

Northwestern Health Unit  
**Homelessness Enumeration 2018**  
**Question Results**  
April 2019



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**Northwestern  
Health Unit**

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[www.nwhu.on.ca](http://www.nwhu.on.ca)

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## Key Findings

- 504 people experiencing homelessness across the Kenora and Rainy River Districts.
- 39.6% of the homeless population has access to a mobile device.
- 70.3% of the homeless population uses social media, and of that population, 97.9% use Facebook.
- The most common ways for the homeless population to get information about health and community services available to them is through word of mouth (54.3% of respondents) and via other service providers (45.3%)
- A relatively large proportion of respondents (37.4%) do not know what health or other community services are available to them.
- 39.3% of the homeless population say they are not able to access an emergency shelter during extreme weather.
- In the Kenora District a large proportion of the homeless population say there is not enough room in shelters (44.4%), while in Rainy River a large proportion (29.7%) do not know where shelters are.

## Background

In 2015 the Expert Advisory Panel on Homelessness was established in Ontario, to provide advice on how to achieve the goal of ending homelessness as outlined in the Poverty Reduction Strategy. The panel made a number of recommendations, including that the province require enumeration of people experiencing homelessness at the local level. In December 2016, legislation was passed requiring all Service Managers, including District Social Service Administration Boards (DSSABs) to conduct an enumeration of the homeless populations in their service area.

In fall of 2018 DSSABs across Ontario undertook the process of enumerating their homeless populations. The Northwestern Health Unit (NWHU) sought an opportunity to work with the two Districts within its catchment area, Kenora and Rainy River, to develop an additional set of health-related questions to be asked alongside the main enumeration surveys. While the Kenora District Services Board (KDSB) and the Rainy River District Social Service Administration Board (RRDSSAB) have developed their own respective reports detailing the results of the main enumeration survey, this report will outline the combined results of the additional health-related questions from both Districts.

## Methods

Enumerations throughout the province were mandated to occur between March and May of 2018 and every two years thereafter. Enumeration in the Rainy River District took place between April 5-18 2018, in the communities of Atikokan and Fort Frances (the two most populous communities in the district). In the Kenora District the process took place throughout May and June in the communities of Dryden, Ignace, Kenora, Lac Seul, Vermilion Bay, Pickle Lake, Red Lake, Sioux Narrows/Nestor Falls and Sioux Lookout.

Anyone without housing of their own, or whose current housing situation felt unsafe or that they were at imminent risk of homelessness (e.g., eviction or utility cut-off pending) were eligible to complete the enumeration survey. In order to help potential respondents self-identify whether they met this eligibility criteria, a pre-survey question was asked which read “Where are you sleeping tonight?” The survey attempted to capture as many forms as homelessness as possible: visible homelessness, hidden homelessness and those who were at risk of homelessness (Rainy River District Social Services Administration Board, 2018).

Both districts used the Period Prevalence Count (PPC) method of enumeration, in which the number of homeless people are counted over a given period of time, rather than the Point-in-Time (PiT) Count where the number of people on a particular day (or possibly extended to a week) are counted (National Coalition for the Homeless, 2011). The PPC method was considered more appropriate for rural settings by the DSSABs; this method is better at capturing hidden homelessness as it relies on services accessed by the homeless population whereas the PiT method relies primarily on shelters.

The NWHU additional survey questions were developed internally by their Foundations Team (Epidemiologist and Planning & Evaluation Specialists) in collaboration with the Leadership Council (comprised of managers at the health unit). The NWHU approached both the KDSB and the RRDSSAB to inquire as to whether the NWHU questions could be included in their respective enumeration surveys.

The RRDSSAB incorporated the NWHU’s questions directly into their survey, with the exception of two questions. The Results from the conglomerated Rainy River survey were stored in Microsoft Excel and shared with the NWHU in early 2019.

The KDSB opted to keep their main enumeration survey separate, but agreed to administer the additional NWHU questions as a separate survey, which was offered to respondents as an optional additional survey. Hard copy results from the NWHU survey in the Kenora district were sent by mail to the NWHU after they were completed, where they were entered into an internal database.

Results from the NWHU questions from both the RRDSSAB and KDSB enumeration processes were combined where possible and analyzed in Microsoft Excel. Two of the NWHU questions were only asked by the KDSB, so results for these questions were only analyzed and reported at the Kenora District level.

## Results

Enumeration in the Rainy River District in the communities of Atikokan and Fort Frances yielded a total of 111 uniquely completed surveys. In the Kenora District a total of 393 unique surveys were completed; of these respondents, 162 were able to fill out the separate survey with the NWHU questions.

Table 1: Completed enumeration surveys in the Kenora and Rainy River Districts

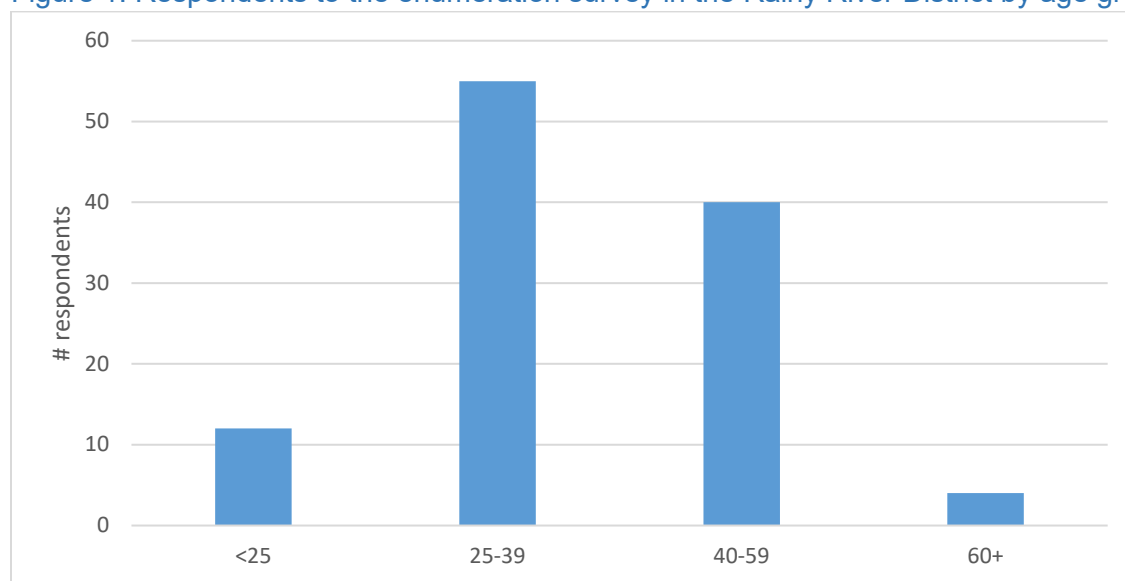
Community	# respondents	
	Enumeration Survey	NWHU questions
Atikokan	29	29
Fort Frances	82	82
<b>Rainy River District Total</b>	<b>111</b>	<b>111</b>
Dryden	67	n/a
Ignace	5	n/a
Kenora	223	n/a
Lac Seul	1	n/a
Vermilion Bay	1	n/a
Pickle Lake	11	n/a
Red Lake	19	n/a
Sioux Lookout	66	n/a
<b>Kenora District Total</b>	<b>393</b>	<b>162</b>
<b>Total across both districts</b>	<b>504</b>	<b>273</b>

The RRDSSAB released a comprehensive report of their findings from their survey which incorporated some of the NWHU questions, which can be found here:  
[http://www.rrdssab.ca/sites/default/files/Press%20Releases/Enumeration\\_Report\\_2018.pdf](http://www.rrdssab.ca/sites/default/files/Press%20Releases/Enumeration_Report_2018.pdf).

The KDSB released an infographic outlining the results from their survey, which can be found in Appendix 2.

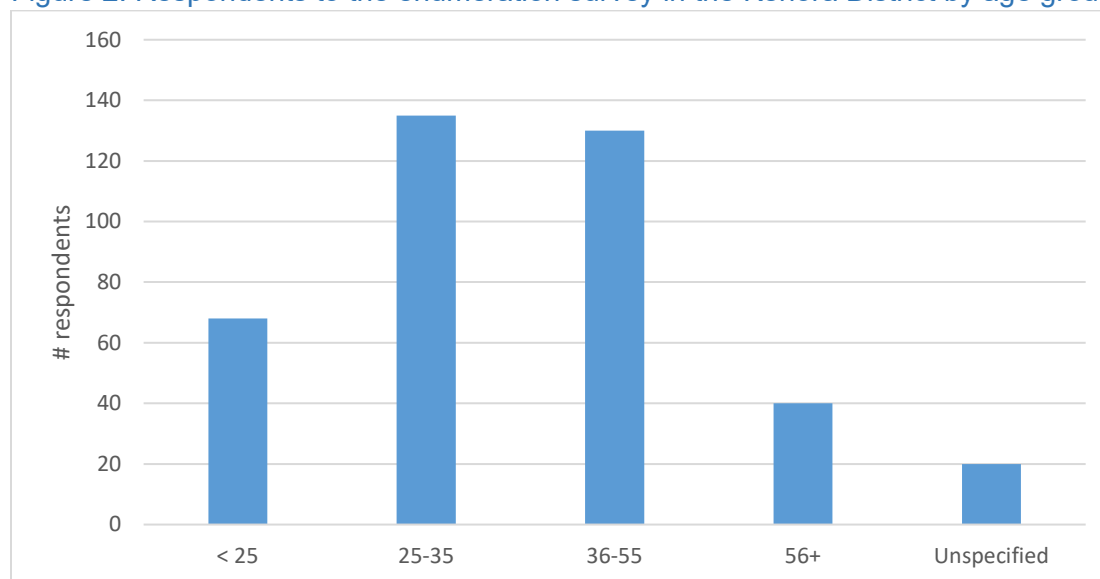
Across both districts, 56.2% of respondents were male, 42.2% were female and 1.6% were transgender or two-spirit. 15.9% of respondents were under the age of 25, and 8.7% were 55 or older (Kenora District Services Board, 2018; Rainy River District Social Services Administration Board, 2018). A breakdown of the age of respondents can be seen below in figures 1 and 2.

Figure 1: Respondents to the enumeration survey in the Rainy River District by age group



Source: Rainy River District Services Board (2018). Available from: [http://www.rdssab.ca/sites/default/files/PressReleases/Enumeration\\_Report\\_2018.pdf](http://www.rdssab.ca/sites/default/files/PressReleases/Enumeration_Report_2018.pdf)

Figure 2: Respondents to the enumeration survey in the Kenora District by age group



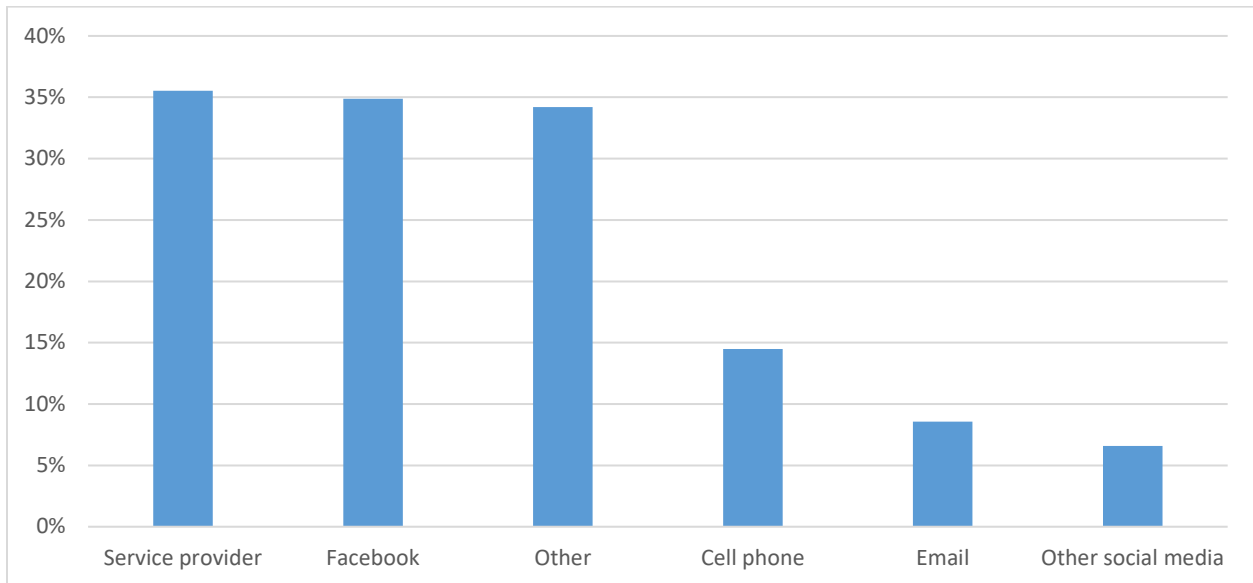
Source: Kenora District Services Board (2018). Available from: [https://www.drydennow.com/images/stories/news/2018/KDSBHomelessness\\_Enumeration.pdf](https://www.drydennow.com/images/stories/news/2018/KDSBHomelessness_Enumeration.pdf)

Note: this graph displays the age group of respondents to the main enumeration survey. Age of respondents to specifically for the NWHU additional survey are not available.

The first NWHU question asked respondents what the best way is to give them information about health and/or emergencies. This question was not asked in the RRDSSAB survey, so the following results only apply to the homeless population within the Kenora District. In the Kenora District, Over a third of respondents (34.9%) said the best way to get information to them was via Facebook. A similar proportion, 35.5% said the best way was through service providers, while 14.5% said through their cell phone, and 6.6% said through other social media. 34.2% of respondents also said that other (not listed) means were the best way to get information to

them. This was an open-ended option, and common responses included the detox centre, shelter, via landline phone, and via newspaper.

Figure 3: What is the best way to give you information about health and/or emergencies?  
Kenora District results



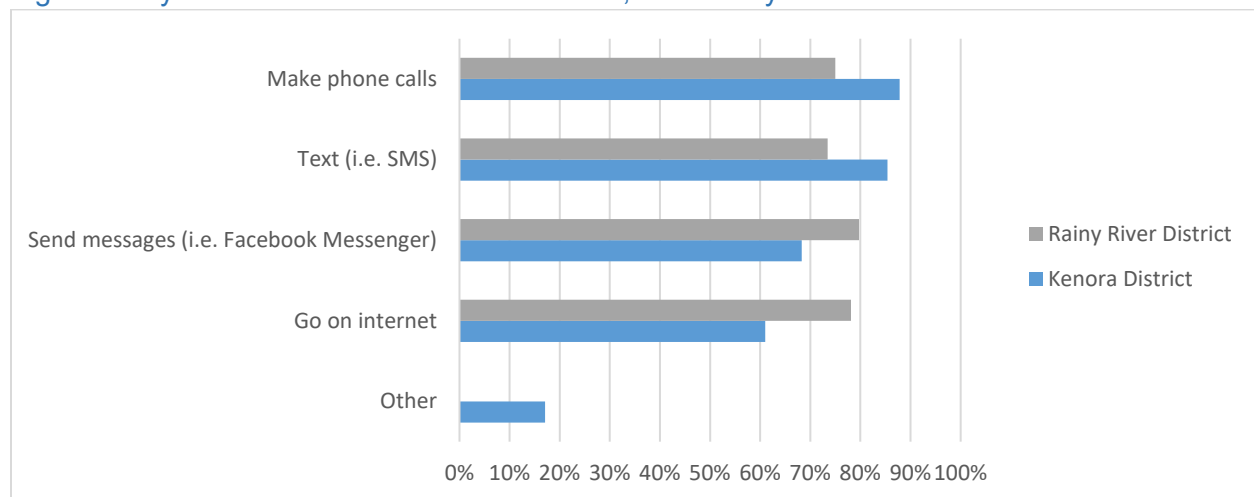
Respondents were asked if they had access to a mobile device (like a smart phone, iPod, iPad, etc.). In the Kenora District, just over a quarter (26.1%) said they did. By contrast, in the Rainy River District a majority (60.4%) of respondents said they had access to a mobile device. Taken together, 39.6% of the homeless population across both districts claims to have access to a mobile device.

Table 2: Do you have access to a mobile device?

	% of respondents	
	Kenora District	Rainy River District
<b>Yes</b>	26.1	59.8
<b>No</b>	73.9	40.2

For the respondents who answered that they had access to a mobile device, they were asked a follow-up question as to what they could do with it. Overall, across both districts 82.9% said they can make phone calls, 80.9% can text (i.e., SMS message), 72.4% can send messages (for example through Facebook Messenger and other web-based messaging), and 68.6% can go on the internet

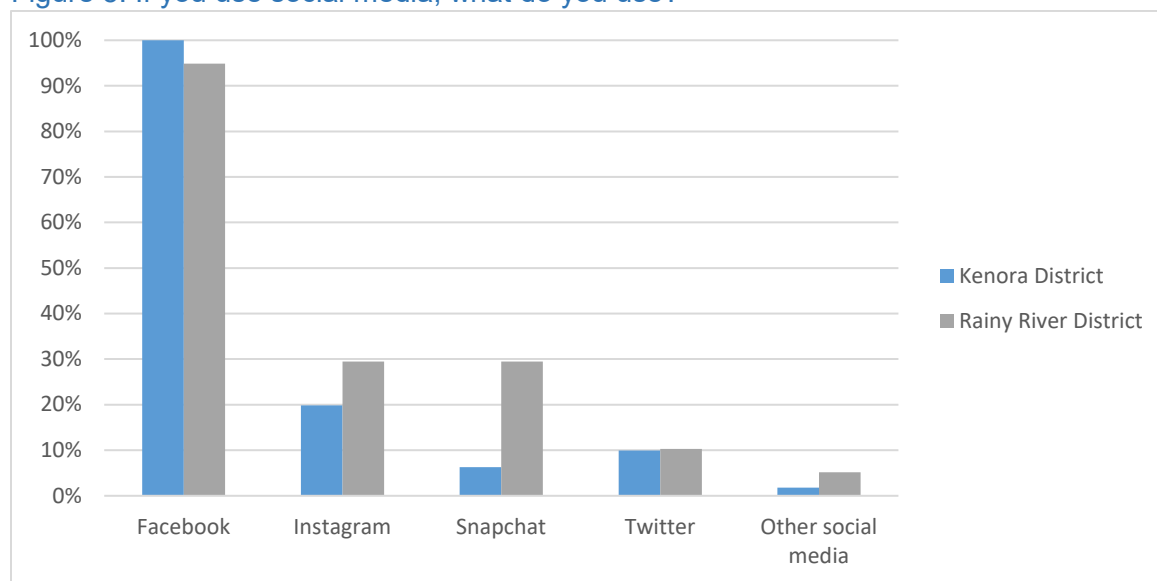
Figure 4: If you have access to a mobile device, what can you do with it?



Note: only applies to the homeless population that has access to a mobile device, not the entire homeless population

Respondents were asked if they use social media, and if they do, what platforms they use. In total, a majority 70.3% of respondents across both districts said that they use social media, while 29.7% do not use it. Of those who do use it, nearly all of them (97.9%) use Facebook, which is the most popular platform by far. Nearly a quarter (23.8%) use Instagram, 15.9% use Snapchat, 10.1% use Twitter and 3.2% use other platforms that were not listed.

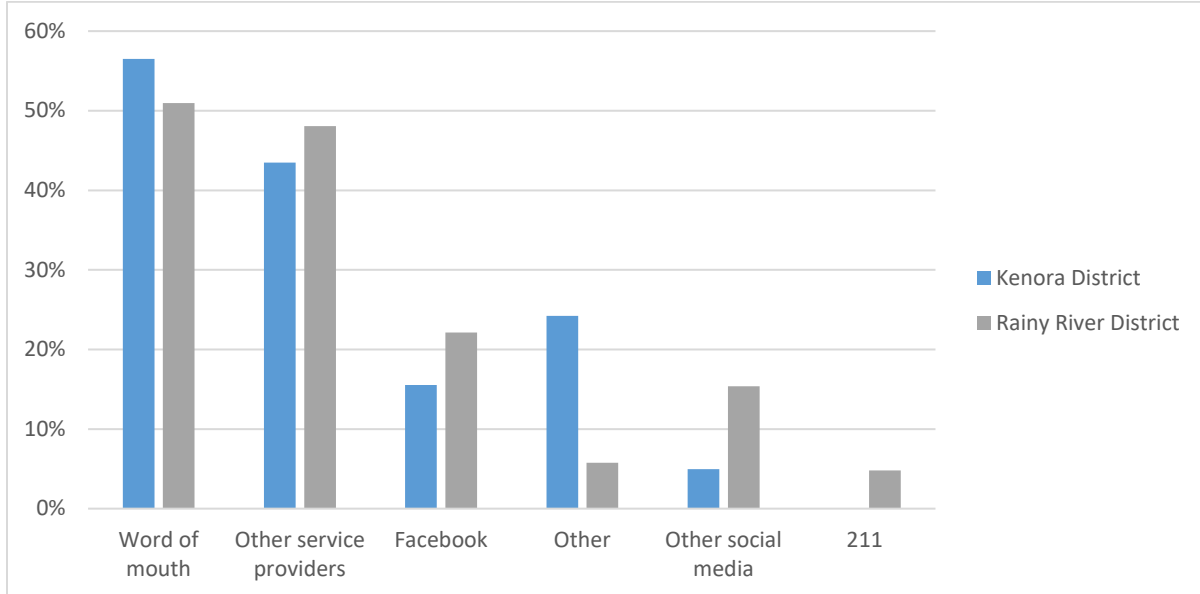
Figure 5: If you use social media, what do you use?



The next question asked of respondents was about where they get information about health and/or community services that they can use. The most common answer given across both districts was through word of mouth (54.3% of respondents), while 45.3% of respondents said they got information from other service providers, 18.1% from Facebook, and 9.1% from other social media. 17.0% of respondents said they get information from other sources that were not listed. Common responses in this “other” category included the shelter, detox centre, Friendship Centres and through email.

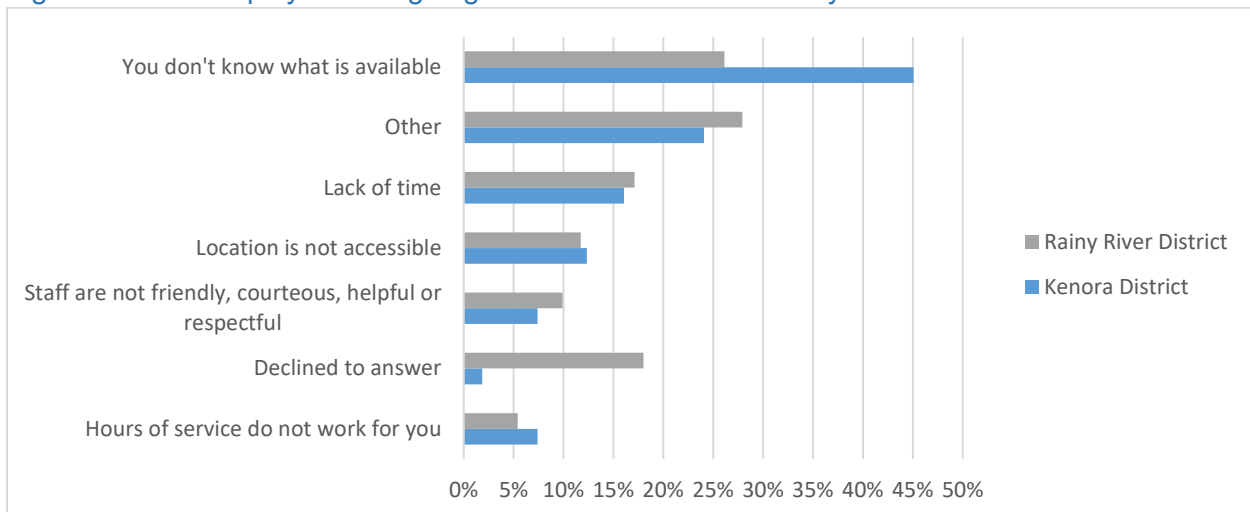


Figure 6: Where do you get information about health and or community services that you can use?



Respondents were then asked what stops them from going to health and/or community services. The most common response was that the respondent does not know that is available to them, with over a third (37.4%) citing this as a reason across the two districts. 16.5% of respondents cited lack of time (i.e., too busy) as a reason, 11.4% said locations are not accessible, 9.2% said staff are not friendly, courteous, helpful or respectful, and 6.9% said the hours of service do not work for them. A quarter of respondents also gave an “other” reason as well; common reasons given in this category include transportation being an issue, anxiety, not needing service, and alcohol use.

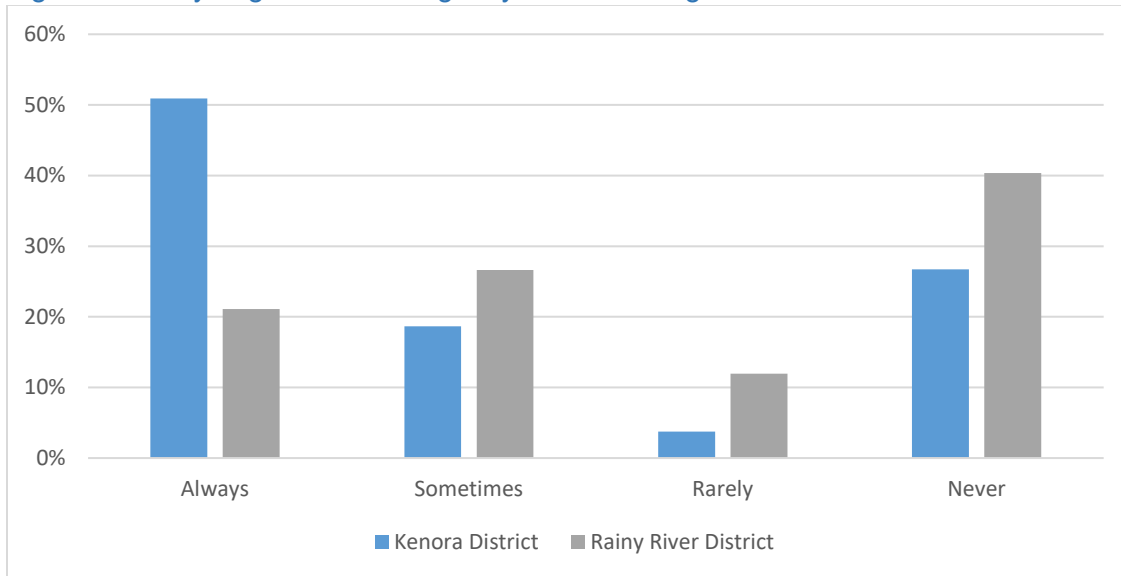
Figure 7: What stops you from going to health and or community services?



Respondents were asked how often they were able to access an emergency shelter during extreme weather, like during extreme cold, heat, or during a storm. A stark difference in responses was noted between the two districts: in the Kenora District, half of the respondents

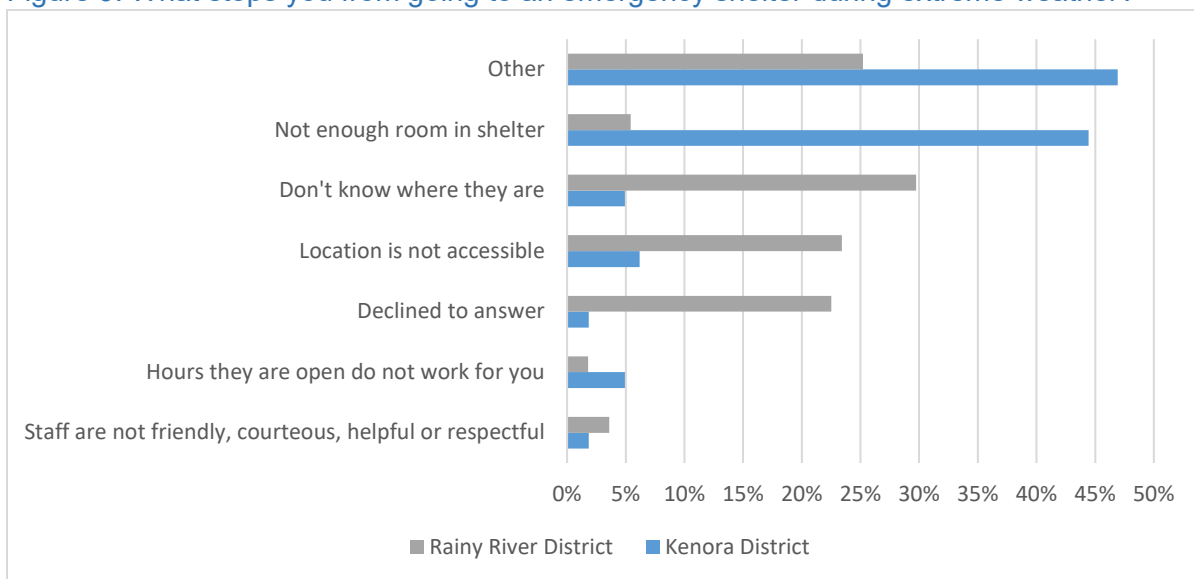
(50.9%) said they are always able to access a shelter, while in the Rainy River District that figure was 21.1%. Across both districts 39.3% of respondents said they can rarely or never get into a shelter during extreme weather.

Figure 8: Can you get to an emergency shelter during extreme weather?



Regardless of their response to the previous question, all respondents were asked what stops them from accessing an emergency shelter during extreme weather. The top reasons in the Rainy River District was that the respondent did not know where the shelters were (29.7%) and that the location of the shelters are not accessible. In the Kenora District the most common answer was that there is not enough room in the shelters (44.4% of respondents). Across both districts the “other” option was selected frequently (38.1% of respondents overall). Common reasons given under this category included not having a shelter in the community, not having a shelter for men, being banned from the shelter, and not wanting or needing to use the shelter.

Figure 9: What stops you from going to an emergency shelter during extreme weather?



The final question respondents were asked was if they had ever gone to a doctor or to the hospital because they were stuck outside too long during extreme weather. This question was only asked in the Kenora District as part of the separate NWHU survey, it was not included in the survey in the Rainy River District. In the Kenora District, just over a quarter of respondents (26.5%) said that they had been to a doctor or hospital after being exposed to extreme weather.

Table 3: Have you ever gone to a doctor or to the hospital because you were stuck outside too long during extreme weather? Kenora District results

<b>Response</b>	<b>% of respondents</b>
<b>Yes</b>	26.5
<b>No</b>	72.8
<b>Don't know</b>	0.6

## Limitations

As in all survey-based research, a limitation in this study is the fact that the data is self-reported. Data captured in this survey are based on respondents' perceptions of themselves and their situation. The sample captured only those who self-identified as being homeless; personal definitions of the term may vary throughout the population.

The enumeration process throughout Ontario was mandated to take place between the months of March and May. In northern Ontario temperatures in these months can still be low; it is possible that some of the more visible areas of concentrated homelessness that occur in the summer months had not yet appeared in these earlier months.

The enumeration process mainly occurred in main cities or towns in the districts, so it is possible that homeless populations living or temporarily finding shelter in more remote communities and therefore would not have been captured in the surveys.

The additional survey questions designed by the NWHU as outlined in this report were implemented in different ways in the two districts. In the Rainy River District the questions (all but two) were incorporated directly into the main survey and was filled out by all respondents, while in the Kenora District the NWHU questions were filled out as a separate survey by a sample of the respondents. This difference in methodology should be noted when interpreting the combined results of the two districts.

## Conclusion

The results from the additional NWHU survey that was administered during the enumeration process provide valuable information about the homeless population residing within the Kenora and Rainy River Districts. The survey was able to collect information about the best ways to reach the homeless population with health information, barriers they face in accessing services and health care, and generally how their situation has impacted them. This type of information will be used to inform the NWHU's planning process, program delivery and services that are offered to and targeted at the homeless population. With health equity being a key focus of the NWHU in our current strategic plan, this population is seen as a key target population.

## References

- Kenora District Services Board. (2018). *Kenora District Homelessness Enumeration Period Prevalance Count*. Retrieved from [https://www.kenoraonline.com/images/stories/newsphotos/2018/June/KDSB\\_Homelessness\\_Enumeration.pdf](https://www.kenoraonline.com/images/stories/newsphotos/2018/June/KDSB_Homelessness_Enumeration.pdf)
- National Coalition for the Homeless. (2011). *How Many People Experience Homelessness? NCH Fact Sheet #2*. Retrieved February 15, 2019, from [http://www.nationalhomeless.org/publications/facts/How\\_Many.pdf](http://www.nationalhomeless.org/publications/facts/How_Many.pdf)
- Rainy River District Social Services Administration Board. (2018). *Rainy River District Enumeration 2018*. Retrieved from [http://www.rrdssab.ca/sites/default/files/Press\\_Releases/Enumeration\\_Report\\_2018.pdf](http://www.rrdssab.ca/sites/default/files/Press_Releases/Enumeration_Report_2018.pdf)

# Appendix 1: NWHU Survey Questions



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## Homelessness enumeration survey – NWHU questions

Thank you for administering this survey for the Northwestern Health Unit (NWHU) at the same time that you do the homelessness survey. We appreciate this chance to work together.

Please return any completed surveys to Dorian Lunny, Epidemiologist, NWHU when you get the chance. We're at 210 First St N, Kenora. If you have any questions about the survey, please contact Dorian at 468-3147, ext. 3275.

What is the best way to give you information about health and/or emergencies?

- Facebook
- Other social media
- Cell phone
- Service provider
- Other: \_\_\_\_\_

Do you have access to a mobile device (e.g. smart phone, iPod Touch, iPad, etc.)?

- Yes
- No

If yes, what can you do with it? (select all that apply)

- Text (i.e. SMS text from your phone number, not app-based messages)
- Send messages (e.g. Facebook Messenger, WhatsApp, etc.)
- Make phone calls
- Go on the internet
- Other: \_\_\_\_\_

Do you use social media? If so, what do you use? (select all that apply)

- Facebook
- Twitter
- Instagram
- Snapchat
- I don't use any social media
- Other social media \_\_\_\_\_

Where do you get information about health and/or community services that you can use? (select all that apply)

- Facebook
- Other social media
- Word of mouth
- Other service providers (i.e. shelters, clinics, health access centres, etc.)
- 211
- Other: \_\_\_\_\_

What stops you from going to health and/or community services? (select all that apply)

- Lack of time
- Location is not accessible
- Hours of service do not work for you
- You don't know what is available
- Staff are not friendly, courteous, helpful or respectful
- Other: \_\_\_\_\_

Can you get to an emergency shelter during extreme weather (i.e. when it is really cold, hot, during a storm, etc.)

- Always
- Sometimes
- Rarely
- Never

What stops you from going to an emergency shelter during extreme weather? (select all that apply)

- Don't know where they are
- Not enough room in the shelter
- Location is not accessible
- Hours they are open do not work for you
- Staff are not friendly, courteous, helpful or respectful
- Other: \_\_\_\_\_

Have you ever gone to a doctor or to the hospital because you were stuck outside too long during extreme weather?

- Yes
- No
- Don't know



# Appendix 2: Results from the KDSB enumeration survey

## 2018 Kenora District Homelessness Enumeration Period Prevalence Count

A **Period Prevalence Count (PPC)** allows for thorough collection of data. It allows for strategic outreach and systematic approach to the collection of information.

Through the support of the Ministry of Housing, the Kenora District Services Board (KDSB) has conducted its first Period Prevalence Count (PPC) of homelessness in each of the nine municipalities of the Kenora District. The results of this project will help Ontario and local governments to better understand the scale and nature of homelessness in order to prevent and reduce it proactively.

The KDSB will use the results from the PPC for future service planning and results will be available to local agencies, local government, and the general public through a report that will be presented at a community forum and on the KDSB website. This project will allow communities to gain a better understanding of the multi-faceted issues related to forms of homelessness in the Kenora District.

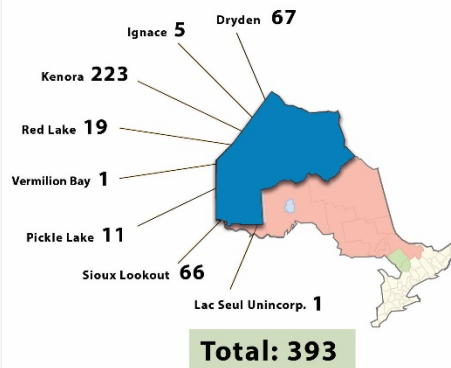
### Communities and dates where a Period Prevalence Count was conducted:

Ignace	April 30/May 1
Pickle Lake	May 2/3/4
Machin	May 7/8
Sioux Narrows/Nestor Falls	May 9/10/11
Kenora	May 14/15/16/17/18
Sioux Lookout	May 22/23/24/25
Ear Falls	May 28/29
Red Lake	May 30/June 1
Dryden	June 4/5/6/7/8

### Gender identity of individuals surveyed:

Male	56%
Female	42%
Transgender, Two-Spirit, Genderqueer	1%
Declined to answer	1%

### Number of surveys completed by community:



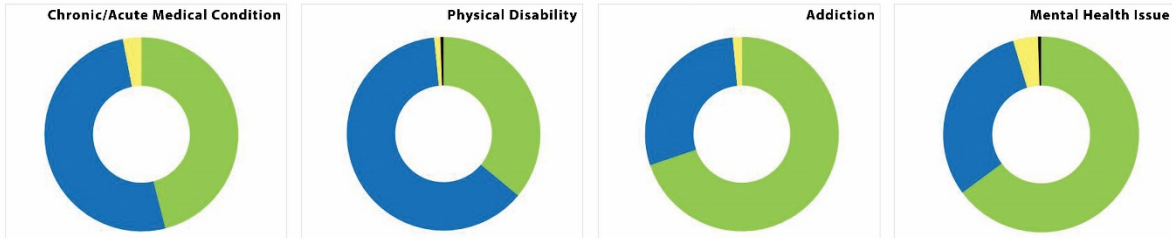
**MARK YOUR CALENDAR!**  
KDSB will be sharing Community Specific Data  
Fall 2018  
KDSB will work with each community to determine where, when and how.



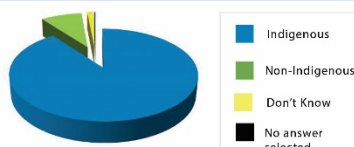
Caring | People | Community | Support | [kdsb.on.ca](http://kdsb.on.ca)

### Challenges impacting the homeless population in the Kenora District:

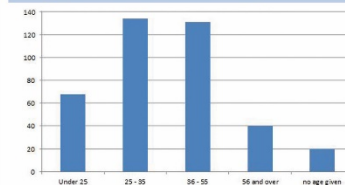
■ Yes   
 ■ No   
 ■ Don't Know   
 ■ Declined to answer



### Racial identity of the homeless population in the Kenora District:



### Age of individuals surveyed:



### Next Steps:

- Submit data to the Province as outlined in the Homelessness Enumeration Requirements.
- Prepare a District Level Report.
- Drill down into community specific data to support community specific needs identification.
- Share community specific data with service delivery partners to support community well-being plans.

### Thank you!

The success of the collection of this data would not have been possible without the help and support of the following Organizations: KDSB Social Services, Paramedics, Police Services, Homeless Shelters, Friendship Centres, Northwestern Health Unit, Mental Health and Addictions, Family Health Teams, School Boards, Hospitals, Food Banks, Women's Shelters, Developmental Services/Community Living, Women's Programs and Municipalities.



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