PROFILE OF
HOMELESSNESS
IN NUNAVUT

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Homelessness is one of those social development issues in Nunavut that will inspire impassioned debate whenever it is raised. This is the case, in part, because an acute shortage of housing stock in all the communities of this geographically large and relatively isolated region of Canada has been documented for well over fifty years. A common question, repeated in many different ways, is “Why cannot this be fixed, especially in the light of the extreme hardship it places on Nunavut’s population?”

It turns out that the characteristics and causes of homelessness in Nunavut have cultural, social, economic and political tentacles that are far more complex than this question would have us believe.

*An* *Profile of Homelessness in Nunavut* makes an important contribution to unraveling some of this complexity. It builds on the work of earlier studies (such as those conducted by Nunavut Tunngavik Inc., the Nunavut Bureau of Statistics, the Nunavut Housing Corporation, Tester et al., Elliot et al. and Webster—see references in the bibliography section of this document). At the same time, a unique contribution of *A Profile of Homelessness in Nunavut* is its effort to carry out a point-in-time count in Iqaluit, Rankin Inlet and Cambridge Bay of the population that can be considered to be absolutely homeless (i.e., either living rough or being sheltered in an emergency facility of some kind).

Perhaps more valuable than the “numbers” that were the result of this work is the articulation of the challenges of achieving even this basic type of quantitative data. Certainly, one challenge is simply determining whom to count. Those individuals who are visible because of their presence in a shelter or other known service point and who have no regular and permanent home are just the tip of the iceberg, so to speak. Certainly some of those who move from “couch” to “couch” would also consider themselves homeless. But even those that can be found in those places traditionally used for a point-in-time homeless count may not always categorize themselves as being homeless. Is homelessness simply a question of where you will sleep or is it more fundamentally the lack of a family and social network that gets you through life’s rough spots? Without providing any easy answers, *A Profile of Homelessness in Nunavut* raises these issues and calls for a deeper discussion about current realities and the way forward.

To those who might say, “We don’t need another study; we need action”, I would suggest that *A Profile of Homelessness in Nunavut* offers some very reasonable suggestions for improving services and public policy. But this is only part of the action that is required. By directly engaging community members in the dialogue about homelessness, this study can help communities find solutions that mobilize the resilience and ingenuity of their citizens.
This study was funded by the Poverty Reduction Division, Department of Family Services, Government of Nunavut.

Cassandra Vink was retained to undertake the study, with some assistance from Sheila Levy, Nancy Poole, and Judie Bopp.

Cassandra Vink (MSc. Planning) is a policy, research, and evaluation consultant, whose focus is on housing and homelessness. Her work ranges from broad housing and homelessness research and policy development, to studies aimed at addressing the housing issues of special needs population groups, and evaluations of specific housing and homelessness programs. Cassandra’s experience in housing and homelessness research includes Aboriginal and Northern communities. At the time of writing this report she was also undertaking a complementary study on behalf of the City of Iqaluit, involving asset mapping, the identification of issues and gaps in the homelessness system, dialogues with community stakeholders to identify and select interventions to address the issues and gaps, and the preparation of an action plan to more effectively use existing resources to prevent and reduce homelessness. At the time of writing a draft report had been prepared.

The views expressed in this report are the author’s and do not necessarily reflect the opinions of the Government of Nunavut. Research for this report was conducted in February and March 2014.
We would like to thank the many service providers and government representatives who provided their input and support. Their local knowledge and the insights they have shared have been a key source of information for the study. Service providers and government representatives in Iqaluit provided input that strengthened and refined the survey questions for individuals experiencing homelessness. In Iqaluit, Rankin Inlet and Cambridge Bay, service providers and government representatives were kind enough to share their insights into the most appropriate approaches to conducting the homeless count and surveys in their home communities; this assistance was critical for accessing individuals experiencing homelessness. Special thanks are extended to staff of the Rankin Inlet and Cambridge Bay Family Services Departments and the Cambridge Bay Community Wellness Centre for their assistance with the Key Partner meetings, the homeless count, and for arranging office space.

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The following key terms are used throughout the report:

**Absolute Homeless**
When the individual is without housing. This includes individuals staying in shelters (sheltered) or places not meant to be housing, such as tents or shacks\(^1\) (unsheltered). Absolute homelessness can also be referred to as visible homelessness.

**Adequate Housing**
Housing that does not require any major repairs.

**Affordable Housing**
Canada Mortgage Housing Corporation (CMHC) considers housing to be affordable if its carrying cost does not exceed 30% of gross family income.

**Arrears**
The amount of money owed to a landlord that is overdue as a result of missed payment deadlines. This can include money owed for rent and money owed for damages charges.

**At-Risk of Homelessness**
When the individual is not homeless, but is vulnerable to homelessness. This includes staying in housing that has been poorly maintained and isn’t fit to be lived in, spending a high share of income on housing costs, being abused or at risk of violence, and the inability maintain existing housing without additional support.

**Chronic Homeless**
Individuals who have either been continuously homeless for a year or more, or have had at least four episodes of homelessness in the past three years.

**Complex Needs**
This is a combination of medical needs (e.g. diagnosis, treatment and rehabilitation) and social needs (e.g. housing, social care and independent living).

**Emergency Shelter**
Accommodation that is intended to be short-term for individuals and families who have no shelter.

**Hidden Homeless**
When individuals are staying in accommodation that is temporary and they do not have a usual home. This includes individuals staying in the housing of relatives or friends and individuals who are homeless but in correctional facilities or medical institutions.

**Housing First**
A Housing First approach to reducing homelessness means that permanent housing is provided along with needed support services. Support services may include intensive medical, mental health, and case management services including life skills training, tenancy management assistance and addictions counseling.\(^2\)

**Housing Stability Services**
Support services that help address the underlying factors related to housing insecurity. These include services such as medical and mental health services, life skills training, tenancy management assistance and addictions counseling.

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\(^1\) Not including individuals staying in cabins and tents for recreational purposes

\(^2\) Housing First is a new policy direction that has been endorsed by the Federal government as an effective way to reduce homelessness (Employment and Social Development Canada, Housing First website accessed at http://www.esdc.gc.ca/eng/communities/homelessness/housing_first/index.shtml)
HOUSING TRANSITION SERVICES
Support services focused on helping the individual move from homelessness to permanent housing. This can include assistance with accessing appropriate housing, medical services, mental health services, addictions services, employment programs, life skills training, and financial assistance.

INSTITUTIONAL CARE
Service from a facility where individuals are under the care of professionals, including correctional facilities, medical facilities, and mental health facilities.

KEY PARTNERS
Government departments, Inuit Associations, and organizations working with individuals experiencing or at-risk of homelessness.

STAKEHOLDERS
see “Key Partners”.

OVER-CROWDING
Housing that does not have enough bedrooms for the size and composition of the household.

POINT-IN-TIME HOMELESS COUNT
A snapshot of the number of individuals experiencing absolute homelessness on a given day.

PUBLIC HOUSING
Publicly funded and administered housing for low-income households where rent is geared to the household’s income.

SAFE HOUSES
Private homes that provide temporary accommodation to women and their children fleeing family violence, generally for one or two days.

SERVICE PROVIDERS
These are organizations working with individuals experiencing or at-risk of homelessness.

SHELTERED
Staying overnight in an emergency homeless shelter, family violence shelter, or safe house.

SUITABLE HOUSING
Housing that has enough bedrooms for the size and make-up of the resident household, according to National Occupancy Standard (NOS) requirements.

SUPPORT SERVICES
See Housing Stability Services.

SUPPORTIVE HOUSING
Permanent housing with a combination of support services.

SURVEY RESPONDENTS
These are individuals who are sheltered, unsheltered, or living with family or friends who self-identified as homeless to researchers and completed the survey.

TRANSITIONAL HOUSING
Time limited housing that is combined with case-managed support services, with the aim of helping individuals transition to long-term and permanent housing, self-sufficiency and independence.

UNSHelterED
Individuals staying in a place not meant to be housing, such as a shack, shed, tent or a public place.
This study, *Profile of Homelessness in Nunavut*, was undertaken to fill a gap in our understanding of homelessness in the territory by trying to determine how many people are without housing of any kind. A better understanding of what homelessness in Nunavut currently looks like, and what the needs of the homeless are, will help create better policy and programs to address this issue that affects us all.

One of the central components of this study was a point-in-time count of “absolute” homelessness, the first of its kind to be done in Nunavut. It involved a count of homeless people staying in shelters and staying in places not meant to be housing, such as shacks and tents. The study also involved surveys of people who self-identified as homeless and were staying in shelters, places not meant to be housing, and with family or friends because they did not have their own housing. The surveys were done to learn more about them, how they became homeless, and what they thought would help them move out of homelessness. The point-in-time count of “absolute” homelessness was conducted over the course of one day in each of Nunavut’s three largest communities: Iqaluit on February 13th, 2014, Rankin Inlet on February 11th, 2013 and Cambridge Bay on February 25th and 26th, 2014. In Iqaluit and Cambridge Bay the count included a number of locations where the homeless are known to be. In Rankin Inlet service providers who work with the homeless advised that there were no locations where the homeless tend to be, and that they are often inside private homes. Based on their suggestion, an announcement was made on the local radio station to advise people of the survey, and homeless people interested in participating were asked to come to the Catholic Church hall to complete the survey. Due to a concern that our approach would not capture all of the “absolute” homeless in Cambridge Bay and Rankin Inlet, the direct count was supplemented by indirect counts in these communities. The indirect count asked service providers the number of people they knew in their community who were staying in places not meant to be housing. Counts for all other Nunavut communities were done by phoning local service providers and asking for the number of people in their community who were staying in places not meant to be housing. These counts were conducted between February 17th and March 7th, 2014. The count and the surveys were done by the researchers as well as local surveyors who spoke English, Inuktitut, and Inuinnaqtun. In total, 93 people were surveyed. Of the respondents, 36 were staying in shelters, six were staying in places not meant to be housing, and 51 were staying with relatives or friends. The study also included face-to-face meetings and phone interviews with workers who provide services to the homeless to discuss what homelessness means in Nunavut, the issues homeless people face, and ways to end homelessness in Nunavut.

### Key Findings

#### Results of Point-in-Time Count of Absolute Homeless

In February 2014, 98 people were counted who were staying in shelters or places not meant to be housing. The count provides a snap-shot of what absolute homelessness looks like, however, given that February is the coldest time of the year, many who might experience absolute homelessness during other times of the year may have been staying with family or friends.

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3 Not all of the 98 people experiencing absolute homelessness who were counted were surveyed. Some people were counted based on reports from service providers. This included children. Others identified that they were staying in places not meant to be housing as part of the pre-screening questions, but declined the opportunity to be surveyed. 42 of the 93 people included in the analysis of survey results were experiencing absolute homelessness. The other 51 were staying with relatives or friends.
HOMELESS SURVEY RESULTS

Ninety-three surveys were conducted with people staying in shelters (36), places not meant to be housing (6), or with family or friends and self-identifying as homeless (51) in Iqaluit (66), Rankin Inlet (8), and Cambridge Bay (19). The key results from these surveys are as follows:

- 57% of the respondents were men and 43% were women.
- The average age of respondents was 38. About one-third were young adults between the ages of 18 and 29.
- Homelessness is not limited to those who are single; 30% of shelter clients were there with their children, and over half (53%) of the people staying with family or friends were staying there with their partner or children.
- While people often think that many of the homeless have moved from other communities, most (69%) of the people surveyed grew up in community where they were currently living.
- Helping family and the community is an important part of Inuit culture. Family and friends are crucial supports for the homeless in Nunavut. Most (82%) of the homeless surveyed indicated that they have family or friends in the community that help them when they are in need. If this were not the case, there would be an even bigger and more visible homelessness crisis in Nunavut.
- A common stereotype of the homeless is that they have addictions or mental health issues. Addictions were reported by 19% of the homeless surveyed, medical conditions by 17%, and mental illness by 11%. Only 5% reported a physical disability and 2% reported an intellectual disability. Shelter clients were more likely to report most health conditions, including addictions (24%), mental illness (19%), medical conditions (19%), and intellectual disabilities (5%).
- A significant number of respondents had been homeless more than once or for more than a year. About half (49%) of those surveyed had been homeless before. Eighty-two percent had been homeless for a year or more, including 40% who had been homeless for five years or more. Many of the shelter users remain clients for long periods of time. There are a number of reasons for this, including gaps in the range of housing and the services that are available to help people move into permanent housing.
- Respondents identified a number of life experiences that led to them losing their housing. These include abuse (44% of women), addictions (15%) evictions (15%), leaving jail or the hospital (12%), and mental health issues (9%). Many people become homeless because of transitions in their life. These include moving to a new community (21%), being forced to move by another family member (25%), family changes such as a break-up or death (23%), or leaving an employer that provided housing (2%).
- The vast majority of people who are homeless want housing. Ninety-five percent of respondents reported that they want housing, however only two-thirds were on the public housing waiting list, and there are no other affordable housing options. The most common reason why they were not on the list was that they had arrears.
- Almost two-thirds (64%) of the homeless surveyed thought that either public housing or help finding an affordable home on the private market would help them move out of homelessness. This reinforces the finding that ensuring a range of housing options will be an important part of addressing homelessness.

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4 While research elsewhere has shown that more homeless people have these conditions than the general population, many do not. National Coalition for the Homeless, Substance Abuse and Homelessness accessed at http://www.nationalhomeless.org/factsheets/addiction.pdf


6 There can be many reasons for arrears, but these reasons were not explored in this study.
A number of different programs and services are required to end homelessness. While housing is essential to ending homelessness, it is not the extent of the solution. Services are critical to helping people move from homelessness to permanent housing. Respondents identified the need for supports to assist with: finding employment, job training or education (52%); repaying arrears (26%); maintain their housing once they obtain housing (24%); applying for public housing (20%); addictions treatment (15%); mental health (14%); health needs (12%); and the need for cultural supports (10%).

HOMELESSNESS AMONG NUNAVUMMIUT IN GATEWAY COMMUNITIES

Some Nunavummiut leave Nunavut for cities like Yellowknife, Montreal, Ottawa, and Edmonton, and Winnipeg. While it is not common for people to move out of territory mainly because they do not have housing, some people do become homeless after moving away for other reasons. Research has shown that homelessness among people from Nunavut is an issue in communities such as Ottawa and Montreal. Data provided by the Yellowknife Salvation Army and Centre for Northern Families in Yellowknife show that homelessness among Nunavummiut is also an issue in Yellowknife:

- In Yellowknife, about half of the Salvation Army’s male day shelter clients under the age of 30 are from Nunavut (approximately 40 young men), and 30% of the Centre for Northern Families’ women’s shelter clients are from Nunavut (approximately 20 women per month).7
- In Ottawa, Cornerstone Women’s Shelter estimated in 2005 that 12% of their women’s shelter clients were Inuit, and in 2013 Shepherds of Good Hope said that Inuit make up 25% of their downtown shelter clients, and over 50% of the clients of their harm reduction program (managed alcohol program).8
- In Montreal, Donat Savoie, Special Advisor to the Office of the President of Makivik Corporation, estimated that many of the about 200 Inuit from Nunavut who live in Montreal are low-income or homeless.9

RECOMMENDATIONS

Based on the findings of the survey of individuals experiencing homelessness and the consultations with service providers, it is recommended that the approach to addressing homelessness in Nunavut include: community planning; data-gathering and research; coordinated service provision; homelessness prevention services; pathways to housing and supports from institutions; emergency shelter services; outreach; services to help people transition from homelessness to housing; housing support services to help people maintain housing; a range of affordable and supportive housing options; and income and employment. However, specific shortcomings and opportunities for intervention are best identified and addressed at the community level.

Additional research is recommended in two main areas. The first area is to better understand the issues related to homelessness in Nunavut, including the needs of sub-groups of homeless, such as shelter clients, families with children, men, women, adults age 55 and over, and youth/young adults. The second area is to better understand and develop policy and programs for the homeless.

7 Based on interviews with, and data provided by, these organizations
9 Based on communications with Donat Savoie, Special Advisor to the Office of the President of Makivik Corporation
In 2006 the Housing and Homelessness Branch of Human Resources and Social Development Canada commissioned a report to examine the state of the knowledge about the challenges and solutions regarding homelessness in the Territorial North, which it described as follows:

“It is apparent that the corpus of statistical, descriptive, and analytical literature relevant to Northern homelessness is greater than generally thought...There is an almost complete lack of the quantitative data needed to understand some of the drivers of Northern homelessness. No attempts at quantitative or rigorous qualitative research seem to have taken place. Policy and programmes continue to be anchored on anecdotal evidence, field reports and correspondence from officials...”

Since that time, most of the research in Nunavut has continued to be statistical, descriptive, and analytical, and quantitative data is still lacking. Research has since examined the drivers of women's homelessness. There has not yet been a quantitative study of the extent, forms and causes of homelessness in the territory. Better knowledge of the extent of homelessness in Nunavut can provide evidence to strengthen the commitment to preventing and ending homelessness. Likewise, a better understanding of the causes of homelessness and the challenges faced by the homeless transitioning into permanent housing can inform appropriate solutions.

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10 Webster, Andrew, MaxSys Consulting, Homelessness in the Territorial North: State and Availability of the Knowledge, Report Prepared for the Housing and Homelessness Branch, HRSDC, 2006
11 For example, Nunavut Bureau of Statistics, Housing Needs Survey, 2010
12 For example, Inuit Tuttarvingat, Homelessness and Housing Realities for Inuit, Workshop Report, 2008
13 For example, Yester, Frank James, Iglutaq (In my room), The Implications of Homelessness for Inuit: A Case Study of Housing and Homelessness in Kinngait, Nunavut Territory, 2005
Building on the Government of Nunavut’s *Long-Term Comprehensive Housing and Homelessness Strategy*, this project aims to contribute to a better understanding of the needs and challenges of individuals experiencing homelessness in Nunavut as well as a picture of what homelessness in Nunavut currently looks like and could look like in the future. It serves as a starting point to understand the following:

1. How many people are homeless in Nunavut on a given day and over the course of a year?
2. Where Nunavummiut facing absolute homelessness find shelter?
3. Who is homeless in Nunavut and where do homeless people come from?
4. How do people in Nunavut become homeless?
5. What services do homeless people access and what would help them find and maintain housing?
6. What areas require future research?

This information was collected to provide evidence for future policy direction on addressing homelessness in the territory.
METHODOLOGY

The study involved several components: a point-in-time homeless count; surveys of individuals experiencing homelessness; consultations with key partners throughout the territory; and information-gathering on homelessness among Nunavummiut in gateway communities outside the territory. Results will be validated through community meetings in Iqaluit, Rankin Inlet and Cambridge Bay.

POINT-IN-TIME HOMELESS COUNT

The point-in-time homeless count was the first of its kind to be conducted in Nunavut. A point-in-time count essentially counts the number of sheltered and unsheltered individuals experiencing homelessness. It involved a “direct” count of homeless individuals in locations in Iqaluit, Cambridge Bay and Rankin Inlet where the homeless are known to spend time, and an additional “indirect” count of homelessness through reports from service providers about individuals they were aware of who were sheltered or unsheltered. This differs from the Nunavut Housing Needs Survey (2010) which involved a census-style survey of residential dwellings.

The direct portion of the count was conducted locally on one day in Nunavut’s three regional centres (Iqaluit, Rankin Inlet, and Cambridge Bay). One-day counts are preferred methods for enumerating homelessness because they reduce the odds of duplicate counting. However, in communities with sparse populations and few homeless assistance services, one-day counts may miss individuals who are not in locations where homeless people commonly spend time.

It is typical for homelessness counts to be conducted during cold temperatures because individuals who are unsheltered during the winter months may provide a more realistic picture of those who are long-term unsheltered, and those most reluctant to use services. There are also particular concerns about the ability of individuals who are staying in places not meant to be housing to survive during the winter. Conducting the count during cold temperatures
helps exclude those staying in places such as cabins and tents for recreational purposes. However, this does mean that more people would be relying on family, friends or shelters at night, and fewer individuals would be experiencing absolute homelessness.

Voluntary, confidential surveys of sheltered, unsheltered, and hidden homeless were also conducted in Iqaluit, Rankin Inlet, and Cambridge Bay in conjunction with the direct count. The purpose of these surveys was to gather information about the demographics and experiences of these individuals. The questionnaire included items on demographics, health conditions, time experiencing homelessness, contributing factors to becoming homeless, service use patterns, suggestions of what would help them find housing, and self-identification of whether they are experiencing homelessness. A copy of the questionnaire can be found in Appendix 2.

**Iqaluit**

The Iqaluit count was conducted on February 13th 2014 by Cassandra Vink and Sheila Levy as well local surveyors including both male and female Inuktitut and English speakers. The count included a number of known locations where individuals experiencing homelessness may be. These locations were identified in consultation with service providers, and included the Qayuktuvik Soup Kitchen, Tukisigarvik Centre, Iqaluit Centennial Library, North Mart, Tim Horton’s as well as other restaurants, bars, and hotels. Surveyors also visited shacks along the beach, Sivummut House shelter for homeless women, Uqutuq Men’s Shelter, and Qimaavik Transition House for victims of domestic violence.

At the Qayuktuvik Soup Kitchen surveyors asked individuals upon entry at noon what their living situation was/where they were sleeping that night, for the purpose of the direct count. At the Soup Kitchen, the Tukisigarvik Centre and the three emergency shelters, to ensure that the research was not disruptive, clients were advised of the survey, and individuals who were interested in participating generally approached the surveyors. At the other locations the surveyors approached individuals, introduced themselves, described the project, and asked individuals what their current living situation was/where they were sleeping that night. If the individual reported that they had housing that they pay rent for or own, they had their own place, or they had housing that was in their name, they were not counted. If the individual reported that they were staying in a shelter, a place that is not meant to be housing, or with relatives or friends, they were counted and asked whether they would be willing to participate in a survey.

**Cambridge Bay**

The Cambridge Bay count was conducted on February 27th and 28th 2014 by Cassandra Vink and local surveyors, including someone who could speak Inuinnaqtun. Based on the advice of service providers and government representatives, a similar approach to Iqaluit was used, and the count and surveys were conducted in known locations where homeless individuals may be. These locations were suggested by service providers, and included the Cambridge Bay Community Wellness Centre (including individuals coming in to access the food bank), Elders Palace (including individuals accessing the job readiness program), and the Northern Store. At the Elders Palace, to ensure that the survey was not disruptive, clients were advised of the survey, and those who were interested in participating approached the surveyors. At

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15 Participants were provided with a $20 gift card to the Northern Store/North Mart for their participation. Participants in Iqaluit also received a $10 gift certificate to the Pvinilt Thrift Shop.

16 All individuals staying in a room or house of relatives or friends were invited to participate in the survey, but the analysis only includes those who are staying in a room or house of relatives or friends and self-identify as being homeless. This has served to exclude those who have a guarantee of continued residency with their relatives or friends, for example, young adults still living with their parents.
the other locations the surveyors approached individuals, introduced themselves, described the project and asked about their current living situation. If the individual reported that they were staying in a shelter or place that is not meant to be housing, they, along with those who said they were staying with family or friends, were asked whether they would be willing to participate in the survey.

- **RANKIN INLET**
The Rankin Inlet count was conducted on February 11th 2014. Service providers and government representatives advised that there were no specific public locations where individuals experiencing homelessness tend to spend time, but rather that they are often inside private homes. Based on their advice, an announcement on the local radio station was used to notify residents of the survey, and those interested in participating were asked to come to the Catholic Church hall to complete the survey. Individuals were also provided with an opportunity to call into a radio program to share information about their current living situation and housing needs. Donna Adams, who is local to Rankin Inlet, provided interpretation for the radio program and assisted Cassandra Vink with the surveys in both English and Inuktitut.

Because individuals who may be staying in places not meant to be housing are more dispersed in Rankin Inlet and Cambridge Bay than in Iqaluit, and the approach used for the direct counts was not likely to capture everyone who may be unsheltered, the direct counts in Cambridge Bay and Rankin Inlet were supplemented by indirect counts, where service providers were asked the number of individuals they were aware of without housing.

- **SMALLER COMMUNITIES**
For all other Nunavut communities, indirect counts were conducted by contacting service providers by phone to determine the number of individuals they were aware of without housing in their community. These counts were conducted between February 17th and March 7th 2014 by Sheila Levy and Cassandra Vink.

**Dialogues with Key Partners**

Key partner meetings were held in Iqaluit, Rankin Inlet, and Cambridge Bay. The meetings were used to present the preliminary research methodology, discuss the most appropriate methods for gathering information in their community, initiate a dialogue about a Nunavut-specific understanding of homelessness, discuss the challenges individuals experiencing homelessness face when connecting to support services or transitioning into stable housing, and gather suggestions of what would help individuals find housing. As part of the telephone interviews with service providers in each of the other 22 Nunavut communities, service providers were also asked about any issues or challenges of individuals experiencing homelessness in connecting to support services or transitioning into stable housing, and suggestions of what would help individuals find housing. A copy of the interview questions for service providers in the other Nunavut communities can be found in Appendix 3.
VALIDATION OF RESULTS

Before the study is used to inform the development of policy to address homelessness, the results will be presented in community forums for assessment and discussion. It is anticipated that validation meetings will be convened in Iqaluit, Rankin Inlet, and Cambridge Bay.

COMPLEMENTARY STUDY IN IQALUIT

There is currently a complementary study underway for the City of Iqaluit. The study, sponsored by the Homelessness Partnering Strategy, Economic and Social Development Canada, has involved asset mapping, identification of issues and gaps in the homelessness system in Iqaluit, dialogues with community stakeholders to identify and select interventions to address the issues and gaps, and the preparation of an action plan to more effectively use existing resources to prevent and reduce homelessness in Iqaluit. The report for that study is currently in draft form. Cassandra Vink is also the researcher for that study. With permission, the information obtained through each study has been used to inform both studies.
The point-in-time count of homelessness was the first of its kind to be conducted in Nunavut, and the findings may raise more questions than answers. Any subsequent projects will be able to adjust the data collection methods used and refine the questionnaire based on lessons learned from this project.

While point-in-time counts are the most common method of counting the population of individuals experiencing homelessness, there are limitations. The methodology underestimates the number of individuals experiencing homelessness because this is a difficult population to contact. Since the count did not go into private homes and buildings, homeless individuals staying there may not have been contacted. Those who were not using services like soup kitchens or shelters on the day of the count may also have been missed. Since the smaller communities were only contacted by phone, some individuals who may be experiencing absolute homelessness could have been missed. For these reasons, the number of absolute homeless counted is likely an underestimate.

Information was not available on the number of individuals staying in safe houses. Safe houses – private homes that provide accommodation for one or two days to women and their children fleeing family violence – exist in six communities in Nunavut. However, as these forms of accommodation are used infrequently, it is unlikely that this lack of data had a significant impact on the total.

The method used provides a “snap shot” of what homelessness looks like on one day of the year, and does not account for seasonal differences in the number of individuals staying in places not meant to be housing. Because of the extreme cold in February in Nunavut, fewer individuals are staying in places not intended for housing than there would be in other seasons. These individuals rely on relatives or friends for shelter during the extreme cold.
LIMITATIONS TO THE SURVEY

It is difficult to make conclusions about the demographic characteristics of the homeless population from the surveys conducted. The majority of the surveys were done in Iqaluit making the results more reflective of the homeless population in Iqaluit than Nunavut as a whole: for example, a larger percentage of the homeless surveyed in Iqaluit were staying in shelters and staying in places not meant to be housing as compared to the overall homeless population. Because of the locations where the surveys were conducted, the survey participants were more likely to be service users. The focus was on absolute homelessness, so many individuals experiencing hidden homelessness would not have been surveyed. Additionally, in Rankin Inlet, those experiencing homelessness were asked to come to the Catholic Church hall to participate in the survey. This self-selection of individuals to participate may have resulted in a different group of people surveyed than the overall population. Also, due to the moderate number of people surveyed, small differences are magnified when presented as a percentage.
NUNAVUT’S UNDERSTANDING OF HOMELESSNESS

The Framework for the GN Long-Term Comprehensive Housing and Homelessness Strategy (2012) states that Nunavut lacks a single, shared definition of homelessness, perhaps because homelessness can take on many forms. In the absence of a definition that had been appropriately debated and endorsed by Nunavut’s homelessness service providers, the Framework used the term “homelessness” to refer to three generally accepted types, or categories, of homelessness: “absolute,” “hidden,” and “at risk.”

One aim of this study was to initiate a dialogue with service providers and government representatives about a Nunavut-specific definition of homelessness, however obtaining consensus on one definition was not our objective.

Dialogues about a Nunavut specific definition of homelessness took place as part of the meetings that were held with key partners in Iqaluit, Rankin Inlet, and Cambridge Bay. Key partners discussed what homelessness means and looks like to their community, including the circumstances in which they would consider someone to be homeless. They also discussed the terms they would use to describe homelessness, and the living situations that would fall into various types or categories of homelessness.

The dialogues reinforced that homelessness is a complex issue, and one that is difficult to define. Homelessness is perceived differently by different people, resulting in a lack of a common understanding about who is homeless. For example, some Nunavummiut in living situations that others would consider to be homeless do not self-identify as experiencing homelessness. These different perceptions of homelessness are demonstrated by the following comments from service providers and individuals experiencing homelessness.

“What is considered to be homeless might be different for different people”
— Stakeholder
Individuals who do not consider themselves to be homeless:

“I don’t consider myself to be homeless, my uncle is letting us stay”
“I don’t know where I’ll be staying tonight” ... [but] no, I don’t consider myself to be homeless”
“I don’t consider myself to be homeless because I have family” [the individual was staying with their grandmother, uncle and two other people]

Service providers:

“Individuals staying in the family violence shelter wouldn’t consider themselves to be homeless, they just need a place to stay temporarily. However, if there were more housing, people would want to move to other living situations.”

In a similar vein, some service providers consider everyone without their own housing and staying with relatives or friends to be homeless, while others say that only when someone is regularly moving between the houses of relatives or friends (couch surfing) are they homeless. Those who see everyone staying with family or friends as homeless think that homelessness is not just about having a roof over one’s head; it’s about a sense of security, stability, privacy, and the ability to control one’s own living space. Below are a few comments from service providers that speak to their understanding that anyone without their own home is homeless:

“Even though they have a place to stay, the person staying with family still feels homeless, they don’t want to be a burden”
“I consider everyone on the public housing waiting list (who is not a transfer) to be currently homeless, even though some may be staying with family on a long-term basis”
“If you don’t have your own space and own security you are homeless”
“If you are properly housed, I imagine that your nuclear family would be housed, not your extended family”

Many service providers and government representatives were reluctant to specifically define homelessness, and thought that it was best for the individual to determine for themselves whether they are homeless.

A common theme among those we spoke to was that homelessness is about social exclusion. Social exclusion can mean struggling with lost or broken relationships, feeling unwelcome by family or society, or feeling hopeless. One service provider described homelessness as being: “about a lack of people to talk to, a feeling that people don’t care anymore; it’s about hopelessness.” The notion that homelessness is about hopelessness was echoed by a shelter client: “It’s tiring. It feels hopeless to continue living – homelessness is a desperate situation.” This is in keeping with the definition of home developed by Nunavut Tunngavik Inc: home is “a place that provides shelter...a response to special needs, social interaction [and] comfort and security.”17 This is also in keeping with research into the sociocultural dimensions of Aboriginal homelessness in other jurisdictions, which situates the problem of Aboriginal homelessness in the broader legacy of colonialism, including physical and cultural displacements, breakdowns in family and community, violence and marginalization.18 Some of these projects have included spiritual homelessness as one of the categories of homelessness, which refers to being separated from traditional land or family.

17 Nunavut Tunngavik Inc. Inuit Tunngavik Inc., 2003/04 and 04/05 Annual Report on the State of Inuit Culture and Society, Housing in Nunavut – The time for Action is Now, 2005
18 Keys Young, Homelessness in the Aboriginal and Torres Strait Islander context and its implications for the Supported Accommodation Assistance Program (SAAP), Department of Health and Ageing, Canberra. 1998, Christensen, Julia, ‘Our home, our way of life’: spiritual homelessness and the sociocultural dimensions of Indigenous homelessness in the Northwest Territories (NWT) Canada, 2013
Although homelessness is difficult to define, there are a number of reasons to define homelessness. Definitions form the basis of a common ‘language’ for discussing the topic, and helps improve understanding of the issue. A definition is also helpful for measuring the homeless population over time. It is also important for policy purposes, as it can influence the perceived extent of the problem and potential services or solutions.

As such, working definitions have been established for the purpose of this study. The majority of stakeholders agreed that the terms they would use to categorize the different types of homelessness are those used in the Framework for the Government of Nunavut (GN) Long-Term Comprehensive Housing Strategy: “absolute homeless,” “hidden homeless,” and “at risk.” Therefore, this study uses those terms and their definitions as working definitions, which are as follows:

**Absolute homeless** – is where the person is without housing. This includes people staying in shelters (sheltered) or places not meant to be housing, such as outdoors, tents, or makeshift huts or sheds (unsheltered).

**Hidden homeless** – is where the person does not have a usual home. This includes people staying in the housing of relatives or friends, and people who are homeless but in correctional facilities or medical institutions.

**At-risk of homelessness** – is where the person is not homeless, but is vulnerable to homelessness. This includes people staying in housing that has been poorly maintained and is not fit to be lived in, people spending a significant amount of their income on housing costs, people being abused or at risk of violence, and people currently in housing but who do not have the ability to maintain it.

19 Nunavut Housing Corporation, Iggluqatigiilauqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
20 Nunavut Housing Corporation, Iggluqatigiilauqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
22 Households spending 50% of their income on housing can be considered severely cost-burdened and those spending 30% to 50% moderately cost-burdened as cited in Pomeroy, Steve. 2001. Toward a Comprehensive Affordable Housing Strategy for Canada. Ottawa. Caledon Institute of Social Policy
There is a critical overcrowding issue in Nunavut; approximately 35% of occupied dwellings are crowded, based on the lack of enough bedrooms. Many people without a home of their own are staying with family or friends on a long term basis. All of these people could be included in a definition of hidden homelessness. However, people who have short term, temporary accommodations but do not have a usual home (couch surfers) require special attention compared to those who are staying in one place with family or friends over a longer time.

There is some existing data on hidden homelessness in Nunavut from the 2010 Nunavut Housing Needs Survey. This was a survey of all homes in Nunavut, whereas the present study only counts homeless people staying in shelters or places not meant to be housing (absolute homeless). The 2010 Nunavut Housing Needs Survey found that four percent of people surveyed, or 1,220 people, did not have a home and were living temporarily in another person’s home. This group of people fit into our working definition of hidden homeless.

People who are homeless but staying in hospitals, health centres, mental health treatment facilities, or jails also fit into our working definition of hidden homelessness. Based on reports and estimates from staff of these facilities in February 2014, there were 13 people who were staying in hospitals, health centres, and mental health treatment facilities in Nunavut longer than they needed to because they did not have housing. At least 33 people were temporarily in jail in Nunavut but did not have permanent housing.

Shifting definitions have a significant impact on the number of people who might be considered hidden homeless. For example, the data from the 2010 Nunavut Housing Needs Survey identified the number of people who were living temporarily in another person’s home as homeless, but “temporary status” was left to the person who responded to the survey to decide. Of the survey respondents we met who were staying with family or friends and considered themselves to be homeless, most said that they had been homeless for a long time (an average of five years). Some of these individuals may have been staying with the same family or friends for a while and may or may not have been considered to be temporary by the person who responded to the survey.

Using a definition of hidden homelessness that includes everyone without a place of their own and staying with family or friends would result in a much higher number. Under this definition, one useful source of data for the number of hidden homeless would be the public housing waiting list. There are approximately 1,500 applicants on the public housing waiting list in Nunavut. It is estimated that these applicants likely represent over 3,500 people. There is also a significant number of people without a place of their own and staying with family or friends who are not on the public housing waiting list.

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1 The profiles presented here are based on actual circumstances, while names are fictitious in order to ensure respondents’ anonymity. The accounts are based on surveys completed by Cassandra Vink for the “Profile of Homelessness.”

24 Two people were reported by staff at the Rankin Inlet Health Centre and 11 people were reported by staff of the Akausiarvik Mental Health Treatment Facility who were staying longer than required due to a lack of alternative housing arrangements.

25 This is based on staff conducted surveys of offenders housed at the Rankin Inlet Healing Facility and the Baffin Correctional Centre. A similar percentage was applied to the offenders housed at the Nunavut Women’s Correctional Centre.

26 Based on data provided by Nunavut Housing Corporation.
Addressing homelessness is an objective of several Government of Nunavut guiding policies, documents and initiatives:

The Government of Nunavut’s Framework for the GN Long-Term Comprehensive Housing and Homelessness Strategy and The GN Long-Term Comprehensive Housing and Homelessness Strategy, prepared by the Nunavut Housing Corporation, both speak to priorities and objectives for addressing homelessness. The Strategy identifies four strategic directions for a comprehensive approach to addressing housing and homelessness in the territory.

The first is to increase Nunavut’s housing stock. This includes increasing Nunavut’s public housing stock to address gaps and growth in demand, and over time finding ways to increase other types of housing, with a focus on social and affordable housing in the midterm.

The second is to improve collaboration among housing stakeholders. The Strategy identifies the need for interdepartmental and multi-sectoral actions to comprehensively address Nunavut’s housing needs.

The third is to identify and address gaps in Nunavut’s housing continuum. This includes developing a better understanding of specific housing needs across the continuum, including those of vulnerable students, seniors, families and single individuals to ensure all needs along the housing continuum are being addressed. The Framework identifies certain gaps that exist in the housing continuum, including purpose-built transitional and supportive housing, and affordable private market rental options, but noted that further research must be completed to determine how these gaps can be addressed in a collaborative way. One of the objectives of the Strategy is to establish a complete housing continuum specific to Nunavut.
The fourth strategic direction is to instill self-reliance to reduce dependence on government. This is a long term focus of the Strategy, and the Strategy identifies the need for more initiatives aimed at increasing self-reliance.

Homelessness is also related to the multi-agency Makimaniq Plan: A Shared Approach to Poverty Reduction. Addressing homelessness ties into the Makimaniq Plan through the theme of Housing and Income Assistance. There are four goals, each with their own actions under this theme.

The first goal is to improve the Income Assistance system and related supports available to those who access Income Assistance programs. This includes reviewing how much can be earned before it is deducted and other changes to Income Assistance programming that would benefit individuals transitioning to work and working collaboratively to develop additional supports for individuals transitioning to work. As a result of this goal the rent-gear-to-income scale for public housing has been revised; there has been a comprehensive review of income assistance and other social safety net programs, although changes must still be implemented; and there have been initial efforts to match apprentices and potential employees with contractors.

The second goal is increased collective understanding of the Income Assistance system overall and clarification of specific policies and programs. This includes increasing the collective understanding and clarification of the overall objectives of the Income Assistance system. This has been completed through the analysis of government safety net programs.

The third goal is exploration of affordable housing options through cooperation and partnership. This includes working collaboratively to explore and support affordable housing options. A housing needs study and housing strategy have been completed and a detailed action plan to implement the strategy and long term financing plan for housing are currently being prepared. The Department of Family Services is also working to increase resources for homelessness by lobbying the federal government, and working with inter-departmental and inter-jurisdictional working groups on homelessness.

The fourth goal is multi-party inquiry and public dialogue on the history of housing in Nunavut. It should be noted that this is not proceeding at this time.

Through its Tunngasugvik homeless shelter policy, the Government of Nunavut provides funding to assist non-profit agencies in delivering shelter services. Two homeless shelters, both of which are located in Iqaluit (the Uquutaq Shelter, a 20-bed men’s shelter, and Sivummut House, a 12-bed women’s shelter) receive homeless shelter funding through this policy, which is administered through the Department of Family Services.

The Department of Family Services also funds a number of family violence shelters and safe houses throughout the territory that support women and children fleeing domestic violence specifically.

On April 1st 2013 the responsibility for implementing the homelessness strategy and developing an action plan was transferred to the newly instated Department of Family Services. The work will include a ground-up approach that takes into consideration the realities of individuals experiencing homelessness in Nunavut, their interactions with Nunavut’s existing social service infrastructure, and barriers they experience in accessing needed services. The Profile of Homelessness in Nunavut will be used to support the implementation of the GN Framework and Strategy and the preparation of the homelessness action plan.
CONTEXT OF HOMELESSNESS

**HISTORICAL CONSIDERATIONS**

Before colonization, Inuit were mobile and constructed their own seasonal, temporary, and permanent dwellings when and where they needed them with the materials available. The Qikiqtani Inuit Association, in its writings about the work of the Qikiqtani Truth Commission, describes “home” for Inuit as “a place where someone feels they belong, but its geography is not always fixed in time or space—it can expand, contract, move, and change shape according to cultural and personal experiences. Inuit homes had a specific relationship to the land—they came from it and they were part of it.”

Prior to settlement, homelessness was not an issue.

In the 1950s and 1960s Inuit were encouraged and sometimes forced to take up residency in new federally administered settlements where they could access education and health services and obtain free, state-sponsored housing. “Many Inuit did not feel “at home” for many years after moving into the government-sanctioned settlements and into permanent housing.” This speaks to the definition of home developed by Nunavut Tunngavik Inc.; home means “a place that provides shelter...a response to special needs, social interaction [and] comfort and security.”

It was also upon settlement when homelessness began, and demand for housing outstripped supply. The housing shortage and rapid social and cultural change brought about by colonization have had profound impacts on the sense of home and homelessness among Inuit. The effects of social and material exclusion, breakdowns in family and community, detachment from cultural identity, intergenerational trauma and institutionalisation, are still present today.

Nunavut has high levels of suicide, addictions, nutrition issues, family violence, depression, schizophrenia and other mental health challenges. These each play a key role in individuals’ vulnerability to becoming homeless. Some of these issues, such as poor mental health and addictions, are both a cause and consequence of homelessness.

**HOUSING**

There is very heavy reliance on public housing in Nunavut. Low levels of participation in the wage economy, limited incomes, and low levels of financial literacy among many Nunavummiut have contributed to this dependency. The cost of food, energy, housing, and transportation are all higher in Nunavut than elsewhere in Canada, making the cost of renting or buying a home out of reach for most Nunavummiut.

Public housing accounts for slightly more than half of all occupied dwellings. Staff housing is also common. In total, the Government of Nunavut directly subsidizes more than 80% of all housing in the Territory.

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29 Inuit Tunngavik Inc. Inuit Tunngavik Inc., 2003/04 and 04/05 Annual Report on the State of Inuit Culture and Society, Housing in Nunavut – The time for Action is Now, 2005
31 Genesis Group, Nunavut Social Safety Net Review, 2011
32 Homeless Link, Homelessness, Mental Health and Wellbeing Guide, Section Two: Understanding Homelessness, Mental Health and Wellbeing
33 Nunavut Housing Corporation, Igliukirniqtigaqigaqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
34 Impact Economics, Understanding Poverty in Nunavut, 2012
35 Nunavut Housing Corporation, Igliukirniqtigaqigaqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
37 Nunavut Housing Corporation, Igliukirniqtigaqigaqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
There is an acute shortage of affordable housing in Nunavut. Many homes are overcrowded or in need of repair. Approximately 35% of occupied dwellings in Nunavut are crowded, based on the lack of enough bedrooms. About 23% of occupied dwellings require major repairs. As of January 2014, there were over 1,500 households on public housing waiting lists in Nunavut. The wait time for a public housing unit is approximately three to six years across Nunavut, with exceptions in a few small communities where the supply more closely matches the needs, and housing can be obtained relatively quickly. It can be very challenging to wait the required three to six years to get housing, particularly for individuals without strong coping and life skills.

With a high proportion of the population under the age of 25, the future demand for public housing will continue to grow. The 2010 Nunavut Economic Outlook projected that an additional 1,672 new public housing units would be needed by 2025, in addition to the need to repair or replace existing units and meet the needs of those already on the public housing waiting list.

Inuit use many strategies to cope with the inadequate supply of housing. These include doubling up or staying with relatives or friends in order to find shelter. Service providers consulted for this study also reported that some individuals deliberately commit petty crimes so that they will be imprisoned and have shelter during the winter months. Historically it has been reported that the RCMP has accommodated unstable individuals who are not permitted to stay at the men’s shelter in Iqaluit in unoccupied jail cells. Some youth have also been known to register at Nunavut Arctic College, not for the primary purpose of attending school, but to obtain student accommodation. Some also let their family members stay with them, which puts whole families at risk of homelessness. Due to a lack of other housing alternatives, and no other choice than to remain homeless, many women and children fleeing violence return to the abuser.

PROFILE

M. has been homeless for one year. At the moment her only option is to stay at the women’s shelter. She has friends or relatives who help her when she is in need, but her hope is to be independent. “I don’t want to rely on friends.”

This is not the first time she has no other place to go but the shelter; she has been homeless twice before. As a young, single mother of five, homelessness affects her whole family. “My kids are sick of this, they want their own house. I tell them to be independent. One day we will have our own place and do family things.” Apart from the lack of affordable housing and not finding work, which makes every day a struggle for survival and keeps her from building a stable future for her children, it is family violence that caused her to be homeless. She fled her home community when her ex-partner threatened her. She had housing before, but she says she was too unstable to maintain her place. Her wish is to one day have her own home and find work.

38 Nunavut Housing Corporation, Iglulugatigiluaqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
40 Based on the opinion of the resident. Nunavut Bureau of Statistics, 2010 Housing Needs Survey
41 Data provided by Nunavut Housing Corporation
42 Data provided by Nunavut Housing Corporation
44 Reported by stakeholders consulted for this study
45 Webster, 2006
**SOCIO-ECONOMIC CONSIDERATIONS**

Nunavut has lower socio-economic outcomes than the rest of the Canada. The territory’s education status is lower, with graduation rates approximately half the national average. Nunavut’s unemployment rate (the number of people employed as a percentage of the population 15 years and older) is 13.1%, compared to 6.9% nationally. Individual average after tax income in Nunavut is slightly higher ($43,305) than the national average ($40,650), although the median income was lower ($24,868) than the national average ($29,878). However, because of the high cost of living, the average Nunavut resident is considerably poorer than most other Canadians. There is strong dependence on social assistance in Nunavut (39.6%). Health status is also lower in Nunavut, with life expectancies of 10 to 12 years less than the rest of the country. Low socio-economic outcomes in Nunavut contribute to poverty, which also places individuals at a higher risk of becoming homeless.

**SERVICES**

There are significant gaps in the infrastructure in Nunavut to support individuals and families who are experiencing homelessness or who are at risk. This includes very limited emergency shelter services. Therefore, for many individuals experiencing homelessness this means relying on relatives or friends in order to find shelter, or staying in places not meant to be long term housing.

Nunavut has very limited supportive housing options to meet the housing needs of individuals who require assistance to maintain their housing, including persons with mental health issues, adults with disabilities, and Elders. Gaps in the available housing options include purpose-built transitional (time-limited) and supportive (permanent) housing. Sometimes individuals stay in institutional care longer than required because of a lack of housing, services, or resources to assist them in transitioning to housing, even though it costs the system more to keep them in an institutional setting.

There are a number of social programs in Nunavut that support employment, training, education, health-care, mental health, personal safety, minimal income, and childcare, that broadly serve to prevent homelessness and help individuals maintain their housing. However, there are limited housing-focused services aimed at transitioning individuals experiencing homelessness into permanent housing, such as assistance with accessing housing, life-skills training, and assistance accessing other services the individual may need. Likewise, for individuals who are unable to maintain housing independently, there is not a system of coordinated supports aimed at keeping individuals housed (including assistance maintaining their tenancy, life skills supports, financial literacy education, and mental health and addictions services). These gaps in services perpetuate the cycle of homelessness in Nunavut. Existing homelessness services and gaps are discussed in further detail later in the report.

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46 Nunavut Bureau of Statistics
47 Statistics Canada, CANSIM, table 282-0087 and Catalogue no. 71-001-XIE, 2014
48 Statistics Canada, National Household Survey, 2011
49 Impact Economics, Understanding Poverty in Nunavut, 2012
50 Nunavut Bureau of Statistics, September, 2012
51 Impact Economics, Understanding Poverty in Nunavut, 2012
52 Nunavut Housing Corporation, Igluliatuqilluqta Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
NUMBER OF HOMELESS

Estimating the number of people experiencing homelessness in Nunavut is a difficult task, particularly because of the prevalence of hidden homelessness compared to absolute homelessness.

This project has involved a concerted effort to enumerate absolute homelessness in Nunavut. However, even counting those experiencing absolute homelessness is challenging, because of the difficulties in contacting these individuals. Also, as mentioned previously, the timeframes to conduct the count were limited. There were also a limited number of survey locations in the count and a limited number of service providers who were contacted in communities across Nunavut. Had more service providers been contacted in communities outside of Iqaluit, Rankin Inlet and Cambridge Bay where the direct count was conducted, there may have been more individuals identified. Further, while the methodology used a point-in-time approach to produce a “snap shot” of what homelessness looks like on one day of the year, there will be seasonal differences in the number of individuals experiencing absolute homelessness (discussed below). A more comprehensive census-type approach would be needed to quantify hidden homelessness. To estimate the number of hidden homeless, we have to extrapolate from existing data sources.

98
ABSOLUTE HOMELESS, INCLUDING:
68 STAYING IN SHELTERS
60 STAYING IN PLACES NOT MEANT TO BE HOUSING

PROF I LE OF HOM ELESSNESS IN N UNAV UT
ABSORTE HOMELESSNESS

Based on the homeless count it is estimated that a minimum of 98 individuals in Nunavut were experiencing absolute homelessness in February 2014. It must be stressed that this number reflects only the month of February, when the count was conducted. The vast majority (74%) of these individuals are in Iqaluit.

The following table shows a snapshot estimate by community of the number of people experiencing absolute homelessness in Nunavut. As mentioned previously, a limited number of service providers were contacted in each community to determine the number of people experiencing absolute homelessness. As such, the numbers shown here are just a minimum, and there may be more people experiencing absolute homelessness in some communities.

<table>
<thead>
<tr>
<th>Community</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arctic Bay</td>
<td>None Reported</td>
</tr>
<tr>
<td>Cape Dorset</td>
<td>None Reported</td>
</tr>
<tr>
<td>Clyde River</td>
<td>2</td>
</tr>
<tr>
<td>Grise Fiord</td>
<td>None Reported</td>
</tr>
<tr>
<td>Hall Beach</td>
<td>None Reported</td>
</tr>
<tr>
<td>Igloolik</td>
<td>None Reported</td>
</tr>
<tr>
<td>Iqaluit</td>
<td>72</td>
</tr>
<tr>
<td>Kimmirut</td>
<td>None Reported</td>
</tr>
<tr>
<td>Pangnirtung</td>
<td>None Reported</td>
</tr>
<tr>
<td>Pond Inlet</td>
<td>None Reported</td>
</tr>
<tr>
<td>Qikiqtarjuaq</td>
<td>None Reported</td>
</tr>
<tr>
<td>Resolute Bay</td>
<td>None Reported</td>
</tr>
<tr>
<td>Sanikkilaq</td>
<td>None Reported</td>
</tr>
<tr>
<td>Arviat</td>
<td>None Reported</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Community</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baker Lake</td>
<td>None Reported</td>
</tr>
<tr>
<td>Chesterfield Inlet</td>
<td>None Reported</td>
</tr>
<tr>
<td>Coral Harbour</td>
<td>None Reported</td>
</tr>
<tr>
<td>Rankin Inlet</td>
<td>9</td>
</tr>
<tr>
<td>Repulse Bay</td>
<td>1</td>
</tr>
<tr>
<td>Whale Cove</td>
<td>None Reported</td>
</tr>
<tr>
<td>Cambridge Bay</td>
<td>3</td>
</tr>
<tr>
<td>Gjoa Haven</td>
<td>None Reported</td>
</tr>
<tr>
<td>Kugaaruk</td>
<td>3</td>
</tr>
<tr>
<td>Kugluktuk</td>
<td>7</td>
</tr>
<tr>
<td>Taloyoak</td>
<td>1</td>
</tr>
</tbody>
</table>

| Nunavut            | 98      |

Absolute homelessness exists in the homeless and family violence shelters year-round. Approximately 700 different individuals stay in Nunavut shelters each year.53

PROFILE

K. is in his forties and never had his own place. He usually lives in shack, but he is lucky to currently be housesitting for a friend. He has experienced homelessness several times in his life, yet he doesn’t consider himself homeless at the moment. K. says the frustration of being told by others to get out was the reason he became homeless. He has struggled with addictions and says he needs help finding employment as well as public or subsidized housing. He lives in the same community he grew up in and has family and friends who help him when he has no other choice.

53 Based on shelter statistics
Number of Individuals Who Stay in Shelters in Nunavut Each Year

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Annual Number of Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter for Homeless Men</td>
<td>Iqaluit</td>
<td>105 men</td>
</tr>
<tr>
<td>Sivummut House</td>
<td>Iqaluit</td>
<td>33 women and 24 children</td>
</tr>
<tr>
<td>Qimaavik Transition House</td>
<td>Iqaluit</td>
<td>90 women and 116 children</td>
</tr>
<tr>
<td>Kataujaq Society Shelter</td>
<td>Rankin Inlet</td>
<td>31 women and 46 children</td>
</tr>
<tr>
<td>Kugaaruk Family Violence Shelter</td>
<td>Kugaaruk</td>
<td>31 women and 43 children</td>
</tr>
<tr>
<td>Cambridge Bay Family Violence Shelter</td>
<td>Cambridge Bay</td>
<td>38 women and 32 children</td>
</tr>
<tr>
<td>Kugluktuk Family Violence Shelter</td>
<td>Kugluktuk</td>
<td>105 women and children</td>
</tr>
</tbody>
</table>

In the heart of the winter the number of individuals staying in places not intended for housing is very limited because of the extremely cold climate. Most individuals who would otherwise be in this situation are forced to rely on relatives or friends for shelter. One man reported that: “I have a tent on the land and stay there most nights, but I can’t if it’s really cold, I don’t have a stove heater.” The homeless count identified 11 individuals outside of Iqaluit who were staying in places not intended to be housing.

Service providers in some communities reported that from time to time individuals sleep in the entrances to banks, laundry rooms or furnace rooms in multi-plex buildings. People have also been known to sleep underneath buildings or on porches, but not during February’s weather conditions. According to service providers, many more individuals experiencing homelessness stay in cabins when the weather permits. Some individuals experiencing homelessness mentioned that there have been times that they have stayed up all night wandering the streets because they had no place to go. One young man experiencing homelessness reported that: “My mother drinks a lot and kicks me out on and off, and then I stay at my sisters’. I have no place to stay sometimes. A few times I’ve had to stay up at night, walk around and find a place to sleep the next day.”

While the above numbers represent the number of individuals experiencing absolute homelessness at any given time, they don’t show the number of individuals who experience homelessness over the course of a year. There are two main sources we can look at to estimate the additional people who become homeless over a one year period. The first is to consider data on the number of people who experience events that immediately cause individuals to become homeless.

Some of the events that put people at immediate risk of homelessness include personal crises such as an eviction, fire, an incident of domestic violence, or removal from the home through a Protection Order issued under the Family Violence Intervention Act. Although Justice staff are responsible for assisting with

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54 2013 shelter statistics
55 Based on shelter statistics from 2011-2012
56 Based on shelter statistics from 2011-2012
57 Based on data from February 2013 to January 2014
58 Based on data from March 2013 to February 2014
59 Estimate based on occupancy rates
arrangements for alternative accommodations in the event of a removal from the home through a Protection Order, the arrangements are temporary, and many of the men removed from the home are at least temporarily homeless. Other events that put people at immediate risk of homelessness include transitions into new phases of life such as youth ages 16, 17 or 18 transitioning out of the Child Protection system, graduation or exit from Arctic College without having arranged permanent housing, departure from an employer that provided housing without having arranged alternate permanent housing, or a move to a new community without having arranged permanent housing. Transitions from institutional care such as a release from a correctional facility or discharge from a health facility also put people at immediate risk of homelessness. However, it should be noted that housing is a consideration prior to discharge from some institutional settings. Correctional facilities confirm a housing arrangement for the offender during the discharge planning process. This may, however, be with relatives or friends, and may end up being only on a temporary basis. Very few are discharged directly into absolute homelessness (i.e. shelter).

Some health facilities, such as the Rankin Inlet Health Centre and Akausisarvik Mental Health Facility will keep patients longer than medically required as a result of lack of alternate housing options.

While these events do not result in homelessness for everyone, the table below shows some indicators estimating the number of individuals who become homeless each year as a result of some of these events, where data is available. Together these are estimated to account for over 470 Nunavummiut becoming homeless each year. However, it should be noted that for many of these individuals their situation of homelessness is temporary.

### Some Events That Result in Immediate Homelessness

<table>
<thead>
<tr>
<th>Event</th>
<th>Number of People Affected Annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>Released from correctional facilities into housing arrangements that are temporary</td>
<td>120</td>
</tr>
<tr>
<td>Removed from their housing through a Protection Order</td>
<td>80</td>
</tr>
<tr>
<td>Lose their housing as a result of a fire</td>
<td>200</td>
</tr>
<tr>
<td>Stay in health facilities longer than required due to lack of housing</td>
<td>40</td>
</tr>
<tr>
<td>Youth ages 16, 17 or 18 transition out of the Nunavut care system annually</td>
<td>20</td>
</tr>
<tr>
<td>Formal eviction as a result of failure to pay rent</td>
<td>14</td>
</tr>
</tbody>
</table>

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**Notes:**

60 Estimates by the researcher based on data from Baffin Correctional Facility and Rankin Inlet Healing Facility. Staff from the Rankin Inlet Healing Facility surveyed the offenders housed at the facility and identified that 53% either do not have housing arranged for the time of their release or their arrangements would be to stay temporarily with extended family members. Based on previous surveys, staff from the Baffin Correctional Centre (BCC) estimate that a minimum of 20% of the offenders housed in its facility are homeless or depend on other people’s generosity for shelter. The number of people released was estimated based on statistics from BCC that 291 individuals were released from BCC for the fiscal year 2012-2013.

61 Based on the total number of Emergency Protection Orders issued in 2008-2009. Although alternative housing arrangements are made by Justice staff for people removed from their housing through a Protection Order, they are temporary arrangements, less than 90 days.

62 Estimates by the researcher based on Nunavut and Iqaluit fire statistics. The five year average number of fires in Nunavut (2008-2012) is 122 fires. More detailed data was available for Iqaluit in 2012 on the number of fires in dwelling units. In Iqaluit, in 2012, 20 of the 46 fires were in apartment buildings, and another 8 were in one and two-family dwellings. The percent loss in the apartments was 93%, so it was assumed that the units were at least temporarily uninhabitable. Whereas the percent loss in one and two-family dwellings was 5%, so it was assumed that most would still be habitable. Assuming (a minimum of) three apartment units per apartments building, and an average of 3 people per unit, the number of people who lost their housing due to a fire in Iqaluit is estimated at a minimum of 180 people. It is estimated that there are a minimum of 20 people who lost their housing due to a fire in other communities. While alternative housing arrangements are made for people who lose their public or government staff housing in a fire, these arrangements may involve staying with relatives or friends or staying temporarily in another vacant unit owned by the Nunavut Housing Corporation. These individuals would still be considered to be homeless while they have these temporary housing arrangements.

63 Based on estimates from the Rankin Inlet Health Facility that 3-4 different people per month stay at the Health Facility longer than medically required due to lack of permanent housing arrangements.

64 Based on estimates of the annual number of youth transitioning out of Child Protection Services. Because of the lack of private affordable rental housing in Nunavut, the only option for youth transitioning out of care is to put their name on the public housing waiting list once they turn 18. Prior to receiving a unit of their own, it is reasonable to assume that they are experiencing homelessness as their only options would be to stay with relatives or friends, stay in a shelter, or place not meant to be housing.

65 Based on data on Orders to Terminate Tenancy in 2013 provided by the Residential Tenancies Office, Department of Justice Government of Nunavut.
The second source we can use to estimate the people who become homeless over a one year period is the surveys of individuals experiencing homelessness, which captured information on the length of time individuals have been experiencing homelessness who became homeless for reasons other than the single events discussed above. For those that have been homeless for less than a week, it can be estimated that an additional equal number of individuals will also become homeless next week. Similarly, it can also be assumed that an equal number will become homeless each week thereafter. It should be noted, however, that homelessness is temporary for many individuals, and the majority of those in the group who became homeless less than a week ago will find housing, so not all of these individuals will be experiencing homelessness at the same time.

For many people homelessness is due to a number of unresolved personal problems building up over time. As will be discussed in further detail later in the report, the vast majority of the survey respondents reported that the things that contributed to them becoming homeless were not specific events such as those discussed above. They were unresolved personal issues such as not having enough income, a family member, partner or roommate forcing them to move, domestic violence, or substance abuse. Using information on the total number of people experiencing homelessness from the February 2014 homeless count and data from the surveys on the length of time someone has been experiencing homelessness, we estimate up to 400 people become homeless each year as a result of unresolved personal issues.\textsuperscript{66} These estimates show that the number of people homeless today are only a subset of those that experience homelessness over the course of a year.

\textsuperscript{66} The total number of people experiencing homelessness is based on the Public Housing Waiting List statistics and surveys of individuals experiencing homelessness. The relevant information from the surveys includes the length of time the people counted had been experiencing homelessness this time, and whether or not they had experienced a previously homelessness episode, and factors that contributed to their homelessness.
The following numbers reflect the results from 93 surveys conducted in Iqaluit (66), Rankin Inlet (8), and Cambridge Bay (19).

Refer to Appendix 1 for summaries of responses from each of the three communities. The respondents included 36 people staying in shelters, 6 staying in places not meant to be housing, and 51 staying with family or friends and self-identifying as homeless. It should be noted that not all of the people who were counted as part of the point-in-time count of absolute homelessness were surveyed. Some were counted indirectly based on reports from service providers. Others who were counted directly declined to participate in the survey.

### AGE

The average age of survey respondents was 38. Most were under the age of 50 (82%). Approximately one-third were young adults between the ages of 18 and 29. Another 26% and 23% were between the ages 30 – 39 and 40 – 49, respectively. Still, 11% were between the ages of 50 – 59, and 7% were 60 and over. Unsheltered individuals had an older age profile, while shelter clients had a younger age profile. These findings show that homelessness in Nunavut is an issue among all ages, not just a particular age demographic.

<table>
<thead>
<tr>
<th>AGE (ADULTS)</th>
<th>18-29</th>
<th>30-39</th>
<th>40-49</th>
<th>50-59</th>
<th>60+</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>32%</td>
<td>26%</td>
<td>23%</td>
<td>11%</td>
<td>7%</td>
</tr>
</tbody>
</table>

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67 For example, at the Qayuqtuvik Soup Kitchen surveyors asked individuals upon entry what their living situation was/where they were sleeping that night. The purpose of this was to count individuals staying in places not meant to be housing even if they did not approach the surveyors following their meal to complete a survey. A number of the individuals who identified that they were staying in places not meant to be housing did not approach the surveyors to complete a survey.
**GENDER**

Males accounted for 57% of the absolute homeless surveyed, while 43% were female. The same gender distribution was shown among survey respondents sleeping in housing of relatives or friends. The vast majority (79%) of unsheltered individuals were male. Females represented a higher proportion of shelter clients (56%), reflective of the greater number of shelter beds available for women. Among the adults age 55 and over who were surveyed, the vast majority (89%) were men.

This shows that homelessness is an issue for both men and women, although the form it is most likely to take, sheltered, unsheltered, or hidden, differs for men and women.

**RESPONDENTS ALONE OR PART OF A FAMILY UNIT**

Homelessness is not limited to single individuals: 27% of shelter clients were accompanied by children. Over half (53%) of respondents staying in the housing of relatives or friends were part of a family unit. A profile of one family experiencing homelessness can be found below. Even among those who were unsheltered (staying in places not intended to be housing) there were two reported instances of couples with children and one instance of a couple without children.

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**FAMILY OF SEVEN, THE FATHER DESCRIBES AS HAVING BEEN “BOUNCING AROUND”**

This was their first time experiencing homelessness and they have been homeless for three years.

What contributed to you losing your housing?

“We were living [out of territory] and [one event resulted in immediate homelessness], so we moved back here. When we were in the city, we always had housing – you can rent a place “like that”!”

Do you have any medical conditions?

“I [the father] was recently diagnosed with cancer. The main thing is to make sure my family gets a house before something happens to me.”

Are you on the public housing waiting list?

“Yes. I’ve been calling them every day. We were supposed to be first on the list, but they keep moving us around.”

What do you think would help you find housing?

“Public housing, more Income Support, and someone not connected to the community to make decisions about housing allocations.”
**MIGRATION**

Contrary to popular perception that a significant percentage of those experiencing homelessness have moved from other communities, most (69%) respondents grew up in the community they are currently living in. This was the case across the various age groups and among those experiencing absolute homelessness and those staying with relatives or friends. A greater percentage of respondents currently living in Iqaluit grew up there (73%), compared to Rankin Inlet (68%) or Cambridge Bay (58%). The exception was women who reported that domestic violence contributed to them being homeless. Only 40% of these women were currently living in the community they grew up in. One of the reasons for this lower percentage is likely because the Qimaavik Shelter takes in clients from across the Qikiqtani Region.

**SUPPORT FROM SOCIAL NETWORKS**

An important part of Inuit culture is for those with resources to provide for family and the community, and social networks are clearly a key strength of the support system for individuals experiencing homelessness in Nunavut. This is evidenced by the fact that the vast majority (82%) of individuals surveyed indicated that they have family, relatives or friends in the community that help them when they are in need. However, 18% of individuals reported that family, relatives or friends were unavailable or unwilling to help them when in need.

Youth were slightly more likely to report having family, relatives or friends in the community that help them when they are in need (84%). Slightly fewer individuals experiencing absolute homelessness said they have family, relatives or friends in the community that help them when they are in need (78%).

The group least likely to have family, relatives or friends in the community that will help them when they are in need is women who reported domestic violence (66%). As mentioned above, one of the reasons for this lower percentage is likely that fewer of these women are currently living where they grew up (partially because Iqaluit’s Qimaavik Shelter takes in clients from across the Qikiqtani Region).
REPORTED HEALTH CONDITIONS

A common stereotype of individuals experiencing homelessness is that they struggle with substance abuse or have mental health conditions. A relatively high percentage of individuals experiencing homelessness struggle with these conditions compared to the general population, but many do not have any mental health conditions.68 Mental health issues or substance abuse can be both causes and results of homelessness, often arising after individuals lose their housing.

Research has shown that individuals experiencing homelessness tend to underreport health problems.69 People may choose to conceal their problem because of distrust or fear of the consequences, or they may be unaware of their problem because they have not visited a doctor. The social stigma attached to mental illness also makes it more difficult to obtain accurate information through surveys and likely leads to underreporting.

Most of the individuals surveyed in this study did not report any health conditions. Addictions were reported by 19% of individuals surveyed, medical conditions by 17%, and mental illness by 11%. Only 5% reported a physical disability and 2% reported an intellectual disability. As mentioned, these numbers likely represent a low estimate of the number of individuals with health conditions.

The vast majority (89%) of those reporting mental illness also reported having addictions issues. The presence of both mental illness and addictions (sometimes referred to as “concurrent disorders” or “dual-diagnosis”) is common among individuals who use services designed for individuals who are chronically homeless.70

Shelter clients in Iqaluit were slightly more likely to report most health conditions, including addictions (24%), mental illness (19%), medical conditions (19%), and intellectual disabilities (5%). Individuals who had been homeless for longer than a year were also more likely to report having a medical condition (23%). A similar percentage reported having an addiction (18%), while a smaller percentage reported having a mental illness (7%). Slightly more reported having a physical disability (7%). Women who reported domestic violence were the subgroup most likely to self-report having health conditions. Over half (53%) of these women reported having an addiction, 40% reported having a mental illness, 33% reported a medical condition, and 13% reported an intellectual disability.

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68 The percentage of homeless reporting health problems varies significantly between Canadian cities. For example, as few as 7% reported a mental health problem in the Upper Fraser Valley, British Columbia, and as many as 59% reported a mental health problem in Edmonton, Alberta (Canadian Institute for Health Information, Mental Health and Homelessness, 2008 accessed at: http://www.cpa.ca/cpsite/userfiles/Documents/Practice_Page/mental_health_homelessness_en.pdf). Comparisons cannot be made between cities as there is significant variability in the definitions and collection methodologies used to gather the information.


70 Barrow, Soto, & Cordova, 2004 and Collaborative Initiative to End Chronic Homelessness, 2006
Other groups that were more likely to report having health conditions were youth and women. This does not necessarily mean that they have a higher incidence of health issues, but perhaps shows that these groups may be more likely to self-report certain health conditions. Women were much more likely to report addictions than men - 71% of those reporting addictions were women. Women were the only ones reporting mental illness. However, a similar number of men and women reported having a physical or intellectual disability. Some 17% of youth reported having mental health issues and 24% reported addictions. In contrast, only one of the nine adults aged 55 and over who were surveyed reported any health conditions.

Although these numbers are likely lower than the actual incidence of health conditions, they do point to the need for treatment, counselling, and support for many of the individuals experiencing homelessness.
Almost an equal number of respondents reported that this was their first experience of homelessness (51%) as the number who reported that they had previously been homeless (49%). Some 57% of youth (ages 29 and under) reported that this was their first experience of homelessness, whereas 43% reported having experienced homelessness previously. Most respondents aged 55 and over (70%) had more than one experience of homelessness over their lives.

Those experiencing homelessness in Nunavut tend to remain homeless for a significant length of time. A staggering 82% of individuals surveyed had been homeless for a year or more. Men were more likely to be experiencing homelessness for more than a year, representing 65% of this group.

Some 40% of respondents had been experiencing homelessness for 5 years or more. The average length of the current period of homelessness was 4.65 years for all respondents, 4.02 years for shelter clients, and 4.71 years for individuals staying with relatives or friends. Adults age 55 and over tend to have been homeless for longer than their younger counterparts (7.7 years on average), while youth experiences of homelessness lasted an average of 2.75 years. Women who reported domestic violence had been homeless for an average of almost three years.
In Nunavut, the percentage of individuals surveyed who have had multiple homeless episodes or who have been homeless for more than a year is disconcertingly high. Gaetz et al report that “the longer one is homeless, the greater likelihood that pre-existing and emergent health problems worsen (including mental health and addictions) and there is greater risk of criminal victimization, sexual exploitation and trauma. There is also a much greater likelihood of involvement in the justice system.” This suggests the need for additional efforts to prevent recurring homelessness in Nunavut and assist the homeless in regaining housing as quickly as possible.

In many contexts, those who have been homeless for more than a year are considered to be chronically homeless. Some definitions of chronic homelessness also take into consideration whether the individual has a disability. In our survey of individuals experiencing homelessness, those who had been homeless for over a year were more likely to be unsheltered (60%), compared to the overall group of individuals surveyed (46%). More of these individuals were men, representing 65% of this group. Their age profile was similar to the overall group, and they were more likely to have grown up in the community they were currently living in (77% compared to 69% of the overall group). More individuals who have been homeless for over a year reported having a medical condition (23%) than those who have been homeless for less than a year. A similar percentage reported having an addiction (18%), while a smaller percentage reported having a mental illness (7%). Slightly more reported having a physical disability (7%). They were less likely to have had a previous homeless episode (43% compared to 49% overall).

Some of these characteristics, including a larger percentage of men and a greater percentage who were unsheltered are typical of individuals considered to be chronically homeless. The similarity in reported rates of addictions and lower reported rates of mental illness is atypical. While this may partly be an issue of underreporting (shelter staff have indicated that most of their long term clients have addictions or mental health issues), it could also mean that a different group of individuals is experiencing long term homelessness in Nunavut than would be the case in other contexts where there are more pathways out of homelessness, (i.e. more affordable housing alternatives in addition to public housing).

FACTORs CONTRIBUTING TO HOMELESSNESS

The literature identifies a number of determinants of homelessness. These include poverty, traumatic change in life circumstances, lack of affordable housing, addictions, and serious mental illness. For women in particular, determinants also include domestic violence, and criminalization of women for “crimes of survival.” For most people, there is more than one factor that contributes to homelessness. One service provider pointed to the range of inter-linked issues that all need to be addressed in order to prevent homelessness:

“It’s not just about the physical home, it’s about poverty, violence, employment, mental health, suicide, and addiction problems. These are all related, causal factors of homelessness that need to be looked at separately and collectively.”

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71 The State of Homelessness in Canada report references a study by Aubry et al (2013) that transitionally homeless (individuals who typically only have one experience with homelessness) make up 88-94% of the homeless population in Canada.
Survey respondents reported an average of three contributing factors contributing to their homelessness. There were a number of commonly reported factors. Approximately one-quarter of individuals said that they did not have enough income to afford housing; the incidence of this factor was even higher (40%) among youth. This points to the insufficiency of incomes among low-income Nunavummiut, including those receiving income assistance, to pay for basic needs such as housing, food, and clothing.

Commonly-reported life experiences that contributed to homelessness included being forced to move by another person in the household (25%), or a family change, such as a death of a family member (23%). Moving to a new community was reported as a factor contributing to homelessness for 21% of the individuals surveyed. Evictions were a contributing factor for 15%, and using alcohol, drugs or other substances was a contributing factor for 15% of the individuals surveyed, including 20% of youth.

Domestic violence was one of the most common reasons for homelessness among women: 44% of female respondents reported domestic violence as a factor contributing to homelessness. The majority (73%) of the women who reported domestic violence also reported other contributing factors such as using alcohol or other substances (47% of women who reported domestic violence), having mental health issues (40%), intellectual disabilities (13%), having moved to the community (13%), or being released from a health facility (13%).

### Reported Factors Contributing to Becoming Homeless

<table>
<thead>
<tr>
<th>Factor</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income is not enough to afford housing</td>
<td>25%</td>
</tr>
<tr>
<td>Family, partner or roommate made move</td>
<td>25%</td>
</tr>
<tr>
<td>Broke up with a spouse or partner, or other family change</td>
<td>23%</td>
</tr>
<tr>
<td>Moved to the community</td>
<td>21%</td>
</tr>
<tr>
<td>Hurt or threatened by a relative or another person were staying with</td>
<td>20%</td>
</tr>
<tr>
<td>Evicted</td>
<td>15%</td>
</tr>
<tr>
<td>Using alcohol, using drugs or other substances</td>
<td>15%</td>
</tr>
<tr>
<td>No income</td>
<td>9%</td>
</tr>
<tr>
<td>Mental Illness/disability</td>
<td>9%</td>
</tr>
<tr>
<td>Income from work dropped or stopped</td>
<td>8%</td>
</tr>
<tr>
<td>Released from prison/jail</td>
<td>8%</td>
</tr>
<tr>
<td>Removed/relocated through justice/RCMP involvement</td>
<td>5%</td>
</tr>
<tr>
<td>Fire</td>
<td>5%</td>
</tr>
<tr>
<td>Family member or personal illness</td>
<td>3%</td>
</tr>
<tr>
<td>Released from a health facility</td>
<td>3%</td>
</tr>
<tr>
<td>Income Assistance dropped or stopped</td>
<td>2%</td>
</tr>
<tr>
<td>Left employer that provided housing</td>
<td>2%</td>
</tr>
<tr>
<td>Released from a mental health facility</td>
<td>1%</td>
</tr>
</tbody>
</table>

*Profile of Homelessness in Nunavut*
The survey results show that individuals with certain life experiences, such as misusing alcohol or substances, mental health issues, and leaving institutions are more likely to become homeless. This points to the need for targeted trauma-informed and culturally relevant strategies to prevent homelessness and ensure adequate, suitable and affordable housing and supports are available for individuals in these ‘complex needs’ groups who are at-risk of homelessness or who are homeless.

In particular, the predominance of domestic violence as a contributing factor for women suggests that gender-specific approaches to the provision of support for housing, empowerment and healing following experiences of gender-based violence are important. Some victim support already exists, including emergency shelter services in some communities and second-stage services for women who have left the Qimaavik Shelter in Iqaluit. However, similar services – including emergency shelter services and crisis supports for victims of domestic violence, support for households at risk of domestic violence in making planned moves, resettlement support, and other second stage support services - may be required in communities where they are not presently available. There is also a need for effective, culturally appropriate services and programs to prevent abuse.

The occurrence of homelessness among those who have been evicted suggests the need for preventative approaches for individuals at risk of homelessness, as well as housing stability services to support those who were formerly homeless and are newly rehoused to retain their tenancies.\(^75\) The intensity and duration of the required supports will vary depending on the needs of the individual, but they may include housing advice, advocacy, help with claiming benefits, budgeting and debt management, accessing community resources and services, and helping find employment. Service providers identified the need for financial literacy education, education about home maintenance and supports related to being a tenant.

Contributing factors such as substance misuse, and mental health issues point to a need for support services geared towards individuals with mental health and addictions issues. Collaboration between the Department of Family Services, Nunavut Housing Corporation, local housing organizations, the Department of Health and community organizations is important to address the housing-related support needs of these individuals. Necessary services may include housing management, independent living skills supports, and home and personal care. Some service providers suggested the need for case conferencing of multiple service providers to identify and clarify issues regarding a client’s needs and goals, resolve conflicts or strategize solutions, and adjust service plans. Case conferencing is a formal, planned, and structured event separate from regular contacts. It should be noted that service providers in some communities, such as Cambridge Bay, are already engaging in case conferences as a way to provide holistic, coordinated, and integrated services across providers.

The relatively high incidence of homelessness as a result of a release from a correctional, health or mental health facility (12%) suggests the need for additional institutionally-based homelessness prevention strategies, including discharge planning, particularly from correctional facilities. Some government representatives also identified the need for collaborative discharge planning processes from health facilities in Nunavut. Intervention to identify and address an individual’s housing problems is important both when they enter and are released from the facilities. Housing advice and discharge planning while in the

\(^75\) It should be noted that the number of formal evictions that occur in Nunavut in a year are quite low. Based on data provided by the Rental Tenancies Office of the Department of Justice, there were only 14 evictions in Nunavut in 2013 resulting from non-payment of rent. The remaining 5 evictions were situations where the tenancy agreement had been frustrated as a result of a sudden change such as a fire (3 Orders to Terminate) or termination of employment (2 Orders to Terminate)
facility can help improve the individual’s chances of avoiding homelessness upon release. Correctional facilities already engage in discharge planning that involves ensuring housing arrangements, and some health and mental health facilities will keep individuals longer than medically required because they lack suitable alternative housing arrangements. However, best practice suggests that staff from the institution as well as external organizations including those providing outreach, advice, as well as local housing associations engage in close collaboration. Post-release housing and support can also be important. The profile below is one example of an individual who could benefit from improved discharge planning and services following release from a correctional facility.

A number of respondents reported that another member of their household forced or caused them to move, but not in combination with domestic violence (13%). This suggests that there are opportunities for homelessness prevention approaches that include family mediation schemes aimed at helping families grappling with unresolved conflict find ways to a solution.

In addition to the need for strategies to prevent homelessness and support individuals in “complex needs” groups in maintaining their housing once they are rehoused, the high incidence of homelessness for transitional reasons such as moving to a new community, a relationship breakdown or family change, being forced by a family member to move, or leaving an employer that provided housing suggests that a greater range of housing options is also critical to reducing the number of individuals who become homeless. The need to increase Nunavut’s public housing stock as well as other types of housing, such as affordable private market rental options, has been identified as a priority in the Government of Nunavut’s Long-Term Comprehensive Housing and Homelessness Strategy.

**RECENT SERVICE USE**

The vast majority of the individuals surveyed reported that they accessed some form of service in the past six months. Only 7% indicated that they did not access any services. Use of the Qayuqtuvik Soup

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**SINGLE 37 YEAR OLD MAN STAYING WITH HIS SISTER**

This was his first time experiencing homelessness and he had been homeless for 10 years.

What contributed to you losing your housing?

“I have been homeless since being released from jail”

Do you have any medical conditions?

“No”

Are you on the public housing waiting list?

“I was at one point, but I got discouraged. I think there are politics involved in how housing is allocated. I’m too shy to bring in my application since I have been in jail.”

What do you think would help you find housing?

“I would like to get a job, but I’ve had no job responses to my applications after being incarcerated. Otherwise I’d like to go back to school.”

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Footnote:

76 Staff from Baffin Correctional Centre indicated that as part of the discharge planning process they make sure the offenders are going back to suitable housing. However, in a lot of situations the housing is not their own home. If they are unable to arrange a suitable place the offender will not receive early parole and will be held to the end of their term. Unless it is a condition of the ex-offender’s probation that they cannot return to the community where they conducted the offence, ex-offenders are returned to the community where they were arrested.
Soup Kitchen (Iqaluit) was the most commonly reported service accessed (63% of all of the individuals surveyed in the three communities). Just over half (52%) of the individuals surveyed reported having stayed at a shelter sometime in the past six months. Other services used that were commonly reported by the individuals surveyed included Income Assistance and/or social services (49%), food bank or community freezer (47%), public health clinic (28%), and the Tukisigiarvik Centre (Iqaluit) (27%).

### Reported Service Use in the Past Six Months

<table>
<thead>
<tr>
<th>Service</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soup Kitchen (Iqaluit)</td>
<td>63%</td>
</tr>
<tr>
<td>Shelter</td>
<td>52%</td>
</tr>
<tr>
<td>Income Assistance or Social services</td>
<td>49%</td>
</tr>
<tr>
<td>Food bank or community freezer</td>
<td>47%</td>
</tr>
<tr>
<td>Public health clinic</td>
<td>28%</td>
</tr>
<tr>
<td>Tukisigiarvik Centre (Iqaluit)</td>
<td>27%</td>
</tr>
<tr>
<td>Job training/job supports</td>
<td>17%</td>
</tr>
<tr>
<td>Legal aid/clinic</td>
<td>13%</td>
</tr>
<tr>
<td>Wellness Centre (Cambridge Bay)</td>
<td>12%</td>
</tr>
<tr>
<td>Detox</td>
<td>6%</td>
</tr>
</tbody>
</table>

### DESIRE FOR HOUSING AND STATUS ON THE PUBLIC HOUSING WAITING LIST

People do not choose to be homeless: 95% of individuals surveyed want housing. The desire for housing is demonstrated by the following comments from individuals experiencing homelessness:

“It would be good to have our own place, people are sleeping on the floor. There are 6-7 of us in one room. It stresses everyone out.”

“This summer it will be ten years trying to get a unit. I have no place of my own. I want my own place. I’m tired.”

However, only two-thirds of individuals surveyed were on the public housing waiting list. Youth age 18 to 29 were less likely to be on the list (58%). Only half of the adults age 55 and over who were surveyed reported being on the public housing waiting list. Most (70%) women who reported domestic violence were not on the public housing waiting list.

The most common reason given for not being on the public housing waiting list was having arrears with the Nunavut Housing Corporation; 42% of those not on the list cited this as a reason. Arrears were cited as the reason by all of the respondents aged 55 and over for not being on the list, while this was a less common issue for young respondents, most of whom had not yet made an application. Victims of domestic violence had a variety of reasons for not being on the waiting list. These included disabilities that left them unable to maintain housing on their own, not applying, release from a correctional facility, a job search, or not having been in the community for long enough to be eligible to put their name on the waiting list.

77 Individuals must be 19 to be eligible for the waiting list.
78 Of the 24 individuals surveyed who reported not being on the public housing waiting list, 10 cited arrears as a reason for not being on the list.
79 Typically the individual must have lived in the community for a year before they are eligible to put their name on the public housing waiting list.
EXISTING HOMELESSNESS SERVICES

Preventing and addressing homelessness in each community requires a range of services, which can include emergency shelters, affordable housing, housing for individuals with particular needs such as mental illness, disabilities, and Elders, and support services to help individuals maintain and regain housing.

Nunavut has existing services in these areas. Many of these services are provided by various departments of the Government of Nunavut. Below are the departments that play a key role, along with the services they currently provide that help prevent and address homelessness among the most vulnerable Nunavummiut. While there are substantial gaps in the services available, the existing services can be built upon to address these gaps and better prevent and address homelessness.

<table>
<thead>
<tr>
<th>Department</th>
<th>Existing Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Family Services</td>
<td>Income Assistance</td>
</tr>
<tr>
<td></td>
<td>Senior Fuel Subsidy</td>
</tr>
<tr>
<td></td>
<td>Senior Citizen Benefit Program</td>
</tr>
<tr>
<td></td>
<td>Residential Care (elders homes, group homes for adults with developmental disabilities)</td>
</tr>
<tr>
<td></td>
<td>Guardianship</td>
</tr>
<tr>
<td></td>
<td>Homelessness Initiatives Grants and Contributions (used to provide funding to Sivummut House Women’s Shelter and Uquutaq Men’s Shelter)</td>
</tr>
<tr>
<td></td>
<td>Family Violence Services (shelters and safe homes)</td>
</tr>
<tr>
<td></td>
<td>Career Services</td>
</tr>
<tr>
<td></td>
<td>Community Wellness</td>
</tr>
<tr>
<td>Nunavut Housing Corporation</td>
<td>Public Housing</td>
</tr>
<tr>
<td></td>
<td>Emergency Repair Program</td>
</tr>
<tr>
<td>Department of Health</td>
<td>Residential Care (mental health treatment centre and group homes for adults with mental health issues)</td>
</tr>
<tr>
<td></td>
<td>Home Care and Continuing Care</td>
</tr>
<tr>
<td></td>
<td>Mental Health (including addictions services)</td>
</tr>
<tr>
<td>Department of Justice</td>
<td>Corrections</td>
</tr>
<tr>
<td></td>
<td>Community Justice</td>
</tr>
<tr>
<td></td>
<td>Rental Officer</td>
</tr>
<tr>
<td>Department of Education</td>
<td>Adult Education (literacy programs)</td>
</tr>
<tr>
<td></td>
<td>Apprenticeship Programs</td>
</tr>
<tr>
<td>Nunavut Arctic College</td>
<td>College Programs</td>
</tr>
</tbody>
</table>
Below is further information on the existing services in Nunavut to prevent and address homelessness.

**EMERGENCY SHELTER SERVICES**

Emergency shelters are designed for short-term stays during crises that cause one to become homeless. Emergency shelter services in Nunavut are very limited: there are two homeless shelters, one for men and one for women and their children, both located in Iqaluit.

Sivummut House is a 12-bed shelter for women and their children in Iqaluit operated by YWCA Agvvik Nunavut. The shelter is open and staffed 24 hours a day. Services offered at the shelter include emotional support, crisis intervention, individual advocacy and referral; in the past, life skills programming was also offered. Sivummut House clients also have access to individual counselling, a facilitated women’s group and culture-based parenting and sewing group programs at Qimaavik Transition House for women and children fleeing violence. Cooking and household chores at the shelter are shared by the clients.

Sivummut House consistently operates close to capacity. They have had to turn away women for many reasons, including full occupancy and Income Assistance ineligibility. Because the shelter relies on funding from Income Assistance, the YWCA Agvvik requires that clients be eligible for Income Assistance in order to stay at the shelter. Homeless women and their children stay at Sivummut House for up to several months. Many women stay at Sivummut house several times during a year. In a few instances individuals with developmental disabilities have stayed for an extended period because of the lack of supportive housing alternatives.

Sivummut House is able to assist some women in moving into their own accommodations in the public housing or rental market. During 2010-2011 (the latest data available), 11 women were assisted with moving into their own housing.

Women may move into accommodation arrangements with family or friends that sometimes do not last due to crowded conditions or social issues, and the women once again seek accommodation at Sivummut House. The periodic homelessness plays havoc with their ability to find and maintain employment. Sivummut House clients cannot continue to stay at the women’s shelter if their income is beyond a certain threshold, as the shelter depends on funding from Income Assistance to operate the shelter, thus perpetuating homelessness.

The YWCA has identified a need for a longer period of support and skill development for its clients. It has also identified the need for additional collaboration with service providers and the local housing association to increase clients’ capacity to be independent and find stable, long term housing. The YWCA has proposed a 12 unit transitional housing development in the community to increase housing options for women experiencing homelessness and transitioning out of Sivummut House.

The Uquutaq Society operates a 20-bed men’s shelter in Iqaluit. The shelter is open 15 hours a day, from 5pm to 8am. The shelter provides supper and breakfast, but does not offer any additional services or supports to navigate the service system or find housing. Men staying at the shelter often have limited opportunities to practice life skills such as cooking, cleaning, and managing a tenancy. This can hinder their ability to successfully maintain their housing once it has been arranged.
The shelter typically operates at 75% capacity. It served 105 different men in 2013. While some clients have brief stays at the shelter, many have been regular clients for over two years. Twenty-seven of the men stayed at the shelter at least once in six or more months in 2013.

The building used for the men’s shelter is in poor condition, and an alternate facility is required. The rent being paid for the existing building is quite high, which suggests that there may be feasible alternatives.

The Uquutaq Society has identified the need to offer clients additional services, although the specific service needs have not been explored. Some clients have affirmed that services based out of the shelter would be helpful (see below). The Uquutaq Society has also identified the need for a second-stage housing option (e.g. transitional or supportive housing) to enable men who have been long term clients of the shelter to transition into permanent housing.

It is important to work towards transitioning the territory’s homeless shelters back to their intended purpose of offering a short-term, emergency response to homelessness. In order to make the transition, the shelters must be re-positioned as entry points into housing. This would involve the establishment of necessary policies and additional services connected to the shelters to assist individuals in accessing and maintaining housing. It is suggested that this include building up the resources connected to the men’s shelter, on-site and through referrals to outside organizations, so that clients can connect to the services they need. This would require the men’s shelter to remain open during the day, so as to allow clients to access these services. It is also suggested that this include establishing housing workers at the shelters, who are either employed by the shelter or an outside organization, to provide assistance finding affordable rental housing and case management support. At Sivummut House, this may involve having a housing worker at the shelter during the day in addition to the current staff member who is responsible for the general operation of the shelter. The policy barrier limiting how much Sivummut House clients can earn while staying at the shelter should also be addressed. One potential solution would be for Sivummut

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**SINGLE MAN STAYING AT UQUUTAQ SHELTER**

He has been homeless twice, this time he has been homeless for a few days.

What contributed to you losing your housing?

“I lost my housing by being violent towards my common law. I’ve been homeless since I was released from jail.”

Do you have any medical conditions?

“I have addictions”

What do you think would help you find housing?

“It would be helpful if there was addictions treatment in Iqaluit. I go to AA, but it would be helpful if there was something more. I got some brochures about treatment facilities in the south, but I don’t understand the whole pamphlets.”

“It would be helpful if the shelter was open during the day so people could access services.”

“I would also like to work towards my GED, but I’m having a difficult time understanding instructions.”
House to have sufficient financial resources to cover expenses in cases where Income Assistance was not available. Alternatively, this could be accomplished through an Income Assistance policy change that allowed clients a grace period (perhaps 8 months) upon finding a job, so that Income Assistance can continue to be provided to Sivummut House after a client gets a job, and the client can save towards obtaining their own housing. Repositioning the homeless shelters as entry points for housing would also require additional housing options for shelter clients to transition into, such as transitional or supportive housing for individuals with complex needs including those who have been long term shelter clients. The housing should include supports such as counselling, financial literacy, life skills, parenting skills, etc. Where possible, the housing and services should integrate Housing First approaches, wherein clients are transitioned as quickly as possible into permanent housing, mental health and additions services are available in combination with the housing, and the housing is not contingent on sobriety or treatment. Housing First approaches have been shown to be an effective way to address homelessness. Repositioning the shelters would require additional resources and collaborative efforts between the government, shelters, community members, and other service providers in the community.

There is a need for additional research on the needs of shelter clients and an evaluation of existing shelter policies and services to identify existing effective services and which adaptations or additional interventions are required. Once the policy and service framework is in place for re-positioning the shelters, targets and standards for service delivery and outcome measures for interventions/programs should be established.

In addition to the two homeless shelters, family violence shelters for women and children fleeing violence are located in Iqaluit, Rankin Inlet, Kugaaruk, Cambridge Bay, and Kugluktuk. Safe houses – private homes contracted by the Department of Family Services which take in women and their children fleeing violence on a temporary basis - are located in six other communities. The remaining 14 communities offer no emergency shelter. Women and children fleeing violence are moved to other Nunavut communities where services exist, typically Iqaluit. As mentioned, many individuals experiencing homelessness must rely on relatives or friends in order to find shelter, or stay in places not meant to be long term housing. Stakeholders from some communities without emergency shelter services identified the need for such services in their community.

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PROFILE

L. is in her fifties and has been staying at Sivummut women’s shelter for two years. It’s the first time she has been homeless, but she has been without her own place for four years. She’s grateful for the services available such as social services and the soup kitchen. “We’re lucky to have staff like them.” She became homeless after she returned from medical leave in Ottawa and she still suffers from health problems. What is keeping her from having her own home is that she owes money due to damages to a unit as well as arrears. “I am trying to move on, but my old bills have been keeping me down.” She says the shelter policy prevents doesn’t allow for her to have a job. “Still, the staff are helping, but they are from different cultures.”

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Shelters and Safe Houses in Nunavut

<table>
<thead>
<tr>
<th>Shelter Type</th>
<th>Name</th>
<th>Location</th>
<th>Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter for Homeless Men</td>
<td>Uqutaq Society Shelter</td>
<td>Iqaluit</td>
<td>20 beds</td>
</tr>
<tr>
<td>Shelter for Homeless Women (and their children)</td>
<td>Sivummut House</td>
<td>Iqaluit</td>
<td>12 beds</td>
</tr>
<tr>
<td>Shelter for Women and Children Fleeing Violence</td>
<td>Qimaavik Transition House</td>
<td>Iqaluit</td>
<td>21 beds</td>
</tr>
<tr>
<td></td>
<td>Kataujaq Society Shelter</td>
<td>Rankin Inlet</td>
<td>8 occupants</td>
</tr>
<tr>
<td></td>
<td>Kugaaruk Family Violence Shelter</td>
<td>Kugaaruk</td>
<td>4 occupants</td>
</tr>
<tr>
<td></td>
<td>Cambridge Bay Family Violence Shelter</td>
<td>Cambridge Bay</td>
<td>12 occupants</td>
</tr>
<tr>
<td></td>
<td>Kugluktuk Family Violence Shelter</td>
<td>Kugluktuk</td>
<td>4 occupants</td>
</tr>
<tr>
<td>Safe Houses for Women and Children Fleeing Violence</td>
<td>Arctic Bay</td>
<td></td>
<td>2 houses</td>
</tr>
<tr>
<td></td>
<td>Cape Dorset</td>
<td></td>
<td>1 house</td>
</tr>
<tr>
<td></td>
<td>Pangnirtung</td>
<td></td>
<td>1 house</td>
</tr>
<tr>
<td></td>
<td>Pond Inlet</td>
<td></td>
<td>4 houses</td>
</tr>
<tr>
<td></td>
<td>Igloolik</td>
<td></td>
<td>3 houses</td>
</tr>
<tr>
<td></td>
<td>Arviat</td>
<td></td>
<td>1 house</td>
</tr>
</tbody>
</table>

**AFFORDABLE AND SUPPORTIVE HOUSING**

Every community has public housing that offers rents geared to the tenant’s income. There are over 5,130 such units across the territory, which does not adequately meet existing need. There are over 1,500 applicants on the public housing waiting list, and almost two-thirds (63%) of the public housing units are crowded or in need of repair.81

Nunavut has very limited supportive housing, and most of the accommodations offering supports are institutional care facilities. There are ten facilities across Nunavut, with different target groups including children and youth who are in the care of the state, adults with mental illness, adults with developmental disabilities, and Elders who require 24-hour care and supervision (see the chart on the following page for details). Many individuals who cannot access the supportive housing they need depend on their families for care. The Department of Health and Department of Family Services ensure that Nunavummiut who require residential care receive these services, but at times these must be obtained outside of the territory. A number of stakeholders identified the need for additional supportive housing for adults with mental health issues, Elders, and adults with developmental disabilities. The Framework for the GN Long-Term Comprehensive Housing Strategy also identified gaps in the supply of purpose-built transitional (time-limited) and supportive (permanent) housing.82

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81 Nunavut Housing Corporation and Nunavut Bureau of Statistics, Housing Needs Survey, 2010
82 Nunavut Housing Corporation, Igluliuqatiguqilaaqtuq Framework for the GN Long-Term Comprehensive Housing Strategy, 2012
Institutional and Supportive Facilities in Nunavut

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Name</th>
<th>Location</th>
<th>Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children and Youth (below the age of 19) who are in the care of the state</td>
<td>Ilaggerugut Children’s Group Home</td>
<td>Iqaluit</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Kalvik Group Home</td>
<td>Cambridge Bay</td>
<td>6</td>
</tr>
<tr>
<td>Adults with Mental Illness</td>
<td>Akausarvik Mental Health Treatment Facility</td>
<td>Iqaluit</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>Cambridge Bay Group Home</td>
<td>Cambridge Bay</td>
<td>12</td>
</tr>
<tr>
<td>Adults with Developmental Disabilities</td>
<td>Isaccie Group Home</td>
<td>Iqaluit</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Rankin Inlet Group Home</td>
<td>Rankin Inlet</td>
<td>8</td>
</tr>
<tr>
<td>Elders (over the age of 50) who require 24-hour care and supervision</td>
<td>Pairijait Tigumivik Centre</td>
<td>Iqaluit</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Andy Aulatjut Centre</td>
<td>Arviat</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Martha Talrug Centre</td>
<td>Baker Lake</td>
<td>8</td>
</tr>
<tr>
<td>All Ages</td>
<td>Naja Isabelle Home</td>
<td>Chesterfield Inlet</td>
<td>10</td>
</tr>
</tbody>
</table>

Support Services

There are a number of baseline services accessible in all communities that help prevent people from becoming homeless and maintain housing, including: various forms of income assistance; counselling and mental health services; homemaking and personal care; eviction prevention; employment, education, and training services; and various wellness services. There are also a number of services that are available in some, but not all communities, including community freezers, food banks, and breakfast programs. Some communities have a drop in centre, wellness centre, or friendship centre which offers various programs and services including counselling, teaching traditional skills, nutrition programs, breakfast programs and food and clothing banks. Family violence shelters and Sivummut House offer supports to the women and children staying there, although the level of supports varies by shelter. In Iqaluit, day programming is available for persons with mental health issues, primarily previous residents of the Akausarvik Mental Health Facility. A second-stage worker assists women who have left the Qimaavik shelter with accessing local services and rebuilding their lives. Some of the existing services are described in more detail in the following table, although this is not an exhaustive list.

Expanding the services available to help prevent individuals from losing their housing, move back to permanent housing, and maintain their housing once they have regained it can be done by building on a range of existing services. In some cases there may just be a need to better connect individuals experiencing homelessness to existing services; in others there may be opportunities to use existing resources to refine a portion of the services to better target individuals who are homeless; while in other cases service expansion would be required.

Support Services Available to Individuals Experiencing Homelessness and At-Risk

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Description</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income Support</td>
<td>• Financial assistance is available to qualifying individuals, including individuals who have recently lost employment (Employment Insurance provided by Service Canada), as a last resort to assist individuals and families meet the basic food and housing needs (Income Assistance through Family Services), and benefits to Elders who are Beneficiaries (Elders Benefit Plan through Nunavut Tunngavik Inc.) as well as other government pensions and assistance.</td>
<td>All Communities</td>
</tr>
<tr>
<td><strong>Type of Service</strong></td>
<td><strong>Description</strong></td>
<td><strong>Location</strong></td>
</tr>
<tr>
<td>--------------------</td>
<td>----------------</td>
<td>-------------</td>
</tr>
</tbody>
</table>
| **Counselling and Mental Health Services** | • Telephone counselling is available every evening for individuals in crisis (Nunavut Kamatsiaqtut Help Line).  
• Mental health counselling is available in all communities (Department of Health). | All Communities |
| **Homemaking, Nursing and Personal Care** | • Individuals in all communities can apply for homemaking, personal care, nursing care, respite care, and in-home rehabilitation services for those with a long-term illness or disease, disability, or otherwise need support in their daily life (Department of Health). | All Communities |
| **Eviction Prevention** | • Staff from the local housing organization, such as the Tenant Relations Officer, and Rental Officer (Department of Justice) work with individuals at risk of formal eviction to negotiate alternate solutions such as repayment plans. | All Communities |
| **Employment, Education, and Training Services** | • Employment, education, and training services are available including employment and career counseling, workshops in resume writing, life skills, interview and job search skills, job search and job maintenance, budgeting and financial assistance, job support clubs and job placement services for individuals receiving or have recently received Employment Insurance benefits (Department of Family Services), counselling and training for individuals receiving Income Assistance (Department of Family Services), adult basic education and apprenticeship programs (Nunavut Arctic College).  
• Employment and training services for Inuit are also provided by regional Inuit associations or their subsidiaries. | All Communities |
| **Wellness Services** | • Various culturally sensitive wellness services are provided at the community level, including mental health, child development, healthy babies, injury prevention; and parenting skills. | All Communities |
| **Food Security and Clothing Services** | • Community freezers are located in various communities.  
• Some communities such as Iqaluit (Niqqirik Nuatsivik Food Bank) and Cambridge bay have food banks (Cambridge Bay Community Wellness Centre).  
• Breakfast programs and food are also offered in some communities at the drop in centre/ wellness centres/ friendship centre, including in Iqaluit, Cambridge Bay and Rankin Inlet.  
• Iqaluit also has a soup kitchen (Qayuktuvik Soup Kitchen).  
• Some communities also offer clothing banks, including Cambridge Bay (Cambridge Bay Community Wellness Centre) and on a limited basis in Iqaluit (Piviniit Thrift Store). | Various Communities including Iqaluit, Cambridge Bay, and Rankin Inlet |
| **Emergency Shelter-Based Supports** | • Women and children staying at the family violence shelters in various communities or homeless shelter in Iqaluit receive some supports such as emotional support, crisis intervention, information, individual advocacy, and counselling, although the level of supports varies by shelter. | Iqaluit, Cambridge Bay, Rankin Inlet, Kugaaruk, and Kugluktuk |
| **Drop in Centres / Wellness Centres / Friendship Centres** | • Drop-in centres offer various programs and services, including counselling, teaching traditional skills, nutrition programs, breakfast programs, food, and clothing banks. This includes the Tukisigiarivik Centre in Iqaluit, Cambridge Bay Community Wellness Centre in Cambridge Bay, and Pulaarvik Kablu Friendship Centre in Rankin Inlet. | Various Communities including Iqaluit, Cambridge Bay, and Rankin Inlet |
| **Housing Stability Services** | • A second stage worker supports women who have left the Qimaavik shelter in accessing local services and rebuilding their lives (YWCA Agvvik). | Iqaluit |
| **Day Programs** | • Day programming, including medication administration, lunch, and life skills supports are available to persons with mental health issues, primarily previous residents of Akausiarvik (Akausiarvik Mental Health Facility). | Iqaluit |
A number of strategies are required to effectively respond to homelessness and help people move back into permanent housing. The homeless individuals surveyed identified the need for supports to assist with finding employment, job training or education (52%); repaying arrears (26%); maintain their housing once they obtain housing (24%); applying for public housing (20%); alcohol or substance treatment (15%); mental health (14%); health needs (12%); as well as the need for cultural supports (10%).

<table>
<thead>
<tr>
<th>Service</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public or subsidized housing</td>
<td>53%</td>
</tr>
<tr>
<td>Help finding employment, job training or education</td>
<td>52%</td>
</tr>
<tr>
<td>Help finding an affordable place</td>
<td>37%</td>
</tr>
<tr>
<td>More Income Assistance</td>
<td>34%</td>
</tr>
<tr>
<td>Assistance with repaying arrears</td>
<td>26%</td>
</tr>
<tr>
<td>Help to keep housing once housed</td>
<td>24%</td>
</tr>
<tr>
<td>Help accessing alcohol or drug treatment</td>
<td>15%</td>
</tr>
<tr>
<td>Mental health supports</td>
<td>14%</td>
</tr>
<tr>
<td>Help addressing health needs</td>
<td>12%</td>
</tr>
<tr>
<td>Cultural supports</td>
<td>10%</td>
</tr>
<tr>
<td>Child care</td>
<td>10%</td>
</tr>
<tr>
<td>Help accessing detox services</td>
<td>9%</td>
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<tr>
<td>Assistance applying for public housing</td>
<td>8%</td>
</tr>
<tr>
<td>Services for children</td>
<td>8%</td>
</tr>
<tr>
<td>Services in preferred language</td>
<td>7%</td>
</tr>
<tr>
<td>More housing</td>
<td>3%</td>
</tr>
<tr>
<td>Ability to work while at Sivummut House</td>
<td>2%</td>
</tr>
<tr>
<td>Shelter$^{13}$</td>
<td>2%</td>
</tr>
</tbody>
</table>

$^{13}$ It is not surprising that the need for emergency shelter services was not mentioned more frequently, as survey participants were asked what would help them find and maintain housing, and emergency shelters are not permanent solutions to homelessness. This does not necessarily mean that there is not a need for emergency shelters, because there will always be crises that result in homelessness.
Individuals experiencing absolute homelessness were much more likely to identify the need for housing retention support (40%), as well as the need for mental health supports (23%), alcohol or drug treatment (23%), assistance addressing health needs (23%), detox services (15%), and cultural supports (15%). Women reporting domestic violence were also more likely to report the need for supports. In addition to identifying the need for supports for themselves, just over a quarter of these women identified the need for child care (27%) or other services for their children (27%). Youth were also more likely to identify the need for supports, while adults age 55 and over were less likely to identify the need for supports.

The most common support mentioned by survey respondents was assistance with finding employment, job training or education. Service providers also identified the need for such supports, along with policies to incent Income Assistance recipients to obtain employment. Employment can help individuals maintain housing and prevent homelessness. In addition to its economic benefits in helping individuals maintain their housing, employment can support personal dignity and help individuals reconnect to the community. Employment services are available in Nunavut, but those focused on individuals with experiences of homelessness are very limited. Conventional employment approaches have been found to be ineffective for individuals with various personal challenges, but supported employment can be successful. It may therefore be necessary to explore the availability, accessibility and appropriateness of existing employment, job training and education services to assist individuals experiencing homelessness, and establish better connections and refine or expand services to more effectively target individuals who have had experiences with homelessness.

Another commonly identified need was for assistance repaying arrears (see below). Arrears can include overdue rent or damages charges. There are many factors that can lead to arrears, including low income or intermittent work, and life crises such as a relationship breakdown. In some cases these issues are compounded by poor physical or mental health, substance use issues, literacy or numeracy problems, and housing other family or community members in need. Most of the time, arrears do not ultimately result

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**SINGLE 52 YEAR OLD WOMAN STAYING AT SIVMMUT HOUSE**

This was her first time experiencing homelessness, and has been homeless for four years.

What contributed to you losing your housing?

“I moved back from [outside of the territory] where I was getting treatment for health issues. I wanted to be with my parents. I have arrears with housing from damages that my family members caused. I owed $1,400.”

Do you have any medical conditions?

“Yes, I had a transplant”

Are you on the public housing waiting list?

“Yes”

What do you think would help you find housing?

“I’ve been trying to get funding to pay off arrears. I would like to get a job, but the shelter won’t allow it. I am trying to move on, but my old bills have been keeping me down. I’ve been living at the shelter for two years.”

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in evictions. Nunavut Housing Corporation’s eviction policies acknowledge the difficult circumstances tenants often face. Local housing organizations engage in a number of eviction-prevention strategies, including providing information on how to pay rent and avoid arrear, in-person consultations, and attempts to establish a repayment agreement. It is also important to note that this study did not explore the particular nature of respondents’ arrears, including whether they were related to past due rent or damages charges, nor did it fully explore whether the arrears resulted in an eviction because the household was not maintaining a payment plan with the local housing organization, or the household gave up their housing for other reasons. The study also did not ask whether the individual was currently engaged in a repayment plan for their arrears. The reasons for arrears and the support needs of individuals with (or at risk of) arrears need to be better identified and addressed. Additional financial literacy education has already been identified as a priority in the Government of Nunavut’s Long-term Comprehensive Housing and Homelessness Strategy. Service providers also identified the need for supports to help individuals initiate and continue with repayment plans for arrears.

For individuals with complex needs, including mental health or substance misuse issues (both with arrears and without), there is a need for adequate, suitable and affordable housing and supports. A number of respondents, particularly those experiencing absolute homelessness, identified the need for ongoing supports to help maintain housing, addictions services or treatment, or mental health supports. Service providers also identified the need for services that help individuals experiencing homelessness to transition into housing and services to help individuals maintain their housing, including additional supports for individuals with mental health and addictions. Supports to maintain housing stability are particularly important for individuals with lengthy or multiple episodes of homelessness.

A number of trauma-informed models for providing housing and supports exist for individuals with complex needs including mental health or substance misuse issues. One approach is to provide supports based out of emergency shelters. Service providers and government representatives suggested a need for additional services in shelters to assist individuals in accessing and maintaining housing. Shelter-based services are meant to assist with breaking the cycle of homelessness by providing and/or connecting clients with appropriate services in the community and adequate, suitable, and affordable housing. Services could include assistance with accessing appropriate housing, providing or referring to medical services, mental health service, substance misuse services, employment programs, life skills training, and financial assistance.

Another approach is to provide outreach services, which offer a first point of contact and link to longer-term services. One of the Qayuqtuvik Soup Kitchen clients spoke about the need for additional outreach: “It would make it a lot easier if services came into the Soup Kitchen. I’m pretty sure a lot of people don’t know where to go.”

Providing more intensive case management is another alternative, where a worker is responsible for providing practical supports as required, addressing new issues that arise, and assisting the client in accessing existing supports in the community. Practical supports may be related to the life skills of maintaining housing, landlord relations or relations with other tenants or visitors.

85 Nunavut Housing Corporation, GN Long-Term Comprehensive Housing Strategy, 2012
A further model is supportive housing, where there is no limit to the length of stay and support is available on an ongoing basis. The need for supportive housing was identified by many service providers, particularly in Iqaluit where there is a need to transition individuals with complex issues or experiencing absolute homelessness out of shelters and into housing, and provide supportive housing for individuals with severe mental health issues. Service providers in a few other communities also identified the need for supportive housing for mental health clients. Some informants also suggested that need for Elders housing as well day programs and shared accommodation with supports (e.g. group home) for adults with complex needs such as mental illness, addictions, and intellectual disabilities.

Housing First is a relatively recent approach which has proven to be successful at reaching individuals who have not been successfully supported by traditional approaches. In a Housing First model, housing is provided to individuals experiencing homelessness while also addressing substance misuse or mental health issues, and access to housing is not contingent on sobriety or treatment. This is a new policy direction endorsed by the Federal government. Housing First models typically offer a variety of services through collaborations with a range of partners. Some service providers and government representatives suggested that Housing First approaches be incorporated, where possible, into initiatives to address homelessness.

Another important strategy to address homelessness is to ensure a range of housing options, including housing with supports, to help move individuals out of homelessness, ideally as quickly as possible. Almost two-thirds (64%) of individuals surveyed identified either access to public housing or help finding an affordable place as something that would be helpful for them to find and maintain stable housing. The need for more public and affordable housing was almost unanimously identified by service providers and government representatives. Some also pointed to the need to make better use of vacant housing stock in communities. It was also suggested that an increased diversity in affordable housing options, such as room-and-board options or apartment-sharing arrangements would be helpful. Others suggested the need for alternative building standards to allow for lower cost construction. Service providers believe that all Nunavummiut have a right to decent housing, in decent surroundings and at affordable costs. Given the evidence of homelessness and inadequate living conditions in Nunavut, they expressed concern that the current responses to these issues are not adequately responding to the needs of low-income Nunavummiut. Concerned about not being able to adequately respond to clients’ housing issues, one Social Worker said: “In social work you never want to leave someone where you find them, but with housing, sadly we do our best, but may leave them in the same place as we found them because there are no housing options.”

Ensuring people have the income they need also reduces the chances that they will lose their housing after obtaining it. Approximately one-third (34%) of individuals surveyed identified that having more Income Assistance would be helpful in finding and maintaining stable housing. A quote from one of the individuals surveyed speaks to the challenge of balancing the costs of various necessities: “We can’t keep up with rent and food; are we supposed to choose between going hungry and having a place of our own?” Some service providers also identified the need for services to assist with food security.

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EMERGENCY SHELTER SERVICES

While the goal is ultimately to prevent homelessness in the first place, no matter how well developed preventive measures are, people will still face crises that lead to homelessness. Service providers and government representatives in some communities suggested that establishing emergency shelter services in their community would be helpful for housing crises and short-term “respite” stays that give other family members a break from housing the individual, though they identified the need for assistance with establishing emergency shelter services: “We need support and resources to set up a homeless shelter” (Service Provider). It was also suggested that emergency service availability would reduce people’s apprehension to ask violent individuals to leave the home because of a lack of alternatives. Refer to the profile below of one woman experiencing homelessness who also suggested that having shelter services in her community would be helpful.

Some communities identified a specific target group in need of emergency shelter services, such as Cambridge Bay, where the need for a men’s shelter was expressed and potential existing buildings in the community that could be converted for that purpose were identified. Other communities had ideas for temporary solutions that would involve shared use of existing community infrastructure such as gymnasiums or community centres, or using hotel rooms that would otherwise be empty.

It is important to note that stakeholders from some communities did not identify a need for emergency shelter services, or were not convinced it would be a helpful approach in their community. Some thought that there would be a stigma around accessing the services and there is a desire to create stability as opposed to crisis management.

SINGLE
40 YEAR OLD
WOMAN SHE SAYS IS STAYING “ANYWHERE I CAN FIND”

This was her first time experiencing homelessness and she had been homeless for 4 years.

What is your current living situation?
“Anywhere I can find. I’ve been anywhere and everywhere. I’m currently staying with a relative – a young lady and her two kids. I’m getting old and still living in someone else’s house. Being in someone’s house is very hard, anger starts building up, especially when they complain about the food. I try to make hats to make money, but have to give it to the people I’m staying with, but I need it too.”

What contributed to you losing your housing?
“My mom moved to another community because she needed more care, now my family is split up. I moved in with my father, but he is now getting old and told me he can’t be there for me, and asked me to start looking after myself. Just by talking about this it hurts a lot. It is tiring. You worry a lot.”

Do you have any medical conditions?
“Because of being homeless I got addicted to drugs to relax and worry less.”

What do you think would help you find housing?
“Public housing. It would also be helpful if there were shelters.”
ACCESS TO AND AWARENESS OF SERVICES

In Iqaluit specifically, individuals experiencing homelessness and stakeholders identified the need for both groups to better understand what services exist and how to access them, for example in the area of mental health. A number of individuals experiencing homelessness identified that they did not know where to go for assistance with finding housing. A common suggestion was to create and maintain a service directory or resource guide identifying the relevant services in the community. Another suggestion was to increase promotion of services through traditional and social media. They also suggested the need for efforts to support people as they navigate the available services. Even if a client is informed of an available service they may not be in a situation where they can arrange an appointment on their own, follow through with the appointment, complete any required paperwork, and follow up on their waiting list status.

COLLABORATION AND COMMUNITY ACTION PLANNING

To more effectively address homelessness, it is important to know what services exist, where there are gaps, and to take a collaborative, integrated approach to addressing the issue. This will require interdepartmental collaboration, with different departments taking leadership roles in different areas. The Government of Nunavut departments with a key role to play are listed on page 37 of this report, along with the existing services they provide that help prevent and address homelessness and assist the most vulnerable Nunavummiut.

Stakeholders suggested that increased collaboration, community involvement and community action planning would help address homelessness. This includes more interagency cooperation to build a better support system. Some service providers and government representatives pointed to the need to develop a collective plan that would involve collaborative, community driven actions, and it was suggested that there are community or business organizations that may be interested in assisting with solutions (for example, the Co-op may be interested in building affordable housing units) but who cannot tackle the problem alone.

87 Nunavut Housing Corporation, Igluliqatigilannilaqta GN Long-Term Comprehensive Housing Strategy, 2012
HOMELESSNESS AMONG NUNAVUMMIUT IN GATEWAY COMMUNITIES

Some Nunavummiut leave the territory and move to gateway cities like Yellowknife, Montreal, Ottawa, Edmonton, and Winnipeg. A number of studies have looked at the reasons behind these migrations and found common themes: receiving medical services; accompanying or living with a family member, partner, sick person, or friend; employment; education; domestic violence; personal problems; and the allure of city life.\(^8\)

For Inuit men in Montreal, relocation to detention centres was also identified as a reason.\(^9\) Lack of housing has been identified as a reason for migration, although to a lesser extent, and service providers and government representatives in Nunavut consulted for this study agreed that it was not common for someone to relocate outside the territory for the primary purpose of finding shelter. This does, however, happen on occasion. In Cambridge Bay, service providers mentioned that there have been instances where service providers have assisted individuals to go to Yellowknife in order to access shelter and services.

Although most Nunavummiut may not leave Nunavut for the primary purpose of finding shelter, some later find themselves homeless. There are also occasions where Nunavummiut become homeless immediately after travelling to gateway communities while accompanying someone on medical travel, missing their return flight, and not having the financial means to return to their home community. Existing studies, feedback from service providers in gateway communities and interviews conducted with some homeless Nunavummiut in gateway communities suggest that many relocated as youth and have now been in the gateway community for a significant period of time.

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Nunavummiut make up a significant portion of individuals experiencing homelessness in some of the gateway communities. For example, in Yellowknife, the Salvation Army has reported that approximately half of its male day shelter clients under the age of 30 were Nunavummiut (approximately 40 young men). Some of the young men accessing the day shelter came as children with their mothers who were fleeing violence. At the women’s shelter operated by the Centre for Northern Families, 30% of their clients were originally from Nunavut (approximately 20 women per month, some staying on a short term basis, others long term). Some of these women who were interviewed by the researchers said that they would probably go back to Nunavut if they had the financial means and if there were shelter or housing opportunities there.

Inuit also contribute to a significant proportion of individuals experiencing homelessness in Montreal. Research by Donat Savoie, Special Advisor to the Office of the President of Makivik Corporation, suggests that a significant proportion of the approximately 200 Inuit from Nunavut residing in Montreal are low-income or homeless. Between 2011 and 2013, Savoie found a steady increase in both the number and percentage of homeless Inuit in Montreal (mainly men). It was found that the majority of Inuit who come to Montreal stay for a relatively long period of time. Among those interviewed, almost half had lived in Montreal for at least 10 years, 15% for one to five years, and 15% for less than six months. Approximately half (52%) of low income and homeless Inuit wish to stay in Montreal. Low income and homeless Inuit in Montreal reported that their top priority was a place to stay.

Homelessness is also an issue among Inuit in Ottawa. In 2005 Tungasuvvingat Inuit and Inuit Non-Profit Housing Corporation prepared a report on the best approach to fill the gaps in housing for Inuit in Ottawa. As part of the report, four shelters were identified as being the most likely to serve Inuit in Ottawa: Shepherds of Good Hope, Union Mission, Salvation Army and Cornerstone. Cornerstone serves homeless women, and the others serve homeless men. None of the shelters had data on how many of their clients were Inuit, but the three men’s shelters estimated that 5% of their clients were Inuit. Cornerstone estimated that 12% of the women they served were Inuit. Inuit Non-Profit Housing Corporation, the only subsidized housing provider for Inuit in Ottawa, identified a chronic need for housing for single Inuit, as many were “couch surfing” with friends or relatives living in other Inuit Non-Profit Housing Corporation units while they were waiting for their own place. More recently, an article on Inuit in Ottawa reported that Inuit comprise almost 25% of Shepherds of Good Hope’s downtown shelter population, and over 50% of the population of its harm reduction program. The Manager of transitional housing programs at Shepherds of Good Hope says that the majority of Inuit in Ottawa are Nunavummiut, and he attributes the relocation of Nunavummiut to Ottawa for treatment as being responsible for a large increase in Ottawa’s Inuit population.

The number of Inuit experiencing homelessness in Winnipeg appears to be low. Only 4 of the 300 people (1.3%) staying in emergency homeless shelters, public places, or other sites not meant to be housing who were surveyed for the Winnipeg Street Health report in 2011 self-identified as Inuit. Less than one
percent of the 525 individuals interviewed for a 2004 study on the mobility process of First Nations, Metis, and Inuit people who had recently moved to Winnipeg were Inuit. Although the final results did not include responses from Inuit due to lack of data, some of the findings may still be relevant. The study found that upon first arrival, and through each survey, respondents had a 50% chance of finding a place of their own, and otherwise lived temporarily with friends and family. Many of the individuals living temporarily were estimated to have been doing so for close to two years. Upon first arriving in the city, many respondents lacked sufficient knowledge of existing services and supports to assist them in making the transition to urban living. Once they arrived, 70% said housing (both rent subsidized and market) was the most important service they needed, regardless of why they had moved to Winnipeg.

A further study of Inuit in Winnipeg conducted by the Social Planning Council of Winnipeg in 2008 found that “housing repeatedly emerged as an important area of concern for Inuit arriving in Winnipeg, both in terms of receiving guidance about where to look for appropriate shelter and the availability of safe affordable temporary shelter while they attempt to find more permanent housing.”

Unfortunately data on Inuit experiencing homelessness in Edmonton is not available. Some 878 individuals identified as Aboriginal in the Edmonton homeless count in 2012, but interviews with staff from Homeward Trust confirmed that further breakdowns by First Nations, Metis, and Inuit are not available.

Collaboration between service providers in Nunavut and service providers in these cities to better meet the needs of people from Nunavut will be important. This also suggests a need for more research on the relation between homelessness and migration.

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97 To be included in the final analysis of results, the interview participants had to complete three interviews over a fifteen month period. No Inuit completed all three interviews.
CONCLUSIONS

Homelessness in Nunavut is an acute and complex challenge experienced by far too many Nunavummiut.

In order to address the issue of homelessness, the problem must be understood. It is also important to be able to understand whether interventions are having positive impacts. Basic research on the experiences of the homeless, with a focus on the causes and solutions to homelessness, can result in better policy and programs to address homelessness.

The Profile of Homelessness in Nunavut involved the first homeless count to be conducted in Nunavut. The results of the survey, as well as consultations with service providers, funders and other stakeholders, have identified several avenues worth considering in the design of interventions to reduce homelessness in the territory. Addressing the issue requires a collaborative approach involving all levels of government, as well as active involvement at the community level.

Many of the individuals surveyed have been experiencing homelessness for a significant length of time, and many shelter clients have relied on the shelter for long periods of time. Re-positioning Nunavut’s homeless shelters as entry points into housing through policies, services in the shelters, and transitional and supportive pathways into housing will be important in helping these individuals access and maintain housing of their own.

In Nunavut, homelessness is experienced almost exclusively among Inuit. Strengthening culturally-based services and resources will help address the needs of Inuit facing homelessness.

Youth make up a significant portion of Nunavummiut experiencing homelessness. There are limited services and housing alternatives designed to meet the unique needs of youth. Youth-specific interventions are likely to be important in addressing the housing and support needs of this group.

Arrears were identified by a number of those surveyed as a barrier to finding and maintaining housing. The reasons that lead to arrears and the needs of those struggling with or at risk of arrears need to be better identified and addressed.
Many of the individuals surveyed suggested that assistance with employment, job training, and education would help them in finding and maintaining housing. Various employment, job training, and education services exist in Nunavut. Exploring the availability, accessibility and appropriateness of existing employment, job training and education services for the homeless, identifying opportunities for better connections, and refining and expanding the services available would make an important contribution to the fight to end homelessness in the territory.

Many suggested that having housing supports or a housing worker would help them maintain their housing after they found housing. Expanding such services would likely be important in helping those with more complex needs maintain their housing.

Almost one quarter of individuals experiencing absolute homelessness suggested that addictions and mental health services would assist them in finding and maintaining housing. Increasing and improving the access and appropriateness of mental health and addictions services will be important in addressing absolute homelessness in Nunavut.

Some people are staying in institutional care settings longer than necessary due to a lack of housing. Strategies including collaborative discharge planning processes and increased access to housing alternatives (such as supportive housing) will help meet the housing needs of these individuals and reduce cost burdens on health, mental health and correctional facilities.

The homeless count shows that access to adequate, suitable, and affordable housing is a barrier to addressing homelessness. Ensuring a range of housing options in the territory will help service providers and homeless individuals find the most appropriate pathways back into housing.

Stakeholders have identified the need for increased collaboration and community action planning to address homelessness. The development of collaborative, community driven action plans to address homelessness would likely be an important next step in addressing homelessness.

Before the results of the study are used to inform the development of policy to address homelessness, it is important that they be presented in community forums for assessment and discussion. Priority needs and appropriate interventions can then be identified. It is anticipated that meetings will be convened in Iqaluit, Rankin Inlet, and Cambridge Bay to validate the results of the study. A homelessness action plan for Nunavut will be developed following the completion of this work.
Based on the survey of individuals experiencing homelessness and the consultations with those who work with the homeless, it is recommended that the approach to addressing homelessness in Nunavut include the following strategies. These strategies are in keeping with the best practices identified in the previous research related to homelessness in Nunavut, *The Little Voices of Nunavut: a Study of Women’s Homelessness North of 60.* However, specific gaps and solutions are best identified and addressed at the community level. Given the high rates of trauma experienced by homeless people, and given the strong connection between experiences of violence and homelessness for women, in all cases it is important that strategies be gender-specific, trauma-informed and culturally safe.

**RESEARCH, PLANNING, COMMUNITY AND CLIENT ENGAGEMENT, AND STRENGTHENING SOCIAL CAPITAL:**

Research, planning and engagement are important for making good decisions about homelessness policy and programs. Community development is also important for establishing and maintaining effective interventions. This includes:

**COMMUNITY PLANNING**

Community plans to address homelessness can take a broad look at the available services, identify gaps, and determine priority actions for addressing homelessness in the community. It is helpful to establish a committee of representatives from different groups, including government staff, people who work with the homeless and at-risk, Inuit community members, individuals who are homeless or have been homeless, the business community, etc. to lead the planning process and oversee the community’s efforts to address homelessness.

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ENGAGEMENT OF THE BROADER COMMUNITY

Building partnerships between government, the private sector, the not-for-profit sector and ordinary citizens will make an important contribution to the fight against homelessness. The Little Voices of Nunavut: a Study of Women’s Homelessness North of 60 states that “these partnerships focus on immediate, practical steps (e.g. allocating underutilized buildings for use as housing), raising funds, and mobilizing the political will for policy change. They help leverage resources that any one stakeholder may not have, but that combine to make a difference.” Public education about the realities of homelessness is also important, and “can help tap into philanthropy (time, goods and money), can decrease the stigmatization and discrimination that homeless people face, and decrease “not-in-my-backyard” opposition to public housing developments and other service centres.”

DATA AND RESEARCH

Data and research are necessary to make good service-planning decisions. Where possible, this research should be community-based. Practical ways to collect better data on homelessness on an ongoing basis should be explored. Having a Homelessness Management Information System can be a helpful way to collect data and coordinate the services provided to each person.

INvolvement of the homeless in the decisions that affect them

Delivering effective services requires regular client engagement to identify needs and provide feedback on existing services. Individuals experiencing homelessness also benefit from volunteering and employment opportunities. As noted in The Little Voices of Nunavut: a Study of Women’s Homelessness North of 60, client engagement “encourages people to grow and change and encourages hope in the face of feeling overwhelmed.”

REPAIRING SOCIAL CAPITAL AND STRENGTHENING CULTURAL VALUES AND PRACTICES

Addressing homelessness in Nunavut means repairing social capital and strengthening cultural values and practices. This involves transforming the resilience and capacity of the community to mobilize and respond to homelessness in a culturally appropriate way.

COORDINATED SYSTEM OF SERVICES:

A number of programs and services exist to support people who are homeless or considered at risk. Government and service providers must coordinate their work to ensure there is a system of support giving people timely access to the housing and services they need. Services need to be “holistic and individualized,” and “the flexibility to create innovative services where gaps exist is an important aspect of this approach.” Improving collaboration among housing-policy stakeholders is one of the priorities that has been identified in the Government of Nunavut’s Long-term Comprehensive Housing and Homelessness Strategy. A coordinated system of services includes:

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HOMELESSNESS PREVENTION
Preventing individuals from losing their housing will be a key part of a homelessness strategy. Intervening early on helps reduce the likelihood that housing problems will escalate. Services can vary but could include housing advice, family mediation, domestic violence victim support, tenancy sustainment, and possibly one-time financial assistance.

PATHS TO HOUSING AND SERVICES WHEN LEAVING INSTITUTIONS
Institutionally-based homelessness prevention strategies, including housing advice, discharge planning, and pathways to housing can help decrease the chances of someone becoming homeless upon release from correctional or health facilities. It can also reduce costs for the health system by avoiding situations where individuals stay in health facilities longer than necessary due to a lack of housing options upon discharge.

OUTREACH
Connecting people to the housing and supports that are available is essential, and outreach is an important way to make sure individuals are aware of and have access to services.

SERVICES TO HELP PEOPLE TRANSITION FROM HOMELESSNESS TO HOUSING
Supports are required to helping individuals break the cycle of homelessness. This can include assistance with accessing appropriate housing, medical services, mental health services, addictions services, employment programs, life skills training, and financial assistance. For those with addictions or mental health issues, this may include a Housing First approach where housing is provided along with help with addictions or mental health issues, but there is not a requirement to stay sober or go through treatment to get housing. A number of these services already exist in communities throughout Nunavut. It is important that homeless individuals are connected to these services.

HOUSING SUPPORT SERVICES TO HELP PEOPLE MAINTAIN HOUSING
Some individuals who have been homeless need housing stability services to maintain their housing once they obtain it. The intensity and duration of the required supports will vary depending on the needs of the individual, but they may include housing advice, budgeting and debt management, housing management, independent living skills, and assistance accessing community resources and services. For some, the required services may also include addictions services or treatment, and/or mental health supports. Connecting individuals to existing services is an important part of meeting these needs.

POVERTY, INCOME AND EMPLOYMENT
In order to maintain housing, individuals must have sufficient income. Geared-to-income rents, Income Assistance, and employment support are all important services in Nunavut that help individuals maintain their housing. It should be noted that while employment support is certainly part of the answer, approaches to addressing homelessness must take into account the impact of trauma and poverty on an individual’s capacity to find and maintain employment.
RANGE OF HOUSING:
There needs to be a range of housing options. This includes:

EMERGENCY SHELTER SERVICES
Having emergency shelter services for times of crisis is a necessary approach in many communities; people need an option for temporary accommodation when they have nowhere else to turn.

HOUSING
The availability of adequate, suitable, and affordable housing is critical to addressing homelessness. Some individuals just need affordable housing, others need affordable housing along with support services, and some with more complex needs, such as mental health or addictions, need permanent supportive housing. Addressing the gaps in Nunavut's housing continuum was identified as a priority in the Government of Nunavut's Long-term Comprehensive Housing and Homelessness Strategy.

RECOMMENDATIONS FOR FUTURE RESEARCH

Additional research is recommended in two main areas. The first involves building a better understanding the issues associated with homelessness in Nunavut. This includes learning more about the needs of sub-groups of individuals experiencing homelessness, including shelter clients, families with children, women, men, Elders, and youth/young adults. Practical ways to collect better data on homelessness on an ongoing basis should be examined. Longitudinal research on pathways into and out of homelessness, as well as migration patterns, would be of benefit to understanding the issues related to homelessness in Nunavut. It is also recommended that research efforts be directed towards the territorial, federal, and municipal policies affecting the ability of Nunavut's communities to address homelessness, and that potential changes to these policies be identified.

The second area for additional research involves understanding and developing interventions to address homelessness in Nunavut. This includes research related to policies and programs that might better address the needs of shelter clients. For example, research should be done on policies and services to re-position the homeless shelters as points of opportunity to transition into housing. Appropriate and effective housing options (time-limited "transitional" housing versus "supportive" options with no time limit) for individuals transitioning out of shelters and out of institutional care should be investigated, as well as the services required to help these individuals achieve independence and stability. Research should also be done around the services necessary for homeless people dealing with health conditions, including mental health and addictions, and how these services can be made more accessible. Ways to integrate Housing First approaches into efforts to address homelessness in Nunavut should also be considered.

Other areas where policies and programs require research include the causes of arrears and supportive strategies for those dealing with arrears, as well as the availability and appropriateness of employment, job training and education services available to the homeless.
Research related to interventions to address homelessness in Nunavut should include existing homelessness services. Evaluation of existing homelessness services is recommended to highlight effective policies and programs, show results, and identify areas where services can be improved. Further inquiry might also help build a better understanding of Inuit/client views on cultural needs, what culturally-based services are/could be available, and how cultural practices and knowledge can be incorporated into existing homelessness services.

To support effective practices, targets and standards for service delivery and outcome measures should be developed as part of the development of future programs. Eligibility criteria and prioritization rules for various programs could be determined to specify which groups of individuals are eligible or have priority for certain services. For example, intensive case management support may only be necessary for people exhibiting characteristics of those who would remain homeless for a significant length of time without additional assistance, such as those with a serious mental health issue or addictions, or who have already been homeless for over a year. This helps support the effective use of limited resources. Tools and practices for intake and assessment are also necessary to identify which individuals and families are eligible for the programs.

It is important that research and planning be conducted at the community level to identify gaps, priorities and actions for addressing homelessness.

**RECOMMENDATIONS FOR FUTURE COUNTS**

It is recommended that future homeless counts take a community-based approach engaging people with lived experiences of homelessness and front-line workers in every step of the research process. Establishing a committee of key partners to plan and conduct the count would provide the necessary structure to decide on appropriate methods to collect baseline data. Also, counts raise public awareness for the issue and further mobilize the community to take action collectively. Refer to Appendix 4 for further suggestions for future counts and specific suggestions of changes to future surveys of individuals experiencing homelessness.


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APPENDIX 1:
RESULTS FROM DIRECT COUNTS IN IQALUIT, RANKIN INLET, AND CAMBRIDGE BAY

IQALUIT

**UNDERSTANDING OF HOMELESSNESS**

Stakeholders in Iqaluit recognize homelessness as a complex issue that has different meanings to different people. Many stakeholders were reluctant to specifically define homelessness, and thought that it was best for the individual to determine for themselves whether they were homeless.

Although there wasn’t consensus on the terms that should be used to describe homelessness, the majority of service providers, funders, and other stakeholders suggested that the terms “absolute homelessness,” “hidden homelessness,” and “at-risk of homelessness” resonated with them. However, some had differing opinions of the living situations that fall within each of these terms.

There was consensus about the living situations that fall under the term absolute homelessness. It was understood that this refers to individuals staying in the following places:

- Places not intended to be housing, such as shacks, cabins, sheds, tents, private vehicles, or abandoned buildings
- Shelters for individuals who are homeless
- Shelters for individuals impacted by family violence
- Temporary accommodation due to loss of housing, such as a hotel.

There was also agreement that hidden homelessness includes individuals who are:

- Staying temporarily in the housing of relatives or friends, including house-sitting
- Homeless, but staying in correctional facilities, medical institutions or supported accommodation
- Staying in a dwelling that is occupied illegally or on land with no legal rights.
However, some stakeholders considered people in situations of extreme over-crowding, severely unaffordable housing, violence and/or interpersonal victimization, and/or unstable housing to be experiencing hidden homelessness, while others considered them to be at-risk of homelessness.

There was agreement that individuals staying in housing that is unfit for habitation because it is beneath a minimum standard as a result of being inappropriately or inadequately maintained, and individuals who are housed but are unable to maintain housing stability due to lack of supports, are at risk of homelessness.

Stakeholders also recognized that being homeless is about more than just someone’s living situation, and is ultimately about social exclusion. They spoke about homelessness being about having lost relationships, not being welcomed family or society, or feeling hopeless as a result of being shut out from society.

**CONTEXT OF HOMELESSNESS IN IQLUIT**

**FACTORS THAT INCREASE THE RISK OF HOMELESSNESS**

Stakeholders identified a number of social factors which contribute to people becoming at risk of homelessness in Iqaluit. These include a loss of self-reliance, trauma, dependence on social assistance and public housing, high rates of poverty, high costs of living, a limited housing market, significant housing shortages, and lack of serviced land that can be used to develop new housing. They also identified a number individual and family risk factors, or life experiences, which contribute to the risk of homelessness, including alcohol or substance misuse, poor mental or physical health, intellectual disabilities, low literacy, including financial literacy, low level of education and lack of qualifications, limited life management skills, physical or sexual abuse, and relationship breakdown.

**HOUSING AND SERVICES**

Service providers and government representatives observed that there is an insufficient supply of permanent, affordable and supportive housing, and that aside from joining long housing waiting lists or moving in with other families, the pathways out of homelessness for individuals and families are limited. There are no transitional or supportive housing options for people leaving shelters, mental health facilities, or corrections or other adults with mental health issues or physical and/or intellectual disabilities. There are also no housing alternatives specifically for youth, individuals with public housing arrears, or people in care currently residing outside of the community.

For those experiencing homelessness, there are limited supports to assist them with the transition to permanent housing. Stakeholders expressed concern that while people are experiencing homelessness they often have limited opportunities to practice life skills, further limiting their ability to successfully maintain housing when they do obtain housing. Stakeholders also observed that supports are very limited to maintain housing independently, including equipping people with skills such as financial literacy, being a tenant, cooking, etc.

Some concerns were raised about existing policy barriers to moving out of homelessness. This includes the limits placed on how much Sivummut House clients can earn while staying at the shelter, due to the shelter’s reliance on funding from Income Assistance. The City’s by-law which currently does not permit the Uquutaq men’s shelter to be open during the day is also seen as a barrier to increased support for homeless men.
AWARENESS OF AVAILABLE SERVICES
Service providers and government representatives suggested that some people at-risk of homelessness or experiencing homelessness don’t know where to access appropriate services or are unable to navigate the service system on their own. Some service providers also indicated that they also are not aware of existing services and how best to connect their clients to these services.

NUMBER OF HOMELESS

ABSOLUTE HOMELESS
The point-in-time homeless count identified 72 individuals experiencing absolute homelessness in Iqaluit on one day in February, 2014, including 57 staying in shelters and 15 who reported that they were staying in places not meant to be housing.

Over the course of a year:
• Seventy-one different women and ninety-two children from Iqaluit stay at Qimaavik Transition House
• Thirty-three different women and twenty-four children stay at Sivummut House Women’s Shelter
• One hundred and five men stay at Uqutaq Men’s Shelter.

HIDDEN HOMELESS
Due to methodological limitations, this study did not count the number of individuals experiencing hidden homelessness. However, the Nunavut Housing Needs Survey conducted in 2010 identified 350 individuals in Iqaluit who were living in temporary accommodation without a usual home elsewhere.

Using a broader definition of hidden homelessness, if one were to consider everyone who is without their own home and staying with relatives or friends to be homeless, it could be estimated that 720 individuals are experiencing hidden homelessness in Iqaluit.¹⁰⁵

At the time of the study, individuals experiencing hidden homeless included 11 individuals staying at the Akausiarvik Mental Health Facility longer than required due to lack of permanent housing arrangements and an estimated 20 offenders housed at the Baffin Correctional Centre and Nunavut Women’s Correctional Facility who do not have permanent housing arrangements.¹⁰⁶ Staff from Baffin Correctional Centre indicated that as part of the discharge planning process they make sure the offenders are going back to suitable housing. However, in a lot of situations the housing is not their own home. If they are unable to arrange a suitable place the offender will not receive early parole and will be held to the end of their term. Unless it is a condition of the ex-offender’s probation that they cannot return to the community where they conducted the offence, ex-offenders are returned to the community where they were arrested.

¹⁰⁵ This calculation is based on the public housing waiting list and the survey with individuals self-identifying with homelessness.
¹⁰⁶ Based on staff conducted surveys as Baffin Correctional Centre.
RESPECTS OF THE SURVEYS WITH INDIVIDUALS EXPERIENCING HOMELESSNESS

The results of the surveys with individuals experiencing homelessness in Iqaluit were as follows:
- Seventy-seven individuals completed the survey based on where they reported they would be sleeping
- Ten respondents who were staying in a room or house of relatives or friends did not self-identify as experiencing homelessness
- Sixty-seven respondents experiencing absolute homelessness or staying in a room or house of relatives or friends self-identified as experiencing homelessness.

The following results are from 67 surveys conducted in Iqaluit with individuals experiencing absolute homelessness or staying with family or friends and self-identifying as homeless.

GENDER
Sixty percent of the individuals surveyed were men and forty percent were women.

AGE
The average age was 38 years old, and ages ranged from 18 to 70 years old.

<table>
<thead>
<tr>
<th>Age</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-29</td>
<td>29%</td>
</tr>
<tr>
<td>30-39</td>
<td>32%</td>
</tr>
<tr>
<td>40-49</td>
<td>23%</td>
</tr>
<tr>
<td>50-59</td>
<td>8%</td>
</tr>
<tr>
<td>60-69</td>
<td>6%</td>
</tr>
<tr>
<td>70-79</td>
<td>2%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

MIGRATION
Almost three quarters (73%) of the individuals surveyed grew up in Iqaluit, while one-quarter (27%) were from elsewhere.

HEALTH CONDITIONS
Over half (57%) of the individuals surveyed reported at least one health condition. Addictions were the most common (19%), followed by a medical condition (16%) and mental illness (12%).

<table>
<thead>
<tr>
<th>Health Conditions</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addiction</td>
<td>19%</td>
</tr>
<tr>
<td>Medical condition</td>
<td>16%</td>
</tr>
<tr>
<td>Mental illness</td>
<td>12%</td>
</tr>
<tr>
<td>Physical disability</td>
<td>4%</td>
</tr>
<tr>
<td>Intellectual disability</td>
<td>3%</td>
</tr>
<tr>
<td>None</td>
<td>43%</td>
</tr>
</tbody>
</table>
FIRST TIME OR MULTIPLE EXPERIENCES WITH HOMELESSNESS
For just over half (52%) of the individuals surveyed, this was their first experience with homelessness. The remaining (48%) had previously had a homeless episode.

LENGTH OF TIME EXPERIENCING HOMELESSNESS
The length of respondents' current period of homelessness ranged from four days to 26 years, with an average length of 5.3 years. Approximately three quarters (76%) had been homeless for over a year, and 40% had been homeless for over five years.

<table>
<thead>
<tr>
<th>Length of Current Period of Homelessness</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Than 1 Month</td>
<td>19%</td>
</tr>
<tr>
<td>1 Month to Less Than 1 Year</td>
<td>5%</td>
</tr>
<tr>
<td>1 Year to Less Than 2 Years</td>
<td>10%</td>
</tr>
<tr>
<td>2 Years to Less Than 5 Years</td>
<td>25%</td>
</tr>
<tr>
<td>5 Years to Less Than 10 Years</td>
<td>20%</td>
</tr>
<tr>
<td>10 Or More Years</td>
<td>20%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

FACTORS CONTRIBUTING TO HOMELESSNESS
The most commonly reported reasons contributing to their homelessness were that income was not enough to afford housing (30%), the individual broke up with a spouse or partner or there was another family change (29%), the individual experienced family violence (27% of all individuals surveyed and 52% of women), a family member forcing or causing them to move (25%), using alcohol or drugs (17%), eviction (14%), having moved to the community (13%), and mental illness (11%).

 Contributions to Becoming Homeless

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income is not enough to afford housing</td>
<td>30%</td>
</tr>
<tr>
<td>Broke up with a spouse or partner, or other family change</td>
<td>29%</td>
</tr>
<tr>
<td>Hurt or threatened by a relative or another member of the household</td>
<td>27%</td>
</tr>
<tr>
<td>Family, partner or roommate forced or caused them to move</td>
<td>25%</td>
</tr>
<tr>
<td>Using alcohol, using drugs or other substances</td>
<td>17%</td>
</tr>
<tr>
<td>Evicted</td>
<td>14%</td>
</tr>
<tr>
<td>Moved to the community</td>
<td>13%</td>
</tr>
<tr>
<td>Mental illness</td>
<td>11%</td>
</tr>
<tr>
<td>Income from work dropped or stopped</td>
<td>10%</td>
</tr>
<tr>
<td>No income</td>
<td>10%</td>
</tr>
<tr>
<td>Released from prison/jail</td>
<td>8%</td>
</tr>
<tr>
<td>Removed through RCMP/Justice involvement</td>
<td>6%</td>
</tr>
<tr>
<td>Family member or personal illness</td>
<td>5%</td>
</tr>
<tr>
<td>Fire</td>
<td>5%</td>
</tr>
<tr>
<td>Released from health facility</td>
<td>5%</td>
</tr>
<tr>
<td>Intellectual disability</td>
<td>3%</td>
</tr>
<tr>
<td>Left employer that provided housing</td>
<td>3%</td>
</tr>
<tr>
<td>Income Assistance dropped or stopped</td>
<td>3%</td>
</tr>
<tr>
<td>Released from mental health facility</td>
<td>2%</td>
</tr>
</tbody>
</table>
DESIRE TO MOVE OUT OF HOMELESSNESS
All but one of the individuals surveyed wanted housing, but only two-thirds reported being on the public housing waiting list. Arrears were identified as the most common reason why they were not on the waiting list.

SERVICES ACCESSED
The most common service accessed by respondents in the past six months was the Qayuktuvik Soup Kitchen (79%), followed by shelters (65%), and the Niqink Natsivik Food Bank (53%).

### Services Accessed in the Past Six Months

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soup Kitchen</td>
<td>79%</td>
</tr>
<tr>
<td>Shelter</td>
<td>65%</td>
</tr>
<tr>
<td>Food bank</td>
<td>53%</td>
</tr>
<tr>
<td>Income Assistance or social services</td>
<td>45%</td>
</tr>
<tr>
<td>Tukisigiarvik Centre</td>
<td>35%</td>
</tr>
<tr>
<td>Public health clinic</td>
<td>32%</td>
</tr>
<tr>
<td>Job training/job supports</td>
<td>20%</td>
</tr>
<tr>
<td>Legal aid/clinic</td>
<td>12%</td>
</tr>
<tr>
<td>Detox</td>
<td>6%</td>
</tr>
</tbody>
</table>

REPORTED SERVICES THAT WOULD ASSIST IN FINDING AND MAINTAINING HOUSING
The majority (66%) of individuals surveyed identified access to public housing or help finding an affordable place as a potential solution to their homelessness. Almost half thought that assistance finding employment, job training or education would be helpful. Many (41%) suggested the need for additional Income Assistance, and 31% indicated that having assistance with repaying arrears would be helpful. Almost one third (31%) indicated that they would like to have help to keep their housing once they obtain housing.

### Respondents' Suggestions of Things That Would Help Them Find Housing

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public or subsidized housing/ Help finding an affordable place</td>
<td>66%</td>
</tr>
<tr>
<td>Help finding employment, job training or education</td>
<td>48%</td>
</tr>
<tr>
<td>More income assistance</td>
<td>41%</td>
</tr>
<tr>
<td>Assistance with repaying arrears</td>
<td>31%</td>
</tr>
<tr>
<td>Help to keep housing once you have it (e.g. housing supports/housing worker)</td>
<td>31%</td>
</tr>
<tr>
<td>Help getting alcohol or drug treatment</td>
<td>17%</td>
</tr>
<tr>
<td>Mental health supports</td>
<td>16%</td>
</tr>
<tr>
<td>Help addressing your health needs</td>
<td>14%</td>
</tr>
<tr>
<td>Cultural supports</td>
<td>11%</td>
</tr>
<tr>
<td>Services in your preferred language</td>
<td>9%</td>
</tr>
<tr>
<td>Help getting detox services</td>
<td>9%</td>
</tr>
<tr>
<td>Not on public housing waiting list and need help with public housing application</td>
<td>9%</td>
</tr>
<tr>
<td>Child care</td>
<td>9%</td>
</tr>
<tr>
<td>Services for children</td>
<td>8%</td>
</tr>
<tr>
<td>Ability to get job while staying at the shelter</td>
<td>5%</td>
</tr>
<tr>
<td>Building more housing</td>
<td>3%</td>
</tr>
</tbody>
</table>
**ADDRESSING HOMELESSNESS**

**HOUSING AND SUPPORTS**

Key stakeholders agreed that the priority is to assist people to move out of homelessness. Within the overall group of individuals experiencing homelessness, stakeholders thought that the particular priority is to assist those experiencing absolute homelessness to move out of homelessness. One of the key suggestions in this area was to establish supports within the emergency shelters to assist individuals with their transition into permanent housing. Supports to help individuals maintain their housing once they have housing was also identified as a priority.

The need for both transitional housing and supportive housing for individuals with higher needs was identified. Specific housing priorities identified by stakeholders include: transitional or supportive housing for individuals exiting the Uqutaq Men's Shelter, Sivummut House Women's Shelter, and Akuisarvik Mental Health Treatment Facility, as well as others in the community with severe mental health issues; and supports to transition individuals out of the men’s shelter. Stakeholders would like to see Housing First approaches integrated into the housing with supports, where possible.

**ACCESS TO AND AWARENESS OF AVAILABLE SERVICES**

Another priority that was identified was to ensure that both individuals and service providers understand what services exist to help people find and maintain housing and how to access them. Helping support individuals to navigate services was also identified as a priority. Specific suggestions included developing a service directory/resource guide/handbook of available services, promotion of services through traditional and social media, outreach services, and navigation and referrals between organizations.

**COLLABORATION**

An important priority was developing more partnerships and better collaboration between organizations, as well as improved understanding and information sharing between stakeholders. The need for a committee to address homelessness was identified. Stakeholders also identified the need to develop a community plan that would identify priorities for the community in addressing homelessness and strategies to collaboratively respond to those priorities.

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**RANKIN INLET**

**UNDERSTANDING OF HOMELESSNESS**

The service providers and government representatives consulted found it difficult to come up with a definition of homelessness. Some stakeholders considered everyone on the public housing waiting list (who is not a transfer) to be homeless, even though some may be staying with family on a long-term basis.

**CONTEXT OF HOMELESSNESS IN RANKIN INLET**

**HOUSING**

There is an insufficient supply of public housing units, and wait times range from three to six years. Service providers identified that it can be very challenging to wait this long to get housing, particularly without strong coping and life skills. Furthermore, due to the length of the list, it is not possible for individuals to have a place of their own at the time they become adults. It was suggested that individuals
“aging out” of foster care have a direct pathway to homelessness, since they can’t get a public housing unit for a number of years. The policy of having to live in Rankin Inlet for one year before being able to get on the public housing waiting list was also identified as a barrier to timely access to housing, as was the fact that arrears are an issue for many individuals experiencing homelessness who previously had housing. It was suggested that some individuals could benefit from additional financial literacy or life skills to maintain their housing.

Overcrowding is an issue in most housing units, and the stock is old and in poor condition. Stakeholders identified that overcrowded living conditions significantly impact mental health, lead to cases of sexual abuse, and contribute to suicides in the community. Although stakeholders pointed out a particular need for larger units, the new units being constructed in the community are one and two bedroom units.

Women fleeing abuse have nowhere to go after their stay in the shelter. They quickly return to the abuser, because having to move in with another family would be more stressful. It was also reported that some people commit crimes just to go back to jail to have a warm place to stay. Some parents with insecure housing situations are forced to seek alternative accommodations for their children including foster care or temporary shelter with a friend or relative, and then face difficulties reuniting their families once they secure housing.

**INCOME**
Service providers and government representatives raised the concern that current levels of Income Assistance are insufficient to cover the cost of living in Rankin Inlet. Likewise, the minimum wage isn’t a living wage. In particular, service providers struggled with situations where Income Assistance won’t cover the rent of an individual who loses their employment and is renting privately. It was thought that this would be less of a challenge in Iqaluit, where more housing options and shelters exist. Another concern was that Income Assistance won’t help cover fuel or power expenses for homeowners on Income Assistance.

**SOCIAL ISSUES**
Service providers and government representatives agreed that housing issues are often the root cause of mental health issues, and not vice versa. It was thought that housing issues are a contributing factor to some individuals in the community having committed suicide.

**SERVICES**
Service providers expressed frustration with the lack of tools that they had to address homelessness. For example, there is no funding available to cover a ($267) plane ticket to another community to allow an in-patient at the Health Centre to be discharged to stay with family. Instead, individuals are kept longer than required as an in-patient. It was mentioned that one of the only things service providers can do to assist with homelessness is to personally go with an individual experiencing homelessness to family members to ask if they can stay with them, but the rejection is brutally painful, and it pits families against families. There are no alternative accommodations for individuals causing issues with family members they are staying with. The only alternative is to call the police, and no one wants to do this to their family members. Because there are no formal alternatives for accommodating housing crisis situations, when an individual doesn’t have family in the community, there are significant challenges in securing temporary accommodation alternatives.
The lack of a continuum of care in the territory also gave service providers cause for concern. It was noted that the Department of Health has mental health clients in southern Canada that can’t return to Nunavut because there is nowhere for them to go. There are also no housing options for individuals with mental health issues who return to the community after treatment, and it was suggested that returning to overcrowded conditions often leads to destabilization and creates challenges for everyone in the household. The Health Centre has a couple of individuals receiving acute care in southern Canada who they are reluctant to take back because there are no supportive housing arrangements for them, and they would therefore have to occupy inpatient beds at the Health Centre. In the past three years the Health Centre has struggled with a rising number of individuals requiring additional levels of care (generally long-term care) occupying in-patient beds. Service providers and government representatives identified that there are no services to support individuals experiencing homelessness with their transition into permanent housing.

**NUMBER OF HOMELESS**

**ABSOLUTE HOMELESS**

Nine individuals experiencing absolute homelessness were counted indirectly based on reports from service providers, including 4 who were sheltered and 5 who were unsheltered (i.e. staying in places not meant to be housing).

Over the course of a year 31 women and 46 children stay at the Kataujaq Society Shelter.

**HIDDEN HOMELESS**

Due to methodological limitations, the homeless count did not count the number of individuals experiencing hidden homelessness. However, a minimum of 20 individuals were identified who were staying with relatives or friends and experiencing hidden homelessness. This includes 12 individuals reported by service providers to be “couch surfing” in addition to the eight survey respondents who were staying with relatives or friends and self-identified as experiencing homelessness.

The Nunavut Housing Needs Survey conducted in 2010 identified 110 individuals in Rankin Inlet who were temporary residents without a usual home elsewhere.

Using a broader definition of hidden homelessness, if one were to consider everyone who is without their own home and staying with relatives or friends to be homeless, it is estimated that there are almost 300 people experiencing homelessness in Rankin Inlet based on the public housing waiting list and surveys of individuals experiencing homelessness.

Other individuals experiencing hidden homelessness at the time of the count include: two people staying at the Rankin Inlet Health Centre longer than medically required due to lack of permanent housing arrangements, (three to four patients per month are typically in this situation); 17 (of 32) offenders housed at the Rankin Inlet Healing facility who do not have permanent housing arrangements; three homeless individuals who had recently been transferred to a medical facility outside of the territory; two who were temporarily without a permanent home as a result of a fire.
RESULTS OF THE SURVEYS WITH INDIVIDUALS EXPERIENCING HOMELESSNESS

The results of the surveys with individuals experiencing homelessness were as follows:
- In total, 11 individuals completed the survey based on where they reported they would be sleeping.
- Three respondents who were staying in a room or house of relatives or friends did not self-identify as experiencing homelessness.
- Eight respondents who were staying in a room or house of relatives or friends did self-identify as experiencing homelessness.

Because of the small number of surveys conducted with individuals self-identifying as experiencing homelessness, limited detail has been provided related to the surveys to ensure that anonymity is maintained and because any detailed breakdowns could not be considered to be a reliable representation of the homeless population in the community. The following numbers are results from eight surveys conducted in Rankin Inlet with individuals staying with family or friends who self-identified as homeless.

GENDER
Three of the respondents who self-identified as experiencing homelessness were women and five were men.

AGE
The average age was 44 years old, and ages ranged from 23 to 57 years old.

ALONE OR PART OF A FAMILY UNIT
Almost three-quarters (74%) of the adults counted were single and the remaining quarter were accompanied by a partner or children.

MIGRATION
Just over two-thirds of the individuals surveyed grew up in Rankin Inlet (68%).

HEALTH CONDITIONS
38% of survey respondents reported having an addiction and 25% reported having a medical condition. These numbers should be interpreted with caution due to the small sample size.

FIRST TIME OR MULTIPLE EXPERIENCES WITH HOMELESSNESS
For the majority (63%) of the individuals surveyed, this was their first experience with homelessness. The remaining (37%) had experienced previous periods of homelessness.

LENGTH OF TIME EXPERIENCING HOMELESSNESS
On average, respondents had been homeless for 2.8 years, ranging from five months to four years.

FACTORS CONTRIBUTING TO HOMELESSNESS
The most commonly reported reasons contributing to respondents’ homelessness were a family member making them or causing them to leave home (38%), and moving from another community (38%).
DESIREE TO MOVE OUT OF HOMELESSNESS
All of the individuals surveyed wanted housing, and 71% reported being on the public housing waiting list.

REPORTED SERVICES THAT WOULD ASSIST IN FINDING AND MAINTAINING HOUSING
The vast majority (88%) of individuals surveyed reported public housing as a solution to their homelessness. Two individuals mentioned that they thought a shelter would be helpful. No other services besides housing or emergency accommodations were frequently mentioned by survey respondents.

ADDRESSING HOMELESSNESS
Service providers and government representatives discussed that all Nunavummiut have a right to decent housing, in decent surroundings, at affordable costs. They expressed concern that the current responses to these issues were not adequately responding to the needs of low income Nunavummiut, and that while solutions are available, the Government was not being decisive. There was consensus about the need for additional affordable housing, as well as supportive housing for those dealing with mental health issues. One stakeholder indicated that they had been involved in the preparation of several business cases for different types of supportive housing, that each had been turned down or stalled. One suggestion to help address housing needs was for alternative building standards to be permitted to allow for lower cost construction. It was also suggested that the Nunavut Housing Corporation review its policies related to housing allocations and arrears.

Service providers identified the need for a collaborative discharge planning process at the Rankin Inlet Health Centre focused on addressing clients’ housing needs. It was also suggested that an Elders day program would reduce the demands on the health care system from Elders living in insecure housing situations.

EMERGENCY SHELTER SERVICES
Although service providers and government representatives indicated that a shelter would only be a “band-aid” solution to the problem, they agreed that the community would benefit from a respite shelter that would take clients on short-term basis when their families needed a break. One suggestion for a temporary measure was to have cots in the gym, but for additional resources are needed in the community to assist in any solutions that are developed.

COLLABORATION
Service providers and government representatives identified a need to work together to make Rankin Inlet a better community. For example, there are empty staff housing units that could be better utilized. They suggested a need for additional collaboration and community planning related to homelessness.
CAMBRIDGE BAY

**UNIVERSITY OF HOMELESSNESS**

Service providers and government representatives discussed the fact that homelessness is a broad term, and it is difficult to draw the line between who is homeless and who isn’t. Many service providers and government representatives agreed that from their perspective, everyone in an overcrowded situation is homeless:

“Anyone in a three bedroom with more than six people is homeless.”

“If you are properly housed, I imagine that your nuclear family would be housed, not your extended family.”

The following comments from service providers and government representatives point to other examples of situations where they would consider the individual to be homeless:

“Although the Elder may feel unsafe in their own home, it is not the child’s house who is staying there, so I would consider the child to be the one that is homeless.”

“People are homeless when they are retired and have to take care of children and grandchildren in their house.”

“Young women make rash decisions to have roofs over their heads. These people are homeless too.”

**CONTEXT OF HOMELESSNESS IN CAMBRIDGE BAY**

**FACTORS CONTRIBUTING TO HOMELESSNESS**

Service providers and government representatives identified a number of factors that contribute to homelessness in Cambridge Bay. These include overcrowding, the price of rental housing, a lack of employment opportunities, the inability to pay rent or buy groceries, relocations to Cambridge Bay, low education, family violence, addictions, and mental health issues. In attempting to regain housing, it was identified that arrears can sometimes be insurmountable.

**HOUSING**

One service provider stated that “there is not enough housing – period.” Another reported that “I see about seven people every day and two or three of them talk about housing issues.” It was discussed that affordable rental housing is not available, and even private market rental housing in general is very difficult to find.

Service providers and government representatives identified a number of negative consequences of the inadequate housing supply. Because Inuit have a strong belief in not turning their back on family, they put themselves at risk by accommodating family members. Service providers mentioned that Elders have expressed concerns about their safety and ability to stay in their own homes. Individuals trying to get Emergency Protection Orders are often concerned that the person being removed from the home may not have a place to go. Kids wander the streets late at night because they don’t want to go back to their overcrowded homes. Also, if one person in the house has a mental illness it adds to the stress in the home.
Service providers and government representatives also identified many strategies that people use to cope with the inadequate supply of housing. Some youth with limited interest in attending school have been known to register at Nunavut Arctic College for the primary purpose of obtaining student accommodation, often using their student housing to accommodate other siblings as well; if the siblings are discovered they must leave, and end up homeless. Some young women experience or put themselves at risk of abuse and violence in order to have a place to stay. It was mentioned that there was one person who was known to go to the RCMP building and ask to be locked up just to stay warm. Due to a lack of other housing alternatives, and no other choice than to remain homeless, many women and children fleeing violence return to the abuser after a stay at the shelter.

INCOME

Service providers indicated that one of the barriers to increased self-reliance is that it is difficult for people to move from Income Assistance to work, because without proper financial planning it would be a disaster to cover the rent increases.

SERVICES

Service providers identified gaps in the infrastructure available for responding to homelessness. It was mentioned that individuals sometimes have to live outside the territory just to access appropriate housing and supports. There have been occasional instances where young males have been assisted to go to Yellowknife where they can access shelter and services. The services exist in Cambridge Bay, but not the accommodations. Individuals are sent out of the community for treatment, but return to the community without their own place, making it difficult for them to adjust habits. Service providers indicated that one of the barriers to addressing homelessness is that they have no budget related to homelessness.

**NUMBER OF HOMELESS**

**ABSOLUTE HOMELESS**

Three individuals who were experiencing absolute homelessness were counted indirectly based on reports from service providers. These individuals were staying in locations not meant to be housing.

Over the course of a year, 38 women and 32 children stay at the Cambridge Bay Family Violence Shelter.

**HIDDEN HOMELESS**

Due to methodological limitations, the homeless count did not include the number of individuals experiencing hidden homelessness. However, 19 respondents were staying with relatives or friends and self-identified as experiencing homelessness. Due to the unreliability of the data for Cambridge Bay, the Nunavut Housing Needs Survey conducted in 2010 did not publish an estimate of the number of individuals in Cambridge Bay who were temporary residents staying in another person’s dwelling without a usual home elsewhere.

Using a broader definition of hidden homelessness, if one were to consider everyone who is without their own home and staying with relatives or friends to be homeless, it is estimated that there are over 250 people experiencing homelessness in Cambridge Bay, based on the public housing waiting list and surveys of individuals experiencing homelessness.
RESULTS OF THE SURVEYS WITH INDIVIDUALS EXPERIENCING HOMELESSNESS

The results of the surveys with individuals experiencing homelessness were as follows:

- Thirty-one individuals completed the survey based on where they reported they would be sleeping.
- Twelve individuals who were staying in a room or house of relatives or friends did not self-identify as experiencing homelessness.
- Nineteen individuals completed the survey who were staying in a room or house of relatives or friends and self-identified as experiencing homelessness.

Because of the small number of surveys conducted in Cambridge Bay with individuals self-identifying as homeless, limited detail has been provided related to the surveys to ensure that anonymity is maintained and because any detailed breakdowns could not be considered to be a reliable representation of the homeless population in the community. The following numbers are results from the 19 surveys conducted in Cambridge Bay with individuals staying with family or friends and self-identifying as homeless.

GENDER

Fifty-eight percent of the respondents who self-identified as experiencing homelessness were men and forty-two percent were women.

AGE

The average age was 34 years old, and ages ranged from 21 to 60 years old.

ALONE OR PART OF A FAMILY UNIT

Forty-two percent of the individuals surveyed were single and the remaining fifty-eight percent were accompanied by a partner or children.

MIGRATION

Fifty-eight percent of the individuals surveyed grew up in Cambridge Bay.

HEALTH CONDITIONS

Most (58%) of the individuals surveyed did not report any health conditions. 16% of survey respondents reported having a medical condition, 11% reported having a physical disability, 5% reported having a mental health issue, and 5% reported an addiction. These numbers should be interpreted with caution due to the small sample size.

FIRST TIME OR MULTIPLE EXPERIENCES WITH HOMELESSNESS

For half of the individuals surveyed, this was their first experience with homelessness. The other half had previously experienced a period of homelessness.

LENGTH OF TIME EXPERIENCING HOMELESSNESS

On average, respondents had been homeless for three years, with a range of one month to 10 years.

FACTORS CONTRIBUTING TO HOMELESSNESS

The most commonly reported reasons contributing to their homelessness were moving from another community (32%) and being evicted (16%). These numbers should be interpreted with caution due to the small sample size.
DESIRE TO MOVE OUT OF HOMELESSNESS
The vast majority (84%) of the individuals surveyed wanted housing, and 71% reported being on the public housing waiting list.

REPORTED SERVICES THAT WOULD ASSIST IN FINDING AND MAINTAINING HOUSING
Almost half (47%) of the individuals surveyed thought that help finding employment, job training, or education would help them in finding and maintaining housing, an equal percentage to those who thought that public housing or an affordable place would be helpful. Additional Income Assistance was suggested by approximately one-quarter (26%) of the individuals surveyed as something that would be helpful for them to find and maintain housing.

ADDRESSING HOMELESSNESS
HOUSING AND SUPPORTS
There was consensus that more housing and supports to address the issue of homelessness are needed in Cambridge Bay. It was mentioned that the co-op may be interested in building units, but the operating and maintenance costs are a concern in terms of feasibility. It was suggested that perhaps a Habitat for Humanity chapter could be established in the community and renovate existing units. Stakeholders identified the need for transitional housing after treatment. It terms of supports, it was suggested that additional initiatives are required related to financial literacy education and housing maintenance.

EMERGENCY SHELTER SERVICES
Service providers and government representatives identified the need for a men’s shelter, and were aware of a number of buildings in the community that could be utilized for this purpose. It was mentioned that the Cambridge Bay Community Wellness Centre had previously applied for funding to be open 24-7 to provide short-term relieve from the elements, but this wasn’t successful.

COLLABORATION
Service providers and government representatives identified the need to prepare a community plan to address homelessness. One said “we need to put our collective thoughts into a plan, not a chat.” One recommendation was to develop a terms of reference to begin moving forward.
APPENDIX 2:
SURVEY QUESTIONNAIRE

[NOTE TO ENUMERATOR: DO NOT READ WORDS IN CAPITALS OUT LOUD]

Location:

When not able to communicate with the person (for example, because they are asleep), please answer the following:

Do you believe this person is homeless?

□ Yes Reason:

□ No

When you are able to communicate with the person:

Hello, my name is __________________ and I'm working with the Government of Nunavut to conduct a survey to count people with housing challenges to provide better programs and services to them.

Screening Questions

[NOT TO BE ASKED IN SHELTERS]

1. What is your living situation? / Where are you sleeping tonight?

[ENUMERATOR TO CODE]

□ Housing You Pay Rent For or Own/ Own Apartment/House/Room (Housing is in your name) [END AND THANK THEM]

□ Room or house of relatives or friends Is it public housing? □ Abandoned building

□ Shelter □ Private vehicle

□ Shack, shed, tent or other structure not meant for housing □ Other

□ Commercial establishment (e.g. hotel, bar) □ Refused

□ Airport □ Don’t know

□ Other indoor place, but not housing (e.g. stairwell)

2. Would you be willing to participate in a survey about your housing needs?

There are 10 questions. You will not be identified and your answers will be kept confidential.

Your participation is completely voluntary -- you can skip a question or stop the survey at any time.

We have gift cards [insert amount and retailer] to compensate you for your time in answering the questions.

□ Yes □ No
Survey Questions

1. How many adults and children are sleeping in the same location with you tonight?
   How many are family members?
   Are any of these family members children? If so, how many?
   For those staying in a room or house of relatives or friends: If you were to move to another location, how many of these people would be moving with you?

2. Is this the first time you have had housing challenges/been without a place, or were there other times in your life when you did not have a place?
   □ Yes □ Refused
   □ No How many other times? For how long? □ Don't know

3. How long have you been without a place this time?
   [Use the most appropriate time interval: days, weeks, months, years]
   Days Weeks Months Years

4. Could you tell me what contributed to your housing challenges/losing your place (for example, illness, lack of income, evicted…)? Do any of the reasons keep you from living in stable housing? If so, which ones?
   [ENUMERATOR TO CODE]

<table>
<thead>
<tr>
<th>Reason for Becoming Homeless</th>
<th>Reason Keeping You From Living in Stable Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income Assistance dropped or stopped</td>
<td>□</td>
</tr>
<tr>
<td>Income from work dropped or stopped</td>
<td>□</td>
</tr>
<tr>
<td>Income is not enough to afford housing</td>
<td>□</td>
</tr>
<tr>
<td>No income</td>
<td>□</td>
</tr>
<tr>
<td>Evicted</td>
<td>□</td>
</tr>
<tr>
<td>Were you living in your own public housing unit, or was it a room or home you rented privately?</td>
<td>□</td>
</tr>
<tr>
<td>Foreclosure of Home That You Owned</td>
<td>□</td>
</tr>
<tr>
<td>Family, partner or roommate made you/ caused you to move [if Elder]</td>
<td>□</td>
</tr>
<tr>
<td>Why did you feel you had to leave?</td>
<td>□</td>
</tr>
<tr>
<td>Broke up with a spouse or partner, or other family change</td>
<td>□</td>
</tr>
<tr>
<td>Hurt or threatened by a relative or another person you were staying with</td>
<td>□</td>
</tr>
</tbody>
</table>
## Removed/relocated through Justice/RCMP involvement
☐ ☐

## Moved to the community.
☐ ☐

## Which community did you move from?

## Why did you move here?

## Using alcohol, using drugs or other substances
☐ ☐

## Mental Illness/disability
☐ ☐

## Family member or personal illness
☐ ☐

## Released from prison/jail
☐ ☐

## Released from a mental health facility
☐ ☐

## Released from a health facility
☐ ☐

## Other
☐ ☐

## Refused
☐ ☐

## Don’t know
☐ ☐

### 5. Do you want housing?

☐ Yes Are you on the public housing waiting list? If no, why not? ☐ Refused

☐ No Why not? ☐ Don’t know

### 6. What services have you used in the last 6 months (for example, soup kitchen, food bank, Tukisigiark Centre, shelter, public health clinic, social services at Grinnell Place, job supports)?

[ENUMERATOR TO CODE]

☐ Soup kitchen ☐ Food bank or community freezer

☐ Drop in (such as the Tukisigiark Centre) ☐ Legal aid/clinic

☐ Public health clinic ☐ Detox

☐ Social services (Such as at Grinnell Place) ☐ Other

☐ Job training/job supports ☐ Refused

☐ Shelter ☐ Don’t know
7. What would help you find housing? (for example, more income, assistance with paying arrears, help with health needs)

[ENUMERATOR TO CODE]

- □ More Income Assistance
- □ Help getting detox services
- □ Help finding employment, job training or education
- □ Help getting alcohol or drug treatment
- □ Assistance with repaying arrears
- □ Mental health supports
- □ Public or subsidized housing
- □ Cultural supports
- □ Help finding an affordable place
- □ Services in your preferred language
- □ Help with public housing application
- □ Child care
- □ Help addressing your health needs
- □ Services for your children
- □ Help to keep housing once you have it (e.g. housing supports/housing worker)
- □ Something else (specify)

8. A BIT ABOUT YOU:

AGE: How old are you? Or Birth Year If not able to provide, estimate age:

MOVES: Did you spend your childhood in [fill community]? □ Yes □ No □ Refused □ Don't know

Why did you move here?

RELATIONSHIPS: Do you have family, relatives or friends in [fill community] that help you when you are in need?

- □ Yes
- □ No
- □ Refused
- □ Don't know

9. HEALTH CONDITIONS: Do you have any health conditions (for example mental illness, addictions, medical conditions, physical disability, intellectual disability)?

- □ Mental illness
- □ Medical condition
- □ Intellectual disability
- □ Refused
- □ Addiction
- □ Physical disability
- □ Other
- □ Don't know

10. Do you consider yourself to be homeless? □ Yes □ No

Have you been asked these questions by anyone else? □ Yes □ No

[ONLY TO BE ASKED IF WE THINK WE ARE GETTING DATA WITH IDENTIFIERS FROM SERVICE-BASED ORGANIZATIONS WITH CASELOADS-TO BE DETERMINED]

What are the first three letters of your last name? □

The first letter of your first name? □

[ENUMERATOR TO CODE:]

SEX: □ Male □ Female

INUIT? □ Yes □ No
APPENDIX 3:
INTERVIEW QUESTIONS FOR SERVICE PROVIDERS IN COMMUNITIES WITH INDIRECT COUNTS

To what extent does absolute homelessness exist in your community?
(By absolute homelessness I am referring to individuals staying in places not meant to be housing such as huts, sheds, or shelters.)

Do you record/report cases of absolute homelessness? If so, could you provide me with your statistics? (Ideally we are looking for number of different individuals at a snapshot in time.)

Where do people in your community who are homeless find shelter?

What challenges exist in serving the homeless population in the community?

What issues and challenges do homeless individuals face as they try to transition into stable housing?
What barriers do they face in connecting to support services?

What would help people in the community who are experiencing homelessness find housing?
Based on the lessons learned from the first homeless count and surveys of individuals experiencing homelessness in Nunavut, the following suggestions are offered by the researcher for refining the survey and adjusting the data collection methods in future homeless counts.

**CONTENT OF THE SURVEY**

Defining hidden homelessness is an important first step to conducting the homeless count and surveys. In the 2014 count all individuals who were staying with relatives or friends were eligible to complete the survey. However, analysis was conducted of only those individuals who self-identified as homeless. Because homelessness can be defined differently by different people this didn’t allow for consistency in the type of individuals for which the results were analyzed. It is recommended that future counts consider adding an additional question for individuals staying with relatives or friends to determine whether or not they have a usual home (e.g. whether they have a place to stay for more than 30 days). Adding a question that clarifies whether the individual is without a usual home would help separate those who don’t have a usual home and are more likely to require specialized attention, from those staying with relatives or friends who do have a usual home. Depending on the objectives of the research, surveys could still be conducted with both groups – those that are staying with relatives or friends and have a usual home, and those that don’t have a usual home, but they could then be analyzed separately.

It is recommended that refinements be made to the question about who, and how many people, the individual is staying with to better determine whether they are single, part of a couple that is homeless, or a family with children that is homeless. It is recommended that this question be revised to the following: If you were to move to another location, how many of the people you are currently sleeping in the same location as would be moving with you (not including yourself)? _______ How many of these are children? _____

Because it is difficult for people to recall specifically how many other times they have been homeless or for how long, it is recommended that future counts consider asking a yes or no question about previous homeless episodes, such as a specific cut off of what would be considered to be chronic homelessness (e.g. Have you been homeless four or more times in the past three years?).

To assist with estimating the number of additional people who become homeless in a year, it is recommended that individuals who have been homeless for less than a year, but reported being homeless previously, be asked a sub-question about whether they had been homeless in the past year.

It is recommended that Income Assistance be added to the list of services that individuals may have used in the last six months. It was thought that in the 2014 survey the difference between social services and Income Assistance was not clear.
Although it is helpful to keep the surveys short, each future count could provide an opportunity to explore one or two particular issues or suggestions a bit further. In the next survey, consideration could be given to whether it would be useful to probe further into the issue of arrears to determine the reasons for arrears, consequences of the arrears (i.e. were they evicted as a result?), and support needs for individuals with arrears. Additional probing could also been done related to survey respondents’ suggestions that assistance finding employment, job training or education would help them find and maintain housing, such as why they think that would be helpful (e.g. more income to be able to afford rent payments, because the employment is likely to come with housing, etc.).

**Approach to Conducting the Survey**

It is recommended that instead of asking open-ended questions, consideration be given to reading the pre-identified options out loud to the survey respondent and then providing an opportunity for additional responses that were not pre-identified. Fewer responses may come to mind without providing some options, and pre-identified options may help garner more fulsome responses.

**Timing**

Ideally, the decision to have a homeless count should be made at least twelve months prior to the count to provide adequate lead time to implement the count. If a researcher is hired, the contract should be signed six months prior to count day.

While it is helpful to conduct counts at the same time each year to allow for trend analysis, adding another count at another time of year (fall or spring) would also be beneficial to identify those individuals that are staying in places not meant to be housing when the weather isn’t quite as prohibitive to this.

**Method**

Ideally partnerships would be developed with hospitals, health centres, correctional institutions, mental health centres, and family violence shelters well in advance of the next count so that individuals in these locations can be effectively counted. Partnerships should also be developed well in advance with Family Services or other staff who administer the safe homes for women and children fleeing family violence to make arrangements to obtain counts from these locations.

**Alternative Approaches for an Indirect Count**

Establishing systems that would allow for indirect counts would be beneficial. Ideally, this would take the form of a Homelessness Information Management System used by a wide range of service providers. Such as system could record and produce data on the number of unique individuals experiencing homelessness. However, even if a Homelessness Information Management System was not used by multiple service providers, establishing systems that record and produce data on the housing status of Family Services clients and public housing waiting list applicants would be very beneficial.