Estimating Homelessness: Towards a Methodology for Counting the Homeless in Canada

Background Report

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Executive Summary

Background

Counting the homeless has proven to be an arduous task. Since the early 1980s American activists, government officials and social researchers have produced estimates of the size of the homeless population which have ranged anywhere from 250,000 to three million or more. (Jencks, 1994; Burt, 1992; Cordray & Pion, 1991) Needless to say, this wide range of estimates has been the source of an acrimonious debate about the actual size of the population between advocates and activists on the one hand, and government officials and social researchers on the other. (Jencks, 1994; Kondratas, 1991) The two most contentious aspects of the numbers debate are centered around the issues of who should be included amongst the ranks of the homeless, and how they should be counted. While a consensus has been achieved about the difficulties inherent in defining and counting the homeless, little agreement has been reached as to how to remedy them. At best, we can conclude that most researchers agree on one fact: who we define as homeless determines how we count them.

Canadian researchers have not been immune to this debate, although the issue of homelessness and counting the homeless has received far less attention in Canada. (O'Reilly-Fleming, 1993) Only a handful of attempts to count the homeless have been carried out at both the local and national levels (Fallis & Murray, 1990); these estimates, like their American counterparts, have been similarly called into question. The issues are the same: who we include in a definition of the homeless, and how we measure them. However, unlike their American counterparts, those working in the area in Canada have only recently begun to address these issues.

Defining Who the Homeless Are

As noted, determining who to include in a definition of the homeless is a difficult task. Part of the problem in terms of arriving at an agreed upon definition of the homeless is that the issue of homelessness is an emotionally charged one. No one, be they researcher, government official, advocate, activist or service provider will deny that the condition of homelessness is one that requires immediate and effective action. What they cannot agree upon is who to target for assistance. What action should be taken, and what services are required to alleviate and, if possible, eliminate this social condition? In a time of strained and dwindling fiscal support, on what scale do we provide services? These are the issues that have fueled the debate about 'who' should be counted amongst the ranks of the homeless. For 'who' we define as homeless determines who will and will not be counted and, ultimately, who will be the recipient of the funding, resources and services that are provided to deal with the problem.

While many different definitions of the homeless are used in the research literature, in general they can be classified into one of three types: definitions focusing on the literally homeless; definitions focusing on those who move into and out of homelessness on a
regular basis — the marginally homeless/housed; and, definitions focusing on that component of the broader Canadian population who are 'at risk' of becoming homeless.

Counting the Homeless

Many different methods have been employed to study and count the homeless. These range from the more recent telephone surveys of the general population to attempts to include the homeless and other disadvantaged groups in the Canadian and American national censuses. In general, eight basic strategies for enumerating or measuring the homeless population have been used: censuses and one-night counts; key-person surveys; partial counts; heroic extrapolations from partial counts; windshield street surveys; adaptations of area probability designs; service-based designs; and, automated (computerized) client tracking systems. (Iachan & Dennis, 1993; Rossi, 1989)

It should be noted that, apart from attempts to take a census of the homeless population, all of the methods listed above have not been developed for the purpose of 'counting' the homeless. Rather, these techniques have been developed and used to survey members of the homeless population using non-traditional sampling techniques. Typically, a sample of the total population is surveyed, and estimates of the total size of the population are then calculated on the basis of the sample selected. Estimates calculated in this manner are a function of the precision of the sampling design and, for the most part, none of the techniques listed above are as precise as anyone would like.

There are many obstacles to deriving precise estimates of the population. The most pernicious obstacles to developing a standard method for estimating the size of the population include: problems of duplication; timeframe; variations across geographical locality; the number and type of services available in a locality; the degree of service utilization by the homeless; and, the level of cooperation with efforts to enumerate the homeless in the community. To examine these obstacles and the challenges they create for those trying to estimate homelessness, Canada Mortgage and Housing Corporation (CMHC) sponsored a special workshop.

The Workshop on Homelessness

The Workshop on Homelessness brought together a panel of experts from the United States and Canada to critically review the various definitions and methods that are currently available, and to offer recommendations concerning those that are preferred or optimal. The panel consisted of experts from government, the service community, the research community and academia. The workshop was carried out over a three-day period. On the first day of the workshop, the issue of the types of definition of homelessness that should be used was discussed and debated. Participants emerged from this debate agreeing that researchers prefer definitions that are focused on the literally homeless. These types of definition are chosen because they are relatively easy to operationalize and implement, and they provide the highest return in terms of cost-effectiveness and representation of the population.
The topic for the second day was the methodological techniques that have been used to count the homeless. The participants arrived at three main conclusions concerning the methodologies for counting the homeless. First, service-based designs provide the highest degree of accuracy, reliability and representation of the population. They are also the most cost-effective of the variety of methods available. Second, it was concluded that attempting to enumerate the homeless on the street, is extremely expensive and has met with very little success. None of the methods that are currently available for counting the homeless includes a street component that is inexpensive or has been deemed successful. Lastly, service-based methods are preferred, but must be adapted to the community/area they are being used in because of variations in the number of services available and the degree to which the homeless use the services.

The topic for the third day was how to ensure that the chosen method for counting the homeless will work in the community. In this regard, as was repeatedly emphasized by participants throughout the workshop, any attempt to enumerate or count the homeless must be accompanied by a great deal of cooperation on the part of everyone involved. Counting the homeless is, of necessity, a collaborative process that requires the cooperation of everyone who is concerned with and involved in the care of the homeless: government officials, service providers, researchers and academics.

Estimating Homelessness: List of Recommendations

In conclusion, three key steps should be kept in mind in any attempt to estimate homelessness. First, support must be garnered for the initiative through development of a community involvement process. Second, community agreement needs to be sought on a precise definition of who is to be considered as homeless. Third, given the definition selected, an appropriate method for estimating homelessness should be chosen. Complete documentation of the initiative should then be kept, detailing; the definition of the homeless; who is and is not counted by what sampling frame; what services are included and excluded in the count; and, how the data are collected.

The key recommendations of workshop participants have been summarized under each of the three critical steps below:

**STEP ONE: FACILITATING COMMUNITY INVOLVEMENT**

- That a committee be formed at the outset of any endeavor to count the homeless, consisting of all relevant members of the service community (directors of services, outreach workers, frontline workers, etc.), as well as relevant members from the government and academic communities. The committee should be responsible for all aspects of the research program, from its development and implementation, to the dissemination of the results.

- That the investigators must recognize and acknowledge that providers are primarily concerned with the management, organization and funding of their facilities and programs, and with the establishment of policy. Therefore, efforts should be made at
the beginning of a research program to determine exactly the types of information that providers require to address their interests and concerns.

- That the interests and information needs of the service community should be incorporated into the research program. This may involve carrying out two counts: an unduplicated estimate of the total number of homeless; and, a count of the number of individuals using services. The research program may also require a survey component in which the specific information required by providers can be collected. Providers may be interested in the following kinds of information about their clients: admission rates, length of stay, recidivism or re-admission rates, use of other services, quality of service received, etc.

- That the investigators recognize that such a research program may pose a considerable inconvenience to the participating organization. Therefore, the implementation of the research program must attend to the day-to-day operations of the organization and ensure it is as unobtrusive as possible. Such actions as funding additional staff to assist in the process of collecting data may be effective in alleviating the inconvenience to the organization.

- That the rights and privacy of the homeless, and the organization, are guaranteed. The investigators must demonstrate at the outset that the rights of the homeless will not be compromised, that the privacy of the homeless will not be violated, and that information provided by both the homeless and the service providers will be held in total confidentiality. Informed consent must be obtained prior to the implementation of the research program.

STEP TWO: DEFINITIONS

- That a definition of the homeless should focus on those individuals who are most in need: those who possess no permanent form of housing and who reside either on the street or in temporary or emergency shelters. The definition should target anyone who is either literally homeless or at imminent risk of becoming homeless.

- That the following guidelines be used for defining whether an individual is literally homeless. A person will be considered to be literally homeless if they meet any one of the following criteria: (1) they stayed overnight in a shelter designated for homeless people, runaways, or neglected or abused women; (2) they stayed at least one night in a house, apartment or room paid for with municipal, provincial or federal emergency housing funds; (3) they stayed overnight in a place not meant for human habitation (e.g., a vacant building, a public or commercial facility, a city park, a car or on the street; (4) they have a regular place to stay that is not their own (e.g., people who traded sexual favors for shelter or spent one night in a hotel or hospital); or (5) they use a soup kitchen or emergency food bank for the homeless population.

- That, regardless of the definition used, who is included in and who is excluded from the definition is clearly indicated.
• That the committee unanimously agree that obtaining information on those who are not included in the definition is extremely expensive, and attempting to include them will compromise the success of the research program.

STEP THREE: METHODS FOR COUNTING THE HOMELESS

• That the standard method for enumerating the homeless be service-based.

• That the committee unanimously agree that counting the street population (e.g., who do not use services and shelters) is extremely expensive, and attempting to include them will compromise the success of the research program.

• That the committee unanimously agree that the use of a service-based methodology which excludes the street population results in an underestimate of the total size of the population, and that the estimate produced reflects only those homeless who are sheltered and use the services included in the research during the time period within which it is carried out.

• That the minimum number of sampling frames employed in a service-based method include: shelters; soup kitchens; day programs and outdoor encampments. And, that they be designated as the primary or standard frames to be used in taking a census of the population in urban (service-intensive) areas.

• That standardized procedures for the adaptation of such a methodology for use in rural (service-unintensive) areas be developed.

• That, where feasible, the shelter-component of service-based methods be replaced with an automated client tracking system, such as the ANCHoR (Automated National Client-specific Homeless services Recording) system developed in the United States with funding from the U.S. Department of Housing and Urban Development and other government and non-government actors.

• That funding be provided to support ongoing efforts to develop and improve existing methods for counting the homeless; in particular, to develop reliable and accurate methods for counting the street component of the homeless population, as well as methods for enumerating the homeless in rural areas.
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Introduction

The following report provides a review of the issues related to enumerating the homeless in local communities across Canada. This report is divided into four sections. In section I, we review the problems and issues associated with defining and counting the homeless that have been identified in the literature. Next, in section II, we present an overview of the goals and results of a three-day workshop sponsored by CMHC designed to bring together a panel of experts who have carried out research in the area or who are actively involved in providing services to the homeless. In section III, we consolidate the results of the literature review and the workshop into a description and overview of the preferred methodology for counting the homeless. Also highlighted in section III, are the issues and problems involved in implementing the methodology. We conclude, in section IV, with our recommendations as to the preferred definition(s) and technique(s) that should be employed in efforts to enumerate the homeless in local communities across Canada.

We note at the start that this report is not intended to provide a comprehensive review of the recent literature on measuring homelessness. For an excellent review of the research in this area, please refer to the following monograph:


In addition, for an orientation to the issues and problems associated with counting the homeless, please see:


Finally we would like to point out that the following report is not intended to be used as a manual for counting the homeless. Those who are interested in consulting a manual should refer to:


Dr. Burt's manual is designed to be used by anyone at "... the state or local level who needs to understand, use, or produce, estimates of the numbers and types of homeless people ..." (Burt, 1991: 1) in any locality. The manual also provides a description of the most common strategies for counting the homeless, what they are capable of doing, and their advantages and disadvantages. Here we report only on the types of methods that have been employed (and their problems), and the results of the workshop during which we consulted with a panel of experts concerning the optimal strategies for defining and counting the homeless.
Section I: Counting the Homeless – Problems & Issues
Estimating the Extent of Homelessness: The Numbers Controversy

In 1982, Mitch Snyder and Mary Ellen Hombs, noting the increasing visibility of the poverty-stricken and destitute on the streets of America, estimated the numbers of homeless in the United States to be between two and three million people. Soon afterwards, in 1984, the Department of Housing and Urban Development (HUD), based on “informed judgment and shelter capacity in a number of large cities” (Wright & Devine, 1992: 355), estimated that there were between 250,000 to 350,000 homeless in the United States. Not surprisingly, this 500 percent discrepancy between the official government estimates and the advocacy estimates (Lee, 1993: 55) of the homeless resulted in a series of controversies and debates focusing on the problems inherent in attempting to count the homeless. At the core of the controversy and debate were the twin issues of who should be included amongst the ranks of the homeless, and how the homeless should be enumerated. Since then, there has been a frantic race amongst researchers, community and political activists, and government officials in the United States to come up with an accurate and reliable method for determining the size of the homeless population.

In Canada, the issue of homelessness and of counting their numbers has received far less attention. As O'Reilly-Fleming notes, “the homeless are largely a social crisis for which there is no audience” (1993: 1). In large part, our lack of concern for the homeless has resulted in a paucity of data and information about them and virtually no information concerning their numbers. In fact, it wasn't until 1987, in response to the International Year of Shelter for the Homeless, that the Canadian Council on Social Development (CCSD) and CMHC undertook the task of carrying out a national survey of temporary and emergency shelters. This survey represented the first large-scale attempt to count Canada’s homeless and produced a country-wide estimate of between 130,000 and 250,000.

A less than successful attempt by Statistics Canada to enumerate the homeless in the 1991 Census means that the CCSD figure represents the best and, to date, only estimate of the number of homeless people in Canada. Like Snyder and Hombs' estimate of the homeless population, the CCSD's number has also been considered suspect. For the most part, this estimate has been called into question on a number of fronts, not the least of which is the categories of homeless individuals selected for inclusion in the study. For example, the CCSD failed to include a major subgroup of the homeless population in their sample – persons who were out on the streets or slept in abandoned buildings, restaurants, stairwells, parking garages and public buildings, or doubled up with friends or acquaintances. (Murray, 1990: 21) Notwithstanding the problems attendant to employing service providers as key informants (Burt, 1991: 24), the CCSD’s estimate also suffers from the fact that of the 472 facilities surveyed, only 283 shelters, or 59 percent, participated in the survey. This low participation had the effect of attenuating even further their estimates of the number of homeless people who were sheltered in 1987.

Despite the conceptual and methodological difficulties surrounding the CCSD’s snapshot survey of the homeless, it represents a good first attempt and, if nothing else, demonstrates some of the pitfalls and difficulties inherent in attempting to survey a hidden population.
(Lee, 1993: 44-60), such as definitions, measurements and sampling. Given the difficulties associated with the CCSD's endeavor, it is surprising that, in June 1991, Statistics Canada attempted to take a census of the homeless using a similar strategy. In an effort to adjust for the problem of sampling within shelters, Statistics Canada used soup kitchens as their sampling frame and conducted interviews with the homeless in 80 to 90 soup kitchens in 16 Canadian cities. (Begin, 1993: 5) As evidenced by the fact that, to date, Statistics Canada has chosen not to release any information concerning this census, and that they have not offered the Canadian public an updated estimate of the size of the homeless population in 1991, one can only conclude that this method of collecting data about the homelessness is less than optimal. As one Statistics Canada spokesperson put it, the 1991 Census did not yield an accurate picture of the nation's homeless. (c.f. Begin, 1993: 6)

The problem, then, is how to come up with an accurate picture of the size of the homeless population. And, as both the Canadian and American examples demonstrate, our estimates are, by necessity, reflections of who we define as homeless and how we go about collecting our data. Therefore, in order to increase the precision and accuracy of our estimates, we must attend first to the issue of definition, and second to the problem of measurement.

The Homeless Muddle: Defining Homelessness

Virtually every study of the homeless in the literature over the last 15 years has begun by noting that the main obstacle in estimating the size of the homeless population is the variety of definitions that are used to describe them. (See, for example: Peressini, 1995; Begin, 1994; Jencks, 1994; Acorn, 1993; O'Reilly-Fleming, 1993; Blau, 1992; McDonald & Peressini, 1991; Hulchanski et al, 1991; Kondratus, 1991; Fallis & Murray, 1990; Belcher and DiBlasio, 1990; Rossi, 1989; and McLaughlin, 1988) The lack of consistency across definitions has lead to what Ellickson terms the homeless muddle (1990: 45) and, in large part, is the source of the controversy over numbers. For who we define as being homeless is as much a statistical or technical statement as it is a political and value stance. A definition of homelessness is, ipso facto, a statement as to what should constitute the floor of housing adequacy below which no member of society should be permitted to fall. (Peressini, 1995; Jencks, 1994; McDonald & Peressini, 1991; Fallis and Murray, 1990; Rossi, 1989) As Rossi notes, "clearly, more inclusive definitions imply a higher floor for the concept of decent housing, but they also enlarge the size (and change the composition) of the homeless population." (1989: 47)

For example, one of the most cited definitions in the literature is that put forth by the United Nations. The UN defines individuals as homeless if they meet one of two criteria: (1) they have no home and live either outdoors or in emergency shelters or hostels; and (2) they live in homes that do not meet the UN's basic standards, e.g., protection from the elements, access to safe water and sanitation, affordable price, secure tenure and personal safety, and accessibility to employment, education and health care. (Murray, 1990: 17-18) Obviously this is a very comprehensive definition that encompasses the whole continuum of definitions, ranging from the literally homeless to the precariously housed (e.g., those who possess some form of housing but run a high risk of becoming literally homeless),
found in the literature (Peressini, 1995; McDonald & Peressini, 1991). Ideally, this would be the type of definition that researchers would like to employ in their study of homelessness. From a methodological standpoint, however, it is unwieldy and is virtually impossible to operationalize within the bounds of a single study.

As a result, much of the research that has been carried out has employed a definition of the homeless based on the first component of the UN's definition: individuals who have no home and who live either outdoors or in emergency shelters or hostels. These individuals are typically defined in the literature as the literally homeless and include "those people who sleep in shelters provided for homeless persons or in places, private or public, not intended as dwellings." (Rossi, 1989: 48) In general, this more restrictive definition tends to be used in practice simply because the more extensive ones are nearly impossible to implement and are extremely costly to carry out (Peressini, 1995; Jencks, 1994; Rossi, 1989).

While the literally homeless form the basis for most definitions, this has not prevented individual researchers from deriving their own individual definitions — each with a slightly different emphasis. In fact, the list of terms that have been used to refer to this population is legion. For example, it includes the cyclically homeless, the seasonally homeless, the episodically homeless, the periodically homeless, the chronically homeless, the temporarily homeless, the near homeless, the new homeless, the old homeless, the unemployed homeless, the transient homeless, the elderly homeless, the mentally and physically disabled homeless, the homeless with AIDS to name but a few. The point is that the issue of defining who the homeless are is not easily resolved. More importantly, the wide variety of definitions proffered in the literature have resulted in an impasse. Without first resolving the definitional issue, and without standardizing that definition, we cannot produce reliable and accurate estimates of the population. Thus, as long as there is a lack of consensus about what members of the population constitute the homeless, there will be a lack of consensus about how to count them.

Not only does the absence of a clearly operationalized definition of the homeless inhibit us from obtaining accurate estimates of the size of the population, it also affects every other aspect of the research process: the type of data sources to use (e.g., service providers, the homeless, official agencies); the way in which the data are collected (e.g., survey, interview, census); the sampling frame (e.g., a list of individuals who are to be included in or excluded from the sample); the sampling design (e.g., how we go about selecting our sample, in particular non-probability and probability methods); the instrumentation that is employed (e.g., self-completed questionnaires, interviews); and, the results of our analysis (e.g., what information we are able to extrapolate from the data, in particular incidence and prevalence rates). In summary, who we define as homeless determines how we go about measuring or counting the homeless.

**Methods for Estimating Homelessness: An Overview**

In addition to the wide variety of definitions in the literature, there are also a number of methodologies or approaches that have been variously used to sample from, or estimate the
size of the homeless population. Since 1980, Rossi reports that there have been over 60 studies of the homeless carried out in the United States. (1989: 52) He suggests that these studies can be classified into five research strategies: key-person surveys; partial counts; heroic extrapolations from partial counts; windshield street surveys and censuses; and, adaptations of area probability designs. (Rossi, 1989: 52-61) The remainder of this discussion consists of a brief overview of these strategies highlighting the advantages, disadvantages, strengths and weaknesses of each. As we have noted, since the early 1980s only a handful of studies of the homeless have been conducted in Canada. All of the Canadian studies can be classified within one or the other of Rossi’s strategies. Thus, the various Canadian research efforts will be noted in the appropriate discussion.

Key-Person Surveys

The first approach consists of identifying and asking key-informants (that is, individuals knowledgeable about the homeless, usually those employed in shelters, food lines and the other services which the homeless contact) to estimate, based on their own records, the size and composition of the population that they are providing services for. The best examples of these types of surveys are the CCSD’s snapshot survey in Canada and the HUD survey in the United States. As Rossi notes, there are many advantages of this approach: (1) this type of survey can be carried out quickly and inexpensively; (2) it is amenable to conventional sampling strategies, that is a sampling list of service providers to the homeless (e.g., shelters, soup kitchens, employment agencies) can be derived and probability sampling techniques used; (3) on the surface the techniques are valid – who, besides the homeless themselves, would know more about them than those the homeless have close contact with? The main disadvantage of this approach is in its reliance on secondary sources. That is, there is no way to verify either the reliability of those reporting, or the validity of their estimates. In addition, because of the mobile nature of the population, many agencies find it difficult to maintain accurate records of the numbers of individuals using their services. Then, there is the issue of duplication. For example, most shelters offer their services on a nightly basis, and research has shown that a large majority of the homeless use shelters on a consecutive and consistent basis. Given that these agencies maintain their records on a nightly basis, it is highly likely that a substantial portion of those using the service will be counted on multiple occasions and at different locations in a community. The end result is that estimates of both the incidence and prevalence of homeless generated by this strategy tend to be inflated. The most efficient way in which this strategy may be employed is in the production of average nightly prevalence rates. (Rossi, 1989) Again, the accuracy of these estimates relies very much on the accuracy and reliability of the individuals providing the information.

Partial Counts

This approach depends on counts or surveys of some smaller subset of the homeless population – usually those that are easily identifiable and readily accessible. Studies using multiple sampling frames – or that entail sampling/counting persons in shelters, in soup lines, at drop-in centers, or at well-known gathering places for the homeless – fall into this category. Examples of studies that have used this type of strategy in Canada include:
CCSD's snapshot survey; the 1991 Census of the Homeless; the Street Health Survey carried out in 1992 by the Institute for Social Research in Toronto; and the East Village Survey carried out in 1991 by McDonald & Peressini for the City of Calgary. By limiting the range of individuals to be included in the study, research using this strategy can be carried out systematically. Sampling lists can be drawn up and probability sampling techniques used. These techniques, therefore, form a reasonably accurate method for estimating the size of the sub-population in question. The main drawback of this technique is that it is of little utility in generating estimates of the total population of the homeless. This is so because it is impossible to determine what proportion of the total population has been omitted, or how frequently homeless persons use the places sampled. On the other hand, if the issue of overlap in usage or frequency of usage is built into the design, then the validity of this technique is, at least, partially restored. Lastly, depending on the degree of detail and care taken in developing the sampling design, these studies can be expensive, time-consuming and labor-intensive.

**Heroic Extrapolations from Partial Counts**

Studies of this type derive their estimates from information gathered from partial counts and extend them to the total population. The estimates derived from smaller, locally conducted studies are extended beyond the context they were originally intended to describe. The best example of this type is the study carried out in 1984 by HUD. While they actually carried out a survey of shelters in the U.S., HUD relied on four estimates of the shelter-to-street ratio obtained from different studies and carried out by different researchers in different cities, in order to estimate the number of homeless people on the streets. As Rossi notes, “...the main difficulty with such heroic extrapolations lies in the critical street-to-shelter ratio [because] there is extensive evidence that the ratio varies from city to city and has strong seasonal variations.” (1989: 56) The primary advantage of this technique is that it is inexpensive. Beyond this, there is little merit in this technique.

**Windshield Street Surveys and Censuses**

These types of surveys locate, identify and enumerate the homeless by sight while canvassing streets and other open places in a city. They have the advantage of 1) being relatively inexpensive; 2) bypassing the problem of developing an instrument which screens out all those who do not meet the definition of homeless; and 3) having direct communication with the study subjects. On the other hand, there are a number of problems inherent in this technique. First, because no communication takes place between the researcher and the homeless, this technique only allows for the most basic of sociodemographic features to be recorded: gender and race. Second, techniques of this type are biased in that they include only those who are in plain sight of the observer. Thus, they exclude those homeless who are not visible, e.g., those in shelters, hostels, flop houses, low-rent hotels, etc. Lastly, as Rossi notes, these types of surveys are “subject to severe identification difficulties.” (1989: 57) That is, the homeless do not always appear to be homeless. Rossi reports that the homeless included in his 1989 study were neat and clean, and most were not sleeping when they were encountered on the street or in public
places. (1989: 57) Thus, in a study of this type, those homeless who did not fit the conventional stereotype would be excluded.

**Adaptations of Area Probability Designs**

The last approach adjusts conventional survey designs by taking into account the fact that the homeless, as a rare or hidden population, present special problems in terms of sampling. Conventional sampling strategies are based on the assumption that every person or household has a known probability of being selected into the sample. That is, every individual or household has an address and may be contacted through face-to-face surveys, telephone surveys or by mail. At the national level, these strategies rely on lists of geographic areas and households within them. The problem with the homeless is that they are a mobile population with no fixed address. Thus, it is not possible to generate a complete list of the homeless where every individual has a known probability of being selected into the sample. Modifications are built into the design of these techniques so that they draw an unbiased sample of non-dwellings, or areas in which the homeless are found: in shelters and on the streets. Examples of this technique are Rossi's 1989 survey of the homeless in Chicago; Burnam and Koegel's 1987 study of Los Angeles' skid row; and, McDonald and Peressini's survey of Calgary's East Village community. The advantage of these techniques lies in their systematic design and their attention to probability sampling. Because of these two factors, they are the most likely to produce the least biased estimates, and the most reliable estimates of the size and composition of the homeless population. The primary disadvantage of this technique is that the reliability and validity of the estimates produced are still highly dependent on the area that is defined for inclusion in the study. In other words, if the homeless are located in areas that are not encompassed by the sampling design, they will be omitted or excluded from the study and the size of the population will be underestimated.

**Service-Based Techniques**

In addition to the above types of methodology, Ronaldo Iachan and Michael Dennis (1993) provide us with a summary overview of the techniques that have been developed since Rossi carried out his survey (1989: 59-61). Iachan and Dennis identify 14 homeless studies using a service-based methodology, and categorize them into three groups (1993: 2):

1. The first set of studies employ only samples of service system locations (e.g., shelters, soup kitchens, day programs) because they are cheaper and cover most of the population (for example, see Burt and Cohen, 1989).

2. The second set of studies use probability samples of shelter and street locations to reduce the potential for bias due to undercoverage and limitations of services systems (for example, see Rossi, Fischer and Willis, 1986).

3. The last set of studies, representing a compromise approach, focuses on service system samples, but also include either purposive or partial samples of high-density
street locations (for example, see Dennis and Iachan, 1992; McDonald and Peressini, 1991; Burnam and Koesgel, 1988).

It should be noted that each of the classifications above represents a general description of the types of designs and strategies that have been employed throughout the study of homelessness. For the most part, however, the trend in homeless studies since the late 1980s has been to employ some version of the service-based methodologies noted above.

Methods for Estimating Homelessness: Recent Developments

In the previous section, we recounted the variety of techniques that have been used to count the homeless or estimate the size of the population, from key-person surveys to techniques using a service-based sampling strategy. Many of the techniques discussed above were developed in the 1980s or earlier, and represent the necessary forerunners of the service-based techniques that have been developed and implemented in the 1990s. In the following section, we will present two methods, developed in the 1990s, which represent the latest developments in the field of enumerating the homeless: the Washington, DC, Metropolitan Area Drug Study (DC*MADS) homeless study and the Automated National Client-specific Homeless services Recording System (ANCtHoR) project. These studies use two different approaches in their effort to count/survey the homeless population in the United States. The first is a variation on several methods: the partial count, area probability and service-based designs noted above. The second approach consists of a multi-purpose computerized recording system which has been developed and is currently being tested in shelters in a number of states across the U.S.

The DC*MADS Homeless Study

The DC*MADS study was carried out in 1991 by Michael L. Dennis and his colleagues at the Research Triangle Institute (RTI) in Research Triangle Park, North Carolina. The study itself is designed to examine the nature and extent of drug abuse of the total population of individuals (homeless and housed) in a single metropolitan area, with a specific emphasis on subgroups of the population which are underrepresented or unrepresented in traditional surveys. The DC*MADS study consists of a number of components differentiated on the basis of the subgroups of the population included in the survey. One of the components is of interest to us here: The Homeless and Transient Population Study.

The Homeless and Transient Population Study (Iachan and Dennis, 1993) employed what is referred to as a “multiple frame approach to sampling the homeless and transient population.” (Iachan and Dennis, 1993: 1) While many of the studies in the later 1980s employed one or the other of the three types of service-based methodologies discussed above, none have attempted to compare all three approaches in a single study. (Iachan & Dennis, 1993: 2) That is, with the exception of the RTI study, no study has attempted to compare the efficacy of the three methodological approaches in terms of how well each covers or represents the population of homeless persons in a given area. The sample design of the RTI survey involved sampling the homeless both over time and over space in
order to develop estimates and characteristics of the population on an average day between February and June, 1991. (Iachan & Dennis, 1993: 3) The survey is composed of the following samples: "Four temporal samples of 16 days each were selected in the months of February, March, April and June, 1991, at a rate of 4 days per week – two samples of shelters, one sample of soup kitchen meals, one sample of encampment clusters, and two two-stage samples of street census tracts and blocks." (Iachan & Dennis, 1993: 3) This represents the most thorough sampling technique used to date, particularly in terms of covering as many as possible of the sites where the homeless may be located. While not the most expensive study ever mounted, the RTI survey was not exactly cheap. The total budget for the project was U.S. $800,000. in 1991.

The study was originally designed with the idea of replicating Rossi's Chicago Homeless Study, which employed a probability-based sample of Chicago blocks defined by census conventions. (Rossi, 1989: 59) Contrary to Rossi's prediction that "... comparable studies could be undertaken in other cities for between $100,000. and $200,000. (in 1988 dollars)," Dennis reports that "... it cost more to obtain the 64 street interviews [based on Rossi's area probability design] than all of the rest of the 844 interviews." (1993: 2) In addition to the exorbitant costs involved in carrying out the street component of the survey, Dennis lists a number of other reasons for discontinuing the street component, such as: the actual yields of the street sample were less than a third of what was expected; the street people could be contacted by means that were less expensive and where they would be more accessible; and, interviewing in the early hours of the morning, in locations that posed serious safety problems, represented an unacceptable security risk. (Dennis, 1993: 2)

As a result of the problems involved in sampling from the streets, Dennis and his colleagues at RTI halted and redesigned the project. The street component was replaced with a component consisting of a sample of homeless people based on their geographic concentration in particular areas, referred to by Dennis as "outdoor encampments," and a two-stage sample of people using soup kitchens and/or food banks. (1993: 2-3) In total, the RTI study is based on 908 in-person interviews conducted from four overlapping sampling frames in the sample days, as follows:

- 477 interviews with residents sampled between 6:00 p.m. and 6:00 a.m. from 93 shelters (including shelters for abused women, juveniles, etc.) (Dennis, 1993: 3).

- 224 interviews with patrons sampled between 6:00 p.m. and 6:59 p.m. the next day from 31 soup kitchen (meals) and food banks (including mobile meal programs) (Dennis, 1993: 3).

- 143 interviews with all literally homeless people who could be found from 4:00 a.m. to 6:30 a.m. in all the major clusters of encampments identified by local providers (Dennis, 1993: 3).
• 64 interviews with all literally homeless people who could be found from 4:00 a.m. to 6:30 p.m. in an area probability sample of 432 census blocks in the DCMSA (Dennis, 1993: 3).

In addition, Dennis reports that “... all sample locations were randomly assigned to the random sample of days and adjusted for institutional nonresponse, individual nonresponses, and overlap between the sample frames within the sample day. The institutional response rate for shelters and soup kitchens combined was 82.6 %,” and for individuals across the four frames was 86.1 percent. (Dennis, 1993: 3)

While the RTI study is of general interest, the methodologies employed in the study are by no means unique; others have employed similar methods — just not all at once in the same study. What is unique about the study is that, by carrying out such elaborate sampling using multiple locations and the services that the homeless can be found in, RTI’s data allow them to determine the efficacy of each methodology in terms of its representation of the population. Basically, their data allowed them to ask the question that everyone would like to ask: “... how well would a service-based methodology cover the homeless population on an average day?” (Dennis, 1993: 7) The answer is illuminating, to say the least.

Using shelters alone as a sampling frame, only 56.3 percent of the total population was included in the resultant sample. Adding soup kitchens raised the coverage of the population to 93.2 percent. The addition of encampments increased the representation by one percent, to a total of 94.2 percent over the three sampling frames. Dennis and his colleagues also report that the “... contribution of random street block samples was typically in the 5% and 15% range.” (Dennis, 1993: 7) Finally, Dennis (1993) also found that the characteristics of the homeless are not distributed evenly over the sampling frames. Specifically, he found that 86.5 percent of those who were classified as heavy alcohol users, and 90.2 percent of those who were unemployed, were included in the three sampling frames (shelters, soup kitchens, encampments) (Dennis, 1993: 7).

These findings are of interest in that they demonstrate the adequacy of service-based methodologies for sampling from the population, as well as estimating the size of the population. As previously noted, direct counts or censuses of the homeless population are expensive, difficult to carry out and, more often than not, produce unreliable estimates of the population. Sampling methodologies, on the other hand, are much more cost-effective and easily implemented. The problem in terms of sampling from the homeless has been that social researchers have had to develop new methods for sampling from this population. As a result, the data have not been available to support the validity or reliability of the service-based techniques. That is, up until now.

RTI’s research clearly demonstrates: First, a service-based methodology allows for at least 94 percent of the total population to be represented in a sample produced by selecting respondents from shelters, soup kitchens and outdoor encampments. Second, the results of the Homeless and Transient Population Study indicate that the majority of the street population can be captured in the other sampling frames. Last, Dennis and his colleagues
are careful to note that the "...findings suggest that shelters alone do not adequately cover the population or major subgroups of interest." (Dennis, 1993: 7) Therefore, sampling or counting from one of the sampling frames alone does not provide accurate coverage of the population - a combination of all three frames provides the highest degree of representativeness of the homeless.

The ANCHoR System Project

The Automated National Client-specific Homeless services Recording System (ANCHoR) is a computerized information system designed to support the coordination of services to the homeless. It is a software program that facilitates the collection and management of a wide variety of information from the homeless as they use the services that they come into contact with. The software is composed of tools for the standardized assessment of consumer needs, for case management, and for recording the use of housing and services. The system is designed to be extremely flexible so that it may be adapted to the needs of the institution or organization providing services (e.g., additional modules may be added to collect relevant and required information). The first version of the software includes modules for Outreach, Assessment, Residential Services and Service Planning. The software is designed to collect basic socio-demographic information about the consumers using the services, such as name (and aliases), date of birth, state of birth, country of birth, social insurance number, gender, age, ethnicity/race, marital status, linguistic orientation, date of entry (or use of services) and exit (or service discontinuation). Also collected is a wide range of information about the consumers of the services, their needs and the outcome of the assistance that they receive.

In addition to providing tools for service providers, the system may be used as a method of counting the homeless. The ANCHoR system can be used to produce aggregate figures for the number of individuals using services for any given time period, their length of stay, their recidivism, and the other services that they may be using. In addition to its utility as a method for counting the homeless, the ANCHoR system collects enough information to create a unique identifier that may be matched across the cases in the databases in order to produce an unduplicated count. In effect, then, because every individual who uses a given service is recorded into the database (and every individual can be distinguished from the others), the resultant figures represent the total population of people using that service. Last, use of the ANCHoR system results in a database that can be updated instantaneously on a daily, monthly or yearly basis, etc. Thus, not only can it produce point-prevalence estimates, it can also be used to produce annual prevalence estimates of the size of the population.

The ANCHoR system is extremely attractive in terms of the information it offers: total unduplicated counts of the consumer population, point-prevalence estimates, period and annual prevalence estimates, admission rates, discharge/disposition rates, and a wide variety of personal and socio-demographic information about the consumers themselves. It is also attractive in that it is a relatively inexpensive system to establish and put into place. For example, Dennis Culhane estimated that the state of Texas could establish a management information system in five of their cities for a one-time cost of U.S. $350,000.
(see appendix C). As compared to the cost of carrying out a one-night census or sampling from multiple frames (anywhere from U.S. $400,000. to $800,000.), putting an ANCHoR system in a given geographic area is extremely cost-effective. Lastly, the software is graphical and designed to run in a Windows environment, making it very easy to use and maintain.

Theoretically, the ANCHoR system has been designed to be used by any organization providing services. In reality, the system has been implemented and is being used in organizations that provide shelter services to the homeless. While this is not necessarily a disadvantage, it is a limitation. The ANCHoR system will provide accurate, unduplicated counts of those individuals using the shelter system. The limitation is that some of the homeless use the shelter system, while others do not. This is the main reason why the service-based methodologies have been developed. Counting the homeless using shelter services alone only provides for a partial count. Thus, to ensure that as many as possible of the homeless are included in a count, researchers have developed a methodology that attempts to count the homeless across as many as possible of the services that they come into contact with. Again, this is why the issue of duplication is so important. Many of the homeless use a wide array of services. Counting across the services, therefore, increases the likelihood that an individual will be counted more than once. Thus, the main drawback of employing the ANCHoR system as a method of enumerating the population is that, at this stage in its development, it only provides counts of those using shelter services.

In summary, the Homeless and Transient Population Study clearly demonstrates three important facts:

1. service-based methodologies are capable of capturing anywhere from 80 to 95 percent of the population. While they are not capable of capturing 100 percent of the population, they do provide for the most complete coverage of the population as is possible

2. the most expensive and least effective component of a service-based methodology is the 'street' component. More importantly, this research clearly demonstrates that excluding this component does not seriously compromise our ability to estimate the size of the population. The street component only represents approximately five percent of the total homeless population - most of whom can be captured in the other sampling frames; and

3. no one component or frame alone provides an accurate estimate of the size of the population. At the very minimum, any attempt to count the homeless should be carried out in three locations: shelters, soup kitchens and outdoor encampments.

In addition to the DC*MADS survey, we reviewed the ANCHoR system project. Our review suggests that employing an automated tracking system is a highly efficient and reliable method of counting the number of people using shelter services. Not only does it enable us to count the number of individuals using the shelter system at any given point in time, but it also can be used to produce period-prevalence counts for any given period of
time. More importantly, the counts are not estimates, but actual total numbers of people passing through the shelter system. The drawback of the ANCHoR system is that it has been designed primarily to be used in shelters. Therefore, the figures that are produced as a result of using the system will only reflect the number of people seeking shelter - not the total size of the homeless population. Using the ANCHoR system as a means for counting the population, therefore, will miss a substantial proportion of the total homeless population at any given point in time.

Section II: The Enumerating the Homelessness Workshop

One of the primary tasks of this project was the design and implementation of a three-day workshop that brought together experts from academia, government and the service community who have participated in or carried out studies of the homeless in Canada and the United States, or are involved in providing services to the homeless. The workshop participants were asked to assist us in the process of critically reviewing and appraising the methodologies presented in the previous section. The criteria for reviewing and evaluating the various definitions and methodologies that were established prior to the workshop by the principle investigators and the project advisory committee are as follows:

1. the definition should maximize the representation of the homeless population by encompassing the widest possible range of sociodemographic characteristics;

2. the methodology should maximize the accuracy and reliability of the estimate or count that is produced by the technique;

3. the definition and methodology should be easy to implement in any context (e.g., locally or nationally); and

4. the methodology should be cost-effective, thereby minimizing the cost of implementation without compromising the representativeness, accuracy and reliability of the estimate or count produced by the technique.

In sum, the main goal of the workshop was to review the various options for defining who the homeless are, and to critically appraise the methods for counting or estimating the size of the homeless population that have been previously employed in the literature, while keeping in mind the above criteria. In carrying out this task over the course of the workshop, we asked the participants to share with us their knowledge and experiences from working with the homeless, or from attempting to count the homeless. The following represents a summary of the conclusions arrived at by the workshop participants over the three days.

Summary of the Workshop

The following consists of an overview of the observations and suggestions made by the panel of experts in the field of homelessness during the course of the three-day workshop. The workshop was designed to address the issues surrounding the definition of who the
homeless are, the methods used to estimate the size of the population, and techniques for facilitating and extending cooperation in efforts to count the homeless in the community.

**Day One: Definitions of Homelessness**

The first day of the workshop focused on the myriad of issues surrounding definitions of the homeless and of homelessness. Throughout the day, these issues were addressed, discussed and debated using a variety of forums (plenary sessions, small-group discussions and presentations). The following represents a summary of the dominant themes and ideas that emerged as a result of the day's activities.

Over the course of the day, three primary themes emerged in reference to the problem of definition. The first theme was that definitions depend on the purpose for which they are being used. Why bother counting the homeless was a question that many of the participants raised. More importantly, they argued that it is a fundamental question that needs to be answered before a definition of the homeless is developed. This question must be addressed because the reasons for counting will contribute to the determination of who will be counted and who will be excluded. For example, if the goal in estimating the size of the population is to improve existing services and to target new services to the homeless, then the most appropriate definition is one that is service-based, focusing on those individuals who use the various services in question. On the other hand, if the purpose of the count is to determine the degree of need across Canada - so that scarce resources and funding can be allocated appropriately - then a broad-based definition is called for, one that encompasses the largest proportion of the population as is reasonably possible. This said, it should also be stated that the participants agreed that, while the purpose behind a count is important, knowing the purpose does not completely resolve the problem of definition. The remaining two themes center on the other factors that need to be considered when attempting to develop a definition.

The second theme was that, despite the fact that there are many possible definitions of the homeless and homelessness, it is not possible to synthesize them all into one overarching definition that can be applied with any degree of rigor or success at the national level. It was argued throughout the workshop that homelessness is best viewed as a point on a continuum of residential instability. The consensus was that it is virtually impossible to come up with a definition that accounts for every individual who is homeless. Therefore, efforts to construct a definition should focus on those most in need. And virtually all agreed that those most in need include those who possess no permanent form of housing and who rely on the shelter system for their housing. While there is a whole range of other individuals who have no permanent form of housing, they do have impermanent forms of housing such as living with friends and family and temporary residence in some form of permanent housing such as boarding homes and low-rent hotels; therefore, they should not be included in a definition of homelessness.

Given the above arguments, two conclusions were reached about the choice of definition of homelessness that would be most appropriate in terms of a count. First, a literal definition is optimal in that it satisfies the conditions that it encompass those most in need,
is possible to operationalize, is efficient and cost-effective. Typically, these types of definitions include people who have spent at least one night in a setting that is defined as a temporary/emergency shelter, a place not designed for shelter or some kind of impermanent arrangement for which they didn’t pay, or who stayed in a program defined as serving individuals who don’t have places to stay, within a set period of time (usually one month). The most advantageous feature of a literal definition is that its operationalization (in terms of developing a methodology) is, with the exception of those actually living on the street, relatively straightforward. The literally homeless then, would not include those who are at risk of becoming homeless, or those who are marginally homeless.

The second conclusion reached was that, regardless of what definition is chosen, it should be clearly defined and flexible. By clearly defined, the participants were referring to the fact that what is most important about a definition is that people know exactly who the definition intends to count, and who actually has been counted after the definition has been implemented. Basically, workshop participants argued that the conceptual definition of the homeless and the method used for counting the homeless are intimately intertwined, and what is most important in terms of definition is specifying who exactly is included in a count.

The workshop participants also argued that the definition used should be flexible. That is, the definition should be structured in such a way that it can be used in a wide variety of situations. By flexibility, participants were alluding to the methodological issue that, if we are going to go to the trouble and expense of counting the homeless, we should do so in such a way as to encompass as many types of homelessness (within the context of a literal definition) as is possible. This really is an issue of collecting enough information from the homeless so that anyone (researchers, government officials, advocates, etc.) can take the information and adapt it for use according to their own data needs. For example, as one participant pointed out, the current definition used by the U.S. Census Bureau includes anyone who has been homeless in the last night, the last seven days, the last 30 days, and if they have ever in their lifetime been homeless. Data collected at this level is extremely flexible, can be used for a wide variety of purposes, and can address a broad range of policy questions.

The last theme that emerged from the first day was that attempting to derive a conceptual definition that everyone agrees upon is essentially a fruitless effort – there are just too many divergent definitions and interests to contend with. In general, the consensus was that what is important is what we are in fact able to measure. In other words, what is important in terms of definitions is their operationalization. Conceptually, a definition of the homeless can encompass anyone from those who are marginally housed to those who live on the streets. Operationally, however, who we can actually count (easily and with a minimum of cost) is limited to a relatively small number of subgroups of the homeless population – those who are easily accessible. For example, there is no simple, cost-effective method for counting street-dwellers, those living in abandoned buildings, or those who are doubled-up with family and friends. On the other hand, over the last decade a number of techniques have been developed (which are considered to be quite successful)
for measuring and counting those homeless who reside in shelters, those who use soup kitchens and food services, and those who congregate in specific (known) geographical areas. The conclusion at this stage in the workshop, therefore, was that the focus in terms of definition should be on who we can realistically count.

Day Two: Methods for Counting the Homeless

As noted throughout the first day of the workshop, the issue of defining homelessness cannot be discussed without addressing the issue of methodology. And, as was concluded on the first day, defining who the homeless are and who will be included in a count is determined ultimately by who can be realistically counted. Indeed, most if not all of the participants who have attempted to survey, sample or count the homeless in the past noted that, regardless of how meticulous the effort to count the homeless is, some portion of the population will be excluded. Given this, the overarching goal in studying the homeless in the last two decades has been to develop better and more accurate techniques for covering as much of the population as possible. This, then, was the topic of the second day’s discussion: the methods and techniques for counting/sampling the homeless that have been developed, as well as their limitations.

One of the main observations made by participants was that all but the most recent of homeless studies were not designed or carried out with the explicit intent of counting the homeless. Most research on the homeless has been designed to determine their demographic characteristics, their housing needs, their health and nutrition needs, and a whole range of other correlates of homelessness. One of the biggest obstacles in carrying out this research was that the homeless are an extremely mobile and elusive population, rendering conventional sampling/survey techniques ineffective. In an effort to overcome this obstacle, a number of techniques have been developed that attempt to go beyond the simple key-informant and snowball sampling techniques which were characteristic of earlier research efforts. Basically the techniques that were discussed throughout the day fall under one of three types: census and one-night counts, area probability surveys, and computerized information management systems.

The first two types of research depend on a multiple sampling frame approach. Noting that the homeless may be found in a number of places, these techniques systematically determine the locations where the homeless can be found, and then a probability sample of individuals is selected from each locale. Probabilities are calculated on the basis of the proportion of individuals found in each locale relative to the other locations in the overall sample.

The last method represents a relatively new approach to the study of the homeless. Computerized tracking systems have been developed and installed in a number of shelters across the United States. Information management systems, as they are commonly referred to, collect a wide variety of information from the homeless as they enter the shelter system. They are tracking systems in that they record the dates that each individual enters and exits from the shelter system. Although not as sophisticated as the ANCHoR system, similar computerized information management systems are used by some Canadian cities to assist
in local policy development. However, the systems such as the one used in Toronto, Canada, are characterized by an extensive delay between the time the data is collected and the time it becomes available for use. The current systems available in the United States provide instant feedback and statistics on the rates of utilization and the characteristics of the homeless using the shelter system at any given point in time. The ANCHoR system is a highly flexible system that allows for a range of data collection possibilities. For example, the investigator has the option of collecting and entering the data on site or collecting the data and sending it out to a centralized location where it is then entered into the computer database. There are no restrictions on this option in terms of the timeframe within which the data is collected and entered into the database. The data may be collected on a person-by-person basis and then forwarded to the centralized location on a daily, weekly, monthly or yearly basis.

While the ANCHoR system is a very useful method for collecting and organizing data on those who use the shelter system, the primary reason and advantage for using the system is that it is a method for collecting and entering data on the homeless on site and on a day-to-day basis. While other computer tracking systems can be used to track shelter usage on a daily basis, they are not specifically designed to be used with standalone PCs. Thus, the real advantage of using the ANCHoR system is that it has been designed for standalone PCs and in a Windows (3.1 or higher) environment. This is probably its most attractive feature and the feature which sets it apart from other computerized tracking systems. Therefore, if used, it should be used in the manner for which it was designed: as an on-site technology where data is collected and entered immediately upon entry into or exit out of the shelter system.

There is only one limitation on the range of information that can be collected from the homeless using this method. The limitation is time. Typically, shelters have strict policies on when a homeless person can enter and exit the shelter. If the homeless are only allowed to enter the shelter at a fixed time at night, as is the case with many shelters that provide a bed on a nightly basis, then there is a limited amount of time within which to process and collect the information required. Usually, the goal of the shelter is to get people in and settled for the night as quickly as possible, and attempting to collect data from the homeless on entry has the consequence of being quite disruptive to the operations of the organization. Two options are available for remedying this problem. First, the amount of information to be collected from the homeless as they enter the shelter may be severely limited, thereby resulting in only a small delay for the shelter. Or, the data to be collected could be collected in the morning prior to leaving the shelter. In either case, it is likely that the shelter's policies will have to be modified in order to take into account the time it takes to collect the desired information.

While the discussions that took place on the second day touched upon these and the earlier methods that were employed in homeless research, the emphasis of the day's discussions was on the problems and limitations of trying to count the homeless. In particular, three issues were raised: duplication, timeframe and geographical area.
The current catch-phase in the literature and, indeed, throughout the day’s discussion, was “unduplication.” This word is used to describe the process of separating out overlaps in usage of services by the homeless. Typically, studies of the homeless that are carried out today involve some form of multiple sampling frame based on probability methods. Studies using this technique go through the process of selecting samples from the services that the homeless use: shelters, food, health, welfare, employment, etc. The problem associated with this technique is that many of the homeless use one or more of the services at any point in time. Therefore, it is highly likely that the same individuals can be counted or surveyed in more than one location. The highest priority in carrying out a study of this type, then, is to remove the duplication from the resultant database.

In the case of information management systems, the problem is one of accuracy of reporting rather than duplication. Duplication exists to the extent that an individual enters and leaves a shelter on a number of occasions over an extended period of time. However, these systems collect enough information that multiple users can be identified and estimates of the size of the population adjusted accordingly. As noted above, the ability to unduplicate is dependent on the accuracy of those recording the information and those reporting the information. Errors in recording are indeterminate in that it cannot be ascertained whether the error inflates or deflates the resultant estimate of the size of the population. The other disadvantage associated with this technique is that it produces estimates that reflect only those who use the shelter system. Those who do not use the shelter system are, therefore, missed.

There are two methods for dealing with duplication. First, duplication is eliminated through statistical means. The degree of overlap in usage across services is determined by comparing lists of those using the services included in the sampling frame and developing weights for the amount of overlap between services. These weights are then applied to the data in order to produce an estimate that accurately reflects the size of the population using each service at any given point in time.

The second method involves developing a unique identifier for each individual included in the study. A unique identifier is constructed by gathering enough information from each individual so that they may be differentiated from the other respondents in the database. This information then provides a basis for identifying those individuals who have been included more than once in the data. Duplication is removed prior to the development of an estimate of the size of the population.

While service-based methods for estimating the size of the population provide a reasonably accurate way of deriving a count of the homeless, they tend to be limited by the timeframe of the approach. That is, one-night counts, censuses and blitzs only cover that part of the population who are available on the night of the study. The homeless are, as we have noted, a very fluid and mobile population. Therefore, a count that takes place within the context of a short period of time (e.g., one night) tends to miss the harder to find homeless and those who are not regular users of the services included in the sampling frame. In part, the accuracy of a count can be increased by ensuring that the widest possible range of services and locations (e.g., jails, institutions, hospitals, etc.) is included. In addition,
maximizing the timeframe in which the study takes place will expand the opportunity to capture as many homeless in the study as possible, and thereby improve the accuracy of the count.

On the other hand, carrying out a survey over an extended period of time increases the chance of duplication, and may result in inflated estimates of the size of the population. Culhane et al.'s research demonstrates the variation in the size of the population that occurs over time (both because of duplication and because of fluctuations in the size of the population). For example, using data collected in shelters in New York and Philadelphia, their research (based on an unduplicated count) indicates that over three times as many homeless use the shelter system over the course of a year, as those using the shelter system on a single day. (Culhane et al., 1994: 122) This would suggest that the estimates of the size of the population will vary dramatically depending on the length of time for which data are collected. Thus, the timeframe for which the estimate is produced is important in terms of accuracy and in terms of reflecting the fluctuations into and out of homelessness over a period of time.

While it is true that longer timeframes increase the numbers of people passing through the shelter system, it is also true, as Paul Koegel noted, that the extent to which that is the case will differ from community to community. Basically, the methods that were discussed throughout the day are dependent upon two factors: (1) the number of services within a given geographical area; and (2) the number of homeless using those services. Therefore, it is important to consider the specific geographic area in which a count is taking place. If an area is rich in services to the homeless, then shorter timeframes will produce more accurate estimates. However, in areas which offer few services, there is a far greater probability that individuals may never use the services (because there are so few), regardless of the timeframe. Thus, the ability of these methods to provide good coverage depends on the availability of services in a community, as well as the degree of usage of those services.

**Day Three: Facilitating Community Involvement**

The last day of the workshop was organized in a similar fashion as days one and two. It took the form of an open question-and-answer session in which the main participants were asked to relate their own experiences in counting the homeless. The explicit focus of the discussion was on facilitating community participation and improving the relationship between those providing services to the homeless and those attempting to either count or survey the homeless within the community.

Two main themes came up throughout the day's discussion. First, from the perspective of the researcher, the main obstacle to carrying out successful counts or surveys of the homeless was the level of service provider cooperation and involvement in the research. All of the researchers participating in the workshop noted the importance of involving the community at the beginning of the research program and maintaining their involvement throughout the course of the program. They suggested a number of ways in which community involvement can be elicited: (1) find out what the community wants to know in
terms of the homeless and incorporate this into the project; (2) make the research palatable to the service provider by finding out what they need to know about their clientele and adapting the research to accommodate their needs (e.g., Dennis Culhane's ANCHO system includes a Service Provider Module); and (3) involve all levels of the organization in the research – from the director to the frontline worker. The most important factor in any attempt to carry out a study of the homeless is to involve the community right from the start. One of the main ways of doing this is to demonstrate how the information that results from the study will benefit the community, as well as the homeless.

As perceived by the provider or those working with the homeless, the main problem with the research that has been carried out is its insensitivity to both the needs of the organization and the needs of the homeless. The providers at the workshop noted that, frequently, research carried out on their clientele is insensitive and typically ignores the individuals' right to privacy. All of the service providers cautioned that a basic axiom of any research on the homeless should be: 'do no harm.' By this, they were referring to the fact that many times the products of research carried out on the homeless are used in ways that do not benefit them. The numbers debate in the United States is a classic example of this. Low-end counts have frequently been used to justify cutbacks in services and funding to the homeless. The participants noted that many of the groups providing services to the homeless see themselves as gatekeepers, protecting the homeless and their privacy. They did acknowledge that there is a need for more information on the homeless (including the size of the population), but they cautioned that the need for information must be tempered by the need to respect the rights and privacy of the homeless.

Workshop Conclusions

The overall consensus among the participants was that literal definitions of homelessness are preferred over definitions that are more inclusive and cover a much wider population. The choice of this type of definition was made for two reasons: it is comparatively easy to operationalize and it provides the highest return in terms of cost-effectiveness and representation of the population. Lastly, the participants agreed that, in many respects, the choice of definition itself was not problematic. Rather, what is important is the specificity of the definition. For a definition to be of any utility, it must clearly indicate who is to be included (counted) and who is not. Thus, any definition of homelessness can be employed in an effort to enumerate the population, as long as it clearly specifies the individuals that it is intended to encompass.

A number of conclusions resulted from the discussion on methods for enumerating the homeless. First, service-based techniques for surveying the homeless provide a reasonably accurate, reliable and cost-effective method of estimating the size of the population. Second, attempting to count the street homeless is extremely expensive and has met with little success. Therefore, methods including a street component are not recommended and street counts should be avoided. Third, service-based methods are preferred, but must be tempered or adjusted for according to the number of services in a community/area, the degree of utilization of those services by the homeless, and the timeframe within which a count takes place. Any attempt to estimate the size of the population within a given
community must be preceded by a great deal of investigative work in order to ensure the inclusion of the widest possible range of services used by the homeless, ascertain the degree of utilization of the services, and determine the timeframe within which the count should take place.

The last day of the workshop focused on facilitating community participation in efforts to count the homeless. Virtually all of those who have attempted to carry out research in the community noted that their initial efforts were met with a great deal of resistance on the part of those providing services to the homeless. As noted above, the providers participating in the workshop cite a number of reasons for such resistance. The primary reason is that, in many respects, the service provision community see themselves as protectors of the homeless. As a result of this perception, they go to great lengths to protect the rights and privacy of those using their services. This is understandable given the vulnerability of the homeless and the limited sources of social support for them. Given an atmosphere of dwindling financial support for such services, and competition for this limited support among the service providers themselves, efforts to count the homeless are often interpreted as efforts to provide a rationale for further financial cutbacks. What is required, therefore, is increased attention to the needs of the community, and a clear demonstration of how their cooperation will benefit their organization and the homeless. Finally, the results of the workshop demonstrate that attempting to count the homeless requires a collaborative effort on the part of all parties concerned: government officials, service providers, researchers and the homeless. Without this cooperation, it is virtually impossible to generate an estimate of the size of the population that is reliable, reasonably accurate or cost-effective.

Section III: Towards a Strategy for Counting the Homeless

Introduction

Conventional strategies for surveying and counting the general population (e.g., traditional probability techniques using households and census blocks) have been found to be very ineffectual in terms of enumerating the homeless. It would be incorrect to say that researchers have not attempted to adapt conventional survey methods in their efforts to estimate the size of the homeless population. They have. The problem is that their experience has demonstrated the limited utility, reliability and accuracy — as well as the exorbitant costs involved — in adapting them for use with the homeless population (see, for example, Dennis, 1993; Rossi, 1989). As a result, researchers in the United States have struggled to develop new techniques for sampling and counting the homeless population. After a decade of developing, testing and modifying their methods, both researchers and government officials have reached a tentative consensus that service-based methods produce the most accurate and reliable results.

Service-based Methods: Description and Overview

In general, service-based methods refer to a class of survey techniques that sample from or count homeless people in a variety of service system locations, including shelters, soup
kitchens, day programs (e.g., drop-in centres), congregate areas or outdoor encampments, street and mobile health care programs, street outreach programs, casual labor offices, etc. Some studies based on these techniques also sample from street locations, which may include those individuals who sleep on the street, on river banks, under bridges, on roof tops, in vacant buildings, in a public or commercial facility (e.g., library, city hall, shopping malls, etc.), in a city park, in a car, or in any other place not meant for human habitation. While there are no hard and fast rules about the number of sampling frames that one should include in a study, it is clear that sampling from the broadest range of locations provides the highest degree of coverage. In this context, then, the greater the number of sampling frames included in a study, the greater the coverage of the population and, hence, the greater the reliability and accuracy of the count. The number of sampling frames employed in a study, therefore, is a matter of choice and will depend largely on the goals and needs of the project.

Typically, there are two factors that affect the choice of sampling frames: the definition of homelessness forming the basis for the study, and the cost of sampling from a variety of locations. The definition of homelessness used will provide a framework that can guide the selection of the sampling frames most likely to capture the individuals possessing the characteristics of interest. For example, if the goal of a study is to estimate the size of the population of homeless battered women, then it makes sense to select locations that maximize the possibility of encountering them. Therefore, the investigator may choose to exclude shelters for runaway youth, detox centres that service alcohol and drug addicts, or other such services where the likelihood of finding battered women is extremely low. The problem with approaching a study of the homeless in this way is that there will always be some margin of error involved (that cannot be predetermined or estimated) in excluding locations from a study.

Apart from shelters for the homeless, most of the services that the homeless use are not specifically targeted at them. A wide variety of individuals use food, social, health care and employment services, and the homeless constitute only a portion of all the people serviced by these types of organizations. Investigators, therefore, may decide to exclude organizations that service a small proportion of homeless people. In doing so, they automatically exclude the proportion of the homeless using those services and, hence, run the risk of compromising the accuracy and reliability of their count.

For example, an investigator who is interested in battered women who are homeless may choose to sample only from the shelters that service them. The problem with this strategy is that not all battered women are shelter users. Battered women use a variety of services, one of which is shelters. They may have problems with alcohol and drug abuse, mental health problems, employment problems, etc., and may contact and use services that are designed specifically to deal with their problems. While battered women do not constitute the majority of their client base, many such organizations service a proportion of the population. Therefore, excluding services where the likelihood of encountering battered women is low, but not zero, results in an undercount or underestimation of the size of the population. Thus, most researchers would agree that it is preferable to start with as wide a
net as possible, in order to capture as many homeless people as possible, and then narrow the focus of the analysis to the groups of interest after the data have been collected.

Cost is another factor that is directly related to the number of sampling frames to be selected for use in a study. The overall cost of a project is a function of the number of sampling frames chosen. The greater the number of locations in which counts must be taken, the greater the cost of the project. This is so for two primary reasons. First, a census or survey must take place at roughly the same time across all of the locations in the study in order to control for the possibility of double-counting (an issue to be discussed in greater detail later on in this section). Therefore, a large staff is required to carry out a simultaneous enumeration across the locations forming the basis of the study. Increasing the sampling frames, therefore, will require a proportional increase in the number of staff required to carry out the task at hand; this will, in turn, increase the cost of the project.

The second reason is related to the amount of time required to carry out a count. The timeframe associated with preparing, training and coordinating both staff and the sites included in the study increases with the number of locations selected. The greater the number of sampling frames, the more time required to contact the locations, gain entry, gather preliminary information about the client base using the service, screen respondents as to their usage of other services that make up the other sampling frames in the study, and organize a count at that site. Thus, the more preparatory time and time spent in the field, the greater the overall cost of the project.

Cost is, perhaps, the most critical consideration in attempting to count the homeless. The cost of counting the homeless has varied depending on the size of the geographic area targeted for enumeration and the number of sampling frames to be used. Various researchers throughout Canada and the United States have reported project costs ranging anywhere from $30,000. (Calgary), to U.S. $800,000. (Washington DC Metropolitan Area Study), to the U.S. $10,000,000. the U.S. Census Bureau has budgeted to carry out the homeless component of the next decennial census. Thus, one thing is clear from previous research efforts: regardless of the size of the locality or the number of sampling frames chosen, counting the homeless is an expensive and time-consuming process.

In addition, it was noted in the workshop that efforts to count the homeless at the national level require an inordinate amount of resources, both human and financial, as well as an incredible amount of advanced planning and coordination. More to the point, however, is the fact that no national effort, Canadian or American, has been deemed successful. And, while the U.S. government is continuing efforts to improve the coverage of the national census to include the homeless, the Canadian government has discontinued their efforts to capture the homeless in the Canadian census.

After a thorough investigation into the possible methodologies that are available for taking a census of the homeless population, the U.S. Census Bureau adopted a service-based method for use in their efforts to include the homeless in a national enumeration of the population. During the 1990 Census, they carried out counts in shelters and pre-identified street locations: the Shelter and Street Enumeration (S-Night). S-Night represents the U.S.
Census Bureau's efforts to include homeless persons in the 1990 Census. The S-Night enumeration, a service-based method, counted persons in emergency shelters and visible in street locations, as well as persons who reported they had no permanent home elsewhere during the standard census of special places and group quarters (e.g., jails, institutions, etc.) on the night of March 20 and the early morning hours of March 21, 1990. Prior to S-Night, the U.S. Census Bureau compiled a national list of shelters from administrative records and requested every local jurisdiction, nationwide, to supplement the list of shelters, street and open public locations used by homeless persons at night. As anticipated, counting the homeless in the pre-identified street locations proved to be the most problematic component of the S-Night enumeration. Indeed, this was so much the case that the U.S. Census Bureau has elected to exclude street locations from the next decennial census. A detailed account of the problems and difficulties encountered during the S-Night enumeration is given in a special edition of Evaluation Review, 1992, Volume 16, Number 4.

The main criticism leveled against the S-Night efforts was with the site selection for the street component. The S-Night street counts were restricted to predesignated areas that the census, working with local authorities, identified as high-density homeless areas. As Wright and Devine explain:

- In essence, the S-Night street enumeration was restricted to homeless persons who spent the night somewhere in these predesignated areas; street people outside those areas were not enumerated. Because Census S-Night resources were limited, coverage of entire cities was clearly out of the question; at the same time, the restricted nature and number of sites that were in fact searched strictly limited the completeness of the count. (1992: 362).

This problem is not restricted to the S-Night effort. In fact, virtually every study that has attempted to count the street homeless has been limited by the difficulties inherent in trying to accurately count the number of homeless who live on the street, in abandoned buildings, on roof tops, in cars, under bridges, etc. The problem is that there is no reliable method for selecting high density locations or for choosing the street locations in which the homeless are most likely to be found. To date, researchers have relied on service providers and local authorities to identify the most likely sites. The problem with selecting sites on this basis is that, regardless of the accuracy of the local authorities' knowledge about the street locations of the homeless, the homeless are extremely mobile and move on a constant basis. By the time the study goes to field, the homeless are likely to have moved to new locations, ones not identified prior to the study. Thus, there really is no reliable way of predicting or anticipating the street locations where the homeless may be found on any given day.

Both Rossi (1989) and Dennis (1993) employed a stratified sampling design based on census blocks to avoid the site identification problems associated with attempts to count the street component of the homeless population. While this technique is the most rigorous method for counting the homeless, and is considered the most scientifically valid method, both researchers report that it is an extremely expensive and logistically difficult method to implement. In fact, Dennis (1993) reports that the costs associated with the street
component of the DC*MADS study were so exhorbitant (over half of the total budget) that the project was halted and redesigned to exclude the street sampling frame.

Thus, regardless of whether a count is carried out at a national or local level, the street component has consistently proven to be the most problematic and costly aspect of any effort to count the homeless. And, given the experience of both the U.S. Census Bureau and others, most researchers would concur that the street component of any method for enumerating the homeless is extremely costly and produces the least satisfactory results. More importantly, as noted in Section I of this report, two key observations have been made based on previous efforts to count the street homeless: (1) the proportion of homeless actually living on the street is small; and (2) the majority of street homeless can be captured in the shelter, soup kitchen and encampment sampling frames. Given these observations, we therefore conclude that the following sampling frames represent the minimum number of locations required to ensure the best coverage of the population: shelters, soup kitchens and day programs, and outdoor encampments.

**The Mechanics of Service-based Methods**

Service-based methods are principally carried out in two stages: the pre-sampling and the survey/census phases. During the pre-sampling or counting phase, detailed lists are developed of the sites and services where the homeless are to be found. Decisions are made concerning the timeframe within which the count will take place (e.g., one-night or over a period of nights). The services are contacted; information is requested on the number of homeless using the service and the optimal time for taking a count on site; permission is sought to carry out a count/survey on site. Outdoor locations are canvassed and counts of the numbers of homeless are generated. The proportion of homeless using the services found in the outdoor locations is estimated based on the information collected. Sample probabilities are then generated from the estimates of the numbers of homeless in each of the sampling frames. Finally, the screening tool and survey instrument or questionnaire are developed.

During the survey/census phase, the field personnel are sent out to count and survey the population. Individuals are approached at each of the sites. They are asked to participate in the study. If they agree, they are screened to determine whether or not they are homeless, and what other services they use. Finally, if the project involves collecting detailed information from the homeless, the questionnaire is administered to the appropriate respondents.

The following description of the service-based method used in the Calgary Survey of the Homeless (McDonald and Peressini, 1991) is intended to provide a detailed example of the activities and tasks involved in implementing such a design. Details are provided on the process of generating lists to be used in the development of the study sampling frames, the types of information required to develop estimates of the proportions of homeless using services, the method for removing overlap between sites, and a point-by-point account of the field procedures used. It is important to note that the goal of the CSH was to survey a sample of the homeless population, and not to take a census of the population. The
primary difference between sampling from and taking a census of the homeless population is that because a census requires counting/surveying every individual in each of the sampling frames, it does not require probability estimates of the proportion of homeless using each of the services. Probability estimates are used to determine the number of individuals to be selected from each of the sampling frames and are, therefore, not required for a census. However, estimates of the size of the population can be generated based on the probabilities associated with the proportion of homeless in each of the sampling frames in a study.

The Calgary Survey of the Homeless (CSH)\textsuperscript{13}: An Example of a Service-based Design

The Calgary Survey of the Homeless (CSH) used a sampling design developed by Burnam and Koegel (1988) in their study of Los Angeles' Skid Row. Burnam and Koegel note that the main stumbling block in drawing a representative sample of the homeless is the construction of an accurate sampling frame (e.g., a complete list of all homeless individuals in a population), and the selection of a sample from this listing such that each person has a known probability of being chosen for inclusion in the sample (1988: 118). Attempting to overcome this obstacle, they developed a method of selecting homeless individuals such that every homeless person in the Los Angeles skid row area would have an equal chance of being selected. Their basic strategy involved:

- estimating the relative proportions of the homeless population that “passed through” various facilities over a month's time (including facilities which served the unsheltered sector of the homeless population), and then randomly sampling, within these facilities, numbers of persons that were directly proportional to the average proportion of the population utilizing the facility over the period of a month.

(Burnam and Koegel, 1988: 122)

Before selecting their sample, however, they had to determine which facilities were used by the homeless and what services each facility provided. After conducting an investigation into the facility and service utilization of the homeless population, they determined that, for their sample to be representative of the total population of homeless in the skid row area of Los Angeles, three sampling strata or sectors had to be distinguished: (1) beds - comprised of persons using temporary sleeping quarters or beds made available to the homeless in shelters or through the provision of hotel vouchers; (2) meals - consisting of homeless persons receiving free meals from missions or other programs, but not using beds; and (3) congregating areas - made up of homeless individuals who made some use of missions and drop-in centers. (Burnam and Koegel, 1988: 123) These three sectors were used as cornerstones on which the final sample would ultimately be drawn.

The next phase of Burnam and Koegel's design involved collecting data from each of the facilities included in each of the sectors, as well as from surveys of homeless individuals themselves, in order to estimate the proportion of the population falling into each of the strata over a month's time. (1988:123) Following this, they determined the proportion of individuals using one or more of the facilities or services (e.g., the overlap between the facilities), and adjusted their estimates of the numbers of people falling into each of the
above specified strata. Finally, they randomly selected a sample of individuals within each strata on a given day. The end product of this methodological design was the selection of a sample that consisted of a representative cross-section of homeless individuals on an average day in Los Angeles' Skid Row.

A preliminary survey of the homeless population in Calgary's skid row was carried out using similar methods and procedures to those outlined above. The goal of the initial survey was to determine the services and facilities used by the homeless, and to estimate the proportions of homeless using each of the service sectors in order to develop a sampling list from which to draw a sample.

Development of the Sampling Frames for the Survey: Over the month of February 1991, the data required to determine the proportions of the homeless population using each facility included in the beds, meals and congregate area sectors were gathered. This information is necessary in order to calculate the probabilities of homeless persons using the services and facilities in each sampling frame. First, the different types of services provided to the homeless population in the city's skid row area was determined. Then, information was collected on the characteristics of the facilities, such as numbers of beds, eligibility for beds, length of stay in beds, numbers and times of meals served, other services (e.g., drop-in or congregate services) and number of persons using other services during the study month. Table 1 presents a summary of this information.

Table 1 indicates a total of two facilities offered beds to the homeless. On the other hand, three facilities offered meals to individuals other than those whom they were housing as part of a program, together providing approximately 233 meals per day to the homeless and transient population. However, it should be pointed out that these figures did not accurately reflect the number of homeless individuals served for a number of reasons: (1) more than one meal was served per day at one of the facilities; (2) individuals could eat at more than one facility in a day; (3) individuals were allowed to have more than one serving during the same serving period; and (4) meals were not restricted to individuals who are homeless.
Table 1: Sampling Information for the Calgary Survey of the Homeless

<table>
<thead>
<tr>
<th>Facility</th>
<th>No. of Transient Beds</th>
<th>Number of Beds Feb '91</th>
<th>Meals Served to Transients</th>
<th>Total Meals Feb '91</th>
<th>Congregate Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Men's Hotel</td>
<td>138</td>
<td>3,811</td>
<td>Breakfast</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lunch</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Dinner</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Calgary Drop-in Center</td>
<td>100</td>
<td>2,992</td>
<td>Mid-morning</td>
<td>2,992</td>
<td>1,230</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Mid-afternoon</td>
<td>2,238</td>
<td></td>
</tr>
<tr>
<td>St. John's Soup Kitchen</td>
<td>-</td>
<td>-</td>
<td>Lunch</td>
<td>3,352</td>
<td></td>
</tr>
<tr>
<td>Salvation Army Soup Line</td>
<td>-</td>
<td>-</td>
<td>Dinner</td>
<td>1,292</td>
<td></td>
</tr>
</tbody>
</table>


Lastly, only one facility contained an indoor congregating area. Because of the constant movement of individuals in and out of the facility, the research team found it extremely difficult to determine exactly how many individuals the facility served. This facility took a daily count of the number of individuals present at 12:00 p.m. Using this information, the research team calculated that the total number of individuals (who may or may not have been homeless at the time) using this congregate area for the study month was no more than 1,230 people or approximately 44 people per day.

Given this information, the researchers concluded that, taking the size and characteristics of the homeless population into consideration, it would be redundant to partition the sample into three sectors. Because only one facility in Calgary's skid row area offered a drop-in service (e.g., provided an indoor congregating area) and that same facility provided both beds and meals, it was decided that the portion of the homeless using this service would be captured, or represented, in the bed and meal sectors. Thus, using the information presented in Table 1, the services provided to the homeless were assigned to the meals and beds sectors by the research team in the following way:

**BEDS SECTOR:** The Single Men's Hostel  
The Calgary Drop-in Center (Night Program)

**MEALS SECTOR:** The Calgary Drop-in Center (Meals Service)  
St. John Soup Kitchen  
Salvation Army Soup Line


The next stage of the investigation required first the identification of all other congregating areas outside of Calgary's skid row attracting concentrations of homeless individuals, and second taking a census of homeless persons in these areas. These included City Hall (on
Sunday mornings), the Public Library, Devonian Gardens (part of a major shopping mall in the downtown core) and three fast food outlets. In total, 75 people were counted in these areas over several observational periods between mid-February and the end of the month. This number, however, was not considered to be an accurate reflection of the number of people who actually passed through each of the congregate areas. Thus, similar to Burnam and Koegel's survey, it was decided that this sub-population of the homeless would be captured in the samples of the other two sectors.

The decision not to sample from the other congregateing areas allowed for the possibility that a portion of the homeless who did not use the bed and meals services and did not congregate at the drop-in center would not be selected for inclusion in the final sample. Thus, ultimately, the final sample chosen would not represent the entire homeless population. To ensure that a minimal amount of bias was introduced into the sample by excluding this sampling strata, a short survey of the individuals in the other congregateing areas was carried out in order to determine their likelihood of being captured in the beds and meals sectors.

The sample design of the auxiliary survey involved sampling a quota (e.g., a set number of individuals based on their proportions — derived from the observations of the areas) of those individuals available in each of the areas at the time of the survey. The survey was conducted over a period of four days. Individuals were asked a series of questions that established if they were or were not homeless (e.g., they did not have a room, apartment, or house of their own, or had not been in their own place in the previous month). If they met the criteria for homelessness, they were asked three additional questions in order to determine whether, in the previous month, they had: (1) slept in a bed in any of the facilities in the beds strata; (2) eaten a meal at any of the settings in the meals sector; or (3) spent time in the drop-in center’s congregate area.

Thirty-six persons were approached across the settings listed above. Overall, five people refused to participate in the minisurvey, for a completion rate of 86 percent. Of the 31 individuals agreeing to participate, 25 (or 80 percent) had in fact passed through the bed stratum, meal stratum or both strata during the study month. Only three people (10 percent) had used the congregate area at the drop-in center. Furthermore, these three people reported using at least one of the facilities in both the beds and meals sectors over the month prior to being surveyed. These results, therefore, support the decision to exclude the other congregateing areas from the overall sampling frame. The majority of people in the outdoor congregateing areas would be represented in the final sample by virtue of the fact that they were also using the services available in the bed and meal sectors. Thus, it was concluded that allocating the sampling frame to the bed and meal sectors would produce a sample of homeless individuals which would be representative of the entire homeless population in the city.

*Allocating the Sample Across the Bed and Meal Sectors*: Having decided to sample individuals as they used beds or as they received meals, the next step in the Calgary study was to determine how to proportionately sample from each of the sectors. Following Burnam and Koegel's reasoning (1988: 133), the study authors concluded that the
population using a bed in the bed sector was a subset of the population that receives meals (e.g., the meals sector is more inclusive than the beds sector). Thus, as Burnam and Koegel put it, "...as one moves from the category of beds to meals... one casts a wider net, drawing in individuals who are less and less involved in service utilization." (1988: 134) It was decided that the strategy in the CSH would be to sample those in the beds stratum first, thereby allocating the maximum proportion of the sample to this category, and then sample the meal settings (accessing those individuals who would have a high probability of being excluded from the sample derived from the beds sector).

Before this step could be carried out, an estimate of the amount of overlap between the two sectors had to be determined. A third survey of the facilities included in the meals sector – the most inclusive of the sectors – was therefore completed. The meals enumeration consisted of four questions: 1) Do you currently have a room, apartment or house of your own?; 2) Have you stayed in your own place in the last 30 days?; 3) Have you slept in a bed at the Single Men's Hostel (SMH) or the Calgary Drop-in Center (CDIC) in the last 30 days?; and 4) In the last week, have you eaten at any of the following places: The Salvation Army Soup Line? The 10:30 and 2:30 meals at the CDIC? The St. John's Soup Kitchen? A complete census of all individuals using the meal services provided at the soup line, drop-in center and soup kitchen at four different times over the study month was carried out.

In total, across the three locations, 264 individuals were approached. Of these, 26 declined to be interviewed, resulting in a completion rate of 90 percent. From the survey, 61 people were defined as not homeless (e.g., they answered "yes" to questions 1 or 2). Thus, excluding these people, information on sector overlap was available for 177 people. Of these 177 individuals, 78 percent (138) had slept in a bed at either the Single Men's Hostel or the drop-in center in the study month, while 22 percent (39) had received meals but had not slept in a bed in the beds sector in the month prior to being interviewed.

The goal of the CSH was to obtain 100 interviews of the homeless. Given this goal, and factoring in a refusal rate of 10 percent (based on the refusal rate obtained in the meals enumeration survey), it was calculated that a sample 110 individuals would have to be initially selected in order to achieve a final sample size of 100. Knowing that 22 percent of the population used meals but not bed services, it was calculated that 24 people needed to be selected from the meals sector. The remaining 86 people (78 percent), would be drawn from the beds sector. At this stage, then, all that remained to be done was to ensure that the individuals to be sampled across the different facilities within each sector had an equal probability of being selected.

Sampling Within The Beds Sector. There are two primary facilities available to people who were seeking beds for which they did not have to pay in the City of Calgary: The Single Men's Hostel (SMH) and the Calgary Drop-in Center (CDIC). Before determining the proportions of interviews to take place in each facility, however, the degree of utilization overlap that occurred between the two facilities had to be calculated. In other words, to ensure that interviews were allotted to each facility in the correct proportion, this overlap had to be accounted for and controlled in the overall sampling design.
Using Burnam and Koegel's design, an estimate of the amount of overlap between the facilities was derived and subsequently controlled for in the overall design of the project by going through the following stages. During the first stage, a list was compiled of different people using each facility for the study month. This list provided a count of the different people who had slept in each facility during a 30-day period, thus providing an estimate of the number of people that the beds in each facility represented. A total of 510 different people slept in a bed at the SMH and 529 different people slept in a bed at the CDIC.

Next, the list from each was compared to the other to see which people had slept in a bed in more than one place. Where overlap was found, it was split evenly or weighted proportionately between the two lists. For example, a person who had slept in a transient bed at the SMH and in a bed at the CDIC during the designated period (February) was counted as one-half in each of the two categories. This procedure served to adjust the estimated number of persons represented by a facility in order to account for the overlap between facilities. In total, 239 people (out of a total of 1,039) had slept in a bed at both facilities during the month of February. A weight of .5 was assigned to the individuals whose names appeared on each of the lists. As a result, the total number of different people using a bed in the beds sector in one month was calculated to be equal to 800 after adjusting for the overlap between the two facilities.

Finally, using the figures derived in the first two stages, the proportion of the total population of different people using beds for each site in the beds sector, controlling for overlap, was calculated as follows: the SMH = .4881 and the CDIC = .5119. The sample of desired interviews, 86, was then proportionately allocated to transient beds in each of the facilities based on the number of people that each bed represented relative to the total population of people using beds during the study period. The number of interviews conducted at each of the facilities was as follows: SMH, 42 interviews and CDIC, 44 interviews.

**Sampling Within The Meals Sector:** In total, three organizations provided meals to homeless and transient people in the city of Calgary: the CDIC (two meal settings at 10:30 a.m. and 2:30 p.m.), the Salvation Army Soup Line (dinner) and the St. John's Soup Kitchen (lunch). As in the beds sector, the goal here was to control for the overlap in usage between the four meal settings, such that each individual in the total population availing themselves of meals in each of the facilities would be counted only once. In short, the goal here was to allocate the entire meal sector sample across the various meal settings such that the number of interviews assigned to each would represent the proportion of the homeless in the city who were served at that particular place. To this end, Burnam and Koegel's design was once again employed.

The procedure outlined by Burnam and Koegel is very long and complicated and will not be reviewed here (see Burnam and Koegel, 1988: 140-145). Instead, Table 2 presents a summary of the steps and calculations that were taken in the CSH in order to replicate Burnam and Koegel's design for deriving an estimate of the proportions of eligible persons served by each meal site, adjusted for the overlap in usage between the four sites. Using
these proportions, the desired number of interviews to be conducted in the meals sector, 24, were allocated as follows:

<table>
<thead>
<tr>
<th>Facility</th>
<th>Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. John's Soup Kitchen</td>
<td>19</td>
</tr>
<tr>
<td>Calgary Drop-in Center (10:30 a.m.)</td>
<td>1</td>
</tr>
<tr>
<td>Calgary Drop-in Center (2:30 p.m.)</td>
<td>1</td>
</tr>
<tr>
<td>Salvation Army Soup Line</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>24</strong></td>
</tr>
</tbody>
</table>

*Source: McDonald and Peressini, 1991.*

Table 2: Summary of Steps Used to Derive Proportions of Interviews to be Conducted at Each Facility in the Meals Sector

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Soup Kitchen</th>
<th>Drop-in Centre</th>
<th>Salvation Army</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>AM  PM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not Homeless</td>
<td>23</td>
<td>22 10</td>
<td>6</td>
<td>61</td>
</tr>
<tr>
<td>Slept in a Bed in the Beds Sector</td>
<td>36</td>
<td>69 28</td>
<td>5</td>
<td>138</td>
</tr>
<tr>
<td>Ate a Meal but Did Not Sleep in a Bed</td>
<td>27</td>
<td>2 4</td>
<td>6</td>
<td>39</td>
</tr>
<tr>
<td>Average # of Meals (Feb)</td>
<td>10.5</td>
<td>3.4 2.4</td>
<td>1.9</td>
<td></td>
</tr>
<tr>
<td>Total # of Meals Served (Feb)</td>
<td>3,352</td>
<td>2,992 2,238</td>
<td>1,292</td>
<td>9,874</td>
</tr>
<tr>
<td>Est. of the # of Different Persons served</td>
<td>334</td>
<td>883 948</td>
<td>663</td>
<td>2,828</td>
</tr>
<tr>
<td>(Total/Ave. # of Meals)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proportion of Eligible Persons at each site</td>
<td>.69</td>
<td>.05 .10</td>
<td>.15</td>
<td></td>
</tr>
<tr>
<td>Total # of Eligible Persons served by each site (est. of Different Persons x Prop. eligible)</td>
<td>231</td>
<td>45 97</td>
<td>102</td>
<td>475</td>
</tr>
<tr>
<td>Eligible # of Persons eating at each site, adjusted for overlap</td>
<td>22</td>
<td>6.5 3</td>
<td>7.5</td>
<td>39</td>
</tr>
<tr>
<td>Proportions of Persons eating at site, adjusted for overlap</td>
<td>.56</td>
<td>.17 .08</td>
<td>.19</td>
<td></td>
</tr>
<tr>
<td>Total # of eligible persons served by each site, adjusted for overlap</td>
<td>130</td>
<td>8 8</td>
<td>20</td>
<td>166</td>
</tr>
<tr>
<td>Proportions of Eligible persons served by each site, adjusted for overlap</td>
<td>.78</td>
<td>.05 .05</td>
<td>.12</td>
<td></td>
</tr>
</tbody>
</table>

*Source: McDonald and Peressini, 1991.*

In conclusion, Table 3 presents a summary of the sample surveyed of the subgroups making up the homeless population, living in the skid row area of the city. The proportion of each group is outlined and the number of interviews that were conducted in each strata specified.
Table 3: Sampling Strata Summary

<table>
<thead>
<tr>
<th></th>
<th>No. of People to be Randomly Sampled</th>
<th>Proportion of the Population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDS:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Men's Hostel</td>
<td>42</td>
<td>.38</td>
</tr>
<tr>
<td>Calgary Drop-in Centre</td>
<td>44</td>
<td>.40</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>86</td>
<td>.78</td>
</tr>
<tr>
<td><strong>MEALS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>St. John's Soup Kitchen</td>
<td>19</td>
<td>.17</td>
</tr>
<tr>
<td>Calgary Drop-in Centre (a.m.)</td>
<td>1</td>
<td>.01</td>
</tr>
<tr>
<td>Calgary Drop-in Centre (p.m.)</td>
<td>1</td>
<td>.01</td>
</tr>
<tr>
<td>Salvation Army Soup Line</td>
<td>3</td>
<td>.03</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>24</td>
<td>.22</td>
</tr>
<tr>
<td><strong>TOTAL NUMBER OF INTERVIEWS</strong></td>
<td>110</td>
<td>1.0</td>
</tr>
</tbody>
</table>

*Source: McDonald and Peressini, 1991.*

In all, a total of 110 homeless men and women were administered a 14-page questionnaire (see Appendix F) that contained questions that would allow us to derive a comprehensive description of the respondents, including: housing histories; specific needs for help; problems with health, drugs, alcohol and mental disorders; a demographic profile; early childhood experiences; problems with the police; work histories; and, other relevant problems and experiences.

The survey instrument was developed, pretested and revised over the course of carrying out the interviews in the meals sector. The mainstay of the revisions involved simplifying a number of questions and shortening the questionnaire (it was originally 25 pages long and took approximately 1.5 to two hours to complete). As a result, the interview took roughly 25 to 65 minutes to complete, with an average completion time of 45 minutes.

In total, 159 persons were approached and asked to participate in the study. Of these, 35 people refused to take part. The remaining 124 people were asked two screening questions designed to ensure that the individuals chosen for inclusion in the study were, in fact, homeless. As a consequence of the screening procedures used, 14 people did not meet either criteria and, were excluded from the study.

A total of 24 interviews were conducted in the meals sector. Altogether, 35 people were approached. Of these, four people refused and seven people were not homeless according to the criteria used. Three interviewers carried out the survey at each of the locations in the meals sector: St. John's Soup Kitchen (N=19), the Salvation Army Soup Line (N=3), and the Calgary Drop-in Centre (a.m.: N=1; p.m.: N=1).

People were approached as they lined up for a meal at each of the services. Starting from the first person in the line, every fifth individual was selected and asked to participate in the
survey. The selection procedure continued until the predetermined number of individuals to be interviewed at each site had been reached. In some instances (depending on the setting, the participants, the number of interviews to be conducted at the particular site, and the amount of time allowed the interviewers at each site), the interviewers had to return over a number of days and repeat the selection procedure until the desired number of interviews were completed.

It took five interview sessions to complete the required 19 interviews at the St. John's Soup Kitchen. Because of its high rate of utilization by the homeless and other people in need, and because it was the most inclusive of all the settings in the CSH (e.g., the maximum number of individuals using the services to the homeless pass through this particular setting), the highest number of interviews were completed at the soup kitchen. In addition, the soup kitchen only served one meal per day, from noon to 1 p.m. The interviewers were granted an additional hour in which to carry out their interviews. Thus, the maximum number of interviews that could be carried out per interviewer during any one sitting was two; therefore, the total number of interviews (19) were completed over five consecutive days. Both the drop-in centre and the Salvation Army soup line required only one sitting to obtain the required number of interviews.

Eighty-six interviews were completed in the beds sector, 44 at the drop-in centre and 42 at the Single Men's Hostel (see Table 3). Like the St. John's Soup kitchen, because of time limitations placed on the researchers in terms of the amount of time they could spend in each setting at any one sitting (a maximum of one to 1.5 hours), interviewing for the beds sector took place over a period of seven days. A total of 124 people were approached and asked to participate in the study. Of these, 31 refused and seven were found not to be homeless according to the study criteria.

Between six and eight interviewers were used, depending on the site and the number of people to be interviewed. As a result of the limited time periods in which interviewing could take place, a maximum of two interviews could be completed at one sitting. In most instances, the interviewers were limited by the amount of time available to complete the interviews.

The Single Men's Hostel presented a unique problem for the researchers. The residents at the hostel were required to be out of the building by 8:00 a.m. in the morning and were not allowed back into the hostel until 4:00 p.m. After dinner, they were free to spend their time in whatever way they liked, as long as they were in their bed or room for lights-out at 10:30 p.m. Given the limited amount of time that all of the residents would be available for interviewing, interviews were conducted as the residents lined up for breakfast (between 7 and 8 a.m.) and dinner (4 to 6 p.m.). This was done in order to maximize the time the researchers had for interviewing and to maximize the pool of residents from which a sample could be selected.

Using a similar procedure to that employed in the meals sector, individuals were selected from the meal line-ups at both settings in the beds sector. Samples of the homeless in each setting were selected using a random start with a preselected interval. Initially, the research
determined that every 10th person would be selected for inclusion in the study. However, because the residents at each facility didn’t use the facility at the same time, the researchers found that this sampling interval was too broad given the pool of individuals to be selected at one point in time. After ascertaining the approximate number of people available for interviewing at any one point in time, the researchers set the sampling interval at five. Interviewing took place over three consecutive days at the drop-in centre and over two days at the Single Men’s Hostel.

Service-based Methods: Further Requirements

Employing a service-based method for counting the homeless requires that both a screening instrument and survey instrument (intake form or questionnaire) be developed prior to entering the field. Because this methodology involves counting in organizations that provide services to both homeless and non-homeless individuals, screening instruments are required in order to differentiate between those who are and those who are not homeless. Basically, screening instruments consist of sets of questions that operationalize the definition of homelessness and allow the interviewer or researcher to identify which of the individuals using services are homeless. For example, the Calgary Survey of the Homeless defined a person as homeless if they did not currently have a room, apartment or house of their own, or had not been in their own place within 30 days of participating in the study. Accordingly, the screening criteria used in the survey were composed of the following two questions: (1) Do you currently have a room, apartment or house of your own for which you pay to live in?; and (2) Have you stayed in your own place within the last 30 days? Each individual in the sampling frames were asked these questions, and from the information they provided it was determined who was and wasn't homeless. Appendix F displays the layout of the screener used in the CSH.

The questions included in a screener that are required to operationalize a definition will vary depending on the definition used in any particular study. For example, the definition of homelessness employed in the DC*MADS survey is somewhat different from that used in the CSH. It is a definition which targets both people who are literally homeless, and people who are precariously housed or living in nontraditional arrangements (e.g., trading sex for shelter). Individuals were defined as homeless in the DC*MADS survey if they met any one of the following conditions:

- someone who stayed overnight in an emergency shelter for homeless people, runaways, or neglected or abused women;

- someone who stayed overnight in a house, apartment or room paid for with municipal emergency housing funds;

- someone who stayed overnight in a nondomicile, such as a vacant building, public or commercial facility, city park or car, or on the street;

- someone whose regular place to stay was a nondomicile regardless of where he/she stayed the previous night (e.g., people who traded sexual favors for shelter or spent one
night in a hotel or hospital); or

• someone who was using a soup kitchen or emergency food bank for the homeless population.

Given this definition, then, the screener developed for the DC*MADS survey contains a different and more detailed set of questions than that of the CSH. The screener used in the DC*MADS survey consists of the following questions:

• SS-1. - First, do you have some place here in the D.C. metropolitan area that you consider to be your home or the place where you sleep regularly?
  Yes........01 [GO TO SS-2]
  No........02

• SS-1a. - Do you have some place in a different city, county or state that you consider to be your home or where you sleep regularly?
  Yes........01
  No........02 [SKIP TO SECTION A]

• SS-2. - Is that a house, an apartment, a room, a shelter, a car or a spot in some public place such as a park bench or bus station?
  (PROBE UNTIL YOU GET AN ANSWER THAT INDICATES WHETHER R HAS REGULAR HOUSING OR NOT, RECORD LOCATION.)

• **REGULAR HOUSING**
  A house.............................................01
  An apartment......................................02
  A room, paid for by R.........................03
  A boat..............................................04
  Some other form of regular housing.........05
  (SPECIFY)........................................
• OTHER ARRANGEMENTS:
House, apartment or room paid for with municipal emergency housing funds........06
General shelter..................................................07
Halfway house/transitional housing.............08
Juvenile/runaway shelter.................................09
Domestic violence shelter...............................10
Public campground............................................11
Car or truck.....................................................12
Public facility...................................................13
Transportation depot.........................................14 [SKIP TO SECTION A]
Vacant building................................................15
Tunnel/sewer....................................................16
Underpass/bridge..............................................17
Under porch/building structure........................18
Sidewalk..........................................................19
City park..........................................................20
River front.......................................................21
Forest/fields.....................................................22
Other nondomicile (SPECIFY BELOW)..........................80

• SS-3. - Where did you stay last night?

• REGULAR HOUSING
A house............................................................01
An apartment....................................................02
A room, paid for by R.........................................03
A boat.............................................................04
Some other form of regular housing...............05
(SPECIFY)..........................................................

• OTHER ARRANGEMENTS:
House, apartment or room paid for with municipal emergency housing funds........06
General shelter..................................................07
Halfway house/transitional housing.............08
Juvenile/runaway shelter.................................09
Domestic violence shelter...............................10
Public campground............................................11
Car or truck.....................................................12
Public facility...................................................13
Transportation depot.........................................14 [SKIP TO SECTION A]
Vacant building................................................15
Tunnel/sewer....................................................16
Underpass/bridge..............................................17
Under porch/building structure........................18
Sidewalk..........................................................19
City park..........................................................20
River front.......................................................21

37
Forest/fields ................................................. 22
Other nondomicile (SPECIFY BELOW) ............. 80

- SS-4. - Who does the place you stayed at last night belong to? By belong, I mean who pays the rent or mortgage or owns it?

Self ......................................................... 01
Spouse ..................................................... 02
Parent ...................................................... 03
Other relative .......................................... 04
Sexual partner ......................................... 05
Friend ...................................................... 06
Someone else ............................................ 07
(SPECIFY) ................................................

- SS-4a. - Do you have an arrangement with your (parent/relative/partner/friends/this person) to sleep in their place on a regular basis?
  Yes .................. 01
  No .................. 02

[SKIP TO BOX A]

**BOX A:**
IF YOU HAVE NOT ALREADY SKIPPED TO SECTION A, R IS NOT CURRENTLY CONSIDERED LITERALLY HOMELESS. IN THE REMAINING ITEMS, USE THE APPROPRIATE TENSE TO REFER TO R'S CURRENT STATUS, AND 30 DAYS FOR A-4.

As the above example indicates, the screening instrument may also contain questions designed to collect information on the other services that the homeless use. Questions collecting information on the sociodemographic characteristics of the respondents may be incorporated in either the screener or the actual survey instrument itself. Both types of additional information can be used to develop and assign a unique identifier to each individual counted.

Unique identifiers are required in order to control for duplicate counting (see section II for a discussion of double counting and duplication). Unique identifiers permit the investigator to cross-reference cases from one sampling frame to the next in order to eliminate the problem of double or multiple counting across frames. Because the homeless may use more than one of the services included in a count, a method for identifying cases that distinguishes between individuals is required.

Unique identifiers can take a number of forms. The U.S Census Bureau collects the respondent's Social Security Number and employs it as their unique identifier. That number is assigned to the individual and once the data has been compiled, the number then can be used to search the database in order to isolate cases of duplication. The duplication is then removed statistically; that is, the individual is assigned to one sector or sampling
frame and removed from all the other sectors they appear in. Other unique identifiers consist of a composite descriptor based on the individual's date of birth, gender, race and name. For example, a person whose birth date is January 1, 1965, who is male, black and whose name is Fred James Smith could be represented by the following number: 01016501FJS, where 010165 refers to birthdate, 0 the male code for gender, 1 the black code for race, and FJS the first initials. This piece of information could be collected from everyone surveyed and the final count adjusted for multiple occurrences in the database. This last type of identifier is the most common one used. And it has been employed in service-based methods as well as computerized information management systems.

The last issue to be addressed is that of the types of data to be collected. Obviously the kinds of questions asked and the types of variables to be included in a count of the homeless will depend on the purpose, goal and, most importantly, budget of the study. As previously noted, the only real limitation on the amount of information collected from respondents is the amount of time that the investigator has to ask respondents questions. This, too, will vary from one frame to the next. If the investigator is surveying the homeless in outdoor encampments or drop-in centers, then the number of questions asked will only be limited by the cooperation of the respondent. On the other hand, in most instances investigators will encounter restrictions on the amount of time they have to ask shelter and soup kitchen users questions. For an example of this, see the above discussion of the CSH where the interviewing process was limited to the hours of operation of the shelters and soup kitchen included in the study. Therefore, the number of questions asked will be limited by the restrictions placed on the investigators by the operating procedures of the organizations included in the study.

The questionnaire employed in the CSH is included in Appendix F as a typical example of the types of questions that may be included in a survey. The questionnaire is composed of a range of questions or variables about the respondent's sociodemographic and socioeconomic background, work history, level of income, health problems (mental and physical), use of drugs and alcohol, family background, social networks, daily activities, rates of service utilization, and history of homelessness. While the number and types of questions asked have varied from one study to the next, the questions included in the CSH reflect the standard or typical types of questions that have been asked of the homeless in other studies.

Similar types of information are collected by investigators using computerized information management systems (CIMS), e.g., the ANCHoR system. Typically, however, those employing CIMS collect substantially less information from the homeless than do researchers carrying out actual surveys. As the following example of the questions included on the application for hostel assistance used by the Municipality of Metropolitan Toronto demonstrates, only information such as the respondent's basic demographic characteristics (e.g., age, gender, race, date of birth, last place of residence), reasons for request of services, disposition of case, and the relevant accounting information is usually collected. (See also Appendix E, which describes the range of data that can be collected using the ANCHoR system.)
1. Name: [First].................................................................
   [Last].................................................................

2. Gender: Female ............
   Male ............

3. Date of Birth:(day/month/year). ........................................

4. a) If accompanied by spouse give first name: ..............................
   b) Not Applicable: ........................................

5. a) If accompanied by children give ages:
       ......................................................
       ......................................................
       ......................................................
   b) Not applicable: ............

6. Last permanent address:
   (Number & Street) ................................................................
   (City) ........................................
   (Province) ..........

---

**SERVICE INFORMATION**

1. **Major reason for service:**
   - A. Spousal abuse .............  o
   - B. Spousal abuse - psychological ....  o
   - C. Parental abuse - sexual ........  o
   - D. Parental abuse - other ...........  o
   - E. Family breakdown - general .......  o
   - F. Eviction - landlord ............  o
   - G. Eviction - other ...........  o
   - H. Transient lifestyle ............  o
   - I. Moving to city ............  o
   - J. Stranded in city ............  o
   - K. From treatment - psychiatric ....  o
   - L. From treatment - other ........  o
   - M. From corrections ............  o
   - N. Fire/unsafe premises ............  o
   - O. Other ............ (specify)

2. **Disposition of case:**
   - A. Found new address in community ........  o
   - B. Returned to spouse/parents ............  o
   - C. Continued on at another hostel ...........  o
   - D. Moved in with friends/relatives ............  o
   - E. Left the city ............  o
   - F. Admitted to hospital ............  o
   - G. Whereabouts unknown ....  o
   - H. Other ............ (specify)
ACCOUNTING INFORMATION

1. Name of hostel: ........................................ 2. Month .... 19 ....
   From ...... 19 ...... to ...... 19 ........
   From ...... 19 ...... to ...... 19 ........
5. Date during which
   Client(s) slept in hostel From ...... 19 ...... to ...... 19 ........

1.  o  7. o  13. o  19. o  25. o  31. o
2.  o  8. o  14. o  20. o  26. o
3.  o  9. o  15. o  21. o  27. o
4.  o 10. o  16. o  22. o  28. o
5.  o 11. o  17. o  23. o  29. o
6.  o 12. o  18. o  24. o  30. o

6. Total nights service ...... X per diem rate $ ...... = amount of this claim $ ....

Date: ...................... .... 19 ........ Staff signature: ......................

The primary reason that these are the only data collected by the Municipality of Metropolitan Toronto is that this information is most relevant to their needs and, therefore, the information they are most interested in collecting. There really are no limitations on the types of questions that could be asked of the homeless. And, regardless of whether a service-based method or a CIMS is used, the type of questions asked will reflect the interests and data needs of those collecting the data. The minimum requirement, in terms of counting the homeless, is that screening questions (like those described above) be asked which allow the investigator to distinguish between the homeless and non-homeless users of the services included in the sampling frames, and to develop a unique identifier for the purposes of unduplicating (e.g., name, date of birth, race and gender). All of the other questions that may be included in a count of the homeless are optional and will depend on the interests of the investigator and the types of questions about the homeless they wish to explore.

Service-based Methods for Counting the Homeless: A Final Note

The last issue that needs to be addressed is that of the role that a computerized information management system (CIMS) such as the ANCHoR can play in relation to service-based methods. Both techniques are designed to obtain as accurate a count of the homeless as possible. However, while CIMSs theoretically can be put in place in any type of service or organization, they have been designed primarily for use in organizations providing nightly shelter to the homeless. Because of this, counts obtained from CIMSs are necessarily limited to shelter users. As they are presently being used, then, CIMSs cannot provide counts of the homeless not using shelter services.
Despite this drawback, as indicated in section II and appendix E, there are many advantages to employing CIMSs. They can be used to collect and record an extensive amount of demographic and historical information about the homeless. More importantly, because the data are collected and recorded for every individual who enters and exits the shelter system, CIMSs are capable of producing both point and period estimates of the prevalence and incidence of homelessness. Finally, CIMSs are extremely flexible and can be adapted to collect any type and amount of information. Computerized information management systems, therefore, provide us with an accurate and reliable method for enumerating the homeless, and for monitoring changes in that part of the homeless population using services. Therefore, where possible, CIMSs should be used in conjunction with a service-based methodology.

The task of adapting a service-based method for use with CIMSs is relatively straightforward. Simply put, CIMSs may be used to replace the shelter component of a service-based method. Basically, the shelter component of the service-based method is dropped and the data from shelters is collected using a CIMS. Non-shelter sampling frames such as soup kitchens, congregate areas, and cars are surveyed using the service methodology described in this section. In other words, the service-based method would be used solely to count the homeless in locations other than shelters. In addition, the survey instrument or questionnaire used in non-shelter locations can be designed to collect information that is identical to that collected using the CIMS intake form.

Finally, as we emphasized in section II, computerized information management systems should not be relied upon to yield an estimate of the total size of the population, nor should they be employed as a standalone method for counting the homeless. CIMSs can only be used to derive estimates of the size of the homeless population using shelters. To use them otherwise will result in a serious underestimation of the total size of the population.

To summarize, in this section we have described and reviewed service-based methods for counting the homeless. In doing so, we have addressed a variety of issues and problems that are relevant to implementing such a design, including: the difficulties involved in counting the homeless street population; the exorbitant costs entailed in carrying out a street count; the degree of coverage provided by the shelter, soup kitchen, day program and outdoor encampment sampling frames; and, the problem of double-counting or duplication. In addition, we have outlined and provided examples of the steps involved in carrying out a count of the homeless and the various tools and instruments required to survey the homeless. Finally, we concluded this section with a discussion of the utility of computerized information tracking systems and the way in which they may be adapted for use with a service-based methodology.

Section IV: Conclusions and Recommendations

The issue of homelessness has not been a priority issue in Canada. As a result, very few attempts have been made to either count or survey them. Not so in the United States. American researchers have worked diligently over the last decade and a half to devise strategies for counting the homeless that produce reasonably accurate estimates of the
population. Major advances have been made in improving the sophistication of the techniques and definitions used. More important, these efforts have unified the community of government officials, advocates for the homeless, social service providers and academics in working towards a common goal: providing adequate housing and services for the homeless. What the American research literature on homelessness demonstrates more than anything else is that a high degree of cooperation is required in order to count the homeless.

Why? Conventional strategies for counting individuals based on households simply do not apply to the homeless. The homeless are a transient, mobile and elusive population which cannot be consistently located in a single place. They do, however, tend to aggregate in known locations for short periods of time. These places include shelters, soup kitchens, medical clinics, outdoor congregate areas, indoor drop-in centers, employment offices and the like. Early in the mid-1980s American researchers acknowledged this fact and began to develop strategies for sampling from the population in these locations. The problem was that carrying out counts in these types of locations required permission and cooperation from those providing the services that the homeless use. Initially, most, if not all, met with some degree of resistance. And it has taken a considerable amount of time – at least ten years – to develop and build up a level of trust between the service provision community and researchers so that the methods for counting the homeless can be easily implemented and carried out. This is not to say the problems associated with counting the homeless have been solved. American researchers still run into resistance, but a tacit agreement has been made that, in most instances, researchers and providers are working towards the same goal.

In Canada, we have only just begun this process of creating a partnership between the government, researchers and the community. Thus, it is reasonable to expect a high degree of resistance and a lack of cooperation between the parties involved. Government officials are skeptical of the estimates of the numbers of homeless that the service community have produced. The service community is equally skeptical of government estimates, and question the value of trying to count the homeless. For them, the numbers are not important; rather, it is the amount and quality of care and services that they can provide which is foremost in their minds. This difference must be addressed before any progress can be achieved and a common goal devised in order to create the level of cooperation required to successfully count the homeless.

Recommendations: Facilitating Community Involvement

The issue of creating and facilitating cooperation between researchers and the service community is not addressed in the research literature. Therefore, the following recommendations are based solely on the observations and comments made by the participants of the workshop.

- A committee should be formed at the outset of any endeavour to count the homeless. It should consist of all relevant members of the service community (directors of services, outreach workers, frontline workers, etc.), as well as relevant members from the
government and academic communities. It would be responsible for all aspects of the research project, from its development and implementation, to the dissemination of the results of the research program.

- The investigators must recognize and acknowledge that providers are primarily concerned with the management, organization and funding of their facilities and programs, and with the establishment of policy. Therefore, efforts should be made at the beginning of a research program to determine exactly the types of information that providers require to address their interests and concerns.

- The interests and information needs of the service community should be incorporated into the program of research. This may involve carrying out two counts: an 'unduplicated' estimate of the total number of homeless and a count of the number of individuals using services. The research program may also require a survey component in which the specific information required by providers can be collected. Providers may be interested in the following kinds of information about their clients: admission rates, length of stay, recidivism or readmission rates, use of other services, quality of service received, etc.

- The investigators should recognize that such a program of research may pose a considerable inconvenience to the participating organization. Therefore, the implementation of the research program must attend to the day-to-day operations of the organization and ensure it is as unobtrusive as possible. Such actions as funding additional staff to assist in the process of collecting data may be effective in alleviating the inconvenience to the organization.

- The rights and privacy of the homeless, and the organization, are guaranteed. The investigators must demonstrate at the outset that the rights of the homeless will not be compromised and, that the privacy of the homeless will not be violated; they must ensure that information provided by both the homeless and the service providers will be held in total confidentiality. Informed consent must be obtained prior to the implementation of the research program.

**Recommendations: Definitions**

The following recommendations are based on both findings in the homeless literature and workshop participants' suggestions concerning the selection of who a definition of homelessness should include.

- A definition of the homeless should focus on those individuals who are most in need — those who possess no permanent form of housing and who reside either on the street or in temporary or emergency shelters. The definition should target anyone who is either literally homeless or at imminent risk of becoming homeless.

- The following guidelines should be used for defining whether a person is literally homeless. A person will be considered literally homeless if they meet any one of the
following criteria: (1) they stayed overnight in a shelter designated for homeless people, runaways, or neglected or abused women; (2) they stayed at least one night in a house, apartment or room paid for with municipal, provincial or federal emergency housing funds; (3) they stayed overnight in a place not meant for human habitation (e.g., vacant building, public or commercial facility, city park, car or on the street); (4) they have a regular place to stay that is not their own (e.g., people who traded sexual favours for shelter or spent one night in a hotel or hospital); or (5) they use a soup kitchen or emergency food bank for the homeless population.

- Regardless of the definition used, who is included in and who is excluded from the definition is clearly indicated.

- The committee should unanimously agree that obtaining information on those who are not included in the definition is extremely expensive, and attempting to include them will compromise the success of the research program.

Recommendations: Methods for Counting the Homeless

The following recommendations are based on both findings in the homeless literature and workshop participants' suggestions concerning the type of methodology that should be used to estimate the size of the population.

- The standard method for enumerating the homeless should be service-based.

- The committee should unanimously agree that counting the street population (e.g., who do not use services and shelters) is extremely expensive, and attempting to include them will compromise the success of the research program.

- The committee should unanimously agree that the use of a service-based methodology which excludes the street population results in an underestimate of the total size of the population; and, that the estimate produced reflects only those homeless who are sheltered and use the services included in the research during the time period within which it is carried out.

- The minimum number of sampling frames employed in a service-based method should include shelters, soup kitchens, day programs and outdoor encampments; and, they should be designated as the primary or standard frames to be used in taking a census of the population in urban (service-intensive) areas.

- Standardized procedures for the adaptation of such a methodology for use in rural (service-unintensive) areas should be developed.

- Where feasible, the shelter component of service-based methods should be replaced with an automated client-tracking system, such as the ANCHoR (Automated National Client-specific Homeless services Recording) system, developed in the United States with funding from the U.S. Department of Housing and Urban Development, and other

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government and non-government actors.

- Funding should be provided to support ongoing efforts to develop and improve existing methods for counting the homeless; in particular, to develop reliable and accurate methods for counting the street component of the homeless population, as well as methods for enumerating the homeless in rural areas.
Appendix A: Working Paper #1 Workshop  
Definitions of Homelessness – June 7, 1995  
The Homeless: Who Are They And Why Count Them?

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<thead>
<tr>
<th>June 7, 1995</th>
<th>Agenda: Day 1-Defining Homelessness</th>
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<td>9:00-9:45</td>
<td>Welcome and Introduction</td>
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<td>- Canada Mortgage and Housing</td>
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<td>- Corporation: Research on the Homeless</td>
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<td>- Goals and Objectives of the Meeting and Overview of the Agenda</td>
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<td>9:45-10:45</td>
<td>The Range of Definitions of the Homeless: Experiences of the Panel of Experts</td>
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<td>[Panel &amp; Discussion]</td>
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<td>10:45-11:00</td>
<td>Break</td>
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<td>11:00-12:30</td>
<td>Defining the Homeless for Enumeration Purposes</td>
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<td>12:30-1:30</td>
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| 1:30-3:00  | Defining the Homeless for Enumeration Purposes: Reports from the groups and discussion | Plenary Session  
Paul Koegel, *Rand Corporation*  
Chris Ringwalt, *Research Triangle Institute*  
Annetta Clark, *Bureau of the Census*  
Louise Fournier, *Institute Phillip Penal*  
Ed Adlaf, *Addiction Research Foundation*  
Tom Carter, *Institute for Urban Studies* |
| 3:00-3:15  | Break                                                                             |                                                                               |
| 3:15-4:45  | The Range of Definitions Issues:  
- Advantages & limitations of different definitions  
- Representativeness of the definition  
- Operationalization  
- Optimal Definitions | Small Group Discussions |
| 4:45       | Submit written reports and adjourn                                                |                                                                               |

**Morning Plenary Session: June 7, 1995**  
**Topic of Discussion: Definitions of the Homeless**

**Task:** The panel of experts were asked to outline the definition of the homeless that they use in their own work, and to discuss the strengths and limitations of those definitions.

**Panel of Experts:**  
Paul Koegel, *Rand Corporation*  
Chris Ringwalt, *Research Triangle Institute*  
Annetta Clark, *U.S. Bureau of the Census*  
Louise Fournier, *Institute Phillip Penal*  
Ed Adlaf, *Addiction Research Foundation*  
Tom Carter, *Institute for Urban Studies*
Discussant: Paul Koegel, Rand Corporation

There is a frightening range of definitions of homelessness out there, and a great deal of difficulty in synthesizing a single definition that fits all needs.

The problem in defining homelessness, I think, is that there is no one such thing as homelessness. We have achieved a little bit more maturity in the field over the last decade, such that it’s now commonly accepted that the best way to think about homelessness is not as a state that can be defined, but rather as some point along a continuum of residential instability. What we are dealing with here is a continuum. Where you draw the line and say these people are homeless and these people are housed is a very arbitrary one, and it is important to recognize the arbitrariness of that decision. I appreciate the point about the policy questions driving the field and other issues.

In our research, we have essentially used three definitions of homelessness, mindful of the fact that what we are doing is very arbitrary and an exercise in establishing a point on a continuum. Most of our research has been survey research of community samples of homeless individuals. There, we use a definition of the homeless that includes people — who in the last 30 days — have spent at least one night in a setting that’s defined as temporary shelter; a place not designed for shelter or some kind of impermanent arrangement for which they didn’t pay; or who stayed in a program defined as serving individuals who don’t have places to stay.

There are two issues imbedded in this definition. One, for the most part we are talking about what has been referred to as the literally homeless, people who truly do not have their own place for which they are paying. Two, we are imbedding into that definition the notion of period prevalence as opposed to point prevalence; and that’s an issue that has to be grappled with in a very real way. If you define homeless people as those who are homeless for a single night, you are going to end up with a very different count than if you define them as anybody who has experienced what you decide homelessness is at any point in the last week (or the last 30 days, or the last six months, or the last year) the numbers will keep on going up and up and up.

We chose the 30-day timeframe because we were very mindful, from our ethnographic work with homeless individuals, of the monthly cycles that many homeless individuals experience. At the beginning of the month, they have money for housing. The money disappears long before the month disappears, so that there are some people who find themselves cyclically homeless at the end of each month. The 30-day cycle allowed us to include those individuals. The advantage of a definition like that is its broader operational simplicity. It’s do-able. You can sort out people who are homeless from those who are not with an operational definition like this, in a way that you cannot when you are dealing with a whole continuum of residential instability.

But its strength is also its weakness, because there are all kinds of situations that really test even a definition as straightforward as this one. For instance, consider the doubled up population. We say we are including in our definition people who are in impermanent
situations for which they are not paying, but our sampling frames really don’t allow us to target the full range of doubled-up individuals. And then we get doubled-up individuals primarily through that part of our sampling frame that deals with soup kitchens — because some of those people show up there. But even then, how do you decide what’s permanent and what’s impermanent? There are some people who have been in impermanent situations for the last 20 years. Are you going to call that person homeless, or is that person housed? We stuck to our 30-day timeframe and arbitrarily decided that if somebody had been doubled up for more than 30 days, that’s not impermanent anymore. We chose 30 days to be consistent, so that we had one number all the way through. It is entirely arbitrary. The same thing happens when you’re dealing with mission programs. Some people at missions are referred to as program staff; they’re not really paid, but they’re there kind of permanently, and they work there in exchange for room and board. This is where they are — they are living in a place that is designated for homeless people, but this is their home now. What do you do with those people?

I raise all of these issues because it is very hard to come up with a definition that comfortably accounts for everybody.

Our second definition is one that we use in our enumeration work. And our enumeration work, for the most part, has been designed to come up with a single night count. Therefore, our definition is more of a single-night definition. There, basically, we are looking for people who are in shelters or other facilities for homeless people, as well as people who are in a host of places that are not intended for human habitation, on a particular night (places like chapel chairs, all-night theaters, public places, public transportation, streets, parks, improvised dwellings, etc.). That’s a much more restrictive definition and really addresses the notion of the literally homeless.

I want to talk just a little about a final definition of homelessness that we have used in the course of our current study, which is a large survey of homeless adults in Los Angeles. The purpose of this study, which followed up on 500 homeless adults over a 16-month period, re-contacting them every other month, was to try to understand how to predict who will escape homelessness. And among those who do escape, what would indicate who is likely to succeed and who will fall back into homelessness. In this study, we had to figure out what constitutes an exit from homelessness. It’s a different problem, but it’s closely related because it’s the flip side of the coin. It’s the question of when is somebody out as opposed to when is someone homeless. The reason I want to talk about our definition is that, in this case, this was not something that is easily done in a quick and cost-efficient way. Rather than make that definition before the fact, we collected data in a way that truly does allow for an appreciation of residential instability and homelessness as being a continuum. We contacted people every other month. Each time we re-contacted people, we worked on filling in a calendar of their housing for the last 60 days. What we ended up with was an imperfect but continuous record of their housing over a 16-month period. As we analyze those data now, we can define exits from homelessness in different ways; we can look at the different kinds of places that people go to; we can think of what we call dependent exits that might include hotel rooms paid for with a voucher, or jail or other kinds of institutional settings, as opposed to independent exits which refers to
housing that they themselves pay for. We can look at the implications of defining an exit as 30 days of continuous housing, or 60 days, or 90 days, and see what differences exist as we define these things differently. That's the ideal: to be able to collect these data in an open way that allows you to explore these issues from very different vantage points. Then, as others come up with new questions, with different policy implications, you still have the ability to go back to the data set and say, I want to define homelessness in this way, for this purpose – let me analyze the data using that definition.

We started out with a baseline sample of about 1,550 people. This was a cross-sectional survey that used the first definition. Then from the baseline sample, we chose a stratified random subsample which was based on mental illness and the recency of their homelessness (one third were homeless for the first time in the last year).

**Discussant: Chris Ringwalt, Research Triangle Institute**

**Special Issues in Homelessness: Youth**

We defined homeless adolescents as youth who stayed in places that were not designed for human habitation, or stayed in places or accessed programs designed to house homeless people temporarily, such as youth or adult shelters. These youth stayed in places where they did not receive adequate supervision or care. A particularly difficult aspect of youth (age 17 to 21) homelessness is the definition. Trying to sort out what adequate supervision and cares has turned out to be beyond our means. We did try to include that part of the definition in one of the ways in which we operationalized our construct, which included a list of places where the youth had spent the night in the last 12 months.

1. adult shelter,
2. youth shelter,
3. a public place (train, bus station or office building),
4. an abandoned building,
5. a car, truck or van,
6. outside in a park,
7. on the street,
8. under a bridge or overhang,
9. on a rooftop,
10. in the subway or some other public place underground.

In addition, the definition included those youth who had spent the night in the home of someone they didn't know. We were trying to quantify youth who go home with someone and, in exchange for sex, have a place to stay for the night. We also struggled with issues about the period of time over which the youth was asked to report homelessness. It varied depending on the setting in which we talked to them; however, we extended our period up to 12 months out of a concern that, with anything less, we would limit our samples to a daily count. But it turned out that for the street youth that we identified, practically all of them had been home on the previous night.
We interviewed youth in three settings: on the streets, in the shelters and in household populations. In household populations, we asked if they had spent the night in any of the above-listed places in the past 12 months. The number of kids living in marginal situations with inadequate supervision is so large that it is unrealistic to attempt to count them.

Comment — Paul Koegel: You raise a very important point here. That is, all too often our definition of the problem is tied to the way we can realistically proceed. If one were to take a broad definition, a more real definition, the only way for you to establish a sampling frame that would allow you to address the problem would be to do a household survey and assess the situation that all our subjects find themselves in households. And that is a very expensive undertaking. So what we do is we say let's define it this way because we can tackle this issue; we can't tackle that issue.

Discussant: Annetta Clark, U.S. Bureau of the Census

At the Census Bureau, we approach the issue of definition very differently from what Chris [Ringwalt] and Paul [Koegel] have talked about. Because we are a statistical agency and not a policy-making agency, we don't define homelessness per se. We talk about it from two different viewpoints. The first one is from the work that we do on the decennial census. That is very important because the purpose of that work is to make sure that we have provided opportunities for everyone in the nation to be included in the census. What we found is that, in 1990 and with the census, we counted by different locations and we had to develop the methodologies to go to the various locations (the shelters). We did a preidentified street location in 1990; we counted people in institutions (including jails, nursing homes, drug and alcohol centres — a whole variety of locations), as well as doing the housing-unit enumeration.

As Chris [Ringwalt] and Paul [Koegel] were saying, we know that the homeless are composed of different subsets, and that we can find them in any of those locations. The purpose of the decennial census is not to identify anyone as housed or homeless, but rather to include them in the census. So, the locations that we targeted in 1990 were the shelters and the pre-identified street locations, as well as institutions. Our intent was to do some special methodology work and procedures in those locations.

In the 1990 Census, we did not define anyone as homeless; we did not issue a definition of homelessness — we tabulated individuals at the various locations and made those available to data users. We issued a whole set of guidelines and limitations when we issued the counts of people at shelters and the pre-identified street locations. Our main purpose was to make clear to data users that this is not a total count of the homeless population, that these are the limitations: it is a one-night count. We only count people in the census that would be classified as homeless in other locations, but they cannot be identified separately.

We are working on developing a national survey, the goal of which is to collect information about persons who are using services that are targeted at homeless populations. We are doing this for another federal agency in order to answer some of the policy-level questions. The methodology will allow us to collect enough data to allow for very flexible
definitions of the homeless population. For example, we include someone as homeless in the last night, last seven days, last 30 days, and if they have ever in their lifetime been homeless. This way, we can collect the data, and then use different definitions for the various policy reasons and purposes. They are very interested in collecting information about the clients using their services, and in looking at the dynamics; they don't want to limit it to a one-night count. So that is the focus of the definition.

In 1990, we did the one-night count in order to minimize duplication. We did our shelter enumeration and then we limited our street enumeration to the early morning hours, with the idea that everyone who would be in the shelters would stay there. Then, we would minimize the duplication on the street. In the survey, we ask for a person's social security number; we collect names and other demographics with the idea of identifying duplicate enumerations. We have completed some research which shows that we can collect enough demographics to be able to unduplicate and match.

We did a pretest of our procedures in March. In the pretest, we were able to collect the social security numbers. Of the clients who did fall into our sample, most were very willing and did have a social security number to provide. Also, a lot of the work that Marty Burt has done has collected social security numbers.

In the Census 2000, we want to avoid, if at all possible, a late-night enumeration.

**Discussant: Louise Fournier, Philippe Pinel Institute of Montreal**

In our first study (1988-1989), we did a census of shelter, soup kitchen and day centre users in order to devise a method for selecting a representative sample for a survey. Our definition included anyone using the shelter, soup kitchen or day centre, whether they were homeless or not. Our study covered a larger population in this sense. But we didn't include street people because we thought that during this time period in Montreal there were really very few people on the street – now I think it is different. But in winter, I think we have fewer homeless on the streets. We found that many of the soup kitchen users were not currently homeless, but were previously homeless.

The advantage of this definition is that it is possible to extract people who are really homeless, and it also makes it possible to study those who were previously homeless but are no longer homeless.

The limitation of the definition is that it excludes those who do not use shelters, soup kitchens or day centres. Based on Paul Koegel's research, which shows that sampling in this way misses very few street people, we felt confident that we had a fairly representative sample of the homeless and missed few street people.

Also, if you take all the people in shelters, you're not sure they are homeless unless you talk to them. In Montreal, we have some people who go to the shelter who are not homeless; they have a permanent address. They come to the shelter to eat or to finish the month comfortably, etc.
In the survey we are doing now with the new homeless, we didn’t do a count, but I think that in the survey we can look at the incidence. It is impressive to see how many people are new homeless. We use the term 'new shelter users' for the newly homeless. Using this definition, we determined that 75 people were newly homeless — that is, they became homeless in the last three months. Our sample, however, is not very representative of the newly homeless; it represents men in the five largest shelters in Montreal. We excluded some people because we wanted to assess the need for a new program designed to prevent homelessness.

**Comment — Paul Koegel:** The point that you have to screen for your definition of homelessness when sampling in the shelters or soup kitchens is a really important one. You can’t just assume that everyone who uses these services is homeless; you have to use a screening instrument to determine who is homeless and who is not.

**Discussant: Ed Adlaf, Addiction Research Foundation**

We conducted a study of street youth in 1990 and another in 1992; the latter was essentially a replication of the first. One of the difficulties I see in the area of adolescence is the notion of runaways, and how that relates to whether or not we use the criteria for lifetime prevalence. We used behavioral criteria to select youth for our sample. One of the concerns we had, especially because we had both an agency and a street sample, is that we wanted to screen out students who might be hanging around the downtown mall.

All the youths that we interviewed were 24 and under. We put no criteria on the youngest age; the 24 and under is based on criteria used by the social service agencies in Toronto. In addition, because of the agency sample, we interviewed any youths who we approached either through the agency or on the street, whether or not they used any social services directed at street youths. Our geographical area was really the inner core of downtown Toronto.

In addition, we used four other criteria; they had to respond positively to three or more of these. The criteria included: (1) whether or not they left school before they completed high school; (2) if they had lived away from their family at least two days in the past year; (3) whether they ran away or were thrown out of their home at least once; (4) whether they had been homeless without a place to stay at least once.

To be included in the sample, they would have to respond positively to three out of the four criteria.

One of the difficulties with adolescents is that the notion of homelessness depends on what criteria you set. Essentially, if you use a literal definition of homelessness, roughly 39 percent of our sample would be considered to be literally homeless — that is, they were currently using shelters or hostels. Approximately 13 percent were currently living on the streets.
However, if you were to use a lifetime prevalence of homelessness because of the large number of runaways, they would virtually all be considered homeless.

One thing to bear in mind is that our primary focus was to look at alcohol and drug use. We weren't interested in estimating the numbers, partly because we didn't think it could be done well since we didn't have proper size information for the population in Toronto.

The screening instrument that we used was relatively easy for interviewers to use.

**Discussant: Tom Carter, Institute for Urban Studies, University of Winnipeg**

Paul [Koegel] talked about a continuum of homelessness. If you review the literature, one of the things you get is a pretty good sense of the continuum of definitions; they range from the literally homeless on the street to the broader definitions that include people doubling-up with friends, or living in marginal and inadequate housing conditions; these people are considered vulnerable. Some of these definitions, although fine from an academic perspective, become very difficult to use when applied in an operational sense.

Winnipeg is a destination for an awful lot of Aboriginal people who are moving from reserves to urban centres. And when they move to Winnipeg, they do double-up with friends – it's accommodation of last resort. I visited a house about two weeks ago where there were about 21 people in a three-bedroom house. They came from five different families. Now it's accommodation of last resort, but it's by no means temporary accommodation; it's a situation that some may live in for a period of ten or 12 years. But if you look at your definitions of homeless, some people would consider this group as homeless, because they satisfy the condition of living in inadequate housing situations and are very vulnerable. In fact, for the people who live in these conditions, their housing is worse than some of the people who live in hostels. They don't have the amenities or the privacy that people in a hostel situation would have.

If you apply the prevailing definitions in the context of the northern communities in say, Saskatchewan, I would estimate that approximately 40 percent of the people would be considered homeless.

Therefore, I think you have to be very careful in an operational sense when you start applying some of these definitions. Most of our policy initiatives have focused on the people in the street or in hostel situations. They haven't focused on people in these broader definitional categories.

A review of the literature suggests that, yes, we have definitions. But when you start applying those definitions in an operational sense, you have to be very careful.

The definition is going to affect the number as well as the policy initiatives that arise because of the count.
Also, I would point out that a lot of the people living under these circumstances certainly don't consider themselves homeless. They don't consider themselves as being in proper housing, but they don't view themselves as homeless, either.

*Comment — Paul Koegel:* When it comes down to the issue of counting homeless people, the worst thing in the world that you could do is ask people, Are you homeless? That's not going to get you anywhere because everyone has different perceptions of their own situations, so I think we have to be very careful there. The second point that I wanted to make was that I agree with what you were saying, Tom. However, I don't think that moving towards a policy frame necessarily restricts us to focus on the literally homeless. That's because it may be that some broader definitions of homelessness are appropriate if what you're looking at is the factors related to a housing market where people are temporarily homeless, if only for a day or two. This argument has raged in the *Journal of Housing Policy Debate,* where Anna Kondratas essentially says that we only care about the literally homeless, and so these lifetime prevalence issues don't really matter. Thus, what Dennis Culhane is doing and Bruce Link [who carried out a household sample, published in the American Journal of Public Health] and his colleagues at Columbia University are doing, don't really matter. But the problem is that they do matter if you're asking a different kind of question.

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**Notes from the Small Group Discussions: Morning, June 7, 1995**

**Topic of Discussion:** Definitions of the Homeless

**Task:** The workshop participants were assigned to three groups and asked to answer one of the following questions: Who should be counted? Who could be counted? Why count the homeless and who are we counting for? The results of the group discussion were presented and discussed during the afternoon plenary session.

**Group A: Cheryl Regehr & John Richmond (Facilitators)**

**Group A was assigned the task of answering the question, Who should be counted?**

- Can't separate who should be counted from who could be counted. The two have to be compared.

- One of the things we looked at was the timeframe of a study — the length of time of a study will determine who should be counted.

- Why the count was being carried out would also determine who should be counted in an enumeration.

- Characteristics vs. place: defining the homeless based on whether they are without a home versus whether they are located in a shelter, soup line, institution, etc. The
characteristics would flow from the count. Therefore, who we are defining as homeless determines what kind of characteristics we are going to find or look for in the population.

- Arrived at consensus favoring a literal definition – it is easiest to operationalize and the most important type of count. It is also the most popular type of definition.

- The literally homeless should include shelter and street populations, those in congregate areas and public gathering places, and those residing in buildings not intended for habitation.

- Who should be counted would be predicated on a continuum of homelessness. Takes into account groups of homeless people who are in a transitional place, who are in boarding homes, etc. They are not homeless in the sense that they have a place to stay, but are homeless in the sense that they have no permanent housing.

- Who should be counted raises a lot of issues: for example, if there weren't shelters and facilities for battered women, would they be considered homeless or would they stay in their current situation?

- The doubled-up population: you have to consider the length of stay; if they have been there for 15 years, is that still homelessness?

- Institutions, psychiatric hospitals, emergency rooms, jails, etc. It doesn't make sense to predetermine the characteristics of the homeless before you count.

- Single-room occupancy.

- Timeframe: whether one does a single-night count or uses a longer period of time (e.g., prevalence) should be dictated by the purpose of the count. Baseline measure: point prevalence (single-night count).

- Needs-related issues: 30-60 day period prevalence; needs assessments; stratify characteristics.

**Group B:**

**Group B was assigned the task of answering the question, Who could be counted?**

- Rather than defining the homeless and then singling out characteristics that should be examined, we argued the opposite: there are many different categories and characteristics of people out there that we may decide, for a variety of purposes, to target in a study of homelessness.

- The most radical suggestion was that we not use the term 'homeless' to describe this population.
• Raised a number of issues.

• Feasibility: looking at issues of cost, accessibility, efficiency, etc.

• Who could be counted is intimately tied to the resources available.

• Who could be counted is, again, linked to the purpose of the count – this is a critical element of the definition.

• The hidden homeless could, in principle, be counted, but it would be one of the difficult groups.

• Those who are institutionalized (e.g., shelter users) would be easier to count. In principle, most groups can be counted but, depending on the resources available, many are regularly skipped over in counts.

• “ICEBERG” Model of homelessness: three-dimensional model of homelessness that encompasses the difficulty of locating homeless people, definition and target population.

• Tip of the iceberg represents the literally homeless; beneath the tip are several categories of homelessness, down to the precariously housed at the bottom.

• Operationalization refers to the ease or difficulty of implementing a definition. The issues to be considered in this context include cost, efficiency, locale and timeframe.

• Definition refers to the conceptual definition of the term, while the Target Population refers to who, including the characteristics, we want to count.

• The main priority in terms of definition is that of clearly identifying who is to be included.

• The pyramid reinforces the complexity of operationalizing a definition of homelessness, and forces the researcher to identify exactly who has been counted.

**Group C: Zvi Gelles & Sandra Tam (Facilitators)**

Group C was assigned the task of answering the questions of, Why count the homeless and who are we counting for?

• need knowledge

• size of population for research purposes

• information for advocacy for low income citizens
• baseline numbers for policy

• to inform funding decisionsmake government aware of social conditions

• what is the best kind of information for advocacy?

• negative reactions from public media to broader definitions

• broader definitions not useful for funding decisionsscount at different stages of the continuum

• count different populations, different characteristicstypes of services/programs available important in terms of definitionscount depends on solution to homeless persons: attractive politically, implications of defining (e.g., deserving vs. not deserving)

• measure characteristics for specific services

• need a reliable base count

• service providers need long-term counts

• federal agencies interested in characteristics of the population

• the term 'homeless' has limited utility: too broad to be useful; examine different groupspoint vs. period prevalence: who is it useful for? (e.g., service needs, funding needs, etc.)

• methodological issues: duplication; time of year; change over time (reliability of one-night counts); shelter to street ratio

• who should be responsible for counting: users? consumers? vested interests; skewed results

• academics: typically do not have an agenda, have high credibility and produce the least controversial results

• federal government has a role in that they have the resources to carry out a national study

• U.S. Census of the Homeless: 76 areas (52 urban, 24 rural); 3 800 clients of services/programs; cost: 4.2 million

• extremely difficult to count the outdoor population

• enumerators come with biases.
Notes from The Small Group Discussions: Afternoon, June 7, 1995
Topic of Discussion: Definitions of the Homeless

Task: The workshop participants were assigned to three groups and asked to address one of the following issues surrounding definitions based on literal homelessness, the marginal homeless and those at risk of becoming homeless: advantages and limitations of the different types of definitions, representativeness of the definitions, and operationalization of the definitions.

Group A – The Literally Homeless: Ramona Allagia & Joe Michalski (Facilitators)

The Conceptual Definition

- **Pros**: an easy definition most people can understand (e.g., the public, politicians); it deals with those persons with the most serious need; it is fairly efficient, since the literally homeless are easier to identify than, say, the marginally homeless; and, counting only the literally homeless is probably more cost effective.

- **Cons**: using this definition raises issues as to what is considered to be a shelter (e.g., when does a shelter become transitional housing? What constitutes a congregate area? (emergency departments, those in mental hospitals, jails, etc.)); shelter counts only capture about 50 percent of the homeless using point prevalence, and about ten to 20 percent more with period prevalence.

The Operational Definition

- **Definition**: should include a timeframe; in fact, both point and period prevalence would be useful in the counting; it should consider the timing of the study (time of day, season and homeless cycle); has to clearly identify congregate areas.

- **Issues in operationalizing the definition**: duplication – appropriate when measuring need, but a problem when an actual count is required; number inflation by service providers (overflow); shelter screening and rules (e.g., behavioral categories accepted and not accepted; some shelters specialize in only one type of homeless (detox centres, alcohol, etc.)); protection of the homeless by service providers sometimes makes it difficult to gain access to shelters or congregate areas; who counts (homeless, key workers, researchers, etc.): Do we pay the homeless? How do we recognize their contribution in the counting process?; operationalization in rural areas is likely to be different where there may be no shelters, soup lines, etc.; level of intrusiveness.
Group B - The Marginally Homeless: Cheryl Regehr & John Richmond (Facilitators)

- Broadly defined the marginally homeless as those who are precariously housed.

- Examined the continuum of the concept of homelessness, which ranges from those housed in a home to those who are literally homeless.

<table>
<thead>
<tr>
<th>Housed in a Home</th>
<th>Range of options/situations</th>
<th>Homeless</th>
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<tbody>
<tr>
<td></td>
<td>the continuum itself reflects degrees of risk for becoming homeless</td>
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<td>the issue of whether discussing definitions was another academic exercise</td>
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<td>uncertain about who to count when talking about the marginally housed</td>
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<td>part of the problem resides with the purpose behind defining the homeless</td>
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<td>operational definitions inevitably spill over to the other two categories (the literally homeless and those at risk of homelessness)</td>
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<td>we can offer a number of suggestions and communities (whoever is using the definition) can decide which definition fits the needs of their community</td>
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<td>definitions and methods are intertwined</td>
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<td>other possible definitions: people housed versus people insecurely housed and people not housed</td>
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<td>trying to distinguish between the underlying meaning of being housed versus having a homesome believe that just counting is not adequate or even desirable, while others believe that baseline estimates are important</td>
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<td>part of the problem that people have with trying to count is that they are wary of the possibility that we will engage in counting for counting's sake. That is, they are concerned that we will count and do nothing more - we won't proceed to the next stage</td>
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<td>the issue of the purpose of doing counts was raised; that is, the questions were asked, why are we doing this? why does CMHC want this?</td>
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<td>some argue for broader definition to capture broader range of experiences/difficulties there are different reasons for counting the homeless (e.g., government, researchers, advocates have many reasons).</td>
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CONCLUSIONS:

- It is difficult or problematic to distinguish the marginally homeless from other groups.

- Many of those defined as marginally homeless are homeless, while some are at risk.

- Marginal homelessness as defined is too general and includes the homeless who are sheltered.

- We require more information about their history and their context before we can begin to distinguish between types of homeless people.

- Counts by themselves are not usually helpful but some argue that such counts can be helpful for policy/service options.

- Counts should be supplemented with more explanatory information to inform all stakeholders.

- Once again, to what purpose are we counting?

Group C – Those at risk of Homelessness: Zvi Gelles and Sandra Tam (Facilitators)

- Before we can define who is at risk, we have to define homelessness. It's easier to define who is literally and/or marginally homeless. Who is at risk is a difficult concept to define (let alone operationalize) – mostly because we have not reached the stage in the development of research where we can intelligently talk about who is at risk. There is simply not enough information to be able to identify with any certainty who is at risk.

- Second, the concept of risk is not fixed or stable: it varies by the number of risk factors that an individual displays; some factors are more risky than others, e.g., some factors increase the risk for homelessness, while others play a smaller role but nevertheless contribute to the risk of becoming homeless; homelessness may be the direct result of one factor, or any combination of two or more factors.

- The real problem is that we simply do not have the type and quality of information to determine with any degree of reliability what factors are directly related to becoming homeless.

- The idea of risk may not be the most conceptually useful one. Other concepts that may prove to be more useful in this context could include: those who are precariously housed and those who are vulnerable to homelessness.

- We can identify a number of the factors associated with homelessness (e.g., past homelessness, unemployment, mental illness, substance abuse, housing supply, etc.), but we cannot predict who will become homeless on the basis of these characteristics –
the research has not developed to this stage.

- Therefore, at this stage, it is not feasible to count at risk groups because no causal relationship can be determined.

- One way of approaching the study (operationalization) of the at risk population is to examine the course of homelessness. This concept comes from Susser’s research. Rosenheck has also attempted to examine this issue.

  - Rosenheck, R. and A. Fontana

  - Susser, E., Struening, E.L., and S. Conover

- One thing is clear: a purely housing-based definition of the at risk population (e.g., those who are at risk of losing their housing) addresses only a portion of the total population; there are many other potential characteristics or factors that may affect the risk of becoming homeless.

- The primary reason for trying to define the at risk population is prevention. If we can identify who is at risk, then we can begin to deal with individuals' problems before they become homeless, and prevent them from becoming homeless. The reason for identifying the at risk population is to develop targeted support services focused on the factors that increase the risk of becoming homeless before individuals lose their housing.
**Appendix B: Working Paper #2**

**The Homeless: Who are they and why count them?**

**June 8, 1995: Methodological Issues and Problems in Counting the Homeless**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Affiliation</th>
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<tr>
<td>9:00-9:15</td>
<td>Greetings and Introduction of New Participants</td>
<td>David Hulchanski</td>
<td>The University of Toronto</td>
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<td>Opening Remarks</td>
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<td>9:15-9:45</td>
<td>Definitions of the Homeless: Review and Summary of Day 1</td>
<td>Tracy Peressini</td>
<td>Centre for Applied Social Research</td>
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<tr>
<td>9:45-12:30</td>
<td>- Methods employed in research</td>
<td>Martha Burt</td>
<td>The Urban Institute</td>
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<td>- Reasons for use of specific methodology</td>
<td>Dennis Culhane</td>
<td>University of Pennsylvania</td>
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<td>- Advantages/limitations of the method</td>
<td>Paul Koegel</td>
<td>Rand Corporation</td>
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<td>- Preferred methodologies</td>
<td>Chris Ringwalt</td>
<td>Research Triangle Institute</td>
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<td>- Modifying the methodology</td>
<td>Annetta Clark</td>
<td>Bureau of the Census</td>
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<td>- Strategies for counting</td>
<td>Phil Giles</td>
<td>Statistics Canada</td>
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<td>- Sampling frames and population lists</td>
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<td>- Timing of count (day, season, etc.)</td>
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<td>- Reliability, Validity and Generalizability</td>
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<td>- Advantages and limitations of different methodologies</td>
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<td>- Optimal Methods</td>
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**Break [10:45-11:00]**
12:30-1:30

Lunch Sponsored by:
The Centre for Applied Social Research
Faculty of Social Work - The University of Toronto

1:30-4:00

Methods of Counting the Homeless:

Panel & Discussion

Ed Adlaf,
Addiction Research Foundation

Ann Longair, Municipality of Metropolitan Toronto

John te Linde,
The City of Calgary

Margot Breton,
University of Toronto

David Northrup, York University (ISR)

Eileen Ambrosio, Street Health

Break [3:00-3:15]

Morning/Afternoon Plenary Session: June 8, 1995
Topic of Discussion: Methods of Counting the Homeless

Task: The panel of experts were asked to outline the method for counting/sampling the homeless that they use in their own work, and to discussion the strengths and limitations of those methods.

Panel of Experts:

Martha Burt, The Urban Institute
Dennis Culhane, University of Pennsylvania
Paul Koegel, Rand Corporation
Chris Ringwalt, Research Triangle Institute
Annetta Clark, U.S. Bureau of the Census
Phil Giles, Statistics Canada
Ed Adlaf, Addiction Research Foundation
Ann Longair, Municipality of Metropolitan Toronto
John te Linde, The City of Calgary
David Northrup, York University - Institute for Social Research)
Discussant: Martha Burt, The Urban Institute


1987 Study of Soup Kitchens and Food Services for the Homeless:

- The study was funded to assess the food and nutritional requirements of the homeless.

- The study was carried out by The Urban Institute's agricultural department, in cooperation with the food stamp program.

- The methodology involved going to soup kitchens to determine the impact of a piece of legislation that was recently passed in the U.S.

- The study was carried out in soup kitchens and other non-shelter services for the homeless — which are better places (in practical terms) to find the homeless than trying to do street searches/counts.

- As a result of the study, we were able to use various methods to UNDUPLICATE and estimate the total number of service users and how many homeless were missed.

- Research Triangle Institute's Overlapping Catchment Study provides solid evidence that soup kitchens and shelters capture a large proportion of the homeless population.

- Research Triangle Institute's study provided a probability basis for estimating population sizes using each service, as well as an accurate weighting for descriptors.

- Rossi's Block Probability Method is incredibly expensive for what you get.

- Our focus has been on using sampling frames based on service utilization.

- In general, the issue of DUPLICATION has driven the methods that have been used.

- Over the last 15 years, we have come up with better methods and alternative ways of dealing with duplication.

- The Blitz Method refers to a one-night shelter and street count. Basically, we count/survey everyone in shelters once the shelters have closed for the night and then count everyone on the streets. The problem with this approach is duplication. Also, you miss a lot of people in a one night count, simply because they do not wish to be found.
• There are three basic structures for dealing with duplication: Do a census: you try over a period of time, through any number of contacts that you may have. The Kentucky State study is a model of this, but there are some others (e.g., Ohio Rural Study). Basically, you try to identify people through every mechanism possible. You use the libraries, police, jails, mental health services, regular welfare services — any source that you have. And you do a screener to find out if people are actually homeless. Then, you ask or try to get enough information from them that you can create a unique identifier for that individual (the census unique identifier approach to unduplicating). You can take as much time as you want to accrue people into the study. Then, there is the Survey/Statistical Base for unduplicating (1987 Urban Institute Study). You have multiple frames — query the interviewees about the use of the other frames in your study. You use that information to estimate the odds or likelihood that that individual could have been chosen more than once in your sample. You then correct your count by weighting for the duplication probability. Out of 1,700 people in the Urban Institute Study, we had approximately five people who were interviewed twice. We reduced our estimate by 75 percent when we unduplicated by statistical means, resulting in a sample of people who used shelters and soup kitchens, but who were only found in one place (the survey/sampling weighting approach). Finally, there is the combination of the two prior approaches, this approach is untested.

• The fewer services you have in a community, the less successful a one-night count will be because the hard part of the blitz is the street part.

• Shelters Homeless services that aren't shelters Generic services.

• You will have local variations.

• You can not use a method and apply it is a community without thinking about how the community works.

• The one-night count is the least attractive in areas that are not service intensive.

• The main attraction of the one-night count is the relatively short period of time needed to complete.

• The harder the homeless are to find, and the less they access regular services, the less effective a short study time period will be.

• Expanding your time frame expands your opportunities to catch people.

• Assumptions are inevitable, and you have to be CLEAR about what assumptions you are making so other people know what you have done.

• One Night Count: If you are just counting the people who are available (there), you will be over because some people will have used more than one service, and you will be
under because some people will have used none of the services for that time period.

- A period of a week will allow you to unduplicate so you can count more of those who use none of the services available and those who use more than one service— but, in that case you have talk to the homeless and service providers and find out about them.

**Discussant: Dennis Culhane, University of Pennsylvania**

Methodology Used: Management Information System/Administrative Database

- You have to recognize that administrative databases which are used primarily for management purposes (e.g., City of Toronto database) are not necessarily ideal for research purposes.

- Researchers have different questions than do managers of programs.

- Administrative databases are not scientifically pure sources of information.

- Basically, we have used whatever information was available in Philadelphia and New York.

- Philadelphia and New York have a pretty highly organized system of shelter provision, they coordinate shelter placements through centralized assessment centers.

- For example, in Philadelphia, anyone who wants to use one of the 3,000 beds in the system has to go through one door. Thus, there is a core of information collected on everyone who comes in. The assessments which are carried out are done primarily for case management purposes. Basically, this system was designed as a registry/tracking system that records the day a person enters and the day they leave—that is, every time they use the shelter system.

- Within the databases themselves we can:

  1. Derive a one night count/census of shelter users every day of the year. Therefore, you can determine how the census (e.g., number) changes over time.

  2. You can also do an admission rate analysis which will provide information on the capacity of the shelter system, which is sensitive to length of stay (e.g., if the length of stay changes from two weeks to four weeks, you need twice as many beds). Therefore you can track both the numbers of new people coming in, as well as changes in length of stay (an information database will allow you to differentiate between the two).

  3. You can also observe the flow of people coming in (e.g., the admissions rates). Therefore you can determine both the INCIDENCE and the PREVALENCE of the people using the facility, recidivism rates (e.g., repeated stays), and the time
between re-admissions.

4. The information database also includes a discharge analysis: What kind of discharges lead to what kind of outcomes in terms of, in particular, re-admissions?

5. The system provides a very long learning curve; you can take months to refine it.

6. You can sample from the database.

- In terms of city governments, they are not particularly concerned with a scientifically pure, unduplicated count. Their primary concern is the management, organization and funding of facilities and programs, and the establishment of policies and statutes.

- They are also interested in measuring outcomes because they may need to defend programs from budget cuts or make a case that a program is having some effect.

- They are used for the purposes of prevention: they want to identify the causal pathways into and out of homelessness, how they change, and points at which they can intervene.

- Management information systems can better address the above issues than one-night counts.

- From a technical perspective, the one night count is obsolete – it is no longer practical, and tends to be relatively expensive.

- For example, in Texas they had budgeted about half a million dollars to do a one-night count and we figured out that, for a one-time cost of $350,000 they could establish a management information system in five of their cities.

- Implementing a management information system requires a lot more on the human side – it requires more manpower.

- One consideration is that the providers need to benefit and use the data from a management information system in order to facilitate their cooperation.

- From the vantage point of some states, shelters are no different than institutions, hospitals, etc.

- With management information systems, you have to consider the issues of confidentiality and informed consent.

- A point to consider is that in just about every city in the U.S., over a year's time, virtually everyone who is on the streets will have contact with the shelter system at some point in time.
You can supplement the system with a periodic survey of the hard-to-reach population.

**Discussant: Paul Koegel, The Rand Corporation**

- I've actually done a lot of counting of the homeless, but never with the express purpose of coming up with a number of how many homeless people there are.

- All of the counting that I have done has been done towards the development of a sampling frame that would allow me to draw a probability sample of homeless individuals, primarily for the purposes of understanding the population and its characteristics as opposed to its size.

- Over the course of different studies, I've really used all of the methods that have been discussed so far: administrative searches in order to get unduplicated counts of people in shelters; work that involves trying to unduplicate between shelter and soup kitchen sectors so that we can assign proportional allocations to shelter and soup kitchen sectors in a self-weighting sampling design; the blitz method as a way to get both a one-night count that would allow us to proportionately allocate between different sections of a city, and to collect some information that would inform allocations across different sampling sectors.

- Highlights of some of the problems with the methods:

  1. Administrative Records: the strategy only works insofar as there is a management information system in place. There are very few cities that have sophisticated management information systems. In many of our cities, the vast majority of shelter is provided by the private sector, not the public sector. Many private shelters purposely do not accept public funds because they want to avoid keeping these sorts of records. For example, the downtown area of Los Angeles, which still has a very entrenched mission service system, is not obliged to report the information on their clients.

  2. As you take longer time frames, you are more likely to find people passing through the shelter system – this is a truism. It is also a truism that the extent to which that is the case will differ from community to community. We make a big mistake if we generalize from communities that are very service rich and intensive to communities that are not. There is a far greater probability that individuals will never pass through that system, or for which you have to have a very wide timeframe to have any hope of getting them.

  3. One-night counts or blitzes are a very expensive and ineffective method of counting. It is an outdated/outmoded method for counting the homeless.

- In our research we asked two questions: How well do different sampling frames help us understand the size of the homeless population? How well do different sampling frames...
help you understand the characteristics of the homeless population?

- What we found was that there were extraordinary differences between the sites in terms of the ability of the different sampling frames to estimate the size of the population.

- For example, shelters and soup kitchens account for 71 percent coverage in a service rich area, 51 percent coverage in an area that is not service rich.

- Basically, our ability to get good coverage is something that will vary depending on the availability of services in a community.

- Your understanding of the homeless population is going to vary by sampling frame and by the interaction between location and sampling frame.

- You can come up with a standard method to be used in each community, but how that method performs in each community is going to vary widely. Communities would do well to do work to assess how well that particular method is doing in terms of covering their particular population. The standardized method is going to be biased in different ways, in different directions, and for different populations.

- The more inclusive you are in terms of both sampling and coverage, the more control over the bias you have.

- Generic services/welfare services: The problem with these types of services is that the people they service are not necessarily going to be homeless — not good sources for finding the homeless.

- But, you do have to work through the provider networks in order to generate the appropriate information that will allow you to put together a reliable list of services that the homeless use and places that they frequent.

Discussant: Chris Ringwalt, Research Triangle Institute
Methodology Used: Snowball Sampling Techniques to Study Youths

- When we talk about counting homeless adolescents we are talking about an entirely different population.

- Adolescents represent a wide variety of special problems.

- Kids seem to have money — from drugs, sex and other illicit activities.

- Most adolescents do not use shelters and soup kitchens.

- Homeless youths tend to be a very mobile population; they also tend to blend in with the youth subculture, and to shy away from adults because of their experiences with the
predatory adult.

- We have used two methodologies in our work at RTI:

  1. Community Surveys - Here, we use service providers and outreach workers to connect with youth - Basically, I'm talking about a snowball or purposive sample. This technique is labor intensive, time consuming, can be extremely expensive, and is not an optimal method for counting.

  2. National Survey of Households - Includes questions designed to determine who among the youths have had runaway or homeless experiences. The reason for this is because a high proportion of youths flow into and out of households.

**Discussant: Annetta Clark, U.S. Bureau of the Census**

**Methodology Used:** Census/One Night Count

- In order to produce the national level statistics, we develop standard procedures and methods that are used at the local level as part of building up toward the census.

- We develop the methods and then we open temporary district offices when it's time to conduct the census and ask each local area to do the work.

- In a sense, then, we are looking at local area studies.

- What we learned during the 1990 Census, was that there were problems from the perspective of local areas.

- Focus on a location service-based enumeration: Shelters, soup kitchens, the outreach programs and drop-in centers - these are the sites that the enumerations took place in.

- Go once and enumerate all of the clients at those facilities. We'll do the shelter enumeration the night before and then go to the other services during the day.

- We ask about use of shelters to help us unduplicate the frames when we get them at the soup kitchens and the outreach programs.

- The last enumeration sites are targeted at non-sheltered outdoor locations: undertaking a research program, the purpose of which is to identify outdoor locations that are more permanent in nature to avoid a block-by-block or pre-identified street location approach, because we don't think it is cost effective.

- This procedure is similar to the one used to produce a straight count of the homeless.

- In the 1990 Census, we found that the development of the list of places was critical to the success of the count, e.g., different meanings of shelter (shelter, temporary, etc.)
• In the census we are now including the emergency shelters, the transitional programs and the voucher programs.

• To have consistency across measures, you have to clearly define what you include and what you don't include.

• You need to open up your list development process to a wider range of informants at the local/community level.

• Do follow-up visits to get at the people who are not there the day you show up to count.

• Coverage issues: what is required is clear standardized methods for who to include and who not to include. Providers report that is was helpful to know who to include and who not include. Avoid night-time enumerations. Go to the services (advanced visits) the day before to facilitate cooperation and to screen for problems with the site, e.g., changes in the numbers of homeless at each site. Finally, interviewer training is extremely important.

Discussant: Phil Giles, Statistics Canada
Methodology Used: Census/One Night Count

• Starting with the 1971 Census an attempt has been made to improve the coverage of the Canadian population (e.g., institutions, shelters, etc.).

• One initiative that arose out of this was to add soup kitchen enumerations to the census.

• We carried out a pilot test of soup kitchen enumerations for the 1991 Census: the test was carried out in 15 cities in Canada. We hired a coordinator in each city. The coordinators drew up lists of the soup kitchens, determined operations, and hired field collection staff.

• The method was then included in the 1991 Census (June 4).

• The census uses self-completed forms that ask the following questions about the individual's homelessness:

  1. Address where you stayed last night;

  2. Do you have a usual place of residence and what is the address;

  3. Is there any place where someone might have counted you for the census.

• I cannot tell you anything about the results, but I can say that the homeless are not randomly distributed across the country.


Discussant: Ed Adlaf, Addiction Research Foundation
Methodology Used: Survey of Homeless Youth

- We were attempting to examine alcohol and drug use among street youth in Toronto (defined as age 24 and under).

- There were two components to our study:

  1. Agency Survey: 217 youth interviewed, representing 70 percent of the total sample; came up with a sample list of agencies providing services to youth and carried out a telephone survey.

  - Select the youth: Frontline workers in the agency don't like random sampling procedures (they act as gatekeepers protecting the youth); therefore, the sample ended up being voluntary.

  - We worked closely with the Coalition of Youth Work Professions.

  - First, we got approval from the executive directors to do the survey in their organization.

  - Second, we arranged for a set of coordinators to talk to the frontline workers.

  2. Street Sample: Represented the other 30 percent of the total sample; employed a snowball sample in a small geographical area (downtown Toronto); distributed business cards and told the kids that the Addiction Research Foundation was doing a study and they would be paid for their cooperation ($15); the street interviews were all done during the day; the kids were given a telephone number to call to arrange for an interview.

- We found that where the samples differed was in the services used by the youths.

Discussant: Ann Longair, Municipality of Metropolitan Toronto
Methodology Used: Information Database

- Basically, we counted people who use the emergency shelter system in Toronto.

- The shelter system consists of 44 emergency shelters (four are run directly by the municipal government, 40 are funded on a per diem basis by the municipal government and other sources).

- Hostel services are discretionary services in Ontario (the municipality can choose to provide or not to provide the service). The province has ceiling per diem that they will pay out in their municipalities.
• Across the province you get different levels of servicing depending on the area or municipality: 20 percent municipal, 30 percent provincial and 50 percent federal.

• Number of beds: the number of beds ranges in size from 11 to 800 beds, with 3,000 in total for Toronto. This number includes all types of emergency sheltering in the database (youth shelters, single women, assaulted women shelters, etc.)

• Each shelter bills the city on a monthly basis.

• Initially, we did try to collect some information on client characteristics: do they require supportive housing, do they have a mental health problem, and do they require subsidized housing, etc.

• The problem was: (1) service providers don’t like labeling their clients; (2) the form just didn’t get filled out; and (3) because of non-response the statistics misrepresented the level of need.

• The Application Form for Shelter Services collects very basic information, including: name, sex, birth date, marital status, number of children, age, last permanent address, place of residence a year ago.

• Main problems: the agencies are concerned with client confidentiality, and things change so quickly that the data become outdated immediately.

• According to the database there are 27,000 shelter users (different individuals), 56,000 overall users (beds used in a year) and 600 chronic users.

• There are a couple of other points I would like to make: (1) there are many types of homelessness and we cannot assume one type of homelessness when doing surveys; and (2), in general there is a belief that single men deserve a lesser quality of service than other needy individuals.

**Discussant: John te Linde, The City of Calgary**

Methodology Used: Once Night Count and Sample

• We have carried out two pieces of research in Calgary since 1990.

• Initially, we were interested in who would be affected if the East Village (an area of the city which is rich in services and shelters for the homeless) was gentrified.

• We carried out blitzs in 1992 and 1994.

• Most services in the city are funded on a facility basis, not on a per diem basis.
• We experienced a general resistance and minimal cooperation from the service providers.

• Some general comments I would like to make are: (1) public awareness goes up when more people become visible on the street; and (2) there is a general concern about who produces the statistics – that is, what numbers are viewed as reliable and valid, the service providers or the city's.

**Discussant: Margot Breton, The University of Toronto**
Methodology Used: Survey of Homeless Women

• In 1985, I carried out a study of single homeless women in Toronto.

• The study was not designed to count the homeless.

• The purpose of the study was to collect information on an under-identified portion of the population.

• We used two criteria to determine homeless status: if they had a permanent place to stay, and the length of time since they had that place.

  We ended up with a sample of 84 women.

• The women were paid to participate in the study. Most likely this contributed to the high degree of cooperation on the part of the women.

• The question we have to ask in all of this is: What is the payoff to the service providers if they participate in the survey?

• Basically, we have to try to build a design that will allow us to generate information that is useful to the service providers.

**Discussant: David Northrup, Institute for Social Research**
Methodology Used: Survey of Street Homeless

• Assisted in the Street Health Survey (Toronto, 1991).

• The study examined the health status of the homeless.

• From the perspective of the Street Health Organization, counts are of little use and may in fact be counterproductive.

• The survey that we carried out was very expensive.
• We defined the homeless (for the purpose of this survey) as being homeless for at least ten days.

• We found that over 99 percent of the homeless in congregate areas use services (shelters, drop-ins and soup kitchens).

• We used a similar sampling design to that employed by Paul Koegel in Los Angeles.

• We found that the homeless display more than just monthly patterns of behaviour. They have weekly and daily patterns of behaviour, as well.

• I would like to make just a couple of general comments: (1) the importance of key informants in the community cannot be underestimated; and (2) there are Canadian and American differences in the homeless, e.g., differences in visibility and in terms of actual numbers.
## Appendix C: Working Paper #3 Workshop

**The Homeless: Who Are They and Why Count Them?**

**June 9, 1995**  
Agenda - Counting the Homeless: Making it work in the Community

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<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Presenter</th>
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<tbody>
<tr>
<td>9:00-9:15</td>
<td>Greetings and Introduction of New Participants</td>
<td>David Hulchanski</td>
<td>The University of Toronto</td>
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<td>Opening Remarks</td>
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<td>9:15-12:30</td>
<td>Counting the Homeless:</td>
<td>Jim Ward,</td>
<td>Jim Ward Associates</td>
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<td>Experiences of Service Providers and the Community</td>
<td>Bob Yamishita,</td>
<td>City of Toronto</td>
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<td>Problems caused by researchers to the organization (e.g., service</td>
<td>Terry McCullum,</td>
<td>Anglican Houses</td>
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<td>Problems caused by researchers to the clients</td>
<td>Susan Miner,</td>
<td>Street Outreach Services</td>
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<td>Ethical problems with counting the homeless</td>
<td>Ruth Mott,</td>
<td>Central Neighborhood House</td>
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<td>12:30-1:30</td>
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<td>1:30-3:00</td>
<td>Counting the Homeless:</td>
<td>Dennis Culhane,</td>
<td>University of Pennsylvania</td>
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<td>Experiences with Service Providers and the Community</td>
<td>Martha Burt,</td>
<td>The Urban Institute</td>
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<td>[Panel and Discussion] Issues:</td>
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<td>Experiences with previous attempts to count in the organization</td>
<td>Paul Koegel,</td>
<td>Rand Corporation</td>
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<td>Problems caused by researchers to the organization (e.g., service</td>
<td>Annetta Clark,</td>
<td>Bureau of the Census</td>
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<td>3:00</td>
<td>Closing Remarks and Adjourn</td>
<td>David Hulchanski</td>
<td>University of Toronto</td>
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Morning/Afternoon Plenary Session: June 8, 1995
Topic of Discussion: Methods of Counting the Homeless

Task: The panel of experts were asked to relate their own experiences on facilitating community participation and improving the relationship between those providing services to the homeless and those attempting to either count or survey the homeless.

Panel of Experts:
- Dennis Culhane, University of Pennsylvania
- Martha Burt, The Urban Institute
- Paul Koegel, Rand Corporation
- Annetta Clark, U.S. Bureau of the Census
- Jim Ward, Jim Ward Associates
- Bob Yamishita, City of Toronto
- John te Linde, The City of Calgary
- Terry McCullum, Anglican Houses
- Susan Miner, Street Outreach Services
- Ruth Mott, Street Health

Discussant: Dennis Culhane, University of Pennsylvania

In order to facilitate provider cooperation, you have to design a system that services the needs of the direct service worker. What do direct service workers need to know in order to improve the services they provide? What you have to do is find out what the community wants to know.

In order to facilitate provider participation you have to provide incentives: demonstrate to them how the information generated by the study is useful to them, as well. In our management information system, we added a Service Provider Module to do this. This module provides information that agencies can use for their own fundraising and reporting purposes. Other modules include assessment, residential, outreach and case management.

In terms of the issue of confidentiality, the only thing to do is to deal with it right up front. Those using the management information system can be made to take an oath not to divulge information. Also, the client can always refuse to participate.

Discussant: Martha Burt, The Urban Institute

You have to bring the community in early in the process. In any attempt to count the homeless, a number of decisions have to be made at the outset — questions of timeframe, flow or length of stay, length of time of the study (12; 18; 24-month study). There has to
be agreement on these issues at the start. A lot of effort has to be put into building trust with providers in order to get their cooperation. You can't just contact the directors of the organizations you are including in your study; you have to deal with the whole organization (e.g., make contact and create a dialogue with all staff from the director to the street-level worker). Basically, any effort to count the homeless will not be successful without local community cooperation.

One main reason for carrying out this type of research is that the data is collected to defend community programs.

**Discussant: Paul Koegel, Rand Corporation**

1. **Relevance:** Whether the question that you are trying to address is coming from the community or is one your research team and you are introducing to the community — it has to be relevant.

2. **Resources:** To the extent that you are bringing resources to an organization rather than taking resources away from them, you're going to be in a better position. For example, in one of our studies we opened field offices in the participating organizations and paid them for their space. In addition, it helps if you can demonstrate that your funding is not money that is being taken away from them.

3. **Logistics:** Do research that is sensitive to the daily flow of the operations in each particular facility. Know how the facility works and try to set things up as unobtrusively as possible.

4. **Pay-off:** You have to demonstrate what the payoff is to the participating organizations.

5. **Reputation:** It helps if you have a good reputation for being unobtrusive and sensitive to the provider and homeless when you are out there in the field.

Issues of concern to the service provider include: why participate, how the data will be used, privacy and confidentiality.

Basically, you have to get the community actors together in order to have them collect the information for themselves. You have to find out what is palpable as well as what is doable, and negotiate with the community to get the research done.
Discussant: **Annetta Clark, U.S. Bureau of the Census**

The procedures used by the U.S. census include:

1. focus groups with providers and local experts
2. contacting all levels of local government
3. contacting all local advocacy groups
4. convening a meeting, inviting everyone, and explaining what the study is about and how it will be carried by the local community
5. large-scale mailing to all participating groups
6. promotional materials
7. on-site visits to every facility
8. acquiring a letter of introduction from the director of each organization.

- One of our main concerns is the unduplication process.
- You have to explain to the service provider why it is important to do a count.
- You need to focus on the area where the enumeration is going to take place.

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Discussant: **Jim Ward, Jim Ward Associates**

We must distinguish between homelessness and shelterlessness in any study that we do. When we are talking about homelessness, we are really talking about the lack of shelter. I would recommend that, however the count is carried out, it be unobtrusive and that the methods used are not harmful to the homeless. I would also recommend that those carrying out the research be disinterested. That is, there is no payoff or they have nothing to gain from doing the study. It is extremely important that our counts be accurate because inaccurate counts result in ineffective policy.

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Discussant: **Bob Yamishita, The City of Toronto**

We have to be sure to attend to the issue of the purpose of the count. In addition, we must consider non-judgmental intervention. I again raise the issue of the privacy of the homeless which, from my perspective, is a critical issue. Perhaps we need to consider a host of different research methods that can be used.
Discussant: John te Linde, The City of Calgary

I would emphasize that, in any effort to count or survey the homeless, you involve service providers at the design and implementation stage of the research. One way of doing this might be through the use of focus groups at both the front-end of the project and at the end of the project. Provider feedback and cooperation is critical.

Discussant: Terry McCullum, Anglican Homes

I am troubled by the lack of available information on the homeless. We need a realistic count. I am, however, skeptical about the way things are counted in the field. My observations are that, among the street youth, at least 50 percent are from outside Toronto; they are a highly mobile population, and the way we judge the adequacy of housing is extremely subjective.

Discussant: Susan Miner, Street Outreach Services

My main observation is that we have to consider choice in terms of asking the question, Do you have a place to stay?

Discussant: Ruth Mott, Central Neighborhood House

I would like to make a number of points: (1) we have to be aware of and take into account the client's privacy and confidentiality; (2) we should consider paying the homeless for their participation; (3) we should report the results in a user-friendly way – give the information back to the clients; (4) we should use focus groups of providers and stakeholders to find out about the homeless (where they go, what they do, where they can be found, what they need, etc.); and (5) we need to ask the provider, how can we make this more accessible? What do we need to take into consideration? How would you like us to work with you?
Appendix D: Workshop Participants
List of participants (in alphabetical order): Workshop on Estimating Homelessness

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Appendix E: The ANCHoR System Project Description

The ANCHoR System Project Description

Project Summary

The U.S. Departments of Housing and Urban Development (HUD), and Health and Human Services (HHS), as well as the Fannie Mae Foundation, in collaboration with the University of Pennsylvania, have joined to support the development of a software program for the improved management of services to persons who are homeless. The ANCHoR (Automated National Client-specific Homeless Services Recording) System will make available to providers, and local and state governments, an information system for the continuum of care. The primary goal of the system is to support the coordination and timeliness of assistance to homeless service consumers. To that end, the system will provide agencies with tools for the standardized assessment of consumer needs, for creating individualized service plans, and for recording the use of housing and services.

Representatives from public interest and advocacy groups and from federal, state and local governments are currently involved in the crafting of specifications for the system, and in the design of the various program modules. As part of that process, the information systems for homeless services currently in use by 16 jurisdictions were reviewed, and a composite set of assessment and service planning forms has been developed. Both the forms and a test version of the software will be piloted in several localities this fall. Designated observers, including government, provider and consumer representatives, will monitor the progress of the test and make recommendations on the feasibility of the ANCHoR System's wider dissemination next year.

To make the system of optimal utility to consumers and direct service providers, a low-cost, PC-based system capable of operating in either a network or a stand-alone environment is planned. Providers will be able to maintain their own databases on the persons they serve, and share data with a coordinating entity (local/state government, or not-for-profit organization). The system will generate standard reports, including aggregate counts of program utilization, as well as individualized needs assessments and service plans. Given the data sharing capacity of the program, the system will be designed with technical safeguards for the protection of client confidentiality, but will nonetheless require local determination of the conditions and terms of data sharing arrangements.

The first version of the software will include modules for Outreach, Assessment, Residential Services and Service Planning (case management). The Outreach module is designed to provide a brief assessment of the needs of persons who reside in public spaces, and to record the engagement process with such persons over time. The Assessment module includes a more thorough and standardized needs assessment for persons and families who request homeless services. This module can be set to prompt for the updating of a consumer's assessment information on a periodic basis. The Residential Services module records the days a person uses residential services, discharge information, rent information (if appropriate) and basic indicators for special needs and referrals. The
Service Planning (case management) module allows case managers to identify and describe the specific service needs of consumers, and gives them a scheduling system to record referrals, referral dates, follow-up dates and measures of success. The Service Planning module also includes a set of periodic information to measure consumer satisfaction and self-appraisals of progress.

An updated version of the software is planned for the second year of the project, and will include modules for Mental Health Services, Substance Abuse Services, Primary Care Clinics and Vocational Services.

Project Goal: Improving the Coordination of Housing and Support Services for Consumers

The ANCHoR System is designed to provide tools for consumers, providers, advocates and government agencies to more effectively organize the delivery of homeless services. Currently, homeless services tend to be reactive, fragmented and uncoordinated, resulting in duplication of effort, gaps in services and inefficiencies in service delivery. At its most elementary level, a client information system will permit providers to know who they are serving and what they need, thus giving providers and consumers common information for coordinating the delivery of direct services. By standardizing assessment procedures and measuring program utilization across the service system, information will also be available to evaluate the effectiveness of the service delivery system in meeting consumer needs in a timely and appropriate manner.

A client information system will also help prepare communities for serving consumers in an evolving social policy environment. Changes in federal funding for homeless services, although still under consideration, will likely include some consolidation of program funding into a formula-based block grant for which state and local governments will have to apply. Under the current proposal for the consolidated McKinney block grant, localities and states must submit plans for establishing a continuum of care for the homeless population. The plan must document existing levels of service provision, gaps in that service array, and proposed initiatives to fill those gaps. Unfortunately, the data sources necessary for effective planning are, in most cases, either minimal or do not exist. The ANCHoR System would give communities the critical information they need to document to funders and to the general public the need for housing and services in their communities.

Data Transfer Options

Providers will be able to use paper forms to register clients and record their use of services. The data collected can then be entered directly into their own, on-site, ANCHoR Station, and/or be sent to a central data entry unit at the coordinating entity, ANCHoR Server. ANCHoR Stations could also exchange data with ANCHoR Server periodically by paper report, by downloading data to diskettes, or by modem.
Confidentiality

Confidentiality will be maintained by initially allowing data to flow in only one direction, from ANCHoR Stations to ANCHoR Server. This restriction is necessary since the server has information collected from many different stations. It will be up to localities to decide the conditions and terms of data sharing between the server and the stations, and between stations. For example, communities will have to decide whether case managers should have access to the assessment information, if it is collected at a different agency. Similarly, should agencies have access to information about a client's services at another agency? A guidebook will be produced that will assist communities in evaluating the benefits and risks of data sharing, and in determining the extent of sharing they will permit. The guidebook will discuss (and provide examples of) consent forms, and procedures for the protection of confidential information when it is shared for research purposes. Jurisdictions will also have to attend to local and state laws governing the sharing of confidential information.

The ANCHoR System will further protect consumer information and maintain consumer anonymity by labeling records with randomly generated and computer encrypted client IDs. These IDs will be created on-site by the individual ANCHoR Stations and will be unique to that single ANCHoR Station. The ANCHoR Server will maintain a master list of all the consumer IDs from the various ANCHoR Stations attached to the ANCHoR System. Each ANCHoR Station will only be able to identify records for individuals by the consumer IDs generated on their own ANCHoR Station. No ANCHoR Station will have access to the master list on the ANCHoR Server.

System Requirements

Jurisdictions should seek a consensus among potential system participants that implementation would be beneficial to the community and to consumers. The availability of resources, either in the form of existing computers or for purchasing the necessary equipment, should also be investigated. Communities will also need to designate an ANCHoR System Administrator (ASA) to oversee implementation, maintain the ANCHoR Server, provide support and training to providers, and act as liaison to the University of Pennsylvania project coordinators. The ASA should have thorough knowledge of PC computers, Windows and, if appropriate, network maintenance. The following are the computer specifications:
IBM-compatible 386 (486 recommended)                    Mouse or tablet
Minimum 8 MB RAM (16 recommended)                    VGA resolution monitor, or higher
Windows 3.1                                           Math co-processor, optional

Proposed Schedule for Completion

Approved data entry forms:        June 1995
Pilot test version of software:   January 1996
Pilot test feedback:              February/March, 1996
Debugging:                       April/May 1996

Reports to funders:

For more information, write:     University of Pennsylvania
Dennis Culhane, Ph.D.             3600 Market Street Room 716
Center for Mental Health Policy & Philadelphia, PA  19104-2648
Service Research                  email: dennis@server.section.upenn.edu
Forms Summary Information: ANCHoR System

Assessment

**Purpose:** To collect uniform data on all persons receiving emergency housing, either on the day of entry or within a set number of days of entry into emergency housing. Assessment information includes residential history, employment and educational background, health indicators and family information. Information is collected to assist case managers in service planning and system planners in system design.

**Data entry situations:** A freestanding assessment centre or designated emergency housing facilities. Localities may choose to have a subset of information completed, rather than all of the information. Family members other than the household head may also have the form or components of it completed for them.

Service Planning

**Purpose:** To assist case managers in recording referrals, dates of referrals, recording outcomes and dates of outcome assessment, and in noting a continuation or completion of service. The module will include a report feature to allow case managers to follow all clients with referrals pending. Includes memo sections for case manager notes.

**Data entry situations:** A freestanding case management agency, or at the assessment facility, emergency housing facility or other agency providing case management to homeless clients. May include street or sheltered homeless persons and families.

Outreach

**Purpose:** To record contacts with clients by street outreach teams. Records referral source, location, client information, indicators and disposition, as well as a memo field for case notes.

**Data entry situations:** Workers record information upon client contact onto shared forms, for later entry into computer.

Residential

**Purpose:** To record days authorized and days stayed in housing. Includes section for noting referrals and some limited follow-up information. Records rent or co-payment and periods covered, as well as probation or barring codes.

**Data entry situations:** On-site at the emergency housing or other residential program.
Appendix F: Screener and Questionnaire
Calgary Survey of the Homeless (1991)

EAST VILLAGE QUESTIONNAIRE FOR HOMELESS PERSONS PRIVATE
Calgary, Alberta
June 1991

Date: __________________________________________

Time of Interview: __________________________________

Location: _______________________________________

Sector: _________________________________________

Sex of Respondent: 
1. Male ______
2. Female ______

Refusal: ________________________________________ (reason only if given)

Length of Interview: _____________________________

Name of Interviewer: ______________________________

INTERVIEWER NOTE: The following questions are designed to distinguish between those who are homeless and those who are not. If the respondent answers NO to Question I, they are homeless and, therefore, eligible to be included in the survey.

If they answer YES to Question I, proceed to Question II. If they answer NO to this question, they are considered to be homeless and are also eligible for the survey. If they answer YES, they are NOT HOMELESS and you should stop the interview, thank the respondent, and move on to the next person.
I. Do you currently have a room, apartment or house of your own for which you pay to live in?

1. NO _____ If NO, GO TO Page 2.
2. YES _____ If YES,

II. Have you stayed in your own place WITHIN THE LAST 30 DAYS?

1. NO _____ If NO, GO TO Page 2.
2. YES _____ If YES, STOP HERE and

Thank the respondent for their time and move on to the next person.

INTRODUCTION: Hello, my name is ___________ (interviewer's name). I am doing a study for the City of Calgary about the lifestyles of people living in East Village. You are about one of 100 people that we will be talking to over the next couple of weeks. Everything you say will be private and confidential. Any results of this study will be reported for many people and not you individually. We are only interested in the general patterns of people's behaviour.

I am going to talk to you about yourself, how you feel about living here and what changes should be made in this community to make it a better place to live for all. Some questions may not apply to you or you would rather not answer them, so please do not feel obligated to do so. We really appreciate your help.

A. HOUSING

INTERVIEWER'S LEAD-IN: First of all, I would like to ask you some questions about where you eat and sleep and why you don't have a permanent place of your own where you pay to live.

1. In the last 7 days, did you sleep:  
   
   No        Yes        If YES, How many nights? 
   Number of nights _______

   a) In a shelter     ________  ________  ________
   b) Bus or train station  ________  ________  ________
   c) On the street     ________  ________  ________
   d) On the river bank  ________  ________  ________
   e) At a relatives    ________  ________  ________
   f) At a friends      ________  ________  ________
   g) Somewhere else, specify: ___________________  ________

(Note to Interviewer: Each of the categories added together should equal 7 nights.)
2. In the last 7 days, have you eaten at:  

|   | No | Yes | If YES, How many times?  
<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The soup kitchen?</td>
<td></td>
<td></td>
<td>Number of times ____</td>
</tr>
<tr>
<td>b) The Drop-In centre?</td>
<td></td>
<td></td>
<td>____</td>
</tr>
<tr>
<td>c) The Single Men's Hostel?</td>
<td></td>
<td></td>
<td>____</td>
</tr>
<tr>
<td>d) Alpha House?</td>
<td></td>
<td></td>
<td>____</td>
</tr>
<tr>
<td>e) The Salvation Army?</td>
<td></td>
<td></td>
<td>____</td>
</tr>
<tr>
<td>g) Somewhere else, specify:</td>
<td></td>
<td></td>
<td>____</td>
</tr>
</tbody>
</table>

3. Do you consider yourself to be homeless at the present time? Yes ____ No ____  
Why or why not? (Explain):  

4. Have you ever had a permanent place to live?  
1. No ____ Why? ___________________________ (GO TO QUESTION 8)  
2. Yes ____ Where was that place? ______________ (parents, wife/husband, etc.).  
5. When did you FIRST not have a permanent place to live? _______ (Year)  
6. About how old were you when you first did not have a permanent place to live?  
Age _______  
7. Including now, how many times have you been without a permanent place to live?  
Number of Times _______  
8. Right now, how long has it been since you had a permanent place to live?  
Years _______  
Months _______  
Weeks _______  
9. Why would you say you are currently without a permanent place to live?  
(Interviewer note: A multiple response question).  

|   | Yes | No  
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>a) no money</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>b) no job</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>c) no welfare</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>d) no unemployment insurance</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>e) no workmen's compensation</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>f) family crisis</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>g) mental health or health problems</td>
<td>_______</td>
<td>_______</td>
</tr>
</tbody>
</table>
h) no job skills
i) the economy
j) no affordable housing
k) don't know anyone well enough to live with
l) other, specify: ____________________________

10. Of all these reasons for not having a permanent place to live, which one do you think is the major reason? ____________________________ (a through l)

11. The last time you had your own place to live, did you pay rent?

No _______ Why not? ____________________________

Yes _______ About how much did you pay a month? ______________

12. Why did you leave this last place?

a) Could no longer afford the rent
b) Building was torn down, burned, or was condemned
c) Was evicted
d) Arguments or abuse from family members/house or room mates
e) No room mate to share expenses
f) Other, specify: ____________________________

13. What is preventing you from finding a permanent place to live right now?

a) Can't afford damage deposit
b) Can't afford the rent
c) Can't afford the rent and damage deposit
d) Don't want a permanent place
e) Other, specify: ____________________________

14. If you had enough money right now, what kind of place would you like to live in? (Interviewer note: Use probes such as no place, apartment, house, shelter)

__________________________

15. Do you have a family? 

a) Parents
b) Spouse
c) Children
d) Brother, sister
e) Aunts, uncles

__________________________

Yes No
f) Other, specify:__________________________________________________________________

16. If you had the opportunity, would you like to live with family? Yes ___ No ___

17. Would your family want you to live with them? Yes ___ No ___
If NO, why?
_________________________________________________________________________________

18. Right now, how long have you lived in Calgary? Years/Months
_________________________________________________________________________________

19. How many places other than Calgary have you lived in?
_______________________________________________________________________________ (number)
B. SOCIAL RELATIONSHIPS

INTERVIEWER'S LEAD-IN: I would now like to talk to you a bit about people you know and what you do in a day.

(Interviewer's Note: Add as many categories as is necessary.)

1. Could you describe what you do on an average day starting with when you get up in the morning and ending when you go to sleep at night?
   a. Where would you go? (List places)
      1. ____________________________ 
         2. ____________________________ 
         3. ____________________________ 
         4. ____________________________ 
         5. ____________________________ 
         6. ____________________________ 
         7. ____________________________ 
         8. ____________________________ 
         9. ____________________________ 
        10. ____________________________
   b. What would you do at each place? (Eat, play cards, work, etc.)
      1. ____________________________ 
         2. ____________________________ 
         3. ____________________________ 
         4. ____________________________ 
         5. ____________________________ 
         6. ____________________________ 
         7. ____________________________ 
         8. ____________________________ 
         9. ____________________________ 
        10. ____________________________
   c) Could you tell me who you would usually talk to at each of these places?
      (Include no one)
      1. ____________________________ 
         2. ____________________________ 
         3. ____________________________ 
         4. ____________________________ 
         5. ____________________________ 
         6. ____________________________ 
         7. ____________________________ 
         8. ____________________________ 
         9. ____________________________ 
        10. ____________________________

2. Do you have someone close to you?
   1. No ________ (GO TO QUESTION 3)
   2. Yes ________ If YES,
      a. How many people would you consider to be close to you? ________
      b. Would the person(s) be friends, family, street people, agency people, etc.?
         Person 1. ____________________________ # of times talked to per week ________
         Person 2. ____________________________ # of times talked to per week ________
         Person 3. ____________________________ # of times talked to per week ________
3. If you had a serious problem, who or where would you go for help?

4. Is/are there any people who you help out from time to time?
   1. No ______ (GO TO QUESTION 1, next section)
   2. Yes ______ If YES,
      a. About how many people would you help in a week? _______(number)
      b. Would these people be friends, relatives, street people?
         Person 1. __________________________
         Type of help offered __________________________
         Person 2. __________________________
         Type of help offered __________________________

5. Do you have a group of people you tend to "hang" out with on a regular basis?
   1. No ______ (GO TO QUESTION 1, next section)
   2. Yes ______ If YES, where do you usually meet these people?
      (Library, Drop-In, Devonian Gardens, City Hall, etc.)

C. DEMOGRAPHIC INFORMATION

INTERVIEWER'S LEAD-IN: Now, I would like to ask you a few questions about yourself -
your education, age, etc.

1. What year were you born? 19____ (year)

2. Where were you born? __________________________
   (city, province, country)

3. What ethnic group would you identify with, if any? (only two)

4. What is your marital status?
   a) Single, never married
   b) Married
   c) Separated
   d) Common-law
   e) Divorced
   f) Widowed
5. Do you have any living children?
   1. No __________ (GO TO QUESTION 6)
   2. Yes __________

   If YES, how long ago was it since you saw one of your children? (days, months or years) _______________

6. What is the highest grade of school that you finished? ______________

7. Have you had any other training (e.g., certificates, diplomas)?
   1. No __________ (GO TO QUESTION 8)
   2. Yes __________ If YES, what type of training have you had?

8. Have you ever served in the military?
   1. No __________ (GO TO QUESTION 9)
   2. Yes __________

   If YES, are you a war veteran?
   1. Yes __________
   2. No __________

9. Have you ever been arrested on any charges during your life?
   1. No __________ (GO TO QUESTION 10)
   2. Yes __________

   If YES,
   a) How many charges ______________ (number)

   b) Could you please describe these charges?

<table>
<thead>
<tr>
<th>Nature of Charge</th>
<th>Conviction</th>
<th>Amount of time served</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>1. Charge ______________</td>
<td>___</td>
<td>___</td>
</tr>
<tr>
<td>2. Charge ______________</td>
<td>___</td>
<td>___</td>
</tr>
<tr>
<td>3. Charge ______________</td>
<td>___</td>
<td>___</td>
</tr>
<tr>
<td>4. Charge ______________</td>
<td>___</td>
<td>___</td>
</tr>
</tbody>
</table>

98
c) Did you ever have a lawyer for any of these charges?

1. Yes ______
2. No ______

If NO, did you think you needed a lawyer?

1. Yes ______
2. No ______

10. Were you raised by your parents? Yes________ No________

If Yes:
   a) How long did you live with your parents (e.g. age)? _____________

   b) Why did you leave home? ________________________________

If No:
   Who raised you (e.g., grandparents, relatives, foster home)?

11. What does/did your father do for a living?
    ________________________________

12. What does/did your mother do for a living?
    ________________________________

13. What was the highest level of school that your father finished?
    ________________________________

14. What was the highest level of school that your mother finished?
    ________________________________

15. Do you have a paid job at the present time?

1. Yes ______ (GO TO QUESTION 16)
2. No ______ (GO TO QUESTION 17)
16.   a) What kind of work do you do?

b) Are you employed: 1) Full-time
2) Part-time
3) Seasonally

17.   a) How long has it been since you worked last?  

b) Have you been looking for a job? Yes _______ No _______

If YES,  
1) How long have you been looking?  
2) What kinds of problems are you having in finding a  
   job? 

If NO,  
1) What are your reasons for not looking right now? 

   c) Are your retired? Yes _______  
   No _______ (GO TO QUESTION 17 d)

   If YES, what year did you retire? 19_______

d) Have you had work in the last year? Yes ____  
   No _____ (GO TO )

   If YES,  
1) How many times have you had work?  
2) What kind of jobs did you have?  
3) How long did these jobs last?  
4) Were these jobs: Part-time  
   Full-time  
   Seasonal

18.   Last year, what were your best earnings per week (e.g. highest amount)?______

19.   Right now, what is your source of income? How much do you get from this 
      source per month?

      a) Income from work  
      b) War Veterans Allowance  
      c) Social Assistance
      d) AISH  
      e) OAS  
      f) GIS  
      g) Unemployment Insurance  
      h) Workmen’s Compensation
      i) CPP  
      j) CPP (Disability)  

      Source
      __________  __________ ($/mo)
k) Bottle Sales

l) Panhandling

20. On average, how much money do you have to live on a week? ________

21. a) Given your current income, what do you think you could afford to pay for rent per month? ________

b) Do you think you could find a place for this much? Yes ______ No ______

c) If you could find a place to stay for ________ (the amount they say) outside of this area, would you move? Yes ______ No ______

D. HEALTH

INTERVIEWER'S LEAD-IN: Now, I would like to ask you a few questions about your health and what services you use.

1. Right now, how would you say your health is?
   a) Excellent ______
   b) Very Good ______
   c) Good ______
   d) Fair ______
   e) Poor ______

2. Has your health changed since you did not have a permanent place to live?
   Yes ______ No ______

   If YES, has it got: Better ______ OR Worse ______

3. Right now, do you have any sickness which is being treated by a doctor?
   Yes ______ No ______

   If YES, what are you being treated for? ________________________________

4. Have you had any accidents or sickness in the last month? Yes____ No____

   If YES, what kind of accident or sickness did you have?
   ________________________________

5. Lately,

   a) Has your appetite been so poor that you did not feel like eating?

   b) Have you felt so tired and worn out

   Never Some of the time Most of the time
that you could not enjoy anything?
c) Have you felt depressed?  

d) Have you felt unhappy about the way your life is going?  

e) Have you felt discouraged and worried about your future?  

f) Have you felt lonely?  

g) Have you thought of suicide?  

6. Have you ever been hospitalized in a mental hospital?

1. No _______ (GO TO QUESTION 7)
2. Yes _______ If YES,

a) What were you hospitalized for and about how many times?

<table>
<thead>
<tr>
<th>What</th>
<th># of Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
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<td>2.</td>
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<td>3.</td>
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<td>4.</td>
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</tr>
</tbody>
</table>

b) Did this treatment occur:

1) Before becoming homeless        
2) After being homeless            
3) Both before and after           

7. Have you ever been treated for chemical dependency (drugs or alcohol)?

1. No _______ (GO TO QUESTION 9)
2. Yes _______ If YES,

a) How many times were you treated? _______(times)

b) What kind of dependency were you treated for?

________________________________________(type of drugs and/or alcohol)

c) Were you treated:

1) Before becoming homeless  
2) After being homeless  
3) Both before and after  

8. a) In the last year, what types of medical or dental services have you used?
(Interviewer: Check off number of item in part b)

b) How would you rate the service you received?

1) hospital-emergency service
2) hospital-psychiatric service
3) walk-in medical clinic
4) medical doctor
5) psychiatrist
6) community health nurse
7) dental services
8) alcohol & drug treatment services

9. I'm going to read you a list of the various social agencies in the City which are available to you. Could you please tell me whether you have used them in the last month and how satisfied you were with the services?

<table>
<thead>
<tr>
<th>Agency</th>
<th># of Times Used</th>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>Not Satisfied At all</th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Alpha House</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c) The Salvation Army</td>
<td></td>
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<tr>
<td>d) Overcomers</td>
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<tr>
<td>e) Mustard Seed Church</td>
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<tr>
<td>f) YMCA</td>
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<td>g) AADAC</td>
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<tr>
<td>h) CUPS</td>
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<tr>
<td>i) OPECS</td>
<td></td>
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<tr>
<td>j) City Social Services</td>
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<tr>
<td>k) Alberta Family and Social Services</td>
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<tr>
<td>l) General Hospital</td>
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<tr>
<td>m) Indian Friendship Centre</td>
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<tr>
<td>n) Immigrant Aid Society</td>
<td></td>
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<tr>
<td>o) Sunrise Residence</td>
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<tr>
<td>p) Single men's hostel</td>
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<tr>
<td>r) Discovery House</td>
<td></td>
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<tr>
<td>t) Sheriff King Centre</td>
<td></td>
<td></td>
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<tr>
<td>u) Sunshine Centre</td>
<td></td>
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</tr>
<tr>
<td>v) Women's Emergency Shelter</td>
<td></td>
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<tr>
<td>w) YWCA</td>
<td></td>
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</tr>
</tbody>
</table>
ASK YOUTHS 18 AND UNDER ONLY
X) Avenue Fifteen
y) Exit Community Church
z) Exodus 1
aa) The Back Door
bb) Other Services

10. Are there any services that you needed but they were not available to you?

1. No ______ (GO TO QUESTION 12)
2. Yes ______ If YES,
a). Would you please list these services? 1. ____________________________
   2. ____________________________
   3. ____________________________

b. Why do you think they are not available? ____________________________
   ____________________________

11. On a day-to-day basis, what are the types of things you need to get by?
   ____________________________

12. Please tell me how much you agree or disagree with each statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) I feel useless at times.</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>b) I have little control over the things that happen to me.</td>
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<tr>
<td>c) I feel that I have a number of good qualities.</td>
<td></td>
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<tr>
<td>d) At times I think I am no good at all.</td>
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<td></td>
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<tr>
<td>e) There is no way I can solve some of the problems I have.</td>
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<tr>
<td>f) I feel that I am a person of worth at least on an equal level with others.</td>
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<tr>
<td>g) I am able to do things as well as most other people.</td>
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<tr>
<td>h) All in all, I am inclined to feel that I am a failure.</td>
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</tr>
<tr>
<td>i) There is little I can do to change many of the important things in my life.</td>
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E. COMMUNITY

INTERVIEWER'S LEAD-IN: At the present time, the City is considering making a number of improvements to this area. Things like new kinds of housing, new businesses and new services. I'd like to ask you some questions about the improvements the City is considering.

1. If the City decides to make these changes (i.e., new housing, business, services, etc.) would you:
   a) Want to continue living in this area? Yes _______ No _______

   b) Feel comfortable with the new people and business in the area?
      Yes _______ No _______

   c) Move somewhere else? Yes ________ No _________ (GO TO QUESTION 2)

   d) Where would you move to? _________________________________

2. If the City were to move the services already available in the area (i.e., Drop-In, SoupKitchen, etc.) to another part of the City, would you:
   a) Continue living in this area? Yes _______ No _______

   b) Move to where the services are? Yes _______ No _______

3. If the services were moved, where in the City would you like to see them located?
   _________________________________

4. If you had an opportunity to talk to the Mayor about what your life is like right now, and what you need, what would you tell him?
   _________________________________

5. What kind of changes would you like to see the City make to the East Village? Would you like to see:
   a) New housing/residential development: No _______ Yes ________

If YES
1. What kind would you like to see?


2. Within the East Village, where would you like to see it located?


b) New commercial development: No ______ Yes ______
If YES
1. What kind would you like to see?


2. Within the East Village, where would you like to see it located?


c) New recreational development: No ______ Yes ______
If YES
1. What kind would you like to see? ________________________________


2. Within the East Village, where would you like to see it located?


d) New development of low-income/low-cost housing: No _____ Yes _____
If YES
1. What kind would you like to see? ________________________________


2. Within the East Village, where would you like to see it located?


e) Extended development of existing services to:

1) The Seniors: No ________ Yes ________
If NO, Why not? ____________________________________________________
If YES

1. What kind would you like to see? __________________________________________

2. Within the East Village, where would you like to see it located?

________________________________

2) The Homeless:  No _______ Yes _______

If NO, Why not? ___________________________________________________________

If YES

1. What kind would you like to see? __________________________________________

2. Within the East Village, where would you like to see it located?

________________________________

6. Thinking about your life right now, would you say you are:

   a) Very dissatisfied _____
   b) Dissatisfied _____
   c) Somewhat satisfied _____
   d) Very satisfied _____

INTERVIEWER: THANK THE RESPONDENT FOR HIS/HER ASSISTANCE.

RECORD TIME.

That concludes the interview. I have enjoyed talking with you and would like to
thank you for participating in this study. Without your cooperation and
assistance, the study would not be possible.
INTERVIEWER'S ASSESSMENT

1. Respondent's level of comprehension?

2. Condition of respondent (i.e., drunk, despondent, lonely, etc.)

3. Assessment of respondent's mental health:

4. Interviewer's notes about interview and questionnaire:
Selected Bibliography: Canadian Research


Canada Mortgage and Housing Corporation.

Daly, G.


National Council on Welfare.


Selected Bibliography: American Research


Appelbaum, Richard.


Burt, M.A.


Dennis, M.L.

Dennis, M.L. and R. Iachan.


Fischer, P.J., and W.R. Breakey. 


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Kondratas, Anna.


Rossi, P.H.


Sosin, Michael R.


Wright, James D.


Estimating Homelessness

1. This concept is similar to the Canadian concept of core housing need. Briefly, core housing need is defined in a two-step process. First, it is established whether the household has one of three basic housing problems: adequacy, suitability and affordability. Second, if one or more of these problems are present, the question is asked if the household income is large enough to solve the problem, e.g., the individual's ability to find suitable housing for less than 30 percent of household income. (CMHC, 1994a, 1994b, and 1991; McDonald & Peressini, 1991; Murray, 1990) In 1991, CMHC reported that just under two million households lived below one of the above two standards and about one million were deemed to be in core housing need. (November, 1994) Within the context of the UN's definition of homelessness, then, roughly four percent of the Canadian population in 1991 was at risk of becoming homeless.

2. This automated client-tracking system is not the first of its kind; a number of cities in Canada and the U.S. have set up similar systems. See, for example, the Municipality of Metropolitan Toronto, Metro Community Service, Hostel Services or the Maricopa County Social Services Department, Phoenix, Arizona. The ANCHoR System is, however, the latest type of computerized tracking system that has been developed for use in shelters servicing the homeless.

3. The actual cost of the Chicago Homeless Study, start to finish, was U.S. $580,000. (1988), (Rossi, 1989: 61).

4. Author's note.

5. Traditional sampling techniques based on households do not apply in the case of the homeless, who have no fixed address and are an extremely mobile population.

6. For further details about the software and service modules, please see Appendix E at the end of this report.

7. The system allows for a system identification number to be assigned to new clients as they receive services. This number may be used to "unduplicate", as well. However, given issues of confidentiality and privacy, many service providers may be reluctant to use such methods of identification.

8. See Appendix E for the specific computer-system requirements for the package.
9. For a detailed discussion of the workshop and its outcomes, see Appendices A through C which contain the detailed reports on the activities and outcomes of each day. For further information, please see McDonald, P.L., Peressini, T.L., and D. Hulchanski, *Workshop on Estimating Homelessness: Towards a Methodology for Counting the Homeless in Canada*. Toronto: Centre for Applied Social Research, University of Toronto, 1995.


12. Congregate areas consist of outdoor sites where the homeless are known to gather on a regular basis during the day. Outdoor encampments, on the other hand, refer to places such as parks, campgrounds and vacant lots where the homeless not only congregate, but live, as well (e.g., tent cities or squatters' encampments).

13. The Calgary Survey of the Homeless was carried out as part of a larger research project, conducted by Dr. L. McDonald, from January 1990 to 1991, for the City of Calgary. For further information about the survey and the sampling design used in the study, see McDonald and Peressini, 1991.

14. The issue of double counting is only problematic for those designs consisting of an enumeration that takes place over an extended period of time (e.g., more than one night). For designs other than one-night blitzes, it becomes necessary to develop a unique identifier to control for the possibility of counting an individual more than once during the period in which the enumeration takes place.