

HOME STREET HOME  
HOMELESSNESS  
A CASE STUDY OF HAMILTON

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## ABSTRACT

Existing in our society today are a number of people that live in the streets and use emergency shelter services for the basic needs of survival. This research report attempts to define the scale and nature of homelessness using Hamilton as a case study. It is a descriptive analysis that provides a synopsis of homelessness in Hamilton and provides recommendations based on individuals that directly work with the homeless. This research involves a first hand perspective experience with working with the homeless. Therefore, it incorporates the human element involved in homelessness.

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## 1.0 Introduction

Many people associate home with family and friends, a form of security and status in the community. Being without a home can be considered the extreme opposite, no family, friends, role in the community, and the absence of security. Food, clothing and shelter are some of the basic requirements individuals need in order to exist but so many people in our society and throughout the world are not having these essentials met. It is a reflection on the whole of society when we see people who have been punished in a sense to a life on the streets because of our insensitive, selfish and ignorant lifestyles.

"One frigid December evening, almost two years ago, 41 year old Drina Joubert curled up for a night in her 'summer home' a rusted out pickup behind some rundown tenements in downtown Toronto. The next day, she was found frozen to death among the sad remnants of her two years on the streets, a couple of shopping bags, some empty wine bottles, cigarette packages, some stomach medication and an alarm clock. A month later, on January 24, 1986, 69 year old transient Kenith Daniel Curie was found frozen to death near a heating vent in an alley, just blocks from where Joubert was found. And, four days later on January 28th, 64 year old bag lady Ann Regan was found huddled in a stair well to an underground parking garage, less than two blocks from where Joubert died. The grim death toll, the legacy of the homeless in Canada's largest and wealthiest city doesn't end there. In January of this year, a 54 year old drifter, Randolph Fraser, was found frozen to death in the doorway of an abandoned downtown apartment building. Ironically, that four story building, with its 48 empty rooms, is owned by the Royal Canadian Mounted Police. They kicked out all the tenants several years ago

to make way for a parking lot and offices,  
which have yet to be built."

(Pigg, 1987).

These are just a few local examples of the many homeless people that experience the lack the essential human need of a home. The homeless population is growing in both size and composition. As a society we need to make changes because it is part of our responsibility as a nation.

### **1.1 Research Agenda**

This report attempts to define the scale and nature of homelessness and find possible recommendations using Hamilton as a Case Study. Section two is a review of the existing literature on homelessness and provides a structure of analysis for examining Hamilton. Section three is a brief description of the research design. Section four is the analysis of Hamilton's homeless population. Section five is a summary of this research report.

## **2.0 Literature Review**

Adequate shelter is one of the most basic of human needs. However, around the world it seems that all nations Eastern and Western, First and Third World, developed and developing have people who experience inadequate or no housing. The homeless population sleep in the streets, under bridges, in hostels or abandoned buildings. Many of them move from one emergency shelter to the next. They live their lives without the security of having a place to call home.

Since the 1980's the problem of homelessness has been getting a lot of attention and gained extensive media coverage during 1987. The United Nations Centre for Human Settlements (HABITAT) declared 1987 as International Year of Shelter for the Homeless (IYSH) (Heilman and Dear 1988). The aims of IYSH were to bring attention to the problem of homelessness and find ways of better dealing with homelessness (Heilman and Dear 1988). The problem of homelessness is not an individual or behavioral issue, it is a problem of society stemming from political activities, economic uncertainty and the lack of public awareness and concern.

"If we take the time. If we look in the gleaming  
skyscrapers and the manicured lawns, we can see  
the stark reality of many young people,  
families, women and single men, mired



in poverty, shuffling along trying to be invisible. They live in a political and economic system which celebrated wealth and consumerism and which therefore considers them worthless."  
(Heffen 1987).

Many studies on homelessness have been inspired by media attention during International Year of Shelter for the Homeless. Questions such as; Who are they?, What causes homelessness?, and What can be done? have been examined. The social problem of homelessness entails many different views, this, it is a complex problem that is not easily solved. In this section of my research report I review literature which will provide valuable insight to homelessness and a structure of analysis that is needed to examine the case study of the homeless population in Hamilton.

## **2.1 The Extent and Definition of Homelessness**

In Canada and in other countries, accurate statistics on homelessness are difficult to obtain. The homeless population do not have a permanent address which makes it complicated to achieve an accurate count. The most common method used to estimate the number of homeless is through the examination of the individuals that use various services that include soup kitchens and hostels. However, this does not include the number of homeless individuals that do not

utilize these particular services. Consequently we must note that any figure that corresponds to the amount of homeless people is most likely an understatement of the actual number of this population that exist in our society.

During International Year of Shelter for the Homeless in 1987, many estimates were made of the number of homeless in the world (Ward 1989). The following statement was drawn from the United Nations HABITAT data;

"More than one billion people, a quarter of the world's population are either literally homeless, or live in extremely poor housing and unhealthy environments. In the developing world, nearly 50 per cent of the urban population live in slums and squatter settlements. In some cities the figure approaches 80 per cent."  
(Ward1989).

Throughout the world and in Canada the magnitudes of homelessness vary. There is approximately 130,000 to 250,000 homeless people during the year (Heilman and Dear 1989). The Federal government estimates that one million Canadians live without shelter, or substandard accommodations, or spend 30 percent of their income to maintain a place of residence (Heilman and Dear 1989). It is very difficult to get an accurate count of homelessness from any level, be it global, national or local.

In 1988 the Ontario Ministry of Housing estimated that there were more than 200,000 households in Ontario were caught in the cycle of homelessness although, the number has probably changed to this present date (Ontario Ministry of Housing 1988). All of these estimates provide some idea of the number of homeless people that exist worldwide and locally. Nevertheless, there is a large proportion of people who are homeless and the numbers are increasing.

The definition of homelessness is complex because there is a wide range of homeless persons that have to be taken into consideration. Homelessness is no longer the stereotypical male, middle aged alcoholic. Every year more and more women, families, youth and ex-psychiatric patients fall into the category of homelessness (Rossi 1989). Each individual case and sub-group of the homeless population is unique. This large heterogenous group needs a broad definition to include everyone.

The United Nations HABITAT data defines homelessness in two ways that involves;

- "1) those who have no homes such as street people and victims of disasters (absolute)
- 2) people whose homes do not meet the basic standards (relative) these basic standards include; -access to safe water and sanitation;  
-secure tenure and personal safety;  
-accessibility to employment,



education and health care and affordable prices." (Ward 1989).

The Ontario Ministry of Housing report on Homelessness define it as;

- a) people literally without shelter;
- b) people who use the emergency shelter programs as a permanent form of accommodation;
- c) tenants living in overcrowded, substandard housing and/or who pay more than 50 per cent of their income on rent"

(Ontario Ministry of Housing 1988).

Both of these definitions are appropriate because they include individuals that are vulnerable and at risk of potentially becoming homeless and those without the security of tenure. The estimates of the number of homeless people and the definition of homelessness provide the public with the basic characteristics of the people that are without shelter and living in our physical environment. Figures and facts are a fundamental aspect in understanding homelessness.

## **2.2 The Historical Perspective of Homelessness**

Homelessness is not a new problem. It has been the object of harsh and inhospitable views from the beginning of

its existence. In the past this population has been associated with labels such as; tramps, hobos and the bums of skid row. However, in actuality the majority of these people were seasonal workers that provided a resource of manpower. They played a major role in the development of Canada's economy. Yet, it was in the nineteenth century that transient homelessness became institutionalized (Rossi 1989).

Institutionalization of the homeless population was a method of dealing with this social dilemma. People did not understand the reasons behind this mystery and consequently miss-assigned these people into places that they did not belong in. An example of this would be California. "California built its first asylum during the nineteenth century." (Dear and Wolch 1987). The asylum like many others during that time served many functions and populations such as; the mentally ill, the mentally retarded, the aged, the drug and alcoholic abusers, mentally disordered offenders and particularly the poor and indigent (Dear and Wolch 1987). Therefore the institutions of this particular time provided many functions for its population.

Institutionalization was one course of action to cure the problem. Another way of dealing with the problem of homelessness in the past was the formation of skid rows.



"Skid row areas were established in each major city, sections inhabited mainly by homeless men." (Anderson 1923). Skid row areas were created by hobos, tramps and were primarily dominant during the 1920's (Rossi 1989). Nel Anderson's work during the 1920's drew upon experiences as a hobo by interviews with homeless men on Chicago's skid rows.

The Depression's composition of the homeless population was comprised with young, single males (Rossi 1989). This was most likely due to the fact that many young men left home in search of employment during the uncertainty of economic times. The majority of these probably did not find work and thus, simply remained in skid row areas permanently. The advent of World War Two resulted in a decline in the homeless population because many men were recruited for the Armed Forces and other war industries (Rossi 1989). After World War Two there was a decline in skid rows and the homeless population due to high employment (Rossi 1989).

The homeless populations of the 1950's and 1960's did decrease slowly but it did not disappear all together (Rossi 1989). Many studies were undertaken during this time to determine who was on skid row? and why they were there? (Rossi 1989). The homeless population of the 50's and 60's

was comprised of older, white male pensioners with problems such as; physical disability, mental illness and alcoholism (Rossi 1989). Factors such as; extreme poverty, unemployment and lack of family ties were some primary reasons causing homelessness amongst the population (Rossi 1989). Most people today associate their negative stereotypical definition of homelessness with this particular era which is very different from today's definition of the homeless population.

Urban renewal and the dismantling of skid rows was characteristic of the 1970's. The urban renewal projects expanded Central Business Districts, provided more office building, luxury apartments and parking lots (Rossi 1989). The movement of the 1970's was to beautify downtown, provide better housing for the homeless and better care for the disabled (Rossi 1989). The homeless population was directed into the general housing market or into subsidized housing for the elderly through benefits provided by the government (Rossi 1989).

Urban renewal projects and the displacement of the homeless into the general housing market did not eliminate the homeless problem. Instead, it only contributed to the shortage of affordable housing and social services that many homeless face today. The formation of the new homeless of

today occurred during the late 1970's and the early 1980's.

### **2.3 The Homeless of Today**

The old homeless were mainly concentrated in skid row areas thus, allowing the general public to avoid or ignore them. Most if the old homeless population had some means of shelter due to strict police laws against living in the streets (Rossi 1989). Today homeless people are more evident and in a sense part of the hustle and bustle of city life. They sleep in the streets and on benches and the majority of the public do come in contact with them at some time or another. The services that the homeless population use to cope have become part of our urban city's infrastructure. The new homeless of today are a wide range of individuals that live in great poverty. They live on the streets and use emergency services to survive. The definition of the homeless of today is described with the following statement.

"Homeless people of today are not necessarily aimless drifters, old winos, bag ladies and drug addicts. Many are single mothers with young children who subsist on welfare and cannot find any rental accommodations within their means. Others are abused young people fleeing intolerable domestic situations. Some are battered women. A number of elderly individuals on low fixed incomes who are



unable to cope with rapidly increasing living costs. Many are the de-institutionalized mentally ill and entire families." (Daly1989).

There is a very extensive group of individuals within the homeless population of today which has changed in a great extent from the homeless of the past. This particular research is geared to examining three groups that are recognized as being very vulnerable amongst the homeless population. The three groups being; the de-institutionalized ex-psychiatric patients, the youth and the elderly.

#### De-institutionalized Ex-Psychiatric Patients

During the 1960's the de-institutionalization movement started to transpire and changed the way the mentally ill individuals would be looked after. De-institutionalization represented a well intended effort to remove the mentally disabled, physically handicapped, mentally retarded, prisoners and other dependent groups from the asylums and similar places of incarceration in order to place them in community settings

(Dear and Wolch 1987). "The capacity of Canadian psychiatric institutions has dropped dramatically from 47,663 beds in 1960 to 7,935 beds in 1987, and yet the alternative community support programs have not materialized." (Heilman and Dear 1988). The population released during the movement

tended to reside in the centre city where they found helping agencies and support services (Dear and Wolch). Among the homeless population of today it is estimated that there are 25,800 current or ex-psychiatric patients that use shelters in Canada (Heilman and Dear 1988). Many of the homeless ex-psychiatric patients in a sense have become the victims of de-institutionalization due to the lack of social services that have not been provided for them.

### The Homeless Youth

The homeless population comprises a proportion of individuals under the age of twenty five that are labelled as street youth. "At least 150,000 kids leave home each year as runaways and never go home." (Artenstein 1990). Many of these children run away from home because of family problems such as; physical, sexual and emotional abuse or simply because there is no room for them in new family marriages/relationships (Artenstein 1990). The homeless youth can be defined as those that do not have any parental, foster or institutional homes. There are many horror stories as street youth that can be described with the following statement;

"Living on the streets isn't just being cold and hungry. It's selling your body to buy

food or drugs. It's committing whatever crimes are necessary to keep body and soul together. It's running the risk of venereal disease and Aids and of being murdered."  
(Artenstein 1990).

There is a number of runaways that do not return home due to unbearable family situations and consequently become part of the homeless population that uses whatever means are available to survive life on the streets.

### The Elderly Homeless

Many people have most likely noticed this particular group of the homeless. Some of them have been labelled bagmen/ladies that walk around our urban cities very cautiously grasping very tightly to their shopping bags and belongings. Most of these elderly homeless have contributed and worked in our society for long periods of time but, instead of taken care of are castaway with inadequate income and family support in their old age (Morris and Heffren 1988). Many of our elderly live at or very close to the poverty line, which does not allow them to buy the necessities of life (Meltzer 1986).

Many of the elderly in our society have problems with low income levels evidence shows a heavy concentration of the near poor are among the elderly thus, limiting their resources



to live comfortably. Approximately 8 per cent of the elderly couples have incomes below the poverty line in 1986, another 15 per cent had incomes that exceeded the line by only 20 per cent or less (Ross and Shillington 1989). Elderly widows comprise a majority of the older population due to higher levels of life expectancy rates. The National Council of Welfare estimated that 57 per cent of the elderly were females and for every 100 hundred elderly women 62 were likely to be poor (Ross and Shillington 1989). This would indicate that the elderly and especially widowed females are very vulnerable to becoming homeless. Many elderly in our population experience problems with physical disabilities which limits them in their in their daily lives. Therefore due to lack of income, family support and physical constraints our elderly have become part of the homeless population.

These three groups are very vulnerable among the homeless population because many people tend to take advantage of our young, weak and disabled. The youth can be viewed as the future of homelessness, the elderly as the last result of homelessness and the ex-psychiatric patients as somewhere in between.

## 2.4 General Factors Affecting Homelessness

Homelessness of the scale seen today is in a large part an outcome of the shortage of inexpensive housing for the poor, a shortage that began during the 1970's and has accelerated during the 1980's. Homelessness also involves other economic and social factors which include loss of affordable housing, low rental housing production, low incomes, de-institutionalization, and the NIMBY syndrome.

### Loss of Affordable Housing

There has been a loss of affordable housing due to the movement of the middle and upper class to the central city areas. The process of gentrification has converted many low income rental housing areas into more expensive housing units not affordable by the lower income people. Profits are gained by building and selling more expensive homes rather than those more affordable. Housing tends towards profit making and not towards essential human needs. Affordable housing has basically stopped; "Ontario has experienced a decline in room and boarding homes."

206,165 rooms in 1971

111,853 rooms in 1981

61,000 rooms in 1987

(Ontario Ministry of Housing 1988.)



Affordable housing is declining and not being replaced thus the low income people are being left without any homes.

#### Low Rental Housing Production

Low-cost rental housing is not profitable and as a result more profitable housing units are being built such as; condominiums, luxury rental accommodations and ownership housing. (Ontario Ministry of Housing 1988). As demand for housing increases and the supply decreases, the available unit prices rise considerably. The end result is that the low income group of the population find it very difficult or even impossible to meet these high costs. Only the wealthier people can afford the higher prices and become the preferred customers of home builders. The vacancy rate of housing units in Ontario has remained low at one percent since 1984.

(Ontario Ministry of Housing 1988)

#### Low Income

In 1988 over half a million people received social assistance in Ontario. (Ontario Ministry of Housing 1988) The people on social assistance consist of 42% of Ontario families while the rest of the population depends on a family member working part or full time. The cost of living has been estimated to have increased 49% since 1980 and 1986. (Ontario Ministry of Housing 1988) There is a majority of low income

families paying on average 64% of their income on shelter, and as a result have been forced to turn to food banks and other charities. (Ontario Ministry of Housing 1988)

### De-institutionalization

The de-institutionalized ex-psychiatric patients have increased competition among the declining stock of rooming and boarding houses. (Ontario Ministry of Housing 1988) The lack of support services and income has consequently resulted in the increased amount of ex-patients in the homeless population.

### The NIMBY Syndrome

The general public has a negative stereotypic definition of street people that promotes great community opposition towards any long term affordable housing in their communities. People do not want affordable housing in their communities due to the belief that this type of housing will bring property value down. Therefore many people ignore and resist helping the homeless.

## 2.5 Addressing Homelessness

Homelessness is a very complex social problem because it involves a diverse number of attitudes and ideas on addressing this issue. The common factors of homelessness according to the Ontario Ministry of Housing report of 1988 are those mentioned in section 2.4. In order to reduce homelessness these factors must be addressed.

### General Recommendations

There is a need to increase the supply of affordable housing through more government involvement. The government needs to provide more geared to income housing rather than a focus on the private housing market (Heilman and Dear 1988). Provisions must be taken on the government's part to ensure that the existing stock of affordable housing does not diminish. Programs in Vancouver have been implemented to increase the number of low rental housing units. The two programs implemented were By-Law Enforcement and Residential Rehabilitation Assistance Program. (Campbell 1987) Both of these programs improved approximately 1000 lodging homes. (Campbell 1987) The RRA program insured that rents were kept at affordable levels by assistance from the government. (Campbell 1987) The By-Law Enforcement program allowed for the upgrading of lodging homes within the area. (Campbell



1987)

Due to the increasing cost of living, social assistance and low income earnings must be modified to at least the poverty line level. Many people are paying fifty to seventy percent of their earnings on rent and consequently this does not leave enough left over to provide for basic necessities. There is a need to help people to overcome the affects of the increasing cost of living and the very stable low income in social assistance levels. (Heilman and Dear 1988)

The de-institutionalization movement was a positive plan but it is up to the mental health system to recognize that there is a need to provide housing, income and support services for this population (Ontario Ministry of Housing 1988). The effects of public policy failure have resulted in the pressure placed on emergency services to provide these needs. The government must take responsibility for this problem and provide funding to reduce pressure on emergency services.

A recommendation to reduce the effects of the NIMBY syndrome is to educate the general public to accept non-profit housing. The government needs to play a role in encouraging

the communities to share their neighbourhoods and remind people that housing is a social necessity and a human right.

"The Not In My Backyard syndrome is narrow, self-serving and ultimately self destructive. As municipal and provincial leaders, we have the responsibility to provide morale and leadership that will end this attitude for good."  
(Curling 1987)

Homeless will not be erased if we do not do anything about it. These general recommendations involve co-operation at the individual and governmental level in order to reduce homelessness.

## **2.6 Summary**

As a result of the previous review, the following themes are relevant to examine homelessness in Hamilton. There are a number of common factors that affect homeless and these will be used as a structure to determine their relevance in Hamilton. It has been recognized that it is very difficult to pinpoint the actual number of individuals that are homeless. Hamilton will be examined to identify if this is the case as well within our local area. General recommendations have been made to address the problem of homelessness. These recommendations will provide a structure to determine if they are feasible or in agreement with individuals that work with the homeless in Hamilton.

### **3.0 Research Design**

Homelessness is a very obscure social enigma that most people do not comprehend thus, it is important to provide an example that people can easily relate to, perhaps one in their environment. This research is basically a case study of Hamilton's homeless population. It specifically examines three groups namely; the youth, the elderly, and the de-institutionalized ex-psychiatric patients. Specific root causes with regards to these groups will be examined along with general factors affecting Hamilton's homeless. It will provide a descriptive analysis of Hamilton that may possibly increase public awareness and expose a number of factors associated with homelessness that extend beyond the basic negative label meaning lazy, ignorant and alcoholic.

#### **3.1 Why Hamilton?**

Hamilton was chosen because it is local and has a significant amount of homeless people. The majority of Hamilton's citizens are unaware of the extent of this problem in their community. Thus, this research will provide a better understanding of the actual magnitude of this problem.

### **3.2 Data Sources**

Extensive interviews with individuals that are directly involved with the homelessness in Hamilton. Personal volunteer work with the homeless to gain a first hand perspective on the issue from a local level. The final sources are newspaper articles and reports obtained from the Hamilton area to provide a better understanding of the conditions and events that take place.

### **3.3. Research Aims**

This research will provide a synopsis of homelessness in Hamilton and attempt to clarify any misconceptions on this topic in order to justify the recommendations in aiding this problem.



#### **4.0 Homelessness in Hamilton**

It is expected that in almost every major urban city there will be a number of people that are homeless. Homelessness can be expected because it is a component of city life. The homeless population can be defined as people; that are literally without shelter; people who use the emergency shelter system as a permanent source of accommodation; tenants that are living in overcrowded, substandard housing and tenants that pay more than 50 per cent of their income on rent. Hamilton is not immune to the homeless population. There are ten hostels located in the city of Hamilton. The Hamilton Regional Housing Statement of 1990, states that there are a total of 259 beds among the hostels, from that total 150 are designated for males and 109 are designated for females. A review of hostel use in Hamilton during 1989 undertaken by the Planning and Development Department suggested that there are roughly 2,700 different males and at least 2,700 different females using the emergency shelter system in a one year period. This sum of the homeless population is probably an understatement because it does not include the individuals that are not using the hostels.

In Hamilton there is an increasing diversity among those who are homeless that include post-psychiatric patients,



youth, elderly abused women, entire families and refugees. Homelessness in Hamilton like in any other areas has general contributing factors but, there are specific factors that affect particular individuals among the homeless population. Therefore, there is a need to examine Hamilton as a case study that entails general and specific factors that affect the youth, the elderly and ex-psychiatric patients within the homeless population. Another part of the case study of Hamilton is a description and analysis of personal volunteer work with the Homeless population.

#### **4.1 General Factors Affecting Homelessness In Hamilton**

The Ontario Ministry of Housing Report of 1988 indicated that general factors affecting homelessness involve the loss of affordable housing, low rental production, low income, de-institutionalization and the NIMBY syndrome. Therefore, these factors will provide a structure of analysis for Hamilton.

##### **Loss of Affordable Housing**

Housing affordability has emerged as a main contributor of homelessness in Hamilton. In Hamilton a large number of older houses are the source of affordable housing. The problem occurs when developers want to demolish these

older affordable homes and turn them into new 12 storey mixed commercial and residential units but, not replace the units they tear down as reported in the Hamilton Spectator on March 15, 1991. Shelly Remple from the Housing Help Centre in Hamilton (an organization that assists people in finding housing) explains that people on welfare assistance or people working in lower income category spend up to 50 to 70 per cent of their income on rent. The Regional Housing Statement Report of 1990 states that 25 per cent of gross monthly income is assumed to be affordable. Therefore, people pay more for rent because there is a lack or shortage of affordable housing that exists in Hamilton. Many of the new housing projects in Hamilton over the recent years have been primarily geared to higher income groups and as a result many lower income groups have had to compete for existing affordable or even median priced housing that in many times is beyond their incomes. Many people have become homeless because then can not afford high rents.

#### Low Rental Production

The Ontario Ministry of Housing reports that rental housing starts have declined relative to home ownership since 1984. In 1986 the production of rental units was 16.1 per cent and of this total the majority of rental units were probably luxury condominiums according to the Ontario Ministry

of Housing report of 1988. Shelly Remple indicates that the vacancy rates in Hamilton are very low approximately at 1 per cent. The demand for low rental housing units exceeds the supply resulting in competition and usually the highest bidder wins excluding the lower income and social assistance groups completely.

### Low Income

In Ontario and especially in Hamilton more and more people are experiencing lay-offs, hiring freezes and plant shutdowns. (Hamilton Spectator Dec. 18, 1990). During a time of recession more people are loosing their jobs and applying for social assistance. A decline in the manufacturing and construction service coincides with a Hamilton-Wentworth/Burlington unemployment rate that has gone up from 3.5 to 7.5 per cent in the last year (Hamilton Spectator Feb. 7, 1991). There is 46,000 unemployment in the Hamilton and Niagara areas, an estimated 30,000 people in Hamilton alone (Hamilton Spectator Mar. 16, 1991). The applications for welfare in Hamilton has increased at great rates. The 1991 welfare caseload is expected to climb to 134,958, an increase of 85 per cent over the 1990 caseload of 73,240 stated Alf Spencer, Hamilton-Wentworth's director of income maintenance (Hamilton Spectator Mar. 12, 1991). Shelly Remple indicates that according to Hamilton's Housing Help Centre last report



84 per cent of the people interviewed had annual incomes below 15,000, 63 per cent were on welfare and 27 per cent were defined as homeless. Many of these people have ended up among the homeless population because of no place to go and lack of sufficient income levels that does not cover rent, food and clothing.

### De-institutionalization

Primarily in Hamilton's case this deals with an increase in competition for existing housing stock and the problem that many psychiatric patients use emergency services for their support systems. They use emergency services because the government has not provided proper support networks after the de-institutionalization movement.

### The NIMBY Syndrome

Negative public attitudes and rejections of any long term type of non-profit housing, de-tox centre (services for drug/alcoholic abusers) or long term housing for the homeless are present in Hamilton. A proposed de-tox centre was announced to citizens of a community in Hamilton in November 27, 1990. The result was very strong community opposition claiming that they did not want their neighbourhood to turn into a social services centre. (Hamilton Spectator Nov.27, 1990). The "not in my backyard" syndrome affects the possible

reduction of homelessness in Hamilton because there is a lack of co-operation among members of the community to help homeless people find permanent and stable homes.

The examination of the general factors affecting homeless in Hamilton only begins to scratch the surface of this social problem. Homelessness according to the general factors has dealt with the lack of housing and income problems. There is the problem of discrimination of landlords against people with children and individuals on welfare assistance. A report of the Hamilton Housing Help Centre of November 1990 indicated that 58 per cent of landlords in Hamilton would not rent to welfare recipients, the report also indicated that the landlords required first and last month's rents however, most people on welfare or with lower income levels can not provide this requirement. The report showed that nearly all tenants living on government assistance were below the poverty line. In summary the general factors affecting homelessness in Hamilton are a combination of lack of appropriate housing, social attitudes and economic uncertainty.

#### **4.2 General Views of Homelessness in Hamilton**

The homeless population in Hamilton is not the

stereotypical bag lady/man as most people tend to believe. The population is very diverse as mentioned in the introduction to section four. Interviews with individuals directly involved with the homeless were undertaken and provide a description such as; who are the homeless? and What can be done to reduce homelessness in Hamilton? The following are brief descriptions of the extensive interviews that took place among the major agencies that deal with homelessness in Hamilton.

#### First Place Religious Organization

Dr. Rev. Charles Forsyth is the Minister of this religious organization in Hamilton who deals with the homeless both directly and indirectly. Directly he runs a centre for the homeless and other programs to help fulfil basic needs such as food, clothing, shelter, and counselling. The maintaining of these programs allows Rev. Forsyth to have direct contact with the homeless ranging from the elderly, the youth and de-institutionalized to ex-psychiatric patients. He also deals with the homeless indirectly because he is on several committees at the municipal level that address the issues of the homeless and housing policies to improve the problem of homelessness. Rev. Forsyth views the homeless as an expression of public policy failure that occurs in several areas. His main concern is the de-institutionalized



psychiatric patients and their release onto the streets. This is an issue that stems from a moral point of view as these people that are being released into a community based service and need the appropriate housing and support networks. However, these needs are not being fulfilled and as a result some of these ex-patients become part of the homeless population. The youth as Rev. Forsyth views them are on a constant road down hill to destruction in their attempt to survive on the streets. First they leave home for various reasons to live on the streets, following this they get involved with drugs and prostitution in order to survive and fulfil basic needs. The problem of homelessness stems from the lack of support services that help individuals get back into society. Rev. Forsyth feels that there is a new breed of underclass individuals (the homeless) that society is creating due to its lack of effort and ignorance shown by the government and individuals that live in our society. He views the solution as part of an effort to reduce money spent on welfare by the government and instead provide support services that teach and train homeless people how to get back into society.

#### Mission Services of Hamilton

Mr. Sloss, a representative of the Mission Services of Hamilton estimated that there are approximately three to four

thousand homeless people in the area. He believes that due to addictive lifestyles and dysfunctional families many people resort to living on the street. Addressing homelessness involves the government providing geared to income housing and more control over social assistance. He feels there should be some way, for example, trusteeship program to distribute the social assistance for a long term and not just let it last a few days after it is received by an individual. The homeless population lacks life skills and is not willing to change their lifestyles because of mistrust. Mr. Slobs believes there is a great need for support services and more stable housing arrangements. Psychiatric patients in his view are among the homeless population because it is their choice and also due to the lack of support services that are needed to help them function in this community.

#### St. Mathew's House

This is an organization in Hamilton that provides programs such as a senior's drop-in centre, a young mothers facility, a male residence and a small housing project for families. Mr. Wear, a social services coordinator did not want to estimate the number of homeless people in Hamilton. He states that homelessness in Hamilton is due to low welfare levels, addiction of alcohol and drugs, lack of education among the public and the problem of de-institutionalization.



Addressing homelessness would involve a more intensive trusteeship over the control of money given by the government. More programs are needed to teach the homeless job training and life skills. He sees a need to increase social assistance but also control it and provide social support programs to get the homeless population integrated back into society.

### Salvation Army

Mr. Andy Barry is a representative of the Salvation Army in Hamilton. The Salvation Army provides services such as seniors programs, mentally disabled training, correctional services for people being released from jail and a home for unwed mothers. He states that the number of meals served in Hamilton last year was 127,405. The street kids of the homeless population have problems such as unemployment, alcoholism, drugs and dysfunctional families. The seniors encounter problems such that people do not have any time for them and do not care. In Hamilton he sees that factors affecting homelessness are the major gap between the rich and the poor. He believes that the middle class is being squeezed out of the hierarchy structure. Factors such as the lack of affordable housing, the demise of industry, and change in the family composition are affecting the homeless in Hamilton. Mr. Barry states that their needs to be a shift in attitude by

society and the implementation of a vision of caring and understanding in this very fast paced and greedy society. There is a need of more affordable housing and modification in the distribution of wealth in Canada, because people earning six dollars and hour can not afford the basic necessities of life.

#### Good Sheppard Centre of Hamilton

Mr. Chire is a representative of the Good Shepard Centre of Hamilton. The centre provides programs such as long term beds for men that may also have psychiatric disorders. They also provide 25 beds for transient men, many who are between the ages of 16 and 25. The foodline services provide 150 to 250 meals a day to men, women and children. He states that many come to the foodline because they pay sixty percent of their income towards shelter and have no money left for food. Counselling services and emergency assistance with clothing are provided as well and Mr. Chire states that the factors affecting the homeless are due to a lack of employment and lack of affordable housing. He states that in Hamilton there is a large proportion of people near or under the poverty level.

#### Wesley Urban Ministries

The Wesley Urban Ministries is a religious

organization that provides a number services to the homeless population in Hamilton. Mr. Art Verrall, the director of services for Wesley explains that they provide a housing placement program for singles, emergency assistance of food, clothing, laundry and personal hygiene facilities, advocacy and counselling. They provide services such as a christmas store for poor and needy, that maintains their (homeless and poor) sense of dignity, pride and self respect. Wesley provides affordable daycare and recreational facilities for children. They provide seniors and multi-cultural programs as well as youth programs for street kids. Mr. Verrall states that through the basic programs of the drop in centre and youth program they reach an average of 170 people a day. He also states that there is an increasing variety of homeless people using the shelter due to the lack of affordable housing, unemployment, and high levels of poverty. He also thinks that there need to be a shift in attitudes among the government and communities. People need to be educated that the homeless population is growing and it could happen to anyone of us. He stated that a more permanent long term housing plan needs to be developed to get people integrated back into the system. There is also a need of support services to teach people basic living skills.



Birgette Bolten

Mrs. Bolten heads the centre for Wesley Urban Ministries on 110 Napier Street in Hamilton. She provides counselling to individuals that need it and runs a community centre for the elderly. Mrs. Bolten is responsible for the organization of volunteers and holds positions on several committees to help the homeless. She feels that the issue of homelessness is hidden from society most likely because people do not care and have enough of their own problems. She also explained that the basic stereotype of homelessness (baglady\man) is very incorrect. The homeless are very intelligent people who have run into some bad luck or unavoidable circumstances. Mrs Bolten explains that many homeless people feel that living on the streets is the best way they can manage to survive and it is their decision to do so.

The preceding interviews are a general description of the homeless in Hamilton and methods of addressing this issue. All of the agencies interviewed are the main places in Hamilton that homeless people frequent for assistance. There are also other agencies in Hamilton that deal directly with particular groups of the homeless. Some social agencies in Hamilton deal with this population indirectly through referrals and court decisions, these agencies however, are not



a prime concern with the direct needs of the homeless and as a result were not interviewed to a great extent.

Most of the media attention in Hamilton regarding homelessness is very limited. During the time period of Oct. 1990 to March 1991, the media only touched upon issues of the homeless. The Hamilton Spectator during this time reported on the conditions of particular lodging homes and the rise in the number of people using food banks (54 percent in 1990) in Canada. Other newspaper articles dealt with fundraising for charities and various activities such as the opening of Drop-In Centres for the cold winter. In a sense this shows that people are not very interested in the homeless of Hamilton and that there should be increased public awareness with regards to the conditions and scale of homelessness in Hamilton. Increased public awareness/education would provide a better understanding of the issue and perhaps promote a change in attitudes among residents to help address the poverty and hunger that exists in their city.

#### **4.3 Specific Cases of Homelessness in Hamilton**

This research concentrates on three particular groups of the homeless population that are; the youth, the elderly and ex-psychiatric patients. It is important to examine the

specific factors of homelessness in order to suppress homelessness during its initial stages.

### Homeless Youth

There are a number of young people on the street who lives are chaotic and who are in crisis. It is very difficult to pinpoint the number of homeless youth due to their transient nature. The needs of this group are complex and a great challenge. Mr. Michaluk, Executive director of the association of Agencies for Treatment and Development states that according to the Community Street Youth Task Force Reports of 1990 there is estimated to be 350 street kids in Hamilton. Homeless youth can be defined as individuals under the age of 25 that have left home without permission or children that have been thrown out by their parents or guardians. Mr Michaluk explained that the causes of homeless youth are sexual, emotional or physical abuse, domestic violence, and the new composition of families (stepmothers\stepfathers). Most of these kids find that their problems cannot be resolved and are better off on their own. Eve St.Pierre runs the youth program at Wesley Urban Ministries and states that the majority of kids have some where to stay, others are homeless and spend up to 80 percent of their time on the streets. Rev. Forsyth mentioned that alot of these kids get into drugs, prostitution, and criminal

dealings just to survive on the streets. According to the Community Street Youth Task Force of 1990, Hamilton, during the summer of 1989 noted family violence as the most common life history characteristic among their street youth. In Hamilton-Wentworth, for youths 13 to 25 years, there were 1000 drug related charges between January 1 and October 31, 1989 and at least 107 of these youths were identified as street youths. Another point from the report states that in this same time period 115 females and 10 males were charged with prostitution, between the ages of 13 and 25 years. The evidence revealed indicates the causes of youth homelessness are due to abuse, family violence and the new composition of families. The general causes of youth homelessness are unemployment (low level incomes/minimum wages) and lack of affordable housing. In a time of recession and job losses, strikes and unemployment there is a strain on family life, and physical, sexual and emotional abuse of children increasing proportionally to worsening economic conditions. (Spectator Jan 31,1991). There must be ways to reduce the number of street kids and this must begin at the foundation of the problem.

#### Elderly Homeless

The Elderly are a very vulnerable group of the homeless population due to disabilities, low incomes and abuse



by the younger groups. A 1990 report on people using services at Wesley Urban Ministries indicates that approximately 20 percent of the people that use their services are 50 years and older. The actual number of elderly homeless is unknown. Mr. Barry from the Salvation Army stated that many people do not have the time or care for their elderly parents and consequently, many of them are left to support themselves. The cost of living is always increasing but, savings and income among the elderly is limited. Mr. Barry said that most of the elderly have problems with paying rent, medication, and basic requirements. The Hamilton Spectator reports that there will be Federal government spending cuts that would pull money out of the pockets of the elderly, veterans, and unemployed families. (Oct. 26, 1990) Another problem that would affect the elderly homeless is the increase in elderly abuse. "Thousands of elderly men and women are being beaten and emotionally abused and robbed by their families, stated a Hamilton expert on elder abuse, Margaret Black." (Spectator Jan. 14, 1991) Another factor could be that the majority of elderly are widowed females. (Regional Housing Statement, 1990) The death of a spouse could be a great impact on an individual and promote problems such as emotional, physical and social distress and consequently making them unable to cope due to lower incomes, lack of affordable housing and disabilities. The specific causes of homeless elderly are



unknown, however it is a combination of abuse, lack of care from family members, low income levels and shortage of affordable housing. Government cutbacks are only adding to factors that are forcing this population to become homeless.

### Ex-Psychiatric Homeless

There has been a number of observations made by the four major agencies in Hamilton (Wesley, Good Shepard, Mission Services and Salvation Army) that there are an increasing number of mentally ill persons who are homeless in Hamilton. The actual number is difficult to assess because the staff at these emergency services are not experts in detecting if a person is suffering from mental illness. Mr. Monti and Mr. Giacinti (housing counsellors for Wesley) claim that these people that appear to be suffering from mental illness are very difficult to house because they do not take their medication and as a result get worse. Mrs. Kovacs a representative of Victorian Order of Nurses of Hamilton states that it is that persons choice not to take their medicine. The problem arises when there is a lack of connection between the patient and follow up services provided by the mental institutions. Mrs. B. Merseneau, the coordinator of the Friendship Centre that provides recreational activities for the mentally ill, states that there is not enough structure and supervision in this population lives and as a result end

up in jail because they can not cope in the outside world. The jail provides care and protection for the mentally ill. These people have put a strain on emergency services because they disrupt the environment by acting out their incapacibilities and consequently have to be removed onto the streets. The causes affecting these group are low levels of income, inappropriate housing and the lack of supervised support services that needed to help them cope in the outside world.

All of these three groups have particular circumstances leading to homelessness. These specific causes are catalysts in the cycle of homelessness and must be addressed to decrease the growing number of homeless in Hamilton.

#### **4.4 Working with the Homeless**

Homelessness in very literal terms are people without a home. There are two ways of explaining this problem. The first way is by using figures and facts to analyze the effects of homelessness has on our environment. The second way of explaining this issue is by working with the homeless. First hand experience makes it possible to understand the human aspect involved in the issue. I felt that this was needed

with this particular research therefore, I decided that volunteer work would be a great asset to my project. Nel Anderson's work with the homeless involved participant observation, meaning being involved directly with the study and observing from the homeless.

I started my volunteer work in October 1990 and it lasted until the end of March 1991. I worked every Tuesday for four to six hours a week in the kitchen preparing meals and serving them. I worked in the kitchen of a Drop In Centre at Wesley Urban Ministries located on 129 Rebecca Street. Homeless people feel very uncomfortable if they are asked too many questions thus, in order to get direct contact and yet not make them feel uncomfortable I worked in the kitchen. The centre consists mainly of long benches and tables, donuts and coffee are provided on a self serve basis, there is soup served at 10:00 am and a hot lunch at 1:00pm. There is a count that is taken every thirty minutes with approximately 45 to 50 individuals using the centre on a steady basis but some lunch time we serve up to 100 meals a day. The population within the centre is primarily male, possibly because women might feel intimidated by the men.

The first time I went to the centre I felt intimidated by the large number of men present but, on the other hand I



was shocked because for the most part of my life I never realized the amount of poverty that existed in my community. Throughout my experience with the homeless most of it has been positive. There are times when things get a little frightening such as; when the men start to fight, or when people are drunk, or just start yelling at the top of the lungs at me for no particular reason. There others times that did not really enjoy such as when the one man started following me around as I was trying to do my work. I noticed a few thing during my experience with the homeless. The younger individual are not very friendly and tend at times to be very cruel. The elderly and the young do not get along at all. There seen to be group of individuals that always hang around together. Most of the homeless people are intelligent, I noted once that there was a man reading about economics to his friends. The centre seemed a lot fuller during the end of the months that the beginning of the month. Linda (program coordinator of the centre) stated that this was because many of them received there welfare cheques during the beginning. Among the teens especially it is very difficult to tell if these people are homeless because they dress about the same as rest of society. I did notice that some the in individuals using the centre seemed to have some kind of mental disorder but, it is difficult to know for sure because I am not an expert in detecting these individuals. The majority of the



people using the Centre are homeless according to a client profile completed by the staff.

I have learned a great deal through my work with the homeless and I think it will affect me for my entire life. At times it was depressing and emotional when working with the homeless. It makes you realize how lucky one really is when we compare our problems to those of the homeless. The main thing I have learned with my experience with the homeless in our community is that there is a lot of pain and hunger that exists out there and it could happen to anyone.

#### **4.5 General Recommendations for Hamilton**

These are general recommendations for addressing homelessness in Hamilton based on the opinions expressed by individuals that directly work with the homeless in Hamilton.

It was recommended that the government develop more affordable housing that catered more to peoples incomes and encourage an increased amount of low rental unit development in the area. There is a need to modify the low income wage structure and increase social assistance rates so that everyone should receive some adequate guaranteed income. The government needs to promote public awareness/education

programs to destroy the NIMBY syndrome for good. Many people mentioned the need for governments to take responsibility for providing support services for the ex psychiatric patients.

A central need specified during the interviews was the need to establish some long term housing for the homeless, this would take place with a number of steps. The process would involve the movement from the emergency shelters into a transitional type of home that provided programs such as; life skills and job training. The final step of the process would involve a stable, independent living environment that the individual could be able to maintain and break away from the homeless label. Specific recommendations with regards to the three groups mentioned would be support services for the elderly, the youth and the psychiatric patients. There was a need to increase social assistance among all these groups and provide programs that would encourage people to help themselves. More public education the homeless is needed to reduce its numbers and the increased level of affordable housing. The homeless population must be taught life skills in order to get them integrated back into society. These people are resources of manpower that must be taught to help themselves through organized programs.

## 5. Summary

The purpose of this study was to define the scale and nature of homelessness and find possible solutions using Hamilton as a case study. The homeless of today consist of a wide range of individuals and this was also evident in Hamilton, this research concentrated on three particular groups; the youth, the elderly and the de-institutionalized psychiatric patients. The methods used to examine the case study of Hamilton were; extensive interviews with key individuals directly involved with the homeless population in Hamilton, newspaper articles and literature obtained from the Hamilton area to provide a local perspective and finally personal volunteer work throughout the research. The volunteer work provided a fresh insight in dealing with the homeless.

The literature review provided background and the basis of a framework to examine Hamilton's homeless. The findings of the study indicated an estimate and definition of who the homeless really were in Hamilton. The findings also provided a description of specific and general factors affecting homelessness in Hamilton. The data sources and collection of information provided the basis for an informative description of the homeless problem in Hamilton and possible general recommendations for addressing this

issue. The volunteer work provided a fresh insight into the human element associated with homelessness. Further research could investigate for specifically how the root causes of specific groups could be addressed in order to reduce homelessness to a greater extent. The solutions to homelessness are very complex and diverse, and it needs much thought and investigation for society to better understand and live with this urban dilemma.





Individuals and Organizations Interviewed

Adolescent Community Care  
Ms. Szkdodziak  
coordinator

\*Friendship Centre  
Mrs. B Merseneau  
coordinator

AY Alternatives for Youth  
Corine Tesman  
Councillor

\*Good Shepard  
Mr. Chire

Baldwin House  
Margaret Dasilva  
coordinator

Greater Hamilton Food Share  
Ms. Sanucci  
director

\*First Place  
Dr. Rev. Charles Forsyth  
Minister

Homestead  
Vera Devries  
director

\*Wesley Urban Ministries  
Art Verrol director  
Bigette Bolten coordinator  
Eve St. Pierre youth coordinator  
Mr. Monti and Mr. Giancittie housing councillors

Hope Haven Homes  
Ms. Corboriteau  
executive director

\*Salvation Army  
Mr. Barry

\*Mission Services  
of Hamilton  
Mr. Sloss  
director

\*Victorian Order of Nurses  
Mrs. Kovac

\*Association of Agencies for  
Treatment and Development  
Mr. Michawk  
executive director

\*St. Mathews House  
Mr. Wear  
social services  
coordinator

Catholic Children's Aid of Hamilton  
Ann Probes

\*Housing Help Centre of  
Hamilton  
Shelly Remple

Children's Aid Society  
Nick Merola

St. Vincent De Paul

Interval House of  
Hamilton  
Ms. Morrow

Dawn Patrol Group Homes

Elizabeth Fry Society of Hamilton

Harvest Time Ministries

Family Services of Hamilton-Wentworth Inc.

Wellington Psychiatric Outreach Program  
Jeff Pitman

\*indicates extensive  
interviews

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