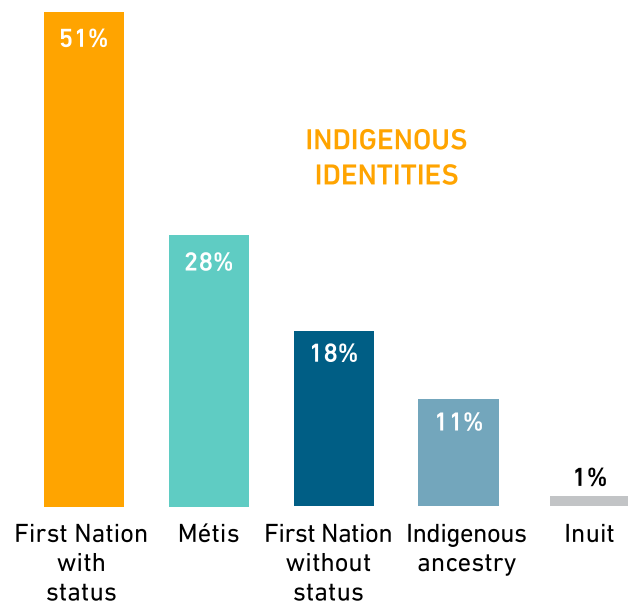
INDIGENOUS IDENTITY

Widespread research indicates that colonial treaties, policies and practices designed to eradicate Indigenous cultures across Canada, including residential schools and the Sixties Scoop, have led to intergenerational trauma, causing extensive health and social implications for Indigenous people today. This impact of colonization has led to Indigenous peoples living off-reserve in urban centres to experience homelessness at a disproportionate rate and make up a substantial percentage of people experiencing homelessness in cities.

The 2020 PiT survey found 35% (299 people) of all respondents identifying as Indigenous. This is slightly higher than the 2018 PiT survey results, where 290 (32%) identified as Indigenous. With approximately 4.7% of the Greater Victoria population identifying as Indigenous (2016 Census), Indigenous individuals are disproportionately represented among those experiencing homelessness.

Of those 299 survey respondents who identify as Indigenous, one half are First Nations with status.

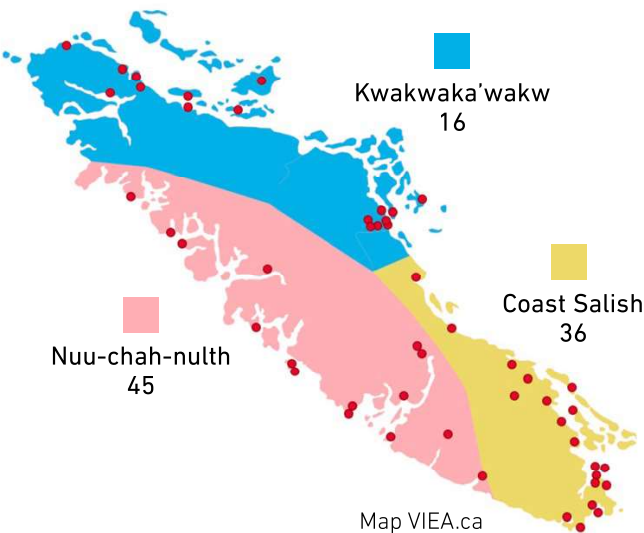
Nearly 80% of Indigenous respondents shared the Indigenous community they are from, and over 100 communities from across the country were listed.



Among the 299 respondents who identified as Indigenous. More than one response was possible.

Almost one third of Indigenous respondents (96) are from 29 communities within Vancouver Island’s three distinct tribal regions:

- Kwakwaka’wakw = 16 respondents
- Nuu-chah-nulth = 45 respondents
- Coast Salish = 36 respondents



Almost one third of Indigenous respondents are from 29 communities within Vancouver Island’s three distinct tribal regions

25 people are from other Indigenous communities throughout BC, and 99 respondents are from Indigenous communities and Nations outside of BC.

12% of Indigenous respondents are on a waitlist for on-reserve housing, 15% are on an urban Indigenous housing waitlist, and 7% are on a waitlist for both. It should be noted that, since the majority of Indigenous communities/reserves place a priority on housing for families, many single individuals may not consider putting their name on a housing waitlist.

Given that 35% of respondents self-identify as Indigenous, regional housing strategies, such as BC Housing’s coordinated access supportive housing resources, should consider increasing Indigenous uptake in supportive and subsidized housing from 33% (which is based on the 2018 PiT survey results).

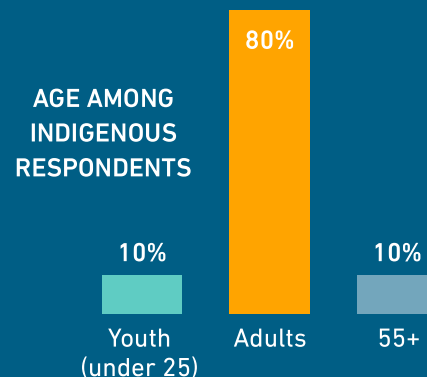
INDIGENOUS PEOPLE'S EXPERIENCES OF HOMELESSNESS

The concept and definition of Indigenous homelessness is complex and goes beyond the basic colonialist definition of lacking access to stable, permanent, or appropriate housing. The Canadian Observatory on Homelessness' (COH) definition of Indigenous homelessness recognizes that Indigenous individuals, families or communities lacking access to stable housing, also experience disconnected relationships with their land, family, community, culture, and identities. The concept of Indigenous homelessness goes beyond the lack of a physical structure of residence, as it comprises of the need for Indigenous people to "culturally, spiritually, emotionally or physically reconnect with their indigeneity or lost relationships" (Thistle 2017, 6).

Experiences of homelessness, along with the personal challenges that act as contributors to homelessness such as substance use, addiction and health challenges, can be directly linked to historical trauma, oppression, residential schools, and other acts of colonization (Thistle 2017). See survey data on the following page for the high level of residential school experience reported.

FACTS ABOUT THE HOMELESS INDIGENOUS POPULATION IN GREATER VICTORIA (299 surveys)

- More Indigenous **women** are homeless than non-Indigenous women: 44% female, 52% male, 3% had another gender identity (e.g., transgender, two-spirit) — only 33% of the general survey population identify as female.
- 13% identify as **LGBTQS2+**, which is slightly higher than the general survey population (12%).
- More than one third (36.0%) were **sleeping outdoors** on the night of March 11, and 71.0% were **single** or had no family members staying with them that night.
- 84% are experiencing **chronic homelessness**, meaning that they have been homeless for a total of 6 or more months of the past 12 months.
- 59% had their first experience of **homelessness as a youth** (under the age of 25), with 46% having their first experience of homelessness at the age of 18 or younger. This is higher than the general survey population.
- Over half (52%) indicate being in **foster care**, a youth group home or a child welfare program as a child or youth. This is a much higher percentage than the broader survey population, where 35% indicate being a child or youth in government/ ministry care — this is consistent with the cross-Canada over-representation of Indigenous children and youth in the foster care system.

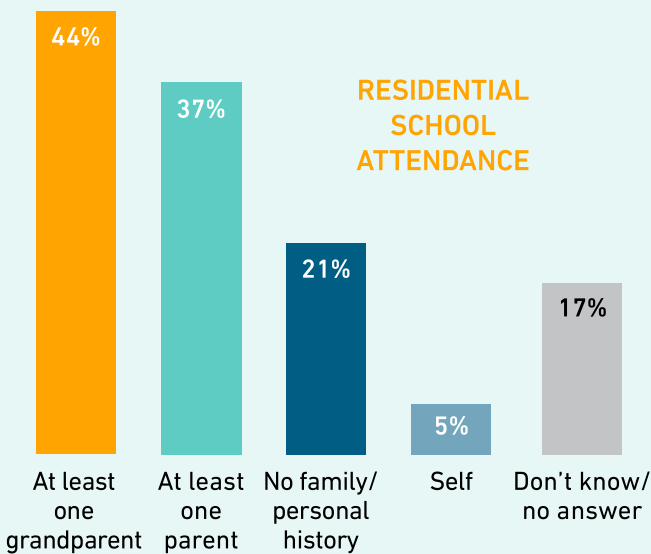


- 89% identify living with at least one **health challenge**:
 - Substance use issue = 72%
 - Mental health issue = 59%
 - Illness/medical condition = 45%
 - Learning/cognitive limitation = 41%
 - Physical disability = 37%
- The top three reasons for **housing loss**: Not enough income for housing (26%), conflict with spouse or partner (14%), and substance use issues (13%).
- Most common **needed services** include: Primary care (65%), addiction or substance use (55%), mental health (51%), life skills (36%), and Indigenous treatment/support (35.8%).

RESIDENTIAL SCHOOL HISTORY

61.5% of Indigenous respondents report having a personal or close family history of attending a residential school.

It is valuable to understand whether or not Indigenous people experiencing homelessness have personally attended residential school or had a parent or grandparent attend a residential school. Much of the literature shows the interrelated connections between the effects of colonization and residential schools with homelessness. Having an understanding of this incidence and the prevalence within the local homeless population can help inform the degree to which housing and support solutions might consider incorporating strategies to address trauma, including intergenerational and historical trauma and work towards the provision of culturally safe and appropriate spaces and services.

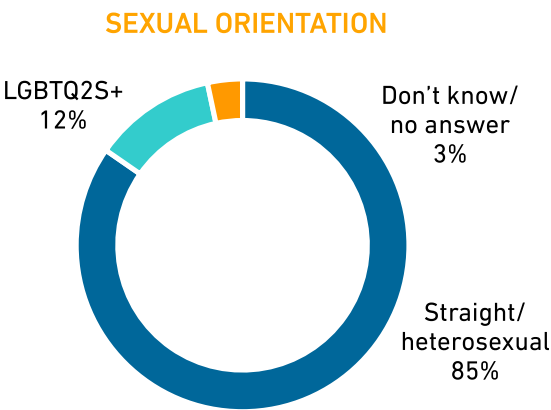


Among the 299 respondents who identified as Indigenous. More than one response was possible.

61.5% of Indigenous respondents report having a personal or close family history of attending a residential school.

SEXUAL ORIENTATION

The majority of respondents identify as straight/heterosexual (84.7%), while 11.9% identify as LGBTQ2S+ (lesbian, gay, bisexual, questioning, queer, two-spirit, and more).



Of those who identified as LGBTQ2S+, 24.5% were youth, 67.6% were adults, and 7.8% were aged 55+. These results are similar to the 2018 PiT survey results.

Findings also indicate that respondents who identify as LGBTQ2S+ are more likely to have first experienced homelessness as a youth (70%) than those who identify as straight (49%).

Respondents who identify as LGBTQ2S+ are more likely to have first experienced homelessness as a youth than those who identify as straight.

While national data is limited, some studies suggest that LGBTQ2S+ members may be more likely to live in poverty than their non-LGBTQ2S+ counterparts. Furthermore, LGBTQ2S+ youth are over-represented in poverty and homelessness statistics, due to rejection of family members and lack of services to address the needs of LGBTQ2S+ youth living in poverty (Canadian Observatory on Homelessness, n.d.).

YOUTH (AGE 16–24) EXPERIENCES OF HOMELESSNESS

Youth homelessness typically refers to young people aged 13 to 24 who are living independently of parents and caregivers and do not have a stable or consistent residence and source of income or have adequate access to the support networks necessary to transition from childhood to independent adulthood.

In 2018, the PiT project surveyed 157 youth aged 15 to 24 experiencing homelessness in the Greater Victoria Region. While the 2020 PiT project surveyed only 84 youth, this does not necessarily reflect a decrease in youth homelessness. There was a change in which facilities participated in the count and lower attendance at the magnet event due to COVID, both of which significantly affected the number of youth surveyed (see the Technical Appendix for a detailed outline of the methodology changes). Still, with 84 youth surveys completed, the data presents a robust picture of youth homelessness.

Youth homelessness remains a salient issue, as the literature estimates that approximately 20% of the homeless population in Canada is comprised of youth; therefore, continuous efforts are needed to address and prevent youth homelessness in the region.

FACTS ABOUT HOMELESS YOUTH IN GREATER VICTORIA (84 surveys)

- **Gender identity and sexual orientation** are bigger factors for youth homelessness: 7% identify as another gender identity compared to 2% in the broader group and 30% identify as LGBTQ2S+ compared with 11%.
- 88% of respondents aged 18 and under are **female** (16 respondents).
- One in five spent the night of March 11 sleeping **outdoors** and 60% have spent the night in a homeless shelter in the past year.
- The majority (73%) were **single** or had no family members or friends staying with them that night.
- Over one third (36%) identify as **Indigenous**, similar to the broader survey population.
- 80% are experiencing **chronic homelessness**, meaning they have been homeless for a total time of six months or longer over the past 12 months.
- Over half (55%) are or were in **foster care**, a youth group home, or government care, a much higher portion than the broader survey group.
- 92.9% identify living with at least one **health challenge**:
 - o Substance use issue 71%
 - o Mental health issue = 70%
 - o Learning disability or cognitive limitation = 49%
 - o Illness/medical condition = 21%
 - o Physical disability = 21%
- Top three reasons for **losing housing** most recently for youth: conflict with/experience of abuse by a parent or guardian (21%), substance use issue (21%), and not enough income for housing (20%).
- The top five **needed services** for youth were the same as the general survey population; however, a higher percentage of youth request needing mental health services (52%) and life skill services (40%).

Research suggests that experiences of homelessness exacerbate the risk of substance use among youth, as youth use alcohol and other drugs to cope with the traumas of homelessness. Substance use among street-involved youth can lead to health implications, addiction, sexual exploitation, and criminal behaviour. Inexperience with independent living, family conflict, and lack of available interventions and services often lead to youth homelessness; therefore, ensuring services and programs specifically designed to address the unique needs of youth and families and is essential in preventing youth homelessness (Sekharan 2015).

EXPERIENCES OF FOSTER CARE

Over one-third (35%) of all survey respondents were in foster care, a youth group home, or a child welfare program of some sort as a child or youth.

Approximate 30% of those who were in government care (300 respondents) became homeless less than one month after leaving their foster care/group home.

Only 15% of these respondents feel that Child Protective Services were helpful with transitioning to independence after leaving foster care.

Experience of homelessness after ministry care	Percent of total in ministry care
Still in care	<2.0% ^a
Up to 1 month	29.7%
Immediately (0-1 days)	25.7%
More than 1 day to 1 month	4.0%
1 month to 1 year	8.7%
1 to 5 years	11.7%
5 to 10 years	7.7%
More than 10 years	19.7%
Don't know/no answer	21.0%
Total (out of 300 respondents)	100%

Among the 300 respondents who were in government care.
^aThe exact percent is not identified to protect the identity of the respondents.

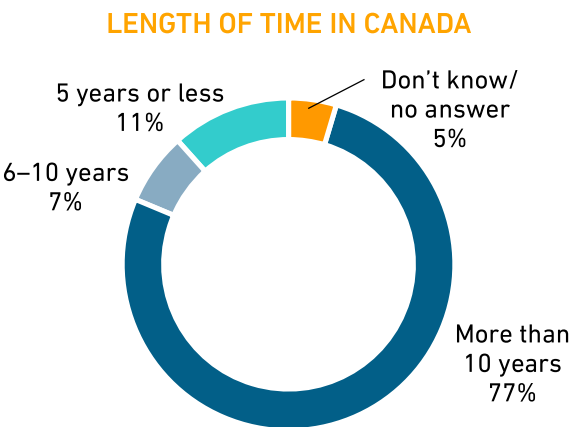


One in three were in government care as a child or youth. A third became homeless less than one month after leaving care.

IMMIGRANTS AND REFUGEES

While the majority of respondents (92.7%) do not identify as immigrants or refugees, 4.6% identify as immigrants and less than 1.0% identify as refugees.

Those who have come to Canada as an immigrant, refugee or a refugee claimant have lived in Canada as long as 2 to 64 years, with the majority (76.4%) residing in Canada for more than 10 years.



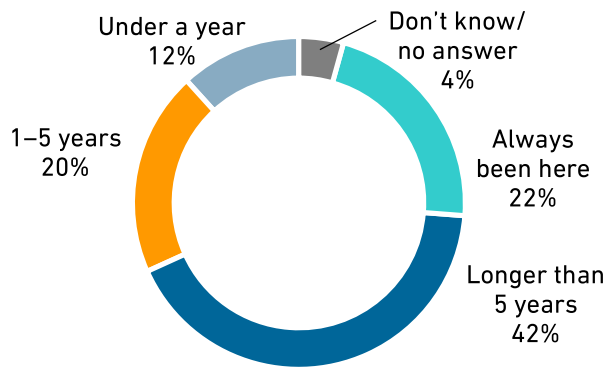
LENGTH OF TIME IN GREATER VICTORIA

There is a common misconception that individuals experiencing homelessness in Greater Victoria are not local to the region, and have moved to the community recently. Survey participants shared important information to counter this assumption. Consistent with the 2016 and 2018 PiT survey findings, the majority of respondents (82%) have lived in the Greater Victoria for more than one year, with 42% living in the region longer than five years and 22% residing here their entire lives. Only 11.85% of respondents have lived in Greater Victoria for less than one year, with even fewer (9%) living in the region for six or fewer months.

Of those who have moved to the Greater Victoria region from another community, and chose to answer the question (515 respondents), 60% are from BC. Of those who came from other areas of BC, nearly half (49%) came from different parts of Vancouver Island.

84% have lived in Greater Victoria for one year or longer.

LENGTH OF TIME IN GREATER VICTORIA



Alberta (18%) and Ontario (12%) are the next most popular locations respondents have come from.

The top five reasons for moving to Victoria include (for the full list of reasons, see data tables in the Technical Appendix):

- Family moved here (18.5%);
- To visit friends and family (13.2%);
- Employment (seeking and secured) (11.7%);
- Multiple reasons (11.5%); and
- Access to supports and services (5.7%).

EMERGENCY SHELTER STAYS

Survey participants were asked if they have stayed in an emergency shelter in the past year: 68% have.

However, 64% indicate that there are reasons they would not stay in a homeless shelter in the greater Victoria region. The top reasons are: a fear for safety (42.8%), noise/crowding/germs (36.2%), and cleanliness/bug/pests (31.5%).

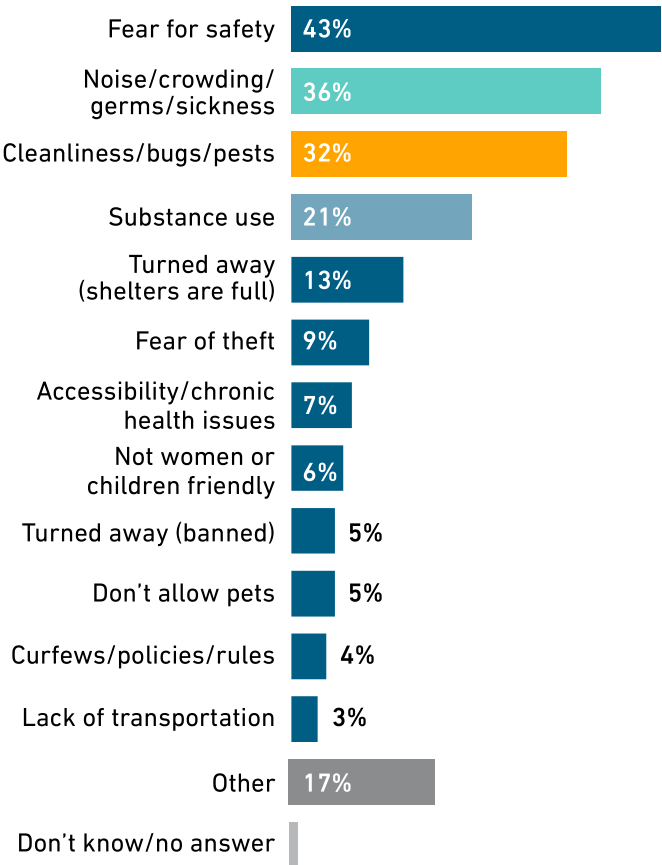
Youth and seniors were less likely than adults to have stayed in a homeless shelter in the past year.

Other reasons include: can't stay with a partner, mental health/anxiety issues, issues with staff, prefer

not to, prefer to stay with friends, not LGBTQ2S+ friendly, etc. The primary reasons for avoiding homeless shelters are the same among different sub-populations (i.e., youth, Indigenous, and senior).

These two questions about emergency shelters stays demonstrate that, although shelters are an important part of homelessness services in terms of emergency response, they may not work for everyone, and some aspects could be improved.

REASONS TO NOT STAY IN A HOMELESS SHELTER



Percentage based on 549 respondents who answered the question. More than one response possible.

Other reasons given to not stay in a homeless shelter included: “they close early or are full,” “don’t want to take place of older person,” and “hostile environment.”

INCOME

The vast majority (94%) report having at least one source of income, whether it is a formal or informal source. The most common source of income reported is welfare/social assistance, closely followed by disability benefits, and employment (17.4% with casual, part-time and full-time combined). Informal sources of income were also significant at 16%, which may include bottle returns, panhandling, sex work, etc. These results are consistent with the 2018 survey.

Sources of income	#	%
Government transfers		
Welfare/income assistance	313	36.7%
Disability benefits	308	36.1%
GST/HST refund	64	7.5%
Seniors benefits (CPP, OAS, GIS, pensions, etc.)	56	6.6%
Child & family tax benefits	14	1.6%
Employment insurance	11	1.3%
MCFD youth agreement	6	0.7%
Government programs	4	0.5%
Veteran/VAC benefits	2	0.2%
Employment		
Casual (contract work, etc.)	73	8.5%
Part-time employment	50	5.9%
Full-time employment	26	3.0%
Other sources		
Informal sources (bottle return, panhandling, sex work, etc.)	139	16.3%
Money from family/friends	34	4.0%
Other sources not listed	19	2.2%
Other money from a service agency	9	1.1%
Crime	6	0.7%
Investments/savings	4	0.5%
No income	55	6.4%
Decline to answer	21	2.5%

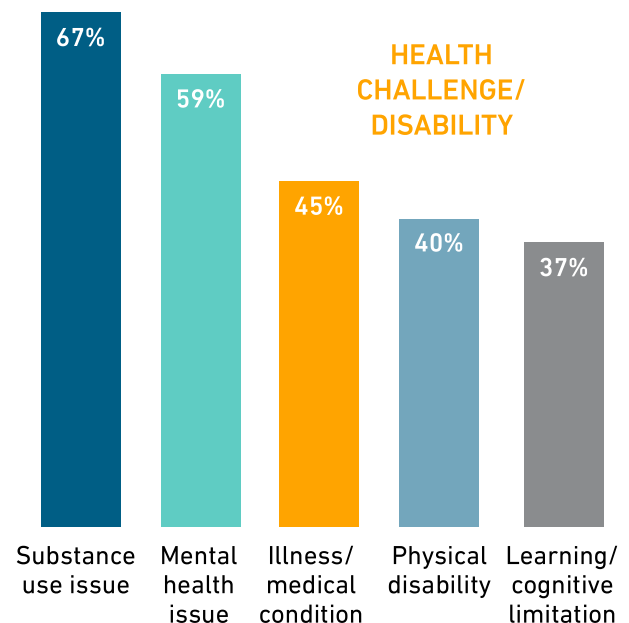
More than one response possible.

HEALTH CONDITIONS³

When asked about health challenges, 90% of survey respondents identify as having at least one health challenge. Youth (93%), seniors (92%), and veterans (94%) report slightly higher incidences of health challenges than the general survey population.

Well over half of the respondents identify as having a substance use issue (67%) and/or a mental health issue (59%). While it might be assumed that substance use and mental health are causes of homelessness, much of the literature demonstrates that substance use and mental health are often a response to and consequence of homelessness and exacerbated by trauma and loss associated with homelessness (Didenko & Pankratz 2007).

90% have at least one health challenge, including substance use (67%), mental health (59%), and brain injury (29%).



³ One question about health challenges and one question about brain injury are new to the 2020 Greater Victoria PiT Count survey. The health challenge question was newly added to the federal survey, and the brain injury question was added to the survey at the request to local community service providers.

Strategies for addressing and preventing homelessness should tackle the health challenges that can be both a cause and a consequence of homelessness. It is also essential to consider that individuals and specific populations experiencing homelessness (youth, Indigenous, seniors, veterans) may have different experiences and incidences of particular health challenges, as shown in this report.

Emerging literature suggests a correlation between homelessness and acquired brain injury. When survey respondents were asked if they identify as having an acquired brain injury that happened after birth, (e.g., from injury related to an accident, violence, overdose, a stroke or brain tumour), 29.3% responded yes.

REASONS FOR HOMELESSNESS

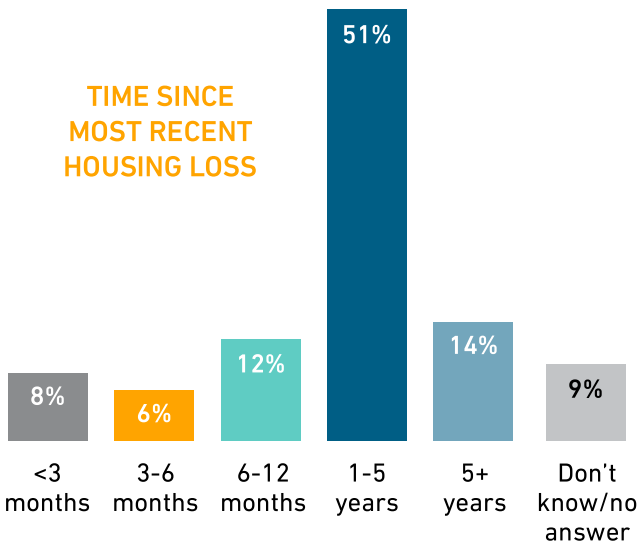
Survey participants were asked what caused them to lose their housing most recently, and many indicated multiple responses; there are multiple and potentially interrelated factors that contribute to housing loss, including a variety of structural, systemic, and personal factors. A lack of income for housing (which could include a loss of benefits, income, or job) was the most common answer — chosen by more than one in four. The top five reasons for housing loss include:

- **Not enough income** for housing (26.3%);
- **Substance use** issue (15.2%);
- **Conflict** with spouse or partner (13.5%);
- **Landlord/tenant** conflict (11.8%); and
- **Conflict** with other adult (e.g., family members, friends, other tenants/roommates) (8.4%).

While substance use is indicated as one of the top three reasons, it is important to remember that substance use prior to housing loss can be exacerbated by trauma, abuse, conflict and loss. Thus, substance use may be the immediate reason, but is preceded by other life circumstances and events that contribute to substance use often long before the event of housing loss.

When survey respondents were asked how long ago they lost their most recent housing, 65% lost their housing one year ago or longer. At the time of the survey, respondents reported losing their housing as recent as the day before to 25 years ago.

Respondents reported losing their housing as recently as the day before, but for most it had been a year or longer.



CHRONIC HOMELESSNESS

Those who have been homeless for a cumulative period of six months or longer are considered to be experiencing chronic homelessness. The majority (82%) of survey respondents identify being homeless for a total time of six months or more over the past year. This is an increase from 72% in the 2018 PiT survey. 61% of respondents report that they have been homeless for the past 365 days or more.

61% of respondents reported they have been consistently homeless for the past 365 days or more.



With seniors becoming the fastest growing population, strong measures need to be taken to address and prevent senior homelessness.

SENIORS' (55+) EXPERIENCES OF HOMELESSNESS

The 2018 PiT survey found that at least 174 seniors (aged 55 and older) were experiencing homelessness in the Greater Victoria Region. Comparably, for the 2020 PiT survey, 160 seniors experiencing homelessness completed the survey, making up nearly 19% of all survey respondents. Much of the literature shows that older adults are finding it increasingly challenging to afford housing with low or fixed incomes and increasing housing costs, and tend to have unique needs and experiences of homelessness. The risk of homelessness also increases in seniors with deteriorating physical and mental health, death of a partner or spouse, social isolation, and a lack of awareness (Canadian Observatory on Homelessness, n.d.). With seniors becoming the fastest growing population, strong measures need to be taken to address and prevent senior homelessness.

FACTS ABOUT HOMELESS SENIORS IN GREATER VICTORIA (160 surveys)

- A much higher portion of the seniors are **male**: 70% identify as male, and 28% identify as female. 5% identify as **LGBTQ2S+**.
- 29% spent the night of March 11 sleeping **outdoors**, and 66% have spent the night in a **homeless shelter** in the past year.
- The vast majority (84%) were **single** or had no family members or friends staying with them that night.
- 19% identify as **Indigenous**, much lower than the general survey group.
- 83% are experiencing **chronic homelessness**, meaning that they have been homeless for a total time of six months or longer over the past 12 months.
- 38% had their **first experience of homelessness** in recent years as a senior (55+).
- 92% identify living with at least one **health challenge**:
 - Illness/medical condition = 65%
 - Physical disability = 64%
 - Substance use issue = 50%
 - Mental health issue = 48%
 - Learning/cognitive limitation = 29%
- Most common **services needed** by seniors: Primary care (e.g., doctor, pharmacy, dentist) (62%), mental health (52%), addiction or substance use (50%), and life skills (e.g., cooking, finance planning, computers) (40.5%).

VETERANS' EXPERIENCES OF HOMELESSNESS

5.5% of respondents (47) indicate they served in the Canadian Military (Canadian Army, Navy, or Air Force) or RCMP. This finding is only slightly different from the 2018 PiT survey where 6.6% identified as veterans. Of these veterans, the majority (92%) served in the Canadian Military Forces, with 8% having served in the RCMP.

Studies indicate that veterans may make up a significant percentage of Canada's homeless population, and may have unique needs and experiences of homelessness; therefore, it is essential to consider this population in homelessness prevention planning.

- 93% of veteran respondents identify living with at least one **health challenge**, which is slightly higher than the general survey respondents (90%):
 - o Mental health issue = 62%
 - o Illness/medical condition = 60%
 - o Substance use issue = 55%
 - o Physical disability = 49%
 - o Acquired brain injury = 49%
 - o Learning/cognitive limitation = 47%

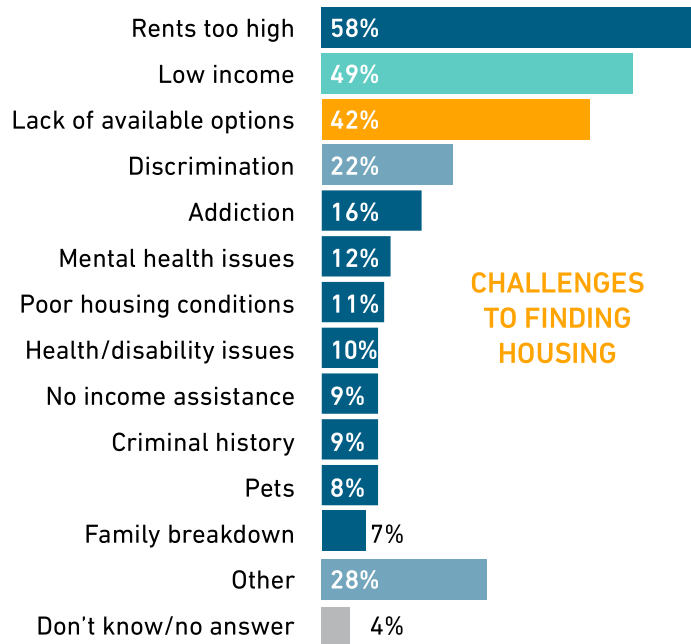
47 survey respondents indicated they served in the Canadian military (Army, Navy, or Air Force) or RCMP.

OBSTACLES TO ACCESSING HOUSING

Homelessness can be a traumatic experience caused by challenging structural, systemic, and personal factors, and it is very rarely a choice. The survey reflects that: 92.5% want permanent housing. This is consistent with previous PiT surveys.

When asked about the challenges or problems in trying to find housing, there was a lot of variety in the answers. The top three most common challenges reported include: the high costs of rent (58.2%), low income (49.2%), and lack of available housing options (42.0%). These findings are not surprising, as they are consistent with previous Greater Victoria PiT surveys, and reflect the current economic conditions of the high cost of living, excessive rents, and lack of affordable independent housing options in the region.

92.5% of respondents said they want permanent housing.



More than one response was possible.

The "other" category contains a broad range of answers, the most common of which are: no references (4.3%), domestic/sexualized violence (4.1%), and no/bad credit (3.3%).

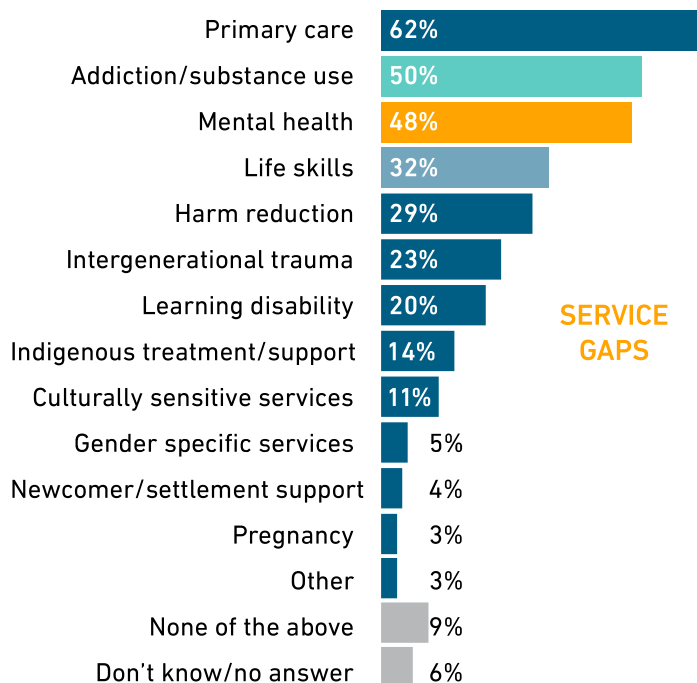
The primary barriers to accessing housing are the same among different subpopulations of the survey respondents (i.e., Indigenous, youth, and seniors).

Even though respondents were not asked what *type* of housing they are looking for, it is evident that people experiencing homelessness are heterogeneous and have diverse housing needs. Therefore, housing planning should include varied options and offer clients' choice, in alignment with the federal government's Housing First policy principles of self-determination and without expectations such as sobriety.

SERVICE NEEDS

When survey respondents were asked to identify which services applied to them from a list of services, 85% of respondents selected a wide range of needed services. The most prominent service needs are: primary care services (62.3%), addiction and substance use services (49.3%), and mental health services (47.5%).

A small percent of other mentioned services not listed include services for housing/accommodations, employment services, family trauma and counselling, and financial planning.



More than one response was possible.

DISTRICT OF SOOKE EXPERIENCES OF HOMELESSNESS

Greater Victoria spans a large area and is comprised of urban, suburban, and rural areas. The District of Sooke is the westernmost municipality in the CRD.

Currently, there are limited services to address homelessness available in Sooke. Current resources available for people experiencing homelessness in Sooke include:

- Sooke Transition House Society—a women’s domestic violence shelter;
- JDF Extreme Weather Shelter — this extreme weather shelter, which operates from October to March when an emergency weather protocol is activated, was started as a result of the findings from the 2018 PiT project;
- Sooke Shelter Society—offers outreach and basic necessities such as temporary outdoor survival shelter gear, and access to food;
- Sooke Food Bank; and
- Sooke Family Resource Society.

As the community of Sooke is working to address homelessness in the area, an increased effort was made to include Sooke in the 2020 PiT survey. While survey data was collected from a number of people experiencing homelessness in the Sooke region, the findings may not be representative of the entire Sooke homeless population—homelessness in non-urban communities often goes unnoticed and is challenging to track, as many people tend to sleep in their vehicles or couch surf (Canadian Observatory on Homelessness, n.d.).

FACTS ABOUT SOOKE HOMELESSNESS (37 surveys)

- 64.9% (24) **male** and 27% (10) female. 11% (4) identify as LGBTQ2S+
- Over half (20) of the respondents are **adults**, while 16.2% (6) are youth, and 27.0% (10) are seniors.
- Nearly half (49% or 18 respondents) spent the night at **someone’s else’s place**, 24% (9) slept **outdoors** unsheltered, 16% (6) slept **in vehicles**, and less than 15% (<6) slept in other locations on the night of March 11.
- 81% (30) are experiencing **chronic homelessness**, meaning that they have been homeless for a total of 6 or more months of the past 12 months.
- Over one-third (13) had their first experience of **homelessness as a teen** (under the age of 19).
- 41% (15) identify as **Indigenous**. This is higher than the general group of survey respondents of 35%.
- 89% identify living with at least one **health challenge**:
 - o Mental health issue = 78.4%
 - o Substance use issue = 64.9%
 - o Physical disability = 45.9%
 - o Illness/medical condition = 43.2%
 - o Learning/cognitive limitation = 40.5%
 - o Acquired brain injury = 32.4%

Homelessness in non-urban communities often goes unnoticed and is challenging to track.



CONCLUSION

THE 2020 GREATER VICTORIA POINT-IN-TIME count and survey continues to provide valuable information to inform service planning and delivery in the region and to help address the unique challenges that a variety of people experiencing homelessness face.

While people experiencing homelessness make up a small portion of the Greater Victoria Region at large, it is clear that individuals and families are struggling to find affordable housing options. High rents, lack of available housing, low incomes, and health challenges (e.g., physical/mental health, substance use) are some of the challenges people experiencing homelessness face when trying to access and maintain stable housing.

The community has the opportunity to go beyond addressing homelessness and begin preventing homelessness before it becomes an even more significant problem. Accurate and reliable data from the Point-in-Time homeless count and survey, and other relevant sources, can provide the information needed to deliver relevant integrated services to address the unique needs of people experiencing homelessness. Furthermore, data on homelessness can give insight into the causes of homelessness within the region, supporting action to prevent homelessness for at-risk populations.

Government agencies, local government, health institutions, non-profits, service providers, and lived-experience groups in the region have a strong commitment to improving housing stability and reducing homelessness. With this being said, it is evident the community still has some work to do, as over 1,500 individuals in the region are experiencing homelessness and struggling with the high costs of rent, low income, and lack of affordable housing options. A considerable portion of the regional homeless population has an income

Accurate and reliable data from the Point-in-Time homeless count and survey, and other relevant sources, can provide the information needed to deliver relevant integrated services to address the unique needs of people experiencing homelessness.

from employment, social assistance, disability, and pensions, which highlights the need for more affordable and/or social housing programs and more adequate incomes. Furthermore, stronger primary and mental healthcare services and facilities are needed to address an array of physical and mental health challenges that cause homelessness, are exacerbated by homelessness, or prevent one's ability to access housing.

While housing is mobilizing in the region, it is essential to emphasize the vital principle of meaningful engagement and active participation of people experiencing homelessness to ensure housing options are accessible, affordable and culturally safe. We hope that this report helps to provide the foundation needed to support decision-makers and service providers in working with people experiencing homelessness to provide housing and supportive services that best fit the needs of the most vulnerable.

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APPENDIX A: ENGAGEMENT WITH COMMUNITIES WITH UNIQUE NEEDS

INDIGENOUS ENGAGEMENT

In recognition that Indigenous populations are over represented in homelessness, the 2020 Greater Victoria PiT Count partnered closely with the Aboriginal Coalition to End Homelessness (ACEH). With a focus on urban Indigenous homelessness, the count did not take place on the 10 First Nations reserves in the region. However, members of those nations were welcome to participate in the survey and were engaged through the ACEH and regional magnet events. The CSPC and ACEH worked to significantly improve Indigenous engagement with a much stronger cultural focus and greater targeted outreach. This included: cultural sensitivity training for volunteers, targeted outreach with local Indigenous serving agencies, increased participation of Indigenous people conducting surveys in Indigenous-specific areas, and an increase in cultural practices on the day of the PiT survey activities (specifically at volunteer headquarters and the youth magnet event).

Survey design | The ACEH was very involved in the survey design as well as Indigenous academic expert Charlotte Loppie. This led to change to the locally-generated survey questions regarding on and off-reserve housing issues, and residential school experience.

Elder and healer participation | Indigenous Elders and cultural leaders opened the headquarters on the day of the PiT survey activities and hosted an information table where medicine bags were available. At the volunteer headquarters, an Indigenous healing station was available throughout the afternoon and early evening, offering volunteers the opportunity to participate in a cultural cleansing and brushing off ceremony.

Cultural training | Representatives of the local First Nation were present at the training sessions with an acknowledgement.

Targeted outreach | The Aboriginal Coalition also co-hosted the Youth Magnet event by incorporating an Indigenous cultural approach to support and promote Indigenous youth participation. The ACEH also worked with the Native Friendship Centre to reach out to hidden homeless. A number of Indigenous homeless outreach workers participated in the PiT survey by conducting targeted surveys with Indigenous individuals who are experiencing hidden homelessness and would have likely been missed in the general survey outreach.

YOUTH ENGAGEMENT

As the majority of homeless youth tend to temporarily stay in hostels/motels or with friends, and often do not access housing or homeless services during the day, the 2020 Greater Victoria PiT project implements a youth-focused component in the form of a magnet event (a strategic method to connect with underserved populations). Similar to the youth magnet event implemented in the 2018 PiT project, this year's PiT project dedicated the role of Youth Engagement Coordinator to two University of Victoria students to work with a designated Indigenous Youth Engagement Coordinator to plan and implement the Youth Magnet Event. The event took place on March 12 and was hosted at the Sanctuary Youth Centre, a drop-in centre for street entrenched and at-risk youth. This event reached out to youth between the ages of 16 and 24 who were not likely to be included in the standard methods used within the broader PiT project efforts. This event included food, prizes, access to healthcare services, counselling services, hygiene products, information on local youth services, artistic and cultural activities, and opportunity to complete the Survey.

NON-URBAN COMMUNITIES

While many services and supports are located in the more urbanized environments in the region, particularly in the City of Victoria, there are experiences of non-urban homelessness that have not yet been well-studied. Furthermore, homelessness in non-urban areas is often hard to track because many people tend to experience hidden homelessness by couch-surfing and sleeping in vehicles (Taylor 2018).

The 2018 Greater Victoria PiT project was the first year that involved the active participation of Sooke community members in gathering information about the local experiences of homelessness in Sooke.

The community of Sooke wanted to be even more involved in the 2020 PiT project; therefore, expanded their efforts to include a hot breakfast magnet event to connect with individuals experiencing rural hidden homelessness. The magnet event was hosted by the Sooke Community Hall and included a hot breakfast from 8:00 AM to 10:30 AM and the opportunity to complete the Survey with a volunteer.

APPENDIX B: COMMUNITY SUPPORTERS AND PARTNERS

ADVISORY TEAM

- Capital Regional District, John Reilly and Gina Dolinsky
- Island Health, Christine Hartwig
- Greater Victoria Coalition to End Homelessness, Emily Jackson
- Greater Victoria Coalition to End Homelessness People with Lived Experience Committee, Malcolm Sword
- Victoria Police Department, Cst. Jose Bingham and Cst. Sean Hand
- Victoria Cool Aid Society, Alan Rycroft
- Our Place Society, Holt Sivak
- Victoria Extreme Weather Protocol, Jen Wilde
- Victoria Immigrant and Refugee Society, Dallas Posavad and Angela Gallantes
- Aboriginal Coalition to End Homelessness, Sally Hunter-Brady
- Victoria Women's Transition House Society, Jannah Cunningham
- Volunteer Victoria, Lisa Mort-Putland
- Oak Bay Community Association, Rick Marshall
- Sooke Shelter Society, Sherry Thompson
- Sooke Foodbank, Kim Kaldal
- District of Sooke, Medea Mills

SPECIAL THANKS

- Kelly Sherwin, Stefanie Hardman, and Taryn Cassidy who shared their experiences of past Counts.

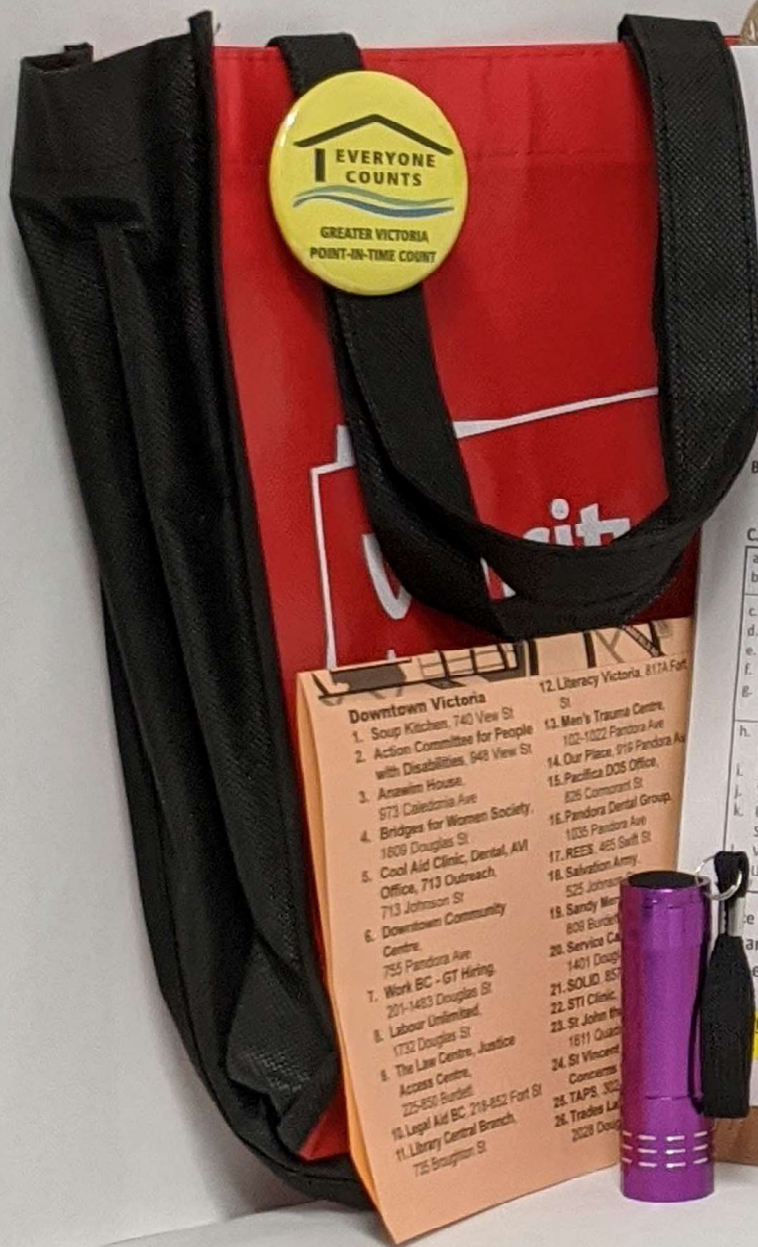
SUPPORTERS

- Island Health
- City of Victoria
- Victoria Police Department
- District of Central Saanich
- Saanich Police department
- City of Langford
- Town of View Royal
- West Shore RCMP
- District of Sooke
- Sooke RCMP
- Town of Sidney
- Sidney/North Saanich RCMP

SIGNIFICANT IN-KIND SUPPORT AND SPONSORS

- Councillor Thornton-Joe
- Viveka Foundation
- Monk Office Supplies
- BC Transit
- Thrifty Foods
- Island Savings
- Sooke Community Hall and community volunteers
- Sanctuary Youth Centre and volunteers

THANK YOU TO ALL OF THE SPONSORS AND DONORS who generously donated food and gifts for the magnet events and volunteers: Ali Baba Pizza, Aurora at Laurel Point Inn, Bean Around the World, Bug Zoo, Cobbs Bakery, Colleen Mycroft, Country Grocery, Doctors of the World, Donna Wingfield, Dutch Bakery, Fairway Market, Flying Squirrel, Habit Coffee, Hey Happy, Island Savings, Island Sexual Health, Island West Produce, John's Place, Kerry Pridmore, Marianne Alto, Old Spaghetti Factory, Opus, Period Project, Soap for Hope, Shannon Robbins, Silk Road Tea, and Veronica Osbourn.



2020 Greater Victoria Housing Needs Survey

"Hello, my name is _____ and I'm a volunteer for the Greater Victoria Housing Needs Survey. We are conducting a survey to provide better housing and services to people experiencing homelessness."

- A. Have you answered this survey with a person with this button?
[YES: Thank & end] [NO: Go to B]

CONFIDENTIALITY AND INFORMED CONSENT SCRIPT – read the follow:

- The survey takes about 10-15 minutes to complete.
- Participation is voluntary and your name will not be recorded.
- You can choose to skip any question or to stop the interview at any time.
- Results will contribute to the understanding of homelessness across Canada, and will help with research to improve local services.

- B. Are you willing to participate in the survey?
[YES: Go to C] [NO: Thank & end]

C. Where did you stay last night [DO NOT READ CATEGORIES]

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

Are they have been screened in:

Thank you for agreeing to participate. You will receive \$10.00 for participating in the survey"

WILL IN TOP OF SURVEY (participant's sleeping location AND your contact information) THEN BEGIN SURVEY

Downtown Victoria

1. Soup Kitchen, 740 View St
2. Action Committee for People with Disabilities, 642 View St
3. Anasim House, 973 Caledonia Ave
4. Bridges for Women Society, 1809 Douglas St
5. Cool Aid Clinic, Dental, AM Office, 713 Johnson St
6. Downtown Community Centre, 755 Pandora Ave
7. Work BC - GT Hiring, 201-1483 Douglas St
8. Labour Unlimited, 1732 Douglas St
9. The Law Centre, Justice Access Centre, 225-850 Burdett
10. Legal Aid BC, 218-852 Fort St
11. Library Central Branch, 775 Broughton St
12. Literacy Victoria, 817A Fort St
13. Men's Trauma Centre, 102-1022 Pandora Ave
14. Our Place, 919 Pandora Ave
15. Pacifica DOS Office, 825 Comarant St
16. Pandora Dental Group, 1035 Pandora Ave
17. REES, 485 South St
18. Salvation Army, 525 Johnson St
19. Sandy May, 808 Broughton St
20. Service Canada, 1401 Douglas St
21. SOLID, 857 Douglas St
22. STI Clinic, 1811 Quadra St
23. St John's, 1811 Quadra St
24. St Vincent's, 1811 Quadra St
25. TAPS, 302 Douglas St
26. Trades Labour, 302 Douglas St