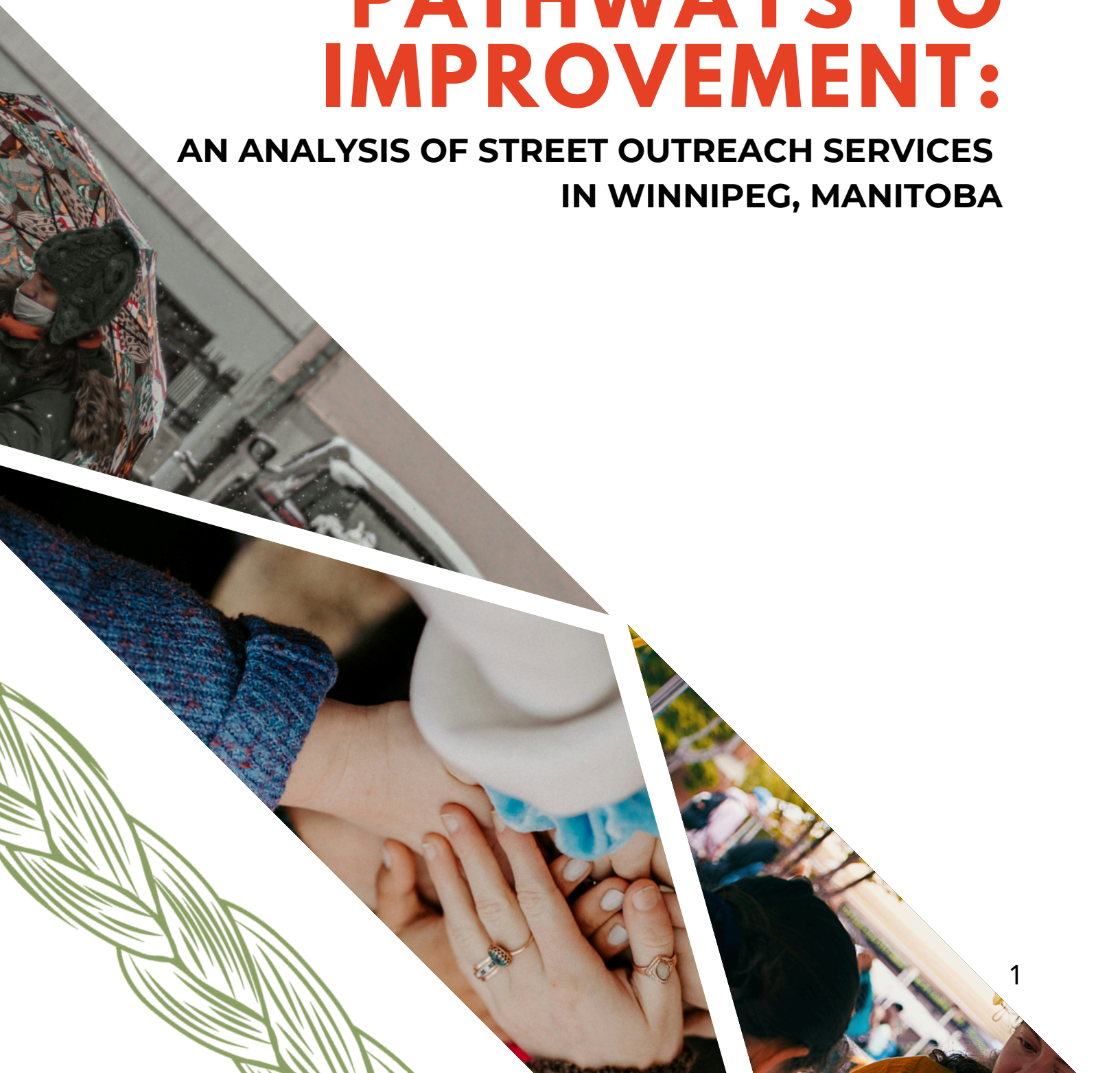


2025



PATHWAYS TO IMPROVEMENT:

**AN ANALYSIS OF STREET OUTREACH SERVICES
IN WINNIPEG, MANITOBA**



Authors and Contributors

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Design

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LAND ACKNOWLEDGEMENT

End Homelessness Winnipeg is an Indigenous-led organization located in Winnipeg, Manitoba. As such, we acknowledge that we live and work on Treaty One Territory, at the crossroads of the Anishinaabe, Métis, Cree, Dakota, and Oji-Cree Nations, and on the traditional lands of the Anishinaabe peoples and the national homeland of the Red River Métis.

We recognize the profound impacts of colonization, which have contributed to the ongoing crisis of homelessness on Turtle Island. We affirm that no one is truly homeless on this land; rather, individuals are unhoused within their rightful homeland. This acknowledgment extends beyond words as we are committed to operating in alignment with Indigenous practices and ways of being, and to implementing the Truth and Reconciliation Commission's (TRC) Calls to Action and the Missing and Murdered Indigenous Women and Girls (MMIWG) Inquiry's Calls to Justice in our daily practice.

We call on all who live, work, and play on this land to actively engage in reconciliation efforts. This includes integrating Indigenous ways of being into all aspects of our work, upholding Indigenous sovereignty, and committing to creating safe, accessible, deeply affordable, and stable housing for all our relatives, regardless of background. In doing so, we can move forward in a good way. Grounded in the principles of the Grandmother Teachings of love, honor, respect, humility, wisdom, and truth, we can work toward a future that honors the land, its people, and their inherent rights to safety and belonging.

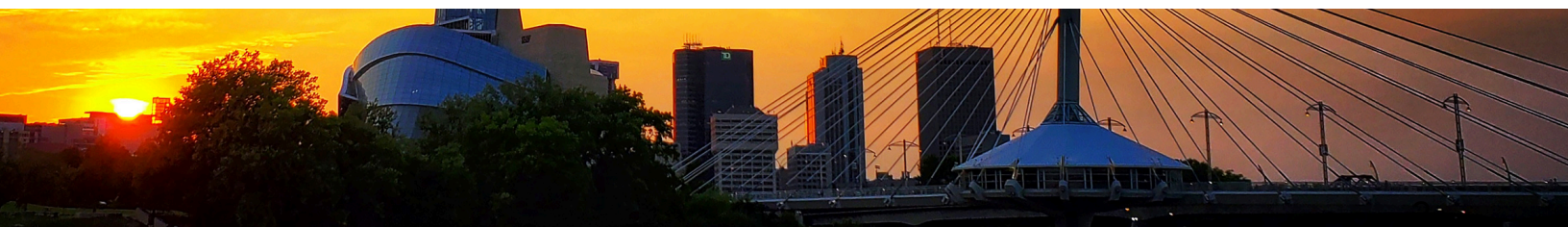


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LIST OF ACRONYMS

This list defines all acronyms used throughout the report.

Acronym	Full Term
ABS	Australian Bureau of Statistics
ACT	Assertive Community Treatment
AHURI	Australian Housing and Urban Research Institute
CAEH	Canadian Alliance to End Homelessness
CHAP	Community Housing Acquisition Program
CO	Community Organization
COAR	Community Outreach Advocacy
COAST	Crisis Outreach and Support Team
COTT	Community Outreach Transit Team
DCSP	Downtown Community Safety Partnership
EHW	End Homelessness Winnipeg
EIA	Employment and Income Assistance
EPS	Edmonton Police Services
GIS	Geographic Information Session
HEART	Homelessness and Encampment Resolution Team
HELP	Human-centered Engagement Liaison and Partnership
HIFIS	Homelessness Individuals and Families Information System
HMIS	Homeless Management Information System
LE	Lived Experts
MMIWG	Missing and Murdered Indigenous Women and Girls

Acronym	Full Term
MSP	Main Street Project
NVCI	Nonviolent Crisis Intervention
PACT	Police and Crisis Team
PiT	Point-in-Time
RAAM	Rapid Access to Addictions Medicine
SBSL	St. Boniface Street Links
SP	Service Providers
STI	Sexually Transmitted Infection
STBBIs	Sexually Transmitted and Blood-Borne Infections
TRC	Truth and Reconciliation
WFPS	Winnipeg Fire Paramedic Service
WON	Winnipeg Outreach Network
WPS	Winnipeg Police Service
WRHA	Winnipeg Regional Health Authority



ACKNOWLEDGEMENT

We want to express our gratitude to each community member, service provider, and organization that has participated in this process. Thank you for walking alongside us and sharing your knowledge, opinions, and concerns, which have helped us advance this project in a positive direction. Through our conversations, it is evident that we are all committed to improving the quality of services provided and working towards a Winnipeg where these services are not essential but merely supplemental. By leveraging the data we collected, we have developed recommendations for changes that will enhance the social service sector and ensure that everyone living on this land has a safe place to call home.

EXECUTIVE SUMMARY

End Homelessness Winnipeg is an Indigenous-led, nonprofit organization in Winnipeg, Manitoba, dedicated to creating and implementing a coordinated approach that ends chronic homelessness in our city. As the backbone agency for Winnipeg's housing and homelessness sector, EHW collaborates with community organizations, government entities, and lived experts (LEs) to create long-term solutions that reflect the needs of our communities. With funding from Reaching Home, the federal initiative aimed at reducing and preventing chronic homelessness in Canada, we launched a research project intended to collect data that will inform the revision of the Kíkinanaw Óma – A strategy to Support Unsheltered Winnipeggers, and make recommendations to inform advocacy for policy changes to enhance street outreach services in Winnipeg. This report is not intended to serve as a shelter review or an outreach model review, nor is it meant to replace the Kíkinanaw Óma strategy as it currently stands.

This data was collected during an eight-month period, from February to September 2024. This project was conducted using a person-centered approach incorporating values of trauma-informed care and harm reduction. The research team engaged with front-line organizations, referred to as Service Providers (SPs) and Lived Experts (LEs), to gain on-the-ground

insights into how support services have been operating, identify gaps in the system, and challenges faced by the SPs and LEs. The research team utilized Microsoft Forms to administer surveys to thirty-three SPs and thirty-one LEs. Additionally, "ride-along" observations were conducted, allowing the team to accompany street outreach teams throughout a workday; this approach provided valuable real-time insights into operational practices.



During our engagement process, it was essential to engage with both groups and gather authentic feedback to gain a better understanding of how street outreach was operating on the ground. This approach allowed us to make informed recommendations without favouring one group over the other. We reported all of the responses from our conversations in a confidential manner, exactly as they were provided. It was a priority to ensure that we maintained their integrity and did not influence or alter the content, to allow for a true reflection of the perspectives shared and protecting the identity of the

SPs and LEs engaged in this project. Considering the findings presented, several key recommendations have been developed to enhance our approach moving forward. These suggestions are designed to address the identified gaps and leverage strengths within our current outreach services. By implementing these recommendations, we aim to foster greater engagement across all age groups and improve overall outcomes. The task of selecting “implementers” will be entrusted to the community leaders in the outreach sector. This method will allow for the most

suitable organization for the role to be identified, and will ensure the overall impact of this initiative aligns with the community's needs and values.

Recommendations 1–8 outline changes necessary for immediate improvements in the outreach sector.

Recommendations 9 and 10 focus on long-term initiatives that will enhance street outreach, but require further development before they can be effectively implemented. Below is a summary of the recommendations.

Recommendations:

1. Broaden the geographic reach of street outreach services to include underserved areas, ensuring equitable access across all neighbourhoods.
2. Strengthen coordination among outreach teams, community organizations, and municipal services to ensure streamlined service delivery and reduce duplication of efforts.
3. Allocate additional funding and resources to address the immediate needs of individuals experiencing homelessness, particularly during extreme weather conditions.
4. Tailor street outreach services to address the unique needs of specific populations, including Indigenous peoples, youth, 2SLGBTQ+ individuals, women fleeing domestic violence, and people with complex mental health and addiction issues.
5. Expand mental health and crisis intervention services to address the growing needs of individuals experiencing homelessness.
6. Provide comprehensive training and professional development opportunities for outreach staff to enhance service delivery.
7. All service providers must agree on the collective use of a robust data collection and sharing system to enhance decision-making and service coordination.
8. Strengthen community involvement in the design and delivery of outreach services to ensure they are responsive and inclusive.
9. Enhance access to affordable and transitional housing, addressing systemic barriers and increasing the supply of low-barrier options.
10. Explore new initiatives to address gaps in service delivery and improve outcomes for individuals experiencing homelessness.

KEY DEFINITIONS

To enhance clarity and ensure a shared understanding, the following list outlines key terms that will be used throughout this report.

Homelessness: Homelessness describes the situation of an individual, family or community without stable, safe, permanent, appropriate housing, or the immediate prospect, means and ability to acquire it. It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household's financial, mental, cognitive, behavioral, or physical challenges, and/or racism and discrimination (Gaetz et al., 2012).

Housing Insecurity: Housing insecurity encompasses a range of challenges that individuals or families may face in maintaining stable, safe, and affordable housing. It includes issues such as affordability, evictions, overcrowding, and substandard living conditions, which may place them at risk of homelessness (Wellesley Institute, n.d.).

Street Outreach: Street outreach refers to programs and services that engage directly with individuals experiencing homelessness in public spaces. These initiatives aim to build trust, provide immediate assistance, and connect individuals to housing, healthcare, and support services (Hannon, n.d.).

Indigenous Homelessness: Indigenous homelessness is a human condition that describes First Nations, Métis, and Inuit individuals, families, or communities lacking stable, permanent, appropriate housing, or the immediate prospect, means, or ability to acquire such housing. Unlike the common colonialist definition of homelessness, Indigenous homelessness is not defined as lacking a structure of habitation; rather, it is more fully described and understood through a composite lens of Indigenous worldviews. These include individuals, families, and communities isolated from their relationships to land, water, place, family, kin, each other, animals, cultures, languages, and identities. Importantly, Indigenous peoples experiencing these kinds of homelessness cannot culturally, spiritually, emotionally, or physically reconnect with their Indigeneity or lost relationships (Thistle, 2017, p. 6).

Harm Reduction: Harm reduction refers to policies, programs, and practices that aim to minimize the negative health, social, and legal impacts associated with substance use, without necessarily requiring individuals to stop using substances. It is grounded in respect for individual's rights and dignity (Canadian Centre on Substance Use and Addiction, n.d.).

For the purpose of this report, the term “harm reduction” specifically refers to strategies related to substance use items, such as safer drug use supplies. While the definition has been expanded in some contexts to include access to nutritious food, clean water, safe sex supplies, and hygiene products, the prevailing understanding of harm reduction varies across cultural contexts. By concentrating on substance use supplies, this report aims to clarify the specific tools and policies that effectively contribute to harm reduction in this area, while also acknowledging the broader implications and potential intersections with other harm reduction efforts.



Trauma-Informed: A trauma-informed approach recognizes the prevalence and impact of trauma on individuals' lives and incorporates this understanding into policies, practices, and interactions to avoid re-traumatization. It emphasizes safety, trust, and empowerment (Substance Abuse and Mental Health Services Administration, 2014).

Person-Centered: A person-centered approach to care means being respectful of, and responsive to, the preferences, needs, and values of the person receiving care. Through this approach, patients are equal partners in planning, developing, and monitoring their care to ensure it aligns with their needs (Canada, 2024).

Reaching Home: Reaching Home is the Government of Canada's strategy for addressing chronic homelessness. It emphasizes coordinated access, data collection, and outcomes-focused approaches (Government of Canada, 2019).

Human Rights-Based: A human rights-based approach integrates the principles of human rights into programs and policies, ensuring that individuals have equitable access to resources, services, and opportunities to meet their basic needs. It emphasizes accountability, participation, and non-discrimination (United Nations, n.d.).

Indigenous Sovereignty: Refers to the inherent authority and autonomy of Indigenous nations, tribes, and communities to govern themselves, rooted in their traditional knowledge systems. This encompasses spiritual practices, culture, language, social and legal systems, political structures, and deep-seated relationships with their lands and waters (The Indigenous Foundation, n.d.).

Homeless Individuals and Families Information System (HIFIS): HIFIS is a federally supported information management system designed to help service providers, communities, and the government collect and share data about homelessness in Canada. It supports Coordinated Access by tracking client interactions, shelter use, and program outcomes, improving service delivery and policy development (Government of Canada, n.d.).

Homeless Management Information System (HMIS): HMIS is a software solution used by communities and organizations to manage data on homelessness. In a Canadian context, it often refers to systems integrated with HIFIS or similar platforms, enabling service coordination and reporting on homelessness trends (Canadian Observatory on Homelessness, n.d.).

Housing First: Housing First is an approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can use to improve their quality of life. This approach is guided by the belief that people need necessities like food and a place to live before attending to anything less critical (National Alliance to End Homelessness, 2022).

Assertive Outreach: Street-based [assertive] outreach is a model that provides assertive outreach services to individuals in public places. Workers actively approach potential people on the streets and offer supports related to accommodation and services. Street-based outreach enables workers to respond directly and immediately to a person's needs by bringing services to people rather than waiting for individuals to come to services on their own (Homelessness NSW, 2021).

INTRODUCTION

Homelessness is a pressing human rights and social issue in Canada that is worsened by systemic factors such as rising housing costs, poverty, and limited access to support services. Currently, there are an estimated 265,000 to 300,000 Canadians experiencing homelessness every year, with these numbers increasing since the start of the COVID-19 pandemic. Despite only making up five percent of the country's population, Indigenous people make up 35% of the unhoused population (Canadian Observatory on Homelessness, n.d.) and are disproportionately affected.

The Office of the Federal Housing Advocate estimates that Canada has a shortage of 4.3 million affordable housing units, with some places in Canada having a 10-year waitlist for rent-geared-to-income housing. Despite the recognition of housing as a basic human right, systemic barriers and policy shortcomings have resulted in the persistent neglect of many vulnerable populations, leaving them without access to low-income housing options. This lack of support exacerbates the number of people who are unhoused, precariously housed, or at risk of becoming unhoused, and contributes to a cycle of poverty that is difficult to escape (The Office of the Federal Housing Advocate, 2024).



Amidst the growing homelessness crisis across Canada, street outreach services have become a critical tool in addressing homelessness. These services offer immediate assistance to individuals living on the streets and in encampments and are designed to connect individuals to basic needs such as food, shelter, healthcare, and other social supports.

Hannon highlights that effective street outreach requires a trauma-informed, person-centered approach, as individuals experiencing homelessness often face significant barriers to accessing mainstream services due to past trauma, mental health issues, a distrust of institutions, and many other factors (n.d.). Street outreach workers focus on relationship building with participants; this often serves as the first point of contact for offering consistent support that can lead to long-term connections with housing and healthcare resources (Hannon, n.d.).

Street outreach services not only provide access to basic resources, critical medical care, mental health services, and addiction support that would not otherwise be available to them (CAEH, 2020), but they also support individuals who are living unhoused to find alternative housing solutions. Moreover, the time that street outreach workers spend taking the time to listen and engage, the more they can foster trust. This step is crucial as many people who are engaging with the outreach teams may have faced stigmatization and trauma that deters them from accessing traditional service models (CAEH, 2020).

In addition to connecting people to long-term resources, street outreach teams provide immediate support by offering essentials such as food, water, clothing, hygiene and harm reduction supplies, transportation, and a sense of belonging to vulnerable populations.

This report aims to conduct a comprehensive evaluation of street outreach services in Winnipeg to understand their effectiveness in addressing homelessness in the community. By delving into the existing gaps in these services, the study seeks to uncover the unique challenges that service providers (SPs) encounter as they strive to assist individuals experiencing homelessness, and that Lived/Living Experts (LEs) encounter when interacting with these services.

This research has generated recommendations to enhance the outreach services that are currently offered, drawing on in-depth insights gathered from two key groups: the dedicated SPs who work tirelessly on the front lines and LEs who have firsthand experience of homelessness.

The report begins by explaining the research methodology, including an analysis of the data collected through surveys and interviews with both SPs and individuals with lived experience. It highlights the key calls for change identified by these respondents and concludes with an analysis and discussion section of the findings.

Finally, the report presents actionable recommendations to improve the current landscape of outreach services in Winnipeg.

METHODOLOGY

The study employed a mixed methods approach to evaluate the effectiveness and challenges of street outreach services in Winnipeg. We focused on understanding the experiences of two main groups: SPs (such as outreach workers and executive directors) and individuals with lived experience of homelessness. Engaging with both groups gave us a better understanding of the challenges service providers face and how community members experience and interact with street outreach services.

We gathered primary data from two participant groups: thirty three SPs and thirty one community members who have accessed street outreach services. See below the methodology that was used to engage both groups.

Service Providers

Service providers were selected based on their direct involvement in outreach work, whether involved in service delivery or management. To ensure a broad perspective, community members were chosen at random across several Winnipeg neighbourhoods, including West Broadway, Central, Point Douglas, St. James, St. Boniface, and the North End. We reached out to those who had accessed street outreach services and invited them to participate in the study.



I believe street outreach fosters a unique opportunity for outreach workers and volunteers to build relationships within the community and bridge the gap that exists between non-profit organizations and folks who live in encampments and on the street.



The data collection process involved both surveys (see Appendix 1) and field observations. Service providers completed surveys that included structured questions designed to capture key information about their roles, the resources they provide, and the challenges they face. Questions addressed topics like the frequency of outreach, whether their teams consisted of volunteers or paid staff, and the areas they serve.

We also asked about the types of resources offered, the extent to which outreach covers encampments, and what harm reduction services are most in demand. Additionally, service providers offered feedback on the training they feel would benefit their teams, as well as insights into the challenges they encounter in the field. It is important to note that the survey responses were anonymous to encourage honest feedback.



Lived/Living Experts

For the LE's, the surveys (see Appendix 2) gathered demographic data and asked about their experiences with outreach services. Questions focused on whether participants had accessed street outreach services, which organizations they had engaged with, and which resources were most helpful. We also explored their current housing situations, including whether they were unhoused or housed, and previous involvement in housing programs.

We wanted to understand why a person may prefer to shelter outdoors instead of accessing shelter services, and how they manage to stay warm in encampments during colder months. Additionally, we asked about their past interactions with services such as Child and Family Services and what improvements they would like to see in outreach services. These questions helped us gather a more comprehensive understanding of the needs and challenges facing those who rely on street outreach.

Alongside surveys, the research team conducted observations by visiting drop-in centers and shadowing outreach workers. This gave us firsthand insight into the daily operations and challenges that outreach teams face.

By observing the interactions between SPs and community members, we gained a deeper understanding of the emotional and logistical difficulties involved in delivering outreach services.

Data Collection and Analysis

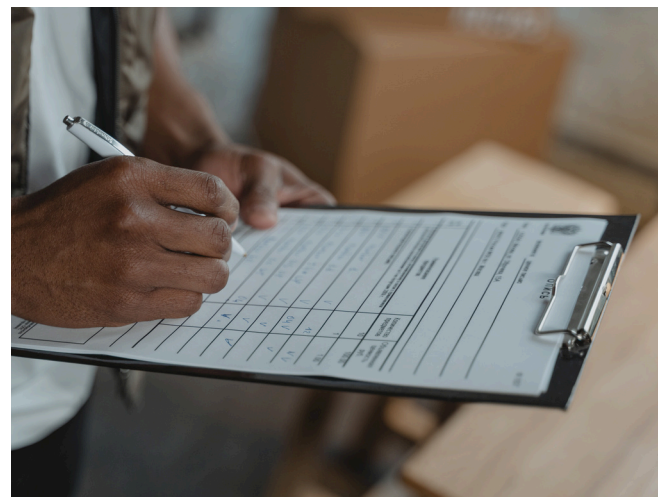
To administer surveys, we used Microsoft Forms, which facilitated efficient data collection, organization, and visualization. As responses were submitted, the system automatically generated graphs and charts, allowing us to quickly compare responses across different participant groups, such as frontline service providers and community members. This feature not only streamlined the data organization process but also enabled us to identify key patterns and trends within the responses.

Descriptive statistics were employed to summarize the data, offering a clear understanding of the distribution of responses across various groups, including service providers from different organizations and community members from diverse neighbourhoods. By comparing these responses, we were able to uncover critical insights into the effectiveness and challenges of street outreach services. In addition to the quantitative analysis, we conducted a qualitative analysis to complement and deepen our understanding of the survey results.

This analysis focused on open-ended answers, allowing us to identify recurring themes and sentiments shared by both SPs and LEs. We carefully examined shared challenges or barriers mentioned by participants, such as gaps in service coordination or insufficient resources, as well as suggestions for improving outreach

efforts. This qualitative analysis provided valuable context and nuance to the quantitative data, helping to create a more comprehensive picture of the current state of street outreach services.

To ensure that participants with lived experience were compensated for their time and insights, a \$20 honorarium was provided upon completion of the survey. This gesture was designed to recognize the value of their contributions and encourage participation. Throughout the data collection process, we placed a strong emphasis on ethical considerations, particularly with respect to confidentiality and informed consent.



Participants were fully informed about the nature of the study, their rights, and the voluntary nature of their involvement. This approach was essential in maintaining a respectful, trauma-informed, and human rights-based methodology, especially when working with vulnerable populations. By prioritizing ethical standards, we ensured that the study was conducted in a manner that was both respectful and protective of participants' dignity and well-being.

LITERATURE REVIEW

Winnipeg, with a population of approximately 841,000 (The Homeless Hub, 2023), faces significant challenges related to homelessness. According to the 2022 Point-in-Time (PiT) Count, 1,256 people were experiencing homelessness on a single night – a figure widely considered as an undercount (Brandon, 2022). Notably, 68.2% of those surveyed identified as Indigenous, underscoring the disproportionate representation of Indigenous people within Canada’s unhoused population (Brandon, 2022).

Street outreach services represent a key response to supporting the unhoused population and are primarily managed by independent community organizations, with minimal direct involvement from the municipality. Over twenty-five organizations provide direct street outreach, while nearly forty are involved in broader outreach activities. In addition to the on-the-ground services, several organizations offer supplementary support to enhance the work of street outreach teams. One such service is 211, a phone-based service operated by United Way Winnipeg, which dispatches outreach teams in response to calls they receive. Another key initiative is the Winnipeg Outreach Network (WON), a collaborative, community-led network that facilitates information sharing tables and produces a regularly updated resource guide to support community members with independent service navigation.

Another supplemental project is the Emergency Response Program run by End Homelessness Winnipeg. This fund provides funding to organizations to increase their access to supplies to distribute to those living unsheltered to protect them from harmful weather conditions (i.e, extreme heat/cold) (End Homelessness Winnipeg, 2024). Under this program, an extreme weather guide is created for the winter and summer months that provides relevant information on how to access services, connect with outreach teams, and navigate their way through the season (End Homelessness Winnipeg, 2024).

Several organizations in Winnipeg are actively involved in street outreach, offering a range of services from basic needs provisions to crisis intervention and housing support. While more than twenty five organizations deliver direct outreach, the following examples illustrate the variety of services that are available on the ground within the sector.

Siloam Mission plays a vital role in supporting Winnipeg’s unhoused population by offering emergency shelter, food, and medical services. Beyond these immediate needs, Siloam Mission also provide supportive housing programs, employment services, and

spiritual care. Their outreach efforts include street-level engagement, where they offer immediate support and connect individuals to long-term resources (Siloam Mission, 2024).

Similarly, **The Salvation Army** operates a range of shelters and supportive housing programs, alongside addiction recovery services. One of its shelters, the Centre of Hope, provides emergency services, while its outreach program focuses on providing meals, clothing, and addiction support (The Salvation Army, 2024).

The Downtown Community Safety Partnership (DCSP) takes a collaborative approach, working with community groups, law enforcement, and the municipal government to improve safety and quality of life for individuals experiencing homelessness in downtown Winnipeg. DCSP runs outreach initiatives, including the Community Outreach Advocacy and Resources team (COAR), which connects vulnerable individuals with support services and acts as a bridge to city resources (DCSP, 2024) and the Mobile Assist and Connect team which provides outreach, social needs assessments, and immediate first aid to those who require support (DCSP, 2024).



Main Street Project's mobile outreach vans, funded by both Reaching Home and the City of Winnipeg, provides services to individuals experiencing or at risk of homelessness, including transportation, health assessments, and referrals to other support services (Main Street Project, 2023). **St. Boniface Street Links (SBSL)** primarily operates in the St. Boniface area, offering outreach services, transitional housing, and life skills programs. SBSL's outreach program emphasizes building relationships with vulnerable individuals and providing access to food, medical care, and housing options (St. Boniface Street Links, 2024).

Indigenous-led initiatives play a critical role in Winnipeg's outreach landscape, recognizing the disproportionate impact of homelessness on Indigenous communities. Programs like

Velma's House, run by Ka Ni Kanichihk, provide culturally appropriate 24/7 safe spaces and support for women, Two-Spirit individuals, and gender-diverse populations (Ka Ni Kanichihk, 2024). Ma Mawi Wi Chi Itata Centre has integrated traditional cultural practices, such as counseling, and healing ceremonies, into outreach efforts, ensuring services are both culturally safe and accessible (2024).

Organizations like **Street Connections** offer a mobile public health van in Winnipeg serviced with public health nurses and outreach staff that work to reduce the spread of sexually transmitted and blood-borne infections (STBBIs) and provide harm reduction supplies (Street Connections, n.d.).

Additionally, organizations collaborate with programs like **Rapid Access to Addictions Medicine (RAAM)** clinics to provide immediate assistance for individuals seeking addiction treatment (WRHA, 2024). Harm reduction efforts, such as naloxone distribution and needle exchange programs, are often embedded within outreach services to reduce harm and connect individuals to longer-term solutions (Health Canada, 2021).

Naatamooskakowin is Winnipeg's Coordinated Access System that works to offer a collaborative, streamlined approach to ending homelessness using intake access points throughout the city (End Homelessness Winnipeg, 2024). The program utilizes the Homelessness Individuals and Families Information System (HIFIS), which helps track and manage data related to homelessness, including service usage and outcomes. By leveraging HIFIS, the Coordinated Access System enhances collaboration among service providers and improves decision-making, ensuring individuals receive timely and appropriate interventions (End Homelessness Winnipeg, 2024). Coordinated Access is currently undergoing a comprehensive review to capture the voices of the community, with a report of the findings to be released in 2025.

Despite the primary role of community organizations in operating outreach services, funding for shelters, transitional housing, and support services largely comes from provincial and federal governments. In addition to the community run programs, the Community Safety Teams are operated by the city and play a crucial role in supporting the unhoused population. These teams are focused on outreach, engaging with residents and addressing issues like homelessness, addiction, and mental health.

By partnering with various organizations in the city, they provide much-needed support and intervention aimed at increasing safety and improving the overall quality of life.

A Review of Outreach Services in Other Cities

The research team conducted a comprehensive online review. We selected six Canadian cities — Toronto, Calgary, Hamilton, Edmonton, Halifax, and Victoria —along with Australia, to serve as the basis for our comparison. These Canadian cities were selected for their diverse population sizes and demographics, as well as their varied geographical locations. Australia was selected for this report due to the parallels in the overrepresentation of Indigenous peoples in their unhoused population, and to offer an international lens for comparison. (Australian Institute of Health and Welfare, 2024).

It is important to note that the numbers presented in the reviews are based on the federally mandated Point-in-Time (PiT) Counts conducted between 2020 and 2023. These figures provide a snapshot of homelessness on a given date but may not reflect an accurate portrayal of the homelessness crisis; these PiT Counts were affected by the COVID-19 pandemic, which could have led to undercounts and inaccurate data. A comprehensive post-pandemic count was completed in late 2024, and results will be available in Summer 2025.

In addition to the PiT Count information, the research analyzed each city's 10-year plan aimed at ending homelessness; this offered valuable insights into long-term strategies, objectives, and progress in tackling this critical issue. To gain an even deeper understanding of each city's approach, key city council documents were reviewed, particularly those related to encampments and emergency homelessness measures. These documents played a vital role in exploring how municipalities confront the immediate and urgent challenges posed by this issue.

Furthermore, the research examined the housing and homelessness sections of each city's official website, identifying a wide array of available services, support programs, and outreach initiatives. This was enhanced by reviewing additional resources, such as policy reports, government publications, and local initiatives that target homelessness and support vulnerable populations. A key focus of the analysis was on locating the funding streams from federal, provincial, and municipal governments allocated to homelessness initiatives. By investigating the financial resources devoted to these efforts, the study gained a clearer picture of the investments made into homelessness services and outreach programs. This thorough approach ensured that the literature review captured a detailed understanding of each city's response to homelessness, ultimately forming a solid foundation for actionable recommendations to improve outreach services in Winnipeg.



Key Findings

Toronto, Ontario

Toronto, the capital city of Ontario, is home to over 3 million residents, with around 7,347 individuals experiencing homelessness (The Homeless Hub, 2021). Notably, 23% of those who are unhoused identify as Indigenous (Homeless Hub, 2021). Toronto's approach to addressing homelessness is well-regarded for its strong partnership model, which unites municipal agencies, health services, housing organizations, and provincial partners.

A key component of their street outreach strategy is the Streets to Home program which operates 24/7 and helps individuals transition to permanent housing while providing access to food and water, referrals, clothing, and harm reduction supplies at one accessible location (City of Toronto, 2024). Additionally, the Streets to Home team provides 24/7 street outreach services, and partners with multiple agencies focused on specific city neighbourhoods and vulnerable groups, including youth, Indigenous peoples, and those with mental health challenges (City of Toronto, 2024).

Each outreach team collaborates closely with emergency services like Toronto Paramedic Services, Toronto Public Health, and the Toronto Parks, Forestry, and Recreation Department, ensuring a comprehensive support system.

Another innovative initiative in Toronto is a city-managed storage system that allows individuals experiencing homelessness to securely store their belongings for up to six months while collaborating with outreach teams to develop comprehensive housing plans (City of Toronto, 2024).

Furthermore, Toronto's implementation of a Coordinated Access system, in collaboration with the Toronto Alliance to End Homelessness and the Aboriginal Affairs Advisory Committee, ensures that individuals receive the right support quickly through streamlined services and robust data systems like Homeless Management Information System (HMIS) and a By-Name List (City of Toronto, 2024; Toronto Shelter, Support and Housing Administration, 2023). This extensive cooperation ensures that street outreach initiatives are effectively implemented across the city.

Calgary, Alberta

Calgary, with a population of 1.41 million, reported 2,782 unhoused people in 2022, with 30.1% identifying as Indigenous (The Homeless Hub, 2022). The city's approach to addressing homelessness is centered around the Community Safety Investment Framework, which coordinates substantial funding from the City of Calgary and the

Calgary Police Service for community outreach, encampment response, and homelessness prevention (City of Calgary, n.d.).

In 2024, Calgary allocated \$750,000 for a coordinated winter response, aimed at increasing accessible warming spaces and enhancing shelter capacity during harsh weather (City of Calgary, 2024). Additionally, the city provides \$9 million in funding to social agencies, supporting programs that prevent homelessness and assist individuals at risk (City of Calgary, 2024). The Calgary Homeless Foundation's Coordinated Community Extreme Weather Response ensures the availability of safe spaces during extreme weather conditions.

Outreach efforts integrate services such as the Police and Crisis Team (PACT) and the Human-centered Engagement Liaison and Partnership (HELP) team (City of Calgary, 2024; Alpha House, n.d.). These initiatives involve collaborations with Alberta Health, Calgary Police Services, Alpha House, and emergency medical services to provide trauma-informed and culturally sensitive supports for individuals facing substance use concerns and mental health crises.

Moreover, Calgary's use of the Homeless Management Information System (HMIS) enhances service coordination and data collection, further streamlining outreach efforts (City of Calgary, 2024).

Victoria, British Columbia

Victoria, with a population of 99,792, has 1,665 individuals experiencing homelessness, 32.9% of whom are Indigenous (Homeless Hub, 2023). In response, the city has developed a comprehensive street outreach strategy aimed at addressing the needs of these individuals; this strategy is supported by investments from both municipal and provincial levels. In 2024 the City of Victoria allocated \$1.8 million in annual operating funding for the SOLID outreach strategy. This funding supports an information access hub that provides low-barrier services, harm reduction supplies, and case management (City of Victoria, 2024; SOLID Outreach, 2023).

The Homelessness and Encampment Resolution Team (HEART) employs a multisectoral model that integrates healthcare, mental health support, addiction services, and social services to address homelessness (BC Housing, 2024). This team proactively engages individuals in encampments and public spaces, offering immediate support and working toward sustainable solutions like permanent housing (BC Housing, 2024). It is financially supported and is financially supported through the province of British Columbia with \$44 million in capital funding (BC Housing, 2024). Victoria's Assertive Community Treatment (ACT) team includes a specially trained police officer who supports outreach efforts for individuals with mental health

issues and criminal histories, focusing on diversion and support rather than punitive measures (University of Victoria Impact Report, 2024). The ACT program has shown a 30% decrease in arrests and police encounters, particularly among racialized groups, enhancing public safety and improving outcomes for individuals facing mental health crises and homelessness (University of Victoria Impact Report, 2024).

Additionally, Victoria utilizes HMIS for effective data collection and reporting, supporting more coordinated outreach efforts (City of Victoria, 2023). Preventative measures like the Tenants Assistance Policy further reduce the risk of homelessness by supporting vulnerable renters (City of Victoria, 2023).

Hamilton, Ontario

In Hamilton, a city with a population of 787,000, 545 individuals were identified as experiencing homelessness in the latest PiT Count, with 23% of these individuals identifying as Indigenous (The Homeless Hub, 2022). The city has developed a multidisciplinary, community-driven approach to homelessness through initiatives like the Crisis Outreach and Support Team (COAST). In partnership with St. Joseph's Healthcare Hamilton and the Hamilton Police Service, COAST pairs mental health professionals with trained officers to provide immediate crisis intervention, reducing reliance on emergency rooms and the justice system (City of Hamilton, 2023).

The Mobile Crisis Rapid Response Team (MCRRT), complements COAST by deploying mental health professionals to 911 crisis calls. This team focuses on linking individuals to community services and providing long-term support (City of Hamilton, 2023). Additionally, Hamilton's Street Outreach Worker program, funded by the city, works with agencies like St. Joseph's Hospital to offer direct support, housing assistance, and referrals for mental health and addiction services (St. Joseph's Healthcare Hamilton, 2014).

In response to the ongoing housing crisis, the city has increased outreach resources by 30%, prioritizing vulnerable groups such as Indigenous peoples, unhoused women, youth, and seniors (City of Hamilton, 2024). Measures like the Winter Response, which includes a warming bus and extended public space hours, provide immediate relief during colder months. The use of HIFIS supports centralized data collection and improved service coordination across multiple agencies (City of Hamilton, 2024).

Hamilton has also received significant financial support from municipal, provincial, and federal sources. The City of Hamilton has allocated \$75 million for housing-related services, including street outreach (City of Hamilton, 2024). The total housing budget stands at \$146.6 million, with additional contributions from the province (\$38.8 million) and the federal government (\$32.1 million) (City of Hamilton, 2024).

Edmonton, Alberta

Edmonton has a diverse population of approximately 1.5 million, which includes a range of communities and cultures. Among this population, approximately 2,519 individuals are experiencing homelessness, with a notable 54% of those unhoused identifying as Indigenous.

To address these challenges, Edmonton has implemented a variety of street outreach services, which are coordinated by Homeward Trust Edmonton, a dedicated system planner. These services are based on core principles of accessibility, collaboration, and responsiveness, ensuring that they meet the needs of the city's vulnerable population effectively.

One approach is the Community Outreach Transit Team (COTT), a partnership with the Bent Arrow Traditional Healing Society, that provides specialized support services to individuals utilizing public transit, focusing on the challenges they face, such as access to housing, mental health concerns, and substance use challenges (Homeward Trust, 2024). By integrating support into transit services, COTT aims to reach individuals where they are and provide the help they need (Homeward Trust, 2024). Moreover, the Encampment Response Team, funded with \$1.7 million, collaborates with community peace officers and Edmonton Police to connect encampment residents with emergency shelter, housing resources, and health services (Homeward Trust Edmonton, 2024). The 24/7 Crisis Diversion Team partners with organizations such as Alberta Health, Boyle Street Community Services, and HOPE Mission, to provide immediate intervention with a focus on diverting individuals from potentially harmful situations, such as interactions with law enforcement and unnecessary hospitalizations, and directly connecting them to appropriate care (Homeward Trust Edmonton, 2024).

Edmonton has also implemented the Affordable Housing Investment Program, which supports the development and rehabilitation of affordable housing units, with a focus on Indigenous-led initiatives for culturally relevant housing options; this commitment has resulted in 644 supportive housing units under development, enhancing the city's long-term housing solutions (Edmonton Homelessness Housing Services Plan, 2024).

Halifax, Nova Scotia

In Halifax, which has a population of 480,582 individuals, 586 people are living unhoused, with Indigenous people making up 22% of this population. To address the issue of homelessness, the municipality has implemented a variety of street outreach services to support the unhoused community.

The creation of designated encampment sites, located throughout the city, is a key factor of their outreach efforts; these sites are equipped with hygiene facilities, provide access to healthcare, food support, and transportation (Halifax Regional Municipality, 2024). These designated sites aim to provide a safer environment for individuals living in encampments, allowing them to access critical resources and support while ensuring their well-being. In addition to these services, the city's outreach teams work to facilitate the transition of individuals from unauthorized encampments to designated locations or shelters, ensuring that individuals continue to have access to care and support (Halifax Regional Municipality, 2024).

Furthermore, a major investment from the Nova Scotia Government has been earmarked for the development of tiny homes, which provide long-term housing options for individuals transitioning out of homelessness (2023). These tiny homes represent a sustainable solution that balances the need for immediate shelter with the goal of securing stable housing for individuals in the long term.

Additionally, programs such as the Community Housing Acquisition Program (CHAP) offer low-interest mortgages and operational funding to sustain affordable housing projects, ensuring that the city has a robust supply of supportive housing for the future (Nova Scotia Government, 2023; Halifax Regional Municipality, 2024). Street Outreach is primarily operated by the Halifax Regional Authority through the Navigator Outreach Program, a cornerstone of Halifax's strategy intended to support individuals experiencing homelessness and ensure that everyone has equal access to social services (Halifax Regional Municipality, 2024). This program offers direct support to vulnerable individuals, particularly in the urban core of Halifax, by connecting them to critical services like healthcare, employment, housing, and identification services (Halifax Regional Municipality, 2024). Outreach workers engage in daily interactions with people living in encampments and assist individuals in navigating complex systems to access essential services (Halifax Regional Municipality, 2024).

Australia

In Australia, First Nations people are overrepresented in homelessness statistics. The 2021 Australian Bureau of Statistics (ABS) Census revealed that First Nations people make up 20% of the homeless population, equating to an estimated 24,930 individuals, despite representing only 3.8% of the total Australian population (Australian Institute of Health and Welfare, 2023).

Australia's approach to addressing chronic homelessness using the Housing First model integrates key assertive outreach strategies designed to engage individuals who are often disconnected from traditional services. Assertive outreach plays a critical role in this approach, particularly in programs such as Pathways to Home and Together Home in New South Wales, as well as the Common Ground model operating in various cities. Outreach teams actively locate and engage individuals experiencing chronic homelessness, including those sleeping rough or living in temporary shelters, and connect them to permanent housing with immediate support (NSW Government, 2019; Department of Communities and Justice, 2024). These outreach efforts are essential for engaging people who are marginalized from conventional services, particularly individuals with complex needs such as mental health challenges and substance use disorders.

The Together Home program, launched in 2020, demonstrates the effectiveness of combining assertive outreach with Housing First principles. The program prioritizes engaging rough sleepers and placing them into stable housing without preconditions, such as sobriety or participation in treatment programs. An evaluation of the program found significant success, with approximately 80% of participants maintaining their housing for over a year and reporting improvements in their quality of life, including better health outcomes, increased social participation, and reduced reliance on emergency services (Brackertz, 2024). Similarly, Common Ground housing initiatives report high retention rates, with 80% of participants remaining housed after one year, highlighting the role of assertive outreach in ensuring long-term housing stability (Common Ground First Nation, 2020; Bullen et al., 2016).

In addition to housing retention, outreach programs have broader societal benefits. For example, studies have shown that assertive outreach strategies reduce the use of crisis services, psychiatric hospitalizations, and other emergency responses. Research from the Australian Housing and Urban Research Institute (AHURI) highlights that for every dollar invested in Housing First programs, there is a return of \$2.70 in cost savings due to reduced reliance on emergency services (Roggenbuck, 2022; AHURI, 2017).

These programs foster a sense of community and belonging among participants, further reducing the likelihood of returning to homelessness (Tsemberis, 2011). Assertive outreach in Australia is also implemented through Pathways to Home, a program in New South Wales focused on transitioning individuals from homelessness into long-term housing while providing wraparound support services.

This program addresses the needs of highly vulnerable individuals and builds trust through proactive engagement, often working with those who are reluctant to seek assistance through traditional channels (NSW Government, 2019). The success of such outreach

initiatives underscores the importance of proactive engagement in breaking the cycle of homelessness and supporting long-term recovery.

Overall, Australia's Housing First programs, such as Together Home, Pathways to Home, and Common Ground, demonstrate the significant impact of assertive outreach strategies. By addressing the immediate needs of rough sleepers and providing ongoing support, these programs not only reduce homelessness but also improve the quality of life for vulnerable populations, providing a model for effective homelessness interventions globally (Bullen et al., 2016; Australian Government, 2024; AHURI, 2017).



SURVEY RESPONSES & RESULTS

Demographic Characteristics

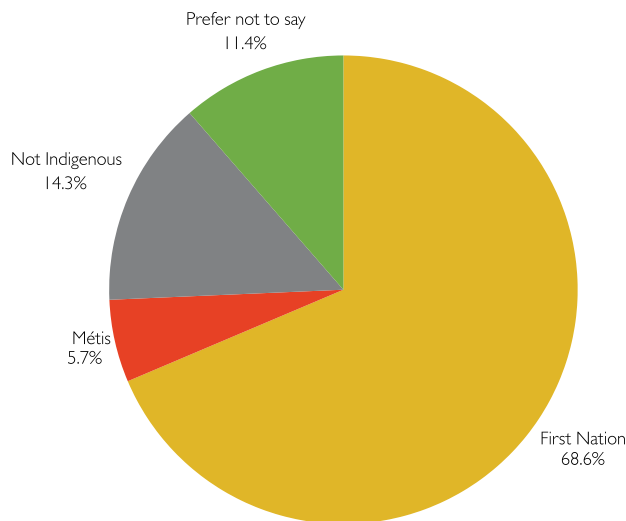


Figure 1 - Percentage breakdown of ethnicity

The results of the LEs surveyed indicate a strong representation of Indigenous peoples, with twenty-four people identifying as First Nations, and two identifying as Métis; the remaining five LEs did not identify as Indigenous. When we asked the survey respondents if they identified with any racial identity, eight LEs identified with specific Indigenous nations, including Oji Cree, Cree, Peguis, Anishinaabe, and Ojibwe. The remaining five who did not identify as Indigenous described themselves as a mix of Caucasian, Arab, and Filipino; four people declined to identify with a racial identity group.

Responses were collected from different age groups. There were no respondents aged 18-24; eight respondents were aged 25-34; 8 were in the 35-44 age group; ten were aged 45-54; and five were aged 55 and older. While this survey gathered valuable insights into the experience of respondents, time and resource constraints did not allow the data to reflect demographic groups such as gender and sexual minorities and individuals aged eighteen and under.

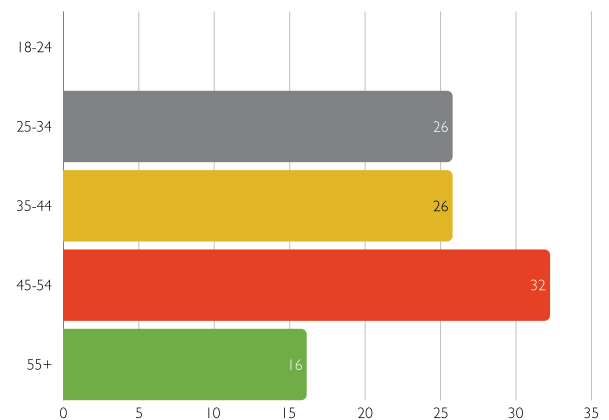


Figure 2 - Percentage breakdown of age of participants

Note: This survey includes responses from 31 participants.



Current Housing and Homelessness Status

The next section of our survey sought to understand the current housing status of the LEs who took part in our study. Only three indicated they were housed during data collection. Meanwhile, eighteen reported experiencing homelessness. Nine LEs cited different housing situations, including hidden homelessness, housing insecurity, or living in transitional housing, and one person did not disclose their housing status.

Ten respondents reported staying in a shelter within the last twelve months, and three had done so within the last six months. Shelter use was very frequent for some, as seven LEs stayed in shelters within the past month, and eight had stayed in a shelter within a week of completing the survey. When it came to housing supports, 18 participants shared they were not currently part of a housing or Housing First program, while thirteen were actively involved.

Two participants who were previously enrolled in a housing or Housing First program are no longer. Despite access to housing programs among most respondents, 26 LEs have stayed unsheltered or lived outdoors, four have never lived outside, and one person shared they stay wherever they can find a place, often a mix of shelter and outdoor living. 22 LEs identified they were not living outside, and nine stated they were living in encampments.

Encampments and Unsheltered Living

We sought to understand why encampments and outdoor living are prevalent in our community; the greater the presence of encampments is, the greater the need for street outreach services is. We asked respondents to share the reasons why they would choose to remain in encampments or sleep rough instead of staying in a shelter. If we understand what was causing encampments to become more frequent, we could make changes to mitigate these barriers and support more individuals in transitioning from unsafe, temporary spaces like encampments or unsheltered living to permanent housing solutions.

What we heard shed light on the complex reasons individuals choose encampments or unsheltered living over shelters. One significant barrier shared was safety. Many people shared that they often felt unsafe in shelters as a result of violence, theft, uncleanliness, and drug use; these circumstances created an environment that can be triggering, especially for those who are recovering from substance use. Overcrowding is also a major problem, as shelters are often full and have restrictions, like strict curfews and participants getting banned; a ban from a shelter prevents people from accessing beds even when they are available. As a result of these concerns, there has been an increase in encampments.

We identified that these temporary living structures provide a sense of personal space and privacy, distancing individuals from harmful influences such as gangs or drugs, which can make encampments unsuitable for everyone experiencing homelessness. However, we heard that issues from shelters can carry over into encampments since they are occupied by a close-knit group of people who live there.

The lack of stability and support within shelters highlights the urgent need for safer, cleaner, and more accessible shelter options. When asked about staying warm while in encampments or outdoors, layering clothing was the most common strategy, mentioned by 24 LEs. This was followed by using fire (ten mentions) and blankets (five mentions). Another method of heat retention shared was relying on body heat or staying active, such as walking around, to keep warm. Less common responses included using electric heaters or even heaters made out of terracotta pots. Individuals also disclosed using substances to cope with the weather conditions.

Past Housing Experiences

We inquired about the circumstances that led to the LE's last housing loss and what could have been done to help prevent it. Hearing directly from those affected was crucial, as it empowered them to share their experiences. Respondents identified a variety of personal, systemic, and situational factors contributing to their housing loss.

Many cited family breakdowns, such as relationship problems or caregiving challenges related to supporting themselves or others who were ill or struggling with addiction as significant factors. These personal challenges were often exacerbated by mental health issues and a lack of sufficient support services to help individuals return to their home communities after receiving care in Winnipeg.



Addiction was another major factor, with several respondents reporting that substance use led to financial instability and housing loss. Some felt that their evictions were influenced by a personal bias based on their socio-economic status or Indigenous identity. Others mentioned being evicted for allowing their unhoused community members to stay with them. Additionally, external factors, such as apartment fires, displaced individuals, and worsened housing instability.

These challenges clearly illustrate the complexity of housing loss and homelessness. Additionally, respondents shared potential interventions that would have helped avert their experiences. A recurring theme was the importance of family or community support; many individuals emphasized that stronger familial relationships or external family-based

resources could have helped them manage the pressures that led to housing instability. Access to mental health support was identified as essential for coping with the emotional and psychological strain that emerges from their circumstances. Substance use emerged as a key factor, with respondents expressing that a better understanding of addiction, improved access to recovery programs, and stronger peer support networks could have helped them break the cycle of instability.

Furthermore, affordable and transitional housing programs were identified as essential solutions for those experiencing housing insecurity. Many respondents felt that providing long-term, stable housing options, and transitional support,



Education about addictions could have prevented me from losing my job and housing, just knowing what I was getting myself into. Now, I can't get a house or a job because I don't have any references.



would offer a more secure foundation for individuals to address their other personal issues. Lastly, community-based resources, such as homelessness prevention programs and housing advocacy services, were identified as potentially helpful in preventing housing loss, assisting individuals in navigating complex systems, and providing legal support to address issues before eviction occurs. Culturally

and peer support groups were also noted as vital in helping individuals feel supported and understood throughout their process of seeking and maintaining housing

Street Outreach Interactions

While examining the current state of street outreach services in Winnipeg, survey responses shed light on both the use of these essential resources and the community's understanding of availability.

Outreach services in Winnipeg are a critical lifeline for individuals navigating homelessness and related challenges. As people face the complexities of homelessness, food insecurity, and the need for support services, understanding their feedback is crucial. This section delves into the areas where outreach services are accessed, which organizations are actively providing them, and highlights the most pressing needs identified by participants. By capturing these insights, we can better grasp the challenges faced by the community and the vital role outreach services play in fostering a safe and supportive environment.

The survey results reveal that almost all the LEs— 29 out of 31 participants—have accessed street outreach services (see Figure 3), indicating a strong reliance on these programs. Main Street Project emerged as the most frequently utilized service, with twenty two participants reporting use, followed by Street Connections (nine mentions), DCSP (eight), Sunshine House (six), Bear Clan (five), and RAY (four).

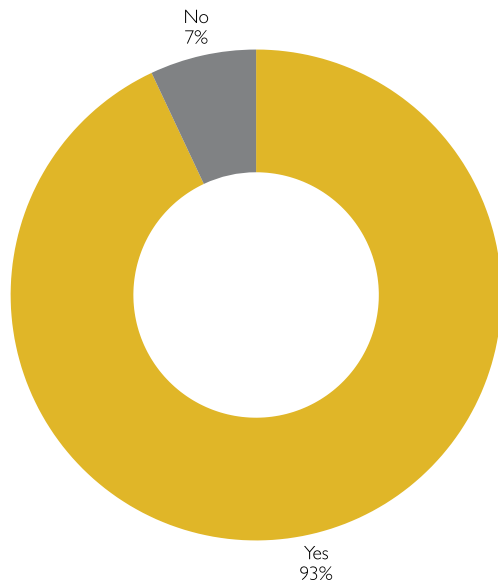


Figure 3 - Percentage breakdown of participants who have accessed street outreach services. (N=31)

Additionally, 11 individuals highlighted their use of other outreach initiatives, indicating the diverse network of support available in the city.

When examining current physical access to outreach services, Point Douglas was identified as the most frequented area, with 29% of respondents accessing services there. This was followed by Downtown at 22%, the North End at 16%, and Central at 11%. Some respondents

also mentioned accessing services in neighbourhoods such as St. James, West Broadway, the West End, and West Central, though these were less frequently reported. This feedback underscores that while outreach services are concentrated in key areas, many neighbourhoods still face challenges due to insufficient resources.

In terms of the resources provided through street outreach, food was the most accessed resource, with 25 out of 31 participants relying on these services for proper nutrition. Clothing services were accessed by 16 LEs, while 12 used outreach workers for harm reduction supplies, and another 12 for housing referrals. (see Figure 4).

Other essential supports included transportation services for seven LEs, navigation assistance for five, and four individuals utilized outreach services for resources like showers or washroom facilities. Together, these insights highlight the vital role that street outreach services play in meeting immediate and long-term needs within the community.

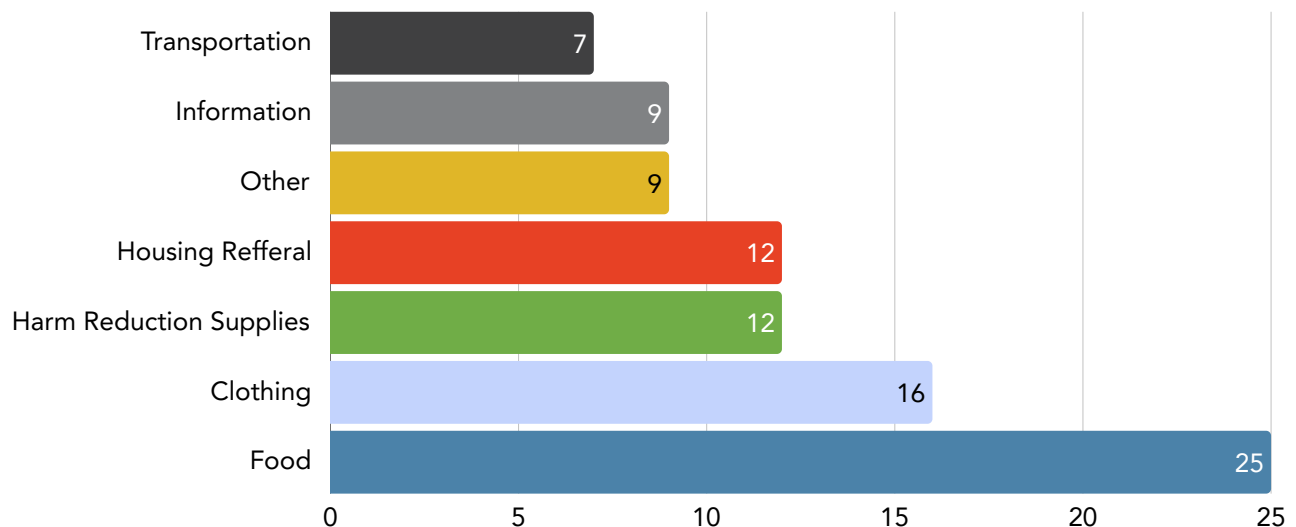


Figure 4 - Percentage breakdown of resources provided through street outreach

Lived Experience Service **Needs and Gaps**

While assessing the current landscape of outreach services in Winnipeg, understanding the existing needs and gaps within the community is crucial. Despite the availability of various support resources, many individuals have expressed concerns about accessibility and the adequacy of services across different neighbourhoods. This section explores the specific needs identified through recent surveys, highlighting areas where support is insufficient, and demand is particularly high. By examining these gaps, we gain valuable insights into enhancing service delivery, ensuring that everyone in the community receives the support they need to thrive.

Feedback from the thirty one LEs surveyed has given rise to several key recommendations for improving street outreach services in Winnipeg. A recurring theme is the need to expand outreach programs to ensure broader geographic coverage and increased accessibility.

Respondents emphasized the importance of greater visibility, suggesting more foot patrols, mobile vans, and personal engagement to build trust and foster stronger connections with those in need. The need for compassionate care and friendship was also highlighted, reflecting a desire for person-centered support approaches. Some participants also noted specific services, such as eye care and transportation as valuable.

Enhancing access to essential resources — such as food, warm clothing, hygiene

supplies, and shelter—was identified as a significant priority, particularly during colder months when vulnerabilities are heightened. Food security was also a prominent concern, with requests for food aid, hygiene support, and warm clothing. A significant emphasis was placed on housing, with many participants expressing an urgent need for housing programs and housing-focused outreach services for those experiencing homelessness.

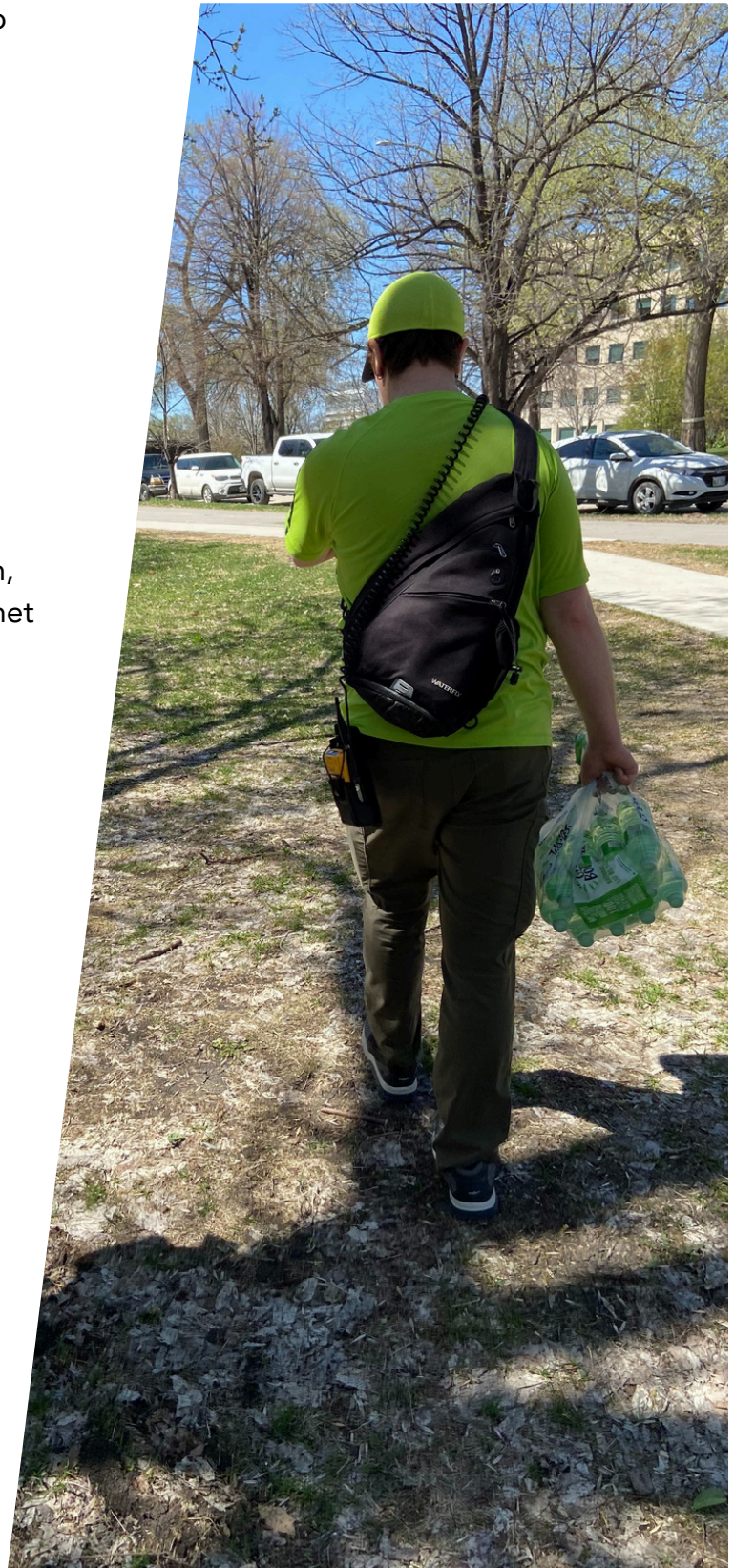
In addition to material support, there is a strong call for increased services to address addiction and mental health challenges, including more detox services, mental health support, and person-centered care approaches. Respondents suggested involving individuals with active living and lived experience in outreach efforts to foster empathy and understanding, ensuring outreach teams can build meaningful relationships with those they serve. Improving infrastructure, such as adding washrooms, water stations, and shelters, throughout the city was another critical area of focus, along with additional mobile support units to reach individuals in traditionally underserved areas.

LEs emphasized the necessity for a fairer distribution of outreach services across all neighbourhoods in Winnipeg to effectively address gaps. Areas identified for increased access included Elmwood, Osborne, St. Vital, and McPhillips, alongside traditionally served neighbourhoods such as Downtown and Point Douglas. Many participants advocated for citywide outreach

expansion, ensuring equitable access to services regardless of location.

This recommendation aligns with the community's broader call for comprehensive, accessible, and compassionate support systems.

Overall, these findings highlight the urgent need for Winnipeg's outreach services to be more inclusive and responsive to the community's diverse needs. By addressing these gaps and prioritizing a person-centered approach, Winnipeg can create a stronger safety net for its most vulnerable residents.



Service Provider Survey Responses

To gain a proper understanding of the Street Outreach services in Winnipeg, we spoke to a variety of front-line organizations and asked for their feedback on the current outreach system in Winnipeg.

General Information and Overview

We asked the SPs who participated in our survey about their experience working in street outreach. Six reported they had just started (under 12 months), seven had been working for one year, six for two to three years, two for three to four years, and eight had five or more years of experience (see Figure 5). It is important to note that this demographic information does not accurately represent the length of time that outreach organizations have operated, as reliance on project-based and short-term funding that often ends can be cited as a barrier to long-term staff planning and retention (The Office of the Federal Housing Advocate, 2024).

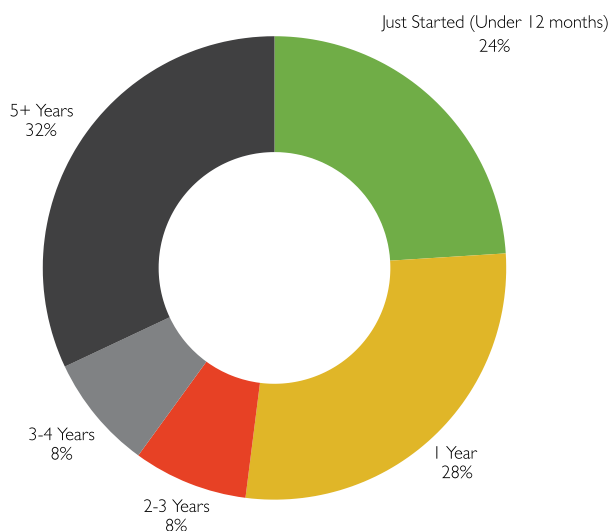


Figure 5- Percentage breakdown of the length of time service providers have worked in outreach

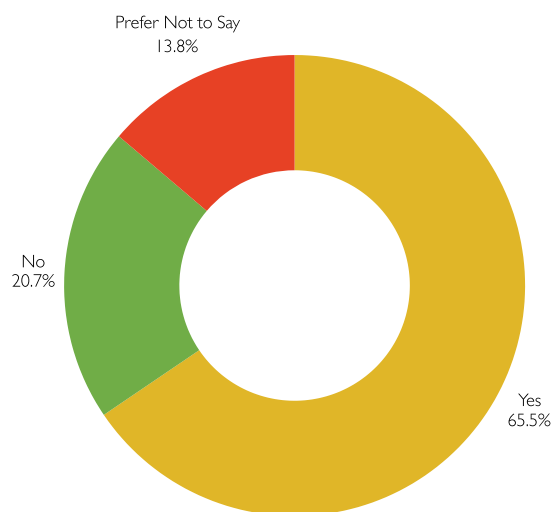


Figure 6- Percentage breakdown of the people who have lived/living experience of homelessness

19 of the SPs indicated having lived/living experience, six respondents reported not having lived experience, and four chose not to disclose their personal history (see Figure 6). This highlights the diversity of experiences among SPs, emphasizing the importance of ongoing training to ensure that all team members, regardless of their background, are equipped with the skills and knowledge necessary to effectively support individuals in need. Tailoring training to address both lived experience and professional competencies is essential for a more inclusive and responsive outreach approach.

Mobile Outreach and Transportation

In mobile outreach services, community members most commonly request transportation to shelters, hospitals, and their home encampments. A considerable number also ask to be taken to their homes or the homes of friends and family, reflecting the need for safe spaces or the desire to reconnect with loved ones. Outreach teams are frequently asked to transport individuals to food resources or treatment centers, such as detox facilities and substance use treatment programs. Of the service providers surveyed, 17 service providers said they offer transportation, seven do not, and five offer it occasionally, depending on the situation. Transportation needs vary, but the focus remains on helping individuals access essential services, medical care, and secure locations. Despite logistical challenges, such as vehicle availability or safety concerns, outreach teams strive to meet these needs whenever possible, ensuring that people are supported in reaching the destinations that best address their immediate needs.

Street outreach services are offered across a wide range of areas, with many respondents indicating they cover key neighbourhoods such as Downtown, Point Douglas, North End, St. Boniface, Broadway, West End, and Central. Some organizations also provide services in St. James, West Kildonan, East Kildonan, and Transcona. While a few respondents focus primarily on Downtown or specific areas like Point Douglas or the West End, others offer citywide coverage, although visits to neighbourhoods such as East/West Kildonan and Transcona are less frequent. Additionally, some outreach services extend beyond the core areas, covering more distant neighbourhoods like St. Vital, Southdale, or other areas as

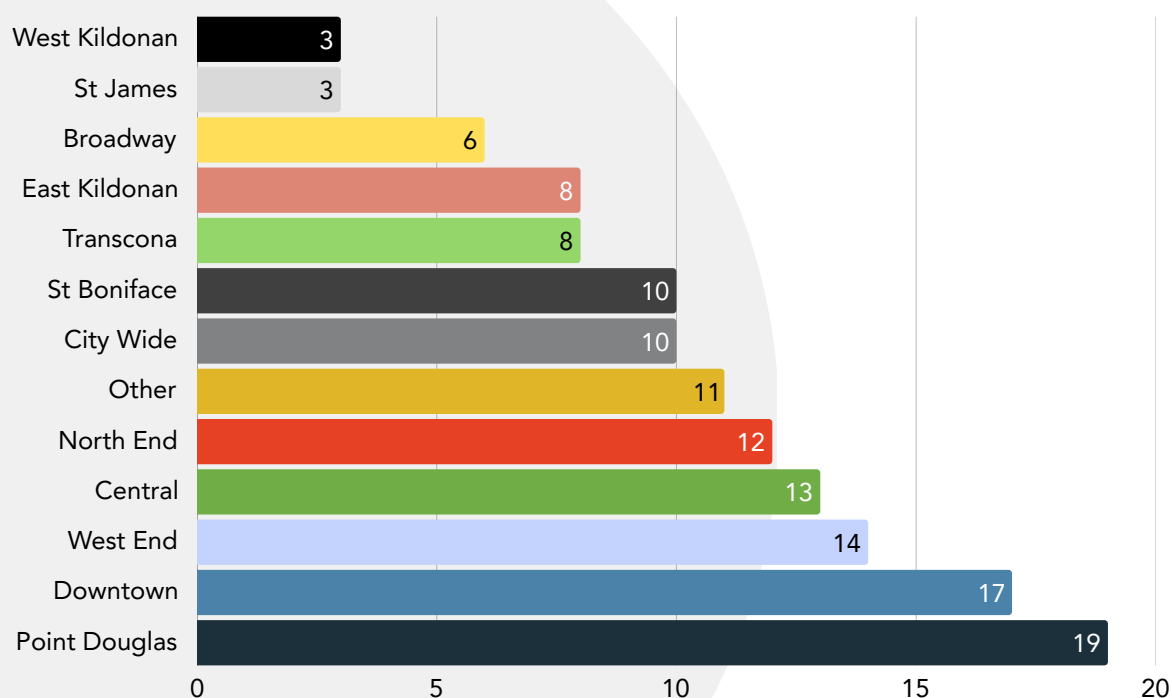


Figure 7 - Breakdown of the number of outreach services in different areas of Winnipeg, MB

requested. Several respondents also mentioned that they will occasionally serve locations outside of their catchment, if it is within a reasonable driving distance; this expands the reach of outreach services to a broad range of locations (see Figure 7).

Street Outreach services provide a comprehensive range of resources aimed at supporting individuals in need and addressing their immediate and long-term challenges. Core resources include clothing, food, water, and transportation, with safe transportation options provided either by walking or mobile means (see Figure 8). In addition to this, many outreach programs offer housing assistance to help individuals secure stable living arrangements. Case management services are frequently provided to guide individuals through accessing additional support, including mental health care, housing, and social services.

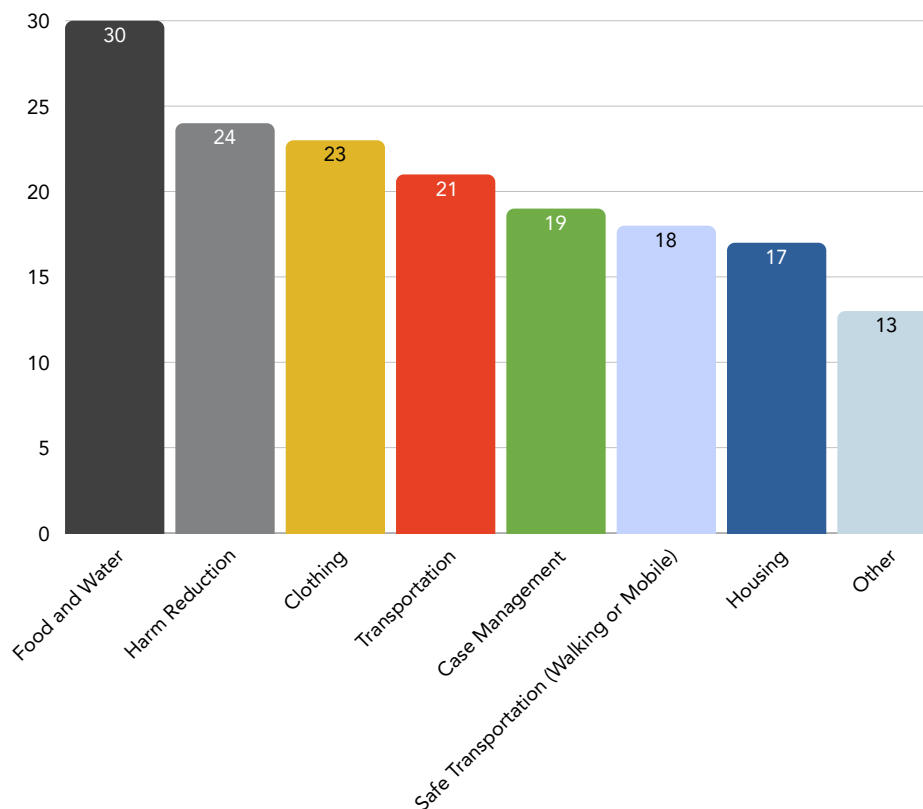


Figure 8 - Breakdown of Core Resource Types and Quantities Reported by Service Providers (SPs)

A key focus area of these services is on harm reduction; this includes distributing supplies like safer sex materials, naloxone for overdose prevention, and hygiene products. Some outreach services also offer wound care, non-emergency medical assistance, and butane refills for those who may rely on propane for heating or cooking. Outreach workers may assist with legal matters, provide support navigating income systems such as Employment and Income Assistance (EIA), and offer crisis intervention services. Specialized outreach services are also available for youth aged 16-26, addressing their unique needs

for support, shelter, and safety. Moreover, several programs include immediate support such as wellness checks, assistance with legal matters, and help with moving, storage, clean-ups, and linkages to addiction recovery and other critical services like medication delivery.

By providing a broad spectrum of resources, Street Outreach services aim to improve the overall well-being of individuals and support their path toward stability and self-sufficiency.

Youth and Community Engagement

Service providers (SPs) interact with youth at varying frequencies, depending on the organizations involved and the specific catchment areas of the services offered. While some organizations primarily serve youth and see them daily, 14 SPs indicated that their interactions with youth occur only sometimes, and nine engage with youth infrequently (see Figure 9). The dynamics of these interactions are situational and are influenced by the characteristics of the local youth population.

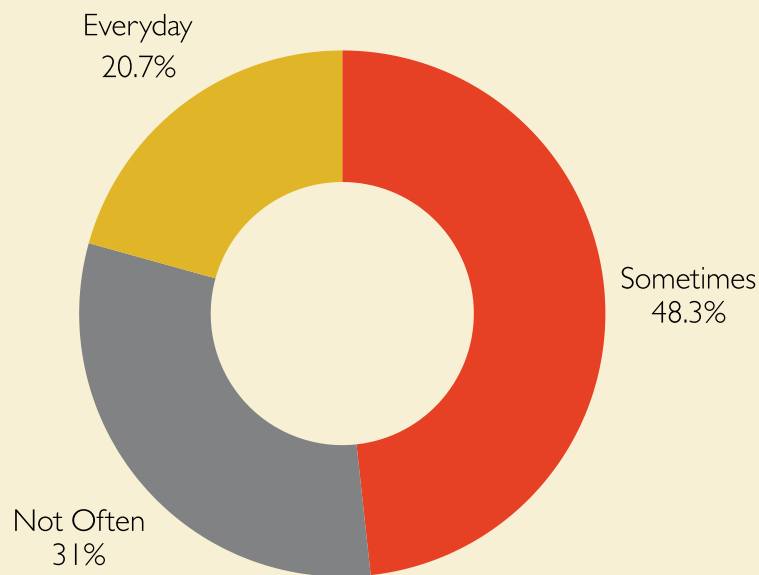


Figure 9 - Breakdown of Percentage of SPs that interact with youth

According to SPs' responses, the most common areas for youth activity include the West End and North End. Other notable areas are Downtown, and locations close to youth-serving organizations, such as RaY in the West Broadway area and The Link in the River-Osborne. In contrast, some respondents pointed out that areas like St. Boniface, St. Vital, Transcona, Elmwood, and Windsor Park in the eastern part of the city seem to have youth activity, with many responses emphasizing its vital role in outreach work related to young people.

Harm Reduction and Traditional Medicine

When asked about offering traditional medicines such as Sage, Sweetgrass, tobacco, or smudging equipment, the responses were divided. 12 SPs indicated that traditional medicines are offered regularly, nine reported that they are only offered when available. Meanwhile, some SPs stated that they do not provide traditional medicines at all. This diversity in responses reflects the varied approaches to care within outreach organizations, where traditional healing practices are integrated in some cases, while others may rely more heavily on western methods. This question serves as a lead-in to a broader discussion about harm reduction practices, exploring how these approaches are incorporated into the services provided to individuals experiencing homelessness or substance use challenges.

Among the harm reduction resources assessed, bubbles (used for safer substance consumption) ranked as the most in-demand resource, with many service providers prioritizing it as the in highest demand. Syringes followed closely as the second most requested item, reflecting the high need for safe injection supplies to reduce health risks like infections. Glass stems, used for safer smoking, ranked third, highlighting a significant demand for resources addressing various modes of substance use. Condoms were consistently prioritized as an essential resource, underscoring the ongoing importance of sexual health and safety in outreach efforts (see Figure 10).

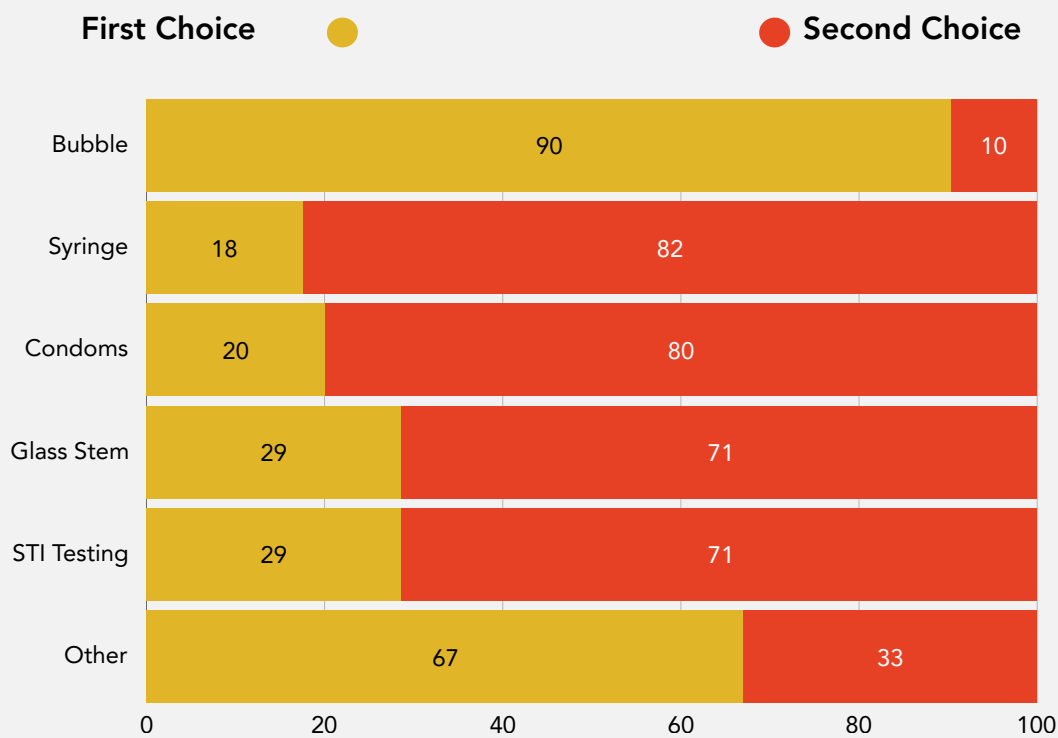


Figure 10 - Breakdown of Harm Reduction Resources Ranked by Service Providers in Order of Perceived Demand

Sexually transmitted infection (STI) testing, though vital, was ranked lower overall, suggesting that while important, it is not as urgently perceived as other immediate-use supplies. The “other” option for harm reduction resources that may include naloxone, tourniquets, sharps containers, and fentanyl testing strips, placed last by all SPs, which may reflect a potential niche or situational demands within certain communities. These findings emphasize the critical need to tailor harm reduction supplies to the specific needs of the population being served, ensuring access to tools that directly address health and safety concerns.

Encampments and Fire Safety

When we looked at the outreach efforts to encampments, the data revealed a significant trend among service providers. 21 SPs indicated that they actively provide outreach services to these encampments, highlighting a commitment to addressing the needs of vulnerable populations. Conversely, five SPs do not. Service providers highlighted that street outreach provides encampment individuals with essential resources such as food, water, hygiene supplies, harm reduction materials, clothing, and medical care. These efforts address basic survival needs while fostering trust and building relationships that facilitate connections to broader support systems, which may include housing programs, mental health services, addiction treatment, and case management.



We all should have the right to safety protocol information and items free of charge. It saves lives. including first aid training.



Encampments benefit significantly from outreach teams' ability to meet people where they are, which reduces barriers to accessing critical services. Street outreach teams also provide emotional support, advocacy, and safety checks, helping individuals navigate complex systems, like applying for identification or securing financial assistance.

Additionally, many outreach efforts focus on harm reduction, distributing supplies such as naloxone, sharps containers, and safe-use kits to reduce health risks. SPs emphasized that consistent engagement with encampments helps mitigate social isolation, fosters community integration, and promotes safer living conditions through fire safety education, trash cleanups, and collaboration with local authorities. By addressing both immediate needs and long-term goals, outreach teams improve health, safety, and dignity for those living in encampments, supporting pathways toward stability and reintegration into society.

We asked the SPs completing the survey for their feedback on the implementation of fire safety protocols. Most respondents said that they believe fire safety protocols in encampments can significantly reduce the risk of injuries, fatalities, and property damage caused by fires. Providing essential resources such as fire extinguishers, sand buckets, burn barrels, or designated fire pits, along with education on safe fire practices and emergency procedures, can help make encampments safer. These protocols give residents the knowledge and tools to manage fire hazards responsibly, protecting both their safety and their belongings.

In addition to improving safety, fire safety protocols can foster a sense of stability and security within encampments, encouraging better relationships with local authorities and neighboring communities. While it was mentioned that some individuals may struggle to follow these protocols due to mental health or substance use challenges, many will benefit from the resources and training provided. Harm reductive options, like alternative heating sources such as hand warmers, heated blankets, or jackets could also address the practical needs of encampment residents more effectively and sustainably.

Overall, service providers stated that fire safety measures not only create safer environments within encampments but also contribute to broader community health and well-being by reducing risks and promoting dignity for those experiencing homelessness.



Collaboration and Partnerships

Street outreach services rely on collaboration between agencies, organizations, and professionals to effectively meet the complex needs of individuals facing homelessness, addiction, and other challenges. Common partners include the Main Street Project (MSP), Downtown Community Safety Partnership (DCSP), Siloam Mission, and St. Boniface Street Links (SBSL), all of which are frequently mentioned by outreach teams. These efforts extend beyond just social services, with collaboration also taking place between healthcare providers like Shared Health, local police, and fire services (WPS and WFPS), as well as community safety organizations such as Bear Clan. Outreach teams work with private housing providers, local businesses, and educational institutions, forming an expansive network to provide comprehensive support to those in need.

These partnerships take many forms, from simple referrals to more involved efforts like coordinating care plans for individuals. Outreach teams often work together to help people secure housing, obtain medical supplies, or access food while also ensuring transportation needs are met. Partners frequently share information about drug trends, safety concerns, and vulnerable individuals, improving the ability to respond effectively to emerging issues. Collaboration also extends to harm reduction, case management, and advocacy efforts, with multiple organizations joining forces to meet the diverse needs of the community. In many cases, outreach services also work closely with shelters, detox centers, addiction recovery programs, and other vital resources that offer critical support to individuals on the streets.

Respondents consistently expressed a desire for stronger integrated collaboration across sectors to improve outreach efforts. Many emphasized the need for closer ties between health services, shelter services, and EIA, recognizing the significant role these areas play in addressing homelessness and its associated challenges. The call for more coordination between different outreach teams was also common, as a more seamless and person-centered approach to support individuals more effectively. Respondents also identified the need for WPS and WFPS to work collaboratively with outreach teams to enhance safety and emergency response capabilities.

Furthermore, there was a call for better connections with youth-serving shelters and foot patrol teams, as these organizations often provide essential, on-the-ground support for vulnerable individuals. The role of funders was highlighted, with many emphasizing the need for stronger partnerships between service providers and funding bodies, and for flexibility in funding requirements to better align services, ultimately creating a more responsive and effective outreach network.

Youth and Community Engagement

Service providers interact with youth at varying frequencies, depending on the organizations involved and the specific catchment areas of the services offered. While some organizations primarily serve youth and see them daily, fourteen (14) SPs indicated that their interactions with youth occur only sometimes, and nine engage with youth infrequently. The dynamics of these interactions are situational and are influenced by the characteristics of the local youth population.

According to SPs' responses, the most common areas for youth activity are the West End and North End. Other notable areas are Downtown and locations close to youth-serving organizations, such as RaY in the West Broadway area and The Link in the River-Osborne. In contrast, some respondents pointed out that areas like St. Boniface, St. Vital, Transcona, Elmwood, and Windsor Park in the eastern part of the city seem to have youth activity that is more dispersed or less concentrated compared to the core neighbourhoods. Overall, the West End appears to be a hotspot for youth activity, with many responses emphasizing its vital presence in street outreach services related to young people.

Service Providers' Feedback on Outreach Gaps

In our survey, we asked the service providers involved in street outreach to identify common gaps in the current landscape of services, as their direct experience and daily interactions with individuals in need make their insights particularly valuable. The responses highlighted several recurring issues that affect both service delivery and participant outcomes in the community. One of the most frequently mentioned concerns in the survey was the lack of coordination and communication between outreach organizations. This gap leads to significant challenges, including inconsistent service delivery, particularly for encampments and individuals sleeping rough. The absence of a unified system for tracking locations, services, and needs makes it difficult for outreach teams to provide timely, effective, and comprehensive support to those in need. Inconsistent service delivery not only creates confusion but also results in some individuals being overlooked or not receiving the necessary resources.

Coordination among outreach teams is critical, as it ensures that services are available where they are most needed and that there is no duplication of effort or missed opportunities for collaboration. According to the CAEH (2023), effective coordination is a cornerstone of ending homelessness, as it can lead to better resource allocation, reduced service gaps, and a more comprehensive approach to addressing the needs of individuals experiencing homelessness. Survey respondents share that the lack of coordination often means that outreach teams are not aware of which services are already being provided in certain areas, leading to inefficiencies or gaps in care. For instance, a person who is

already receiving basic supplies from one organization may end up being approached by another team, duplicating efforts and potentially damaging pre-built relationships with the encampment residents. On the other hand, encampments in less trafficked areas might not be prioritized, leaving those individuals without the support they urgently need. Respondents shared that, to improve outcomes, outreach teams must collaborate more closely, share data and resources, and establish common standards for service delivery. This kind of coordination allows for more effective outreach strategies, ensures that no one falls through the cracks, and can make services more efficient and responsive to the evolving needs of individuals experiencing homelessness.

Additionally, respondents pointed to the severe shortage of affordable housing and safe spaces, with a particular focus on the lack of options for individuals with mobility issues or those unable to access traditional shelters. Mental health support emerged as another significant gap, with respondents emphasizing the inadequacy of services for individuals dealing with both mental health challenges and substance use issues. Respondents also noted the shortage of appropriate care for those with severe addictions. This includes long wait times for detox programs and insufficient substance use treatment services.

Funding limitations were another common concern, raised by outreach teams often unable to purchase critical supplies needed to allow them to meet the diverse needs of participants due to restrictions on funding. Another key gap identified by respondents was the lack of accessible harm-reduction supplies; with a limited supply of items like needles and pipes, individuals are left with no choice but to use unsafe equipment. Similarly, respondents highlighted the shortage of trained staff and resources, particularly for responding to high-risk situations like overdoses; this is compounded by the extremely high turnover rates within the sector. Additionally, ten percent emphasized the mismatch between the level of care required and what is available, particularly for individuals with complex mental health or addiction issues and the need for more comprehensive, wraparound services.

The concentration of services in areas like the Downtown and Central neighbourhoods was also noted as a gap by several respondents; many people are fearful of this area which leads to disparities in the support they receive. Additionally, respondents pointed out the lack of services for unhoused non-Indigenous individuals, stressing that while Indigenous homelessness has received attention, similar support is needed for people who are not Indigenous. Finally, issues like the lack of youth-specific mental health services and safe spaces for women in domestic crisis were mentioned, further highlighting the need for targeted services for vulnerable groups.

Service Provider Training Needs

When we asked the SPs what kind of training they believed would be most beneficial for street outreach, there was significant emphasis on the need for further mental health training, frequently ranking it as their top choice. This training is crucial for helping workers understand and support individuals who are facing mental health challenges, especially in outreach situations. Following closely behind is harm reduction training, which provides essential knowledge on minimizing the negative impacts associated with risky behaviors, often linked to substance use. Service providers also highlighted the importance of Housing First training, which underscores the importance of safe stable housing.

Additionally, it was noted multiple times that training on Indigenous perspectives is vital to ensure the delivery of culturally relevant services and to facilitate positive, safe connections with Indigenous people experiencing homelessness. While other training areas were ranked lower, they still hold importance in the field. Skills in assistance and communication are commonly mentioned, alongside specialized training such as Narcan administration, crisis intervention, wound care (first aid), and de-escalation techniques. Many providers also expressed a need for training in trauma-informed care and case management, as well as in emotional control, empathy, conflict resolution, and client care.

NVCI TRAINING

Trauma Informed Training

CONFLICT RESOLUTION

De-Escalation Training

PTSD Management

Intervention Training

Wound Care

SAFETY TRAINING

Communication Training

Case Management

A few responses also pointed to the importance of mental health first aid and Nonviolent Crisis Intervention (NVCI) training. While some respondents felt that no specific training was necessary, many emphasized the value of a well-rounded skill set to effectively serve individuals in outreach environments. Overall, the insights from service providers paint a comprehensive picture of the diverse training needs that can empower outreach workers to make a real difference.

SHADOW & INTERVIEW FINDINGS

As another method of data collection, the research team spoke to 13 organizations and informed them that End Homeless Winnipeg was researching to gain insights into the current landscape of outreach services in the city. It was explained that we would be examining outreach operations in Winnipeg to identify gaps within the sector. Nine organizations agreed to participate in in-person interviews, four of which the research team shadowed, and four organizations declined participation. Throughout this section, each organization will be referred to as a Community Organization (CO) for anonymity.

Outreach Approaches and Services

The organizations observed play a vital role in the delivery of outreach for addressing homelessness, with many organizations offering a variety of basic needs, such as food, hygiene products, clothing, and case management. Several organizations provide water, food, and hygiene supplies to individuals living in encampments. Notably, CO3's approach included integrating addiction rehabilitation as a foundation for recovery, which helps build trust between staff and participants based on shared lived experiences. Similarly, CO4's outreach focuses on relationship-building, offering warm meals, and supportive case management. CO2, through its extensive outreach services, also ensures follow-up services for participants, demonstrating the importance of continuity in care. The emphasis on meeting basic needs is consistent across all organizations, but each group demonstrated distinct strategies to foster trust and maintain contact with their populations.

Housing and Crisis Support

A significant challenge faced by all organizations was the lack of suitable, affordable housing options for their participants. Several SPs expressed a large struggle with the limited housing stock and long waitlists. For example, CO1 provides basic case management but cannot directly offer on-site housing due to high demand. CO2, despite offering vital case management, faces a similar issue with referrals, acknowledging the demand for housing far outstrips supply. CO5 has experienced particularly severe impacts due to the loss of funding, leaving them unable to conduct new intakes and working with a significant backlog; over 50% of the people on their caseload are currently unhoused due to limited housing availability. The lack of affordable, accessible housing was also a notable concern for CO6, which struggles with barriers such as guarantor requirements, and the inability for the organizations are unable to act as guarantors, as

well as the lengthy identification processes that hinder housing efforts; CO6 stated in our interview “We have recently attended 90 viewings, submitted 80 applications and had a zero percent success rate”.

Mental Health and Crisis Response

Another shared concern was the need for specialized mental health and crisis response teams. Both CO1 and CO3 noted that their outreach efforts are hindered by the absence of dedicated teams to address mental health crises, with CO1 specifically advocating for the establishment of on-site crisis intervention teams. While shadowing CO1, the research team observed an interaction with a community member who became hostile towards CO1’s staff which stemmed from previous disagreements. The unpredictable behaviour of the individual led CO1 to discontinue services to that individual. During a home visit, CO3 highlighted their de-escalation approach, which relies heavily on trust and persistence, but underscores the gap in formal mental health support. This challenge was echoed by CO4, who also noted a lack of mental health support despite the growing need for support for encampment residents.

Additionally, CO1 reported tensions with police involvement in crises, reflecting the broader issue of harmful police interactions with vulnerable populations. CO1 advocated for outreach models such as the model used in Victoria, BC, where officers are trained in de-escalation and work in plain clothes, prioritizing harm reduction and reducing trauma in interactions with individuals experiencing homelessness. While CO4 was not as focused on policing, their work in outreach also highlighted challenges in working with agencies lacking harm-reduction alignment.

Organizational Coordination and Data Tracking

A common theme across many organizations was the struggle with inter-agency coordination and the need for better data tracking. CO1 and CO3 use a whiteboard to track encampment locations and services, while CO2 employed smartphones to log data in real-time, enabling for real-time documentation of services rendered and encampment locations. However, the research team noted that poor coordination led to fragmented service delivery and missed opportunities for collaboration.

This fragmentation was particularly apparent in CO7, where the lack of information sharing between outreach teams and health organizations hindered the development of a coordinated response. A lack of integration between outreach teams and health services prevents effective support and limits the impact of outreach efforts, particularly for individuals facing complex health issues or urgent housing needs.

Staffing, Funding, and Resource Gaps

Almost all organizations noted significant gaps in funding, staff, and resources. CO5's experience was particularly stark, as they lost funding from United Way used to operate their outreach group. Similarly, CO6 identified challenges with poor or nonexistent rental histories for the clients they serve, along with the difficulty obtaining documentation required for housing applications. CO4, while providing essential services like food and hygiene, was also underfunded, limiting its ability to fully support those in need.

CO2's lack of trained staff to conduct on-site housing assessments for Naatamooskakowin highlighted a significant gap in services. While staff could provide basic needs and referrals, their inability to offer Coordinated Access assessments meant many participants faced barriers in obtaining housing support. CO5's experience with Naatamooskakowin, which they found to be poorly implemented, further illustrates how fragmented and inefficient systems can hinder positive outcomes. They felt that the system was difficult to navigate and required too much commitment, making it challenging to fulfill their own job responsibilities. This gap was a recurring theme across various organizations, emphasizing the need for increased funding and training to better address the complex needs of those experiencing homelessness in Winnipeg.

Community Engagement and Trust-Building

The importance of community engagement and trust-building was highlighted across all organizations. CO2, CO3, and CO4 displayed strong relationships with the community, where staff were often addressed by their first names and engaged in personal interactions with participants. CO2's collaborative relationships with other community organizations were particularly notable; they conducted home visits and provided medical transportation, which solidified their role as a trusted community resource.



CO3 also stood out for its unique approach of incorporating lived experiences into its outreach, fostering genuine connections with participants, and encouraging long-term engagement. In contrast, CO5 faced challenges due to outreach service cuts and strained relationships caused by underfunding, which created a significant gap in trust-building efforts in the neighborhoods they serve. CO5 reported feeling isolated and uninformed due to a lack of collaboration with other organizations, as there were no additional services available nearby.

Shadow in Edmonton, Alberta

In Edmonton, the research team attended a presentation by Edmonton Police Services (EPS) about their Encampment Response Unit, which addresses the risks associated with encampments, including theft, overdoses, and dangers related to extreme weather. EPS emphasized the safety risks posed by encampments, such as human trafficking and accidental deaths due to unsafe heating sources. Although their approach to clearing encampments was not trauma-informed, community members were allowed to vacate and collect their belongings. To support individuals exiting homelessness, Edmonton introduced the Navigation Centre, a centralized resource hub that offers identification services, addiction treatment, social welfare, and culturally appropriate support for Indigenous peoples.

The research team also shadowed Edmonton's Human-Centered Engagement Liaison Partnership (HELP) Team, which combines police and community organization staff. Each HELP team member is paired with a police constable and a community champion. The team observed that the HELP team's approach blends elements of a military/police framework with community engagement, emphasizing relationship-building and trust. This collaborative model highlights the value of strong partnerships between outreach services and law enforcement to effectively address community needs.



ANALYSIS & DISCUSSION

The findings from this study reveal significant gaps in Winnipeg's street outreach services and highlight the pressing need for systemic reform. Despite the commitment and adaptability of organizations and service providers, challenges remain in areas such as accessibility, collaboration, resource availability, and responsiveness to diverse needs. To effectively address these issues, a person-centered, coordinated approach is essential, informed by community recommendations and collaboration with municipal and provincial governments.

Resource Constraints and Housing Strategies

Winnipeg's chronic shortage of affordable housing stands as a critical barrier to resolving homelessness through street outreach. Service providers have shared frustrating experiences, such as attending numerous property viewings without securing a single rental due to stringent requirements and systemic discrimination. Furthermore, resource constraints also represent a critical challenge for Winnipeg's outreach services. The combination of insufficient funding, high staff turnover, lack of coordination, and a limited supply of affordable housing bottlenecks service delivery. This situation results in long waitlists and full caseloads that hinder SPs ability to onboard new clients and extend the wait times for housing among vulnerable populations, which can discourage individuals from seeking support. The housing crisis not only limits outreach effectiveness but further perpetuates cycles of homelessness. Innovative solutions, such as partnerships with local property owners, show promise but require substantial investment and policy developments to ensure safe practices.

Indigenous-Specific Challenges and Cultural Safety

The overrepresentation of Indigenous peoples among Winnipeg's unhoused population stems from historical and ongoing systemic inequities. Many Indigenous individuals experience homelessness as a disconnection not only from housing but also from their cultural identity, land, and community. Although some organizations incorporate culturally relevant practices to their services, such as offering traditional medicines and healing ceremonies, these initiatives lack widespread adoption and are often under resourced and unevenly distributed across the city. The lack of systemic commitment to Indigenous sovereignty and equity creates a significant gap in Winnipeg's outreach efforts. International models like Australia's Together Home initiative, and assertive outreach demonstrate the benefits of integrating Indigenous led approaches with mainstream services. Winnipeg must enhance culturally appropriate outreach services and ensure that Indigenous perspectives are woven into every aspect of outreach frameworks.

Safety and Accessibility in Shelter

Safety concerns in shelters and encampments remain major barriers for unhoused individuals seeking support. Although shelters are intended as safe havens, they are often perceived as unsafe due to issues such as violence, theft, overcrowding, substance use, and cleanliness. Many individuals find shelters unwelcoming due to restrictive policies, including curfews, bans on personal belongings, and high-barrier entry requirements that prioritize rule enforcement over immediate safety. Overcrowding exacerbates these issues, leaving many without a place to stay indoors, especially during Winnipeg's harsh winters. Consequently, several individuals opt for encampments, where they feel they have greater autonomy and protection from the concerns cited by shelter users. However, encampments also pose significant safety risks stemming from personal safety, inadequate heating, sanitation, and fire safety measures. While SPs have attempted to mitigate fire concerns by distributing fire safety supplies, these efforts are limited without broader systemic support. Moreover, encampments often face enforcement actions that lead to the confiscation or destruction of residents' belongings and housing structures, which further destabilizes their lives and fosters distrust in the system.

Improving shelter safety and accessibility must be a priority. This includes expanding existing shelter spaces to reduce overcrowding, investing in more housing, implementing trauma-informed policies, and fostering environments that respect individuals' dignity. Simultaneously, harm-reduction strategies for encampments and transitional housing units with wrap around support could help mitigate risks and foster trust between residents, outreach teams, and the support systems. A person centered, dual approach that prioritizes both immediate safety and long-term solutions is essential to effectively address these interconnected challenges.

Training and Capacity Building

Substantial gaps in training, such as trauma-informed care, cultural safety, and mental health crisis response were identified in the data collection process. Although 19 SPs reported having living experience, which provides valuable skills, there is a clear need for additional professional training, across all sectors, to effectively meet the complex needs of unhoused individuals, especially at a street outreach level.

Key training priorities identified by providers include Non-Violent Crisis Intervention, mental health first aid, and Indigenous cultural safety. NVCi training is essential for managing high-tension situations without resorting to force, ensuring that outreach workers can de-escalate crises effectively. Mental health first aid would equip staff to recognize and respond to signs of mental health distress, helping to bridge the gap between initial contact and the provision of more specialized care. Cultural safety training,

with a focus on Indigenous communities, is crucial for fostering trust and ensuring that outreach services are accessible and respectful to all individuals, especially those from marginalized backgrounds.

Investing in ongoing professional development and specialized training programs is key to strengthening the capacity of outreach workers. This investment would provide SPs with the tools necessary to navigate high-stress situations, build rapport with clients, and offer culturally relevant, compassionate care. Prioritizing these areas of development not only improves the quality of services provided but also supports the long-term effectiveness and sustainability of outreach programs. By focusing on these training priorities, there will be an increased understanding of how to better address the multifaceted challenges faced by unhoused individuals and help empower them on their path to stability.

Coordination and Fragmentation

Cities like Toronto and Edmonton serve as classic examples of centralized coordination systems. Homeward Trust in Edmonton serves as the system planner and ensures that information and funding is shared equitably among organizations serving the unhoused population. Similarly, Toronto's Coordinated Access ensures that all community organizations use uniform methods for delivering support, with shared access to client data. These models streamline service delivery, ensuring that individuals in need receive timely and integrated care.

One of the most pressing issues facing Winnipeg's outreach landscape is the fragmentation of services. The limited collective use of Naatamooskakowin, the Coordinated Access system, has led to duplicated efforts, missed opportunities for collaboration, and inconsistent service delivery. SPs frequently expressed difficulties in sharing information, tracking client needs, and aligning strategies across the sector. For instance, some providers depend on manual tracking systems (e.g., whiteboards), while others use smartphones to document services in real-time. Unfortunately, these methods function independently, highlighting the lack of a unified framework. By enhancing Winnipeg's Coordinated Access system and ensuring all organizations have equal access to data and client tracking, outreach efforts could be significantly improved.

Effective outreach requires robust partnerships and a willingness to collaborate and adapt among municipal authorities, service providers, and community organizations. While some organizations in Winnipeg have forged effective collaborations, others remain isolated, limiting their potential impact. Currently, tensions exist among organizations resistant to change, as they believe their approach is unparalleled. This mindset obstructs progress, as adaptability is crucial for developing a shared and effective model.



Additionally, selective involvement from municipal and provincial governments complicates the situation; it becomes damaging when a select few frontline organizations are consistently included in discussions, while equally deserving ones are left out. Organizations that have been deemed champions in the sector have continuously been excluded from high-level conversations surrounding homelessness and have not been included in the development of municipal or provincial response plans. This lack of inclusivity creates distrust within the community about Winnipeg's ability to address and implement changes.

Furthermore, the exclusion of most COs only exacerbates tensions within the sector. Actions by the municipal and provincial offices have further compounded these challenges, eroding confidence in the collaboration and coordination necessary to address homelessness.

To function effectively as a unified system instead of a collective of 40 separate entities, organizations and governments must prioritize flexibility, respect for different approaches, and collaboration within a common framework. Without coordination, the quality of services suffers, and people experiencing homelessness receive inconsistent and fragmented supports and services. It is crucial to promote inclusivity, adaptability, and shared responsibility among organizations to create a more cohesive and efficient support network. This will improve outreach efforts and better meet the needs of the community.

CONCLUSION

The findings from this study reveal an urgent call to action: Winnipeg's Street outreach services, though critical, are constrained by systemic inefficiencies, resource shortages, and gaps in coordination. Without immediate and significant reforms, these challenges will continue to perpetuate cycles of homelessness, leaving the most vulnerable residents underserved and at risk.

Winnipeg's extreme lack of deeply affordable housing supply is the most pressing barrier to effectively addressing homelessness and improving street outreach. SPs are stretched thin, forced to navigate systemic discrimination, restrictive housing policies, and insufficient resources. At the same time, shelters fail to meet basic standards of safety, dignity, and accessibility. Additionally, encampment residents are left unsupported and continuously displaced, furthering the cycle of traumatization and fostering distrust toward the systems they are meant to seek support from. The overrepresentation of Indigenous peoples among the unhoused population showcases the need to provide culturally relevant outreach and housing that respects Indigenous sovereignty and addresses historical inequities.

Collaboration among organizations is vital; however, the fragmentation of the outreach landscape undermines its collective impact. The lack of coordinated services across the city has significantly eroded trust between unhoused individuals and outreach organizations; these tensions directly impact the ability to work cohesively and deliver consistent, high-quality support to the community. This issue was highlighted in the responses from LEs, who emphasized the urgent need for greater unity and collaboration within the sector. Additionally, the lack of a fully coordinated system within the outreach sector hinders data sharing, and effective service delivery. With only one organization funded by Reaching Home to deliver outreach services, the deliverables to utilize Coordinated Access and HIFIS aren't prioritized. Municipal and provincial governments must take an active and inclusive role in fostering unity among outreach service providers through empowering a centralized community entity to bridge the gap in data tracking, and unifying service delivery.

The time for change is now. Without a truly unified and transparent approach, the system remains fragmented, and its intended purpose to provide seamless, equitable access to housing and support, cannot be upheld. A person-centered, trauma-informed approach is essential to build trust, foster dignity, and meet the diverse needs of Winnipeg's unhoused population. This requires substantial investments into affordable housing, expanded cross-sectoral training for service providers, and funders alike, and a uniform framework that prioritizes collaboration and data-driven decision-making. By emulating successful models

from other cities, Winnipeg can strive for innovative solutions, such as designated encampments, assertive outreach, and Indigenous-led outreach services that integrate traditional knowledge with modern practices.

To support this transformation, we have developed targeted recommendations based on the study's findings and insights from the community. These recommendations, detailed in the following section, illustrate potential pathways to improvement to create meaningful change in Winnipeg's Street outreach services.

Despite facing numerous challenges, community organizations and frontline staff work tirelessly to bridge the service gap for our relatives who are experiencing homelessness. Many front-line workers often go above and beyond the boundaries of their job descriptions to provide support. Without their dedication, commitment, and hard work the state of homelessness in our city would be significantly worse. Their tireless efforts are recognized as critical to our sector.





PRELIMINARY RECOMMENDATIONS FOR OUTREACH IMPROVEMENTS

To maintain the integrity and transparency of this document, the responsibility of selecting “implementers” will be entrusted to the community. This approach allows for the identification of the most appropriate entities for each role, ensuring that the collective impact of this initiative is maximized and aligned with the community's needs and values. Recommendations 1–8 outline critical changes necessary for immediate improvements in the outreach sector. Recommendations 9 and 10 focus on long-term initiatives that will enhance street outreach but require further development before they can be effectively implemented.

1. Expand Geographic Coverage

Recommendation: Broaden the geographic reach of street outreach services to include underserved areas ensuring equitable access across all neighbourhoods.

Implementation Plan:

- Conduct a geographic needs assessment to identify underserved areas and prioritize expansion efforts.
- Increase funding for mobile outreach units and deploy additional teams to high-need locations.
- Establish mobile outreach vans in underserved neighbourhoods to provide localized support.
- Use GIS mapping to track service coverage and adjust deployment based on realtime data.

2. Enhance Collaboration and Coordination

Recommendation: Strengthen coordination among outreach teams, community organizations, and municipal services to ensure streamlined service delivery and reduce duplication of efforts.

Implementation Plan:

- Increase the use of a centralized data-sharing platform, such as HIFIS, to track client interactions, resource distribution, and encampment locations.
- Create a cross-agency working group to align outreach efforts, share best practices, and address systemic challenges.
- Implement standardized protocols for inter-agency referrals to ensure seamless transitions between services.
- Host quarterly coordination meetings with key stakeholders, including service providers, municipal agencies, and community leaders.

3. Increase Resources for Immediate Needs

Recommendation: Allocate additional funding and resources to address the immediate needs of individuals experiencing homelessness, particularly during extreme weather conditions.

Implementation Plan:

- Partnerships within the sector that include local businesses and community organizations to expand the availability of food, clothing, hygiene supplies, and harm-reduction materials.
- Establish emergency response units for extreme weather events, equipped with warming buses, shelters, and supply distribution teams.
- Develop procurement contracts to ensure a steady supply of high-demand items such as naloxone kits, harm-reduction supplies, and fire safety equipment for encampments.

5. Enhance Mental Health and Crisis Support

Recommendation: Expand mental health and crisis intervention services to address the growing needs of individuals experiencing homelessness.

Implementation Plan:

- Establish on-site crisis intervention teams within outreach services, staffed by trained mental health professionals.
- Provide ongoing training for outreach workers in trauma-informed care, deescalation techniques, and mental health first aid.
- Develop partnerships with local hospitals and mental health facilities to create rapid referral pathways for individuals dealing with mental health crisis.
- Advocate for funding to support mobile mental health units that can respond to crises in real-time.
- Expand partnerships with mental health and addiction service providers to deliver mobile crisis intervention and on-site support.

6. Invest in Training and Staffing

Recommendation: Provide comprehensive training and professional development opportunities for outreach staff to enhance service delivery.

Implementation Plan:

- Develop a standardized training curriculum covering topics such as harm reduction, Housing First principles, Indigenous perspectives, and crisis intervention.
- Implement peer mentorship programs to leverage the lived experience of staff and foster knowledge sharing which would result in peer facilitated training sessions.
- Increase wages and benefits for outreach workers to address high turnover rates and attract skilled professionals.

7. Improve Data Collection and Sharing

Recommendation: Service providers must agree on the collective use of a robust data collection and sharing system to enhance decision-making and service coordination.

Implementation Plan:

- Provide training for staff on data collection and privacy protocols to ensure compliance with legal and ethical standards.
- Regularly analyze data to identify trends, measure program effectiveness, and inform policy decisions.
- Publish frequent reports summarizing key findings and progress to maintain transparency and accountability.

8. Foster Community Engagement

Recommendation: Strengthen community involvement in the design and delivery of outreach services to ensure they are responsive and inclusive.

Implementation Plan:

- Create advisory committees comprising individuals with lived experience to guide program development and evaluation.
- Launch public awareness campaigns to reduce stigma around homelessness and highlight the impact of outreach services.
- Partner with community organizations to host events and workshops promoting collaboration and knowledge sharing.
- Establish volunteer programs to involve community members in supporting outreach efforts, such as distributing supplies or providing mentorship.

9. Improve Access to Housing

Recommendation: Enhance access to affordable and transitional housing, addressing systemic barriers and increasing the supply of low-barrier options.

Implementation Plan:

- Advocate for increased funding for affordable housing initiatives through federal, provincial, and municipal channels.
- Streamline housing application processes by reducing administrative requirements and integrating support for individuals without traditional documentation such as photo identification, and lack of rental history
- Partner with private landlords and housing developers to create incentives for affordable housing development, including rent subsidies and tax breaks.
- Expand Housing First programs to prioritize immediate placement into permanent housing with wraparound support services.

10. Innovate Outreach Models

Recommendation: Explore new initiatives to address gaps in service delivery and improve outcomes for individuals experiencing homelessness.

Implementation Plan:

- Develop a city-managed storage system to allow individuals to securely store personal belongings or invest in an expansion of Oyate tipi storage facilities.
- Pilot designated encampment sites with essential services, such as hygiene facilities, healthcare access, and food support.
- Implement additional tiny home initiatives as transitional housing solutions, drawing on successful models in other cities.
- Establish mobile outreach hubs equipped with technology and resources to serve remote or underserved areas.

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APPENDIX

Service Provider Survey Questions

1. Is your Street Outreach Team primarily driven by:
2. How often do you participate in Street Outreach?
3. How do you offer Street Outreach?
4. Please Specify the catchment area you offer street outreach services.
5. What resources do you provide while doing street outreach?
6. Do you provide outreach in encampments>
7. How do encampments benefit from street outreach?
8. How would encampments benefit from the implementation of fire safety protocols?
9. Do you offer traditional medicines?
10. What harm reduction do you consider to be in greatest demand?
11. Do you have lived and/or living experience?
12. How long have you been working in street outreach?
13. What would be the most beneficial type of training for outreach?
14. If other training is required that is not listed, please list.
15. What method of communication does your team use?
16. How do you document your information and stats?
17. What agencies do you collaborate with while doing street outreach?
18. What do you collaborate on?
19. (Mobile) While doing mobile outreach, do you transport community members?
20. (Mobile) If you do not transport community members, please state the reason.
21. (Mobile) What is the most frequent location community members ask to be transported to?
22. How often do you interact with you (under 18 years of age)
23. What catchment do you see the most youth activity?
24. What are the common gaps in services you see in the community while doing street outreach?
25. Where would you like to see more community collaboration?
26. Is there anything else you would like to add? Please comment below.

Lived/Living Experts Questions

1. Do you identify as First Nations (with or without status), Me tis, or Inuit?
2. Do you identify with any of the racial identities below?
3. How old are you?
4. Have you accessed street outreach service in Winnipeg
5. What street outreach services have you accessed?
5. What resources have you accessed when interacting with street outreach services?
Please select all that apply.
6. What resources would you consider most important?
7. Where in Winnipeg do you access street outreach services?
8. Where in Winnipeg do you think there should be more access to outreach services?
9. Are you currently experiencing homelessness?
10. Please share why you lost your last housing.
11. What could have been done to prevent you from losing your last housing?
12. Have you stayed in a shelter?
13. Are you a part of a housing and housing first program?
14. Have you ever been a part of a housing and housing first program?
15. Have you stayed or lived outside?
16. Are you currently staying in an encampment?
17. What would be your reason to stay in the encampment?
18. What are the reasons why you would choose to stay outside rather than stay in a shelter?
19. How do you stay warm in an encampment?
20. What improvement would you like to see in street outreach services?
21. Have you ever received services from child and family services?
22. Were there necessary supports for you as a youth?
23. Provide a check in with the interviewee