

Saint John's **2017** 

Progress Report on Homelessness

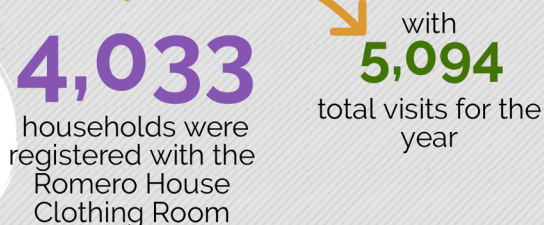
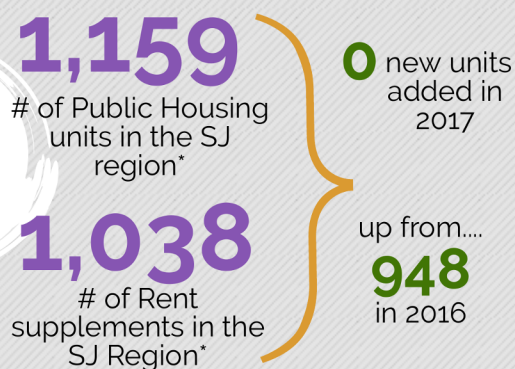
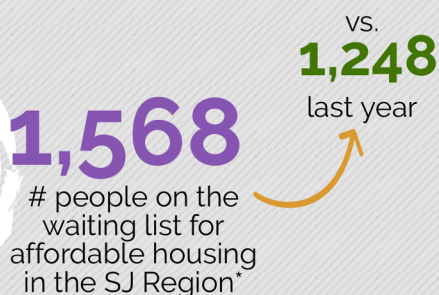
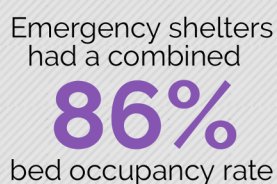
April 2018



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Highlights from Saint John's 2017 Progress Report on Homelessness



Find the full report at www.sjhdc.ca

Introduction

"Housing rights are human rights. Everyone deserves a safe and affordable place to call home."

These affirming words were spoken by Prime Minister Justin Trudeau on November 22nd, 2017, while announcing the government's long-awaited National Housing Strategy. The message signaled an encouraging shift to a "rights-based" approach to housing. Yet the Prime Minister's assertion was made in stark contrast to a reality in which hundreds of thousands of Canadians continue to lack safe, affordable housing. In the decade from 2006 to 2016 the proportion of households in Canada with monthly shelter costs considered unaffordable remained nearly unchanged, decreasing slightly from 24.4% to 24.1% (Statistics Canada, 2017). At the same time, homeless shelters saw an increase in their clients' average length of stay, indicating that people are finding it more and more difficult to break the cycle of homelessness (Canada, 2016). Despite years of advocacy and considerable progress in certain areas, the difficult truth remains that on any given night, 35,000 Canadians are homeless, and at least 235,000 will experience homelessness in a year (Gaetz et al., 2016).

This reality is found in Saint John as much as any other community across the country. For this reason, each year the Human Development Council releases our annual Progress Report on Homelessness. The report serves as a check-in: an opportunity to identify areas where progress has been made, and those where challenges persist. As with past reports, the intention is not to assign grades or to deem Saint John to pass or fail in supporting people with housing struggles. Instead, we aim to further a discussion on homelessness, informed by statistics and by the community's response to this complex social issue. This year, our report highlights some concerning trends: a gradual increase in the number of individuals using Saint John's emergency shelters, and a persistently high average number of nights stayed in a shelter. For those seeking permanent housing, the challenge has not abated, as the waiting list for affordable housing in the region increased from 1,248 in 2016 to 1,568 in 2017. The extent of need in the community is reflected through other services as well: Romero House served more than 80,000 meals in 2017, while 4,033 households were registered for their Clothing Room. The number of needles distributed through the AIDS Saint John Needle Exchange Program increased by 50%, with 306,467 needles distributed in 2017.

Despite this daunting local reality, there is reason for optimism. While the number of individuals using a shelter increased in 2017, both the average length of stay per visit and the average number of nights stayed per client decreased. At a policy level, the new National Housing Strategy sets clear and promising objectives. Over the next 10 years, the federal government has plans of cutting chronic homelessness by 50%, building 100,000 new affordable housing units while repairing 300,000 existing affordable housing units, providing 300,000 households with financial assistance through a new Canada Housing Benefit, and lifting 530,000 households from core housing need. By grounding the strategy in a "rights-based" approach, we can begin to envision a Canada where those receiving social assistance or housing subsidies are seen - not as the recipients of charity - but rather as rights-holders, asserting their right to a life of dignity, beginning with safe and secure housing. For more information on the National Housing Strategy and its human rights-based approach to housing, visit www.placetocallhome.ca.



The Numbers

Data Collection & Limitations



Producing an annual progress report on homelessness in Saint John is a less-than-straightforward task. While data collection, management, and measurement tools have improved over time, certain limitations remain. For example, we are still unable to assess the number of individuals who are hidden homeless (couch surfing) or at risk of homelessness – though we can say, based on anecdotal evidence, the number is significant. We also currently lack the tools and overall systems approach that would allow for us to accurately capture the number of individuals who entered homelessness in 2017 versus those who exited. Without this information, it is difficult to fully demonstrate a community's effectiveness at reducing its homeless population. Although we are not there yet, as a community, a systems approach is on the horizon; this data will soon be available. In the meantime, there are certain indicators which we can use to show where progress is being made and what challenges persist as it relates to homelessness.

In particular, emergency shelter use is something on which we can reliably report from year to year. This is thanks in large part to a shared data management software: the Homeless Individuals and Families Information System (HIFIS). All emergency shelters in New Brunswick, as well as many other service providers, manage and track data through HIFIS, providing us with a reliable and consistent source of data. Other tools, such as Point-in-Time (PiT) Counts complement our shelter use data and allow us to gather information on rough sleepers (e.g., on the street, in parks, etc.). While a PiT Count was not conducted in 2017, two comprehensive counts have been conducted in Saint John to this point: one in 2016 and one in early 2018. The results from the 2018 count will be featured in next year's report.

We also draw on data from the Canada Mortgage and Housing Corporation (CMHC), New Brunswick Social Development, and Statistics Canada, to provide context for local housing challenges. These indicators, when considered alongside our shelter statistics, provide valuable insight as to the challenges our community continues to face in accessing affordable housing. As the table below demonstrates, a number of these indicators point to improvement. In 2017 we saw an increase of 90 rent supplements in the Saint John region*. We also saw a 2 percent drop from 2011 to 2016 in the percentage of households in core housing need**. At the same time, however, the number of people on the waiting list for affordable housing in the region grew from 1,248 to 1,568 and we have yet to see an increase in the average social assistance rate of \$537, despite the median rent for a 1 bedroom apartment being \$610. While the numbers don't tell the whole story, they demonstrate the very real challenge many Saint Johners face in accessing safe, affordable housing.

Housing Indicators in Saint John		
	2016	2017
Number of public housing units	1159	1159
Number of rent supplements	948	1038
# of people on waiting list (SJ region*)	1248	1568
Social Assistance Rate (single individual)	\$537	\$537
Percentage of Households in core housing need	10.8% (2011)	8.8% (2016)**
Median rent for a 1 bedroom	\$610	\$610
Median rent for a 2 bedroom	\$700	\$725 (CMHC 2)
Vacancy rate for a 1 bedroom	7.4%	5%
Overall Vacancy rate (SJ CMA)	8.6%	4.7%

* This region (Social Development Region 2) encompasses the area from Sussex to St. Stephen

**Core housing need refers to households which are unable to afford shelter that meet adequacy, suitability, and affordability norms. Sources: National Household Survey, 2011 & Census, 2016

Note: an initial version of this report incorrectly stated that the number of public housing units increased in 2017. No additional public housing units were added in the Saint John region.

356 people used an emergency shelter in 2017

262 male  91 female  2 transgender  1 unspecified

Based on most indicators, Saint John saw relatively little change in emergency shelter use in 2017. The most notable *increase* - at 9 percent - was the total number of unique individuals who used a shelter, from 327 in 2016 to 356 in 2017. The increase was particularly noteworthy at Coverdale (the women's emergency shelter), which served 93 individuals - a 22% increase over 2016. The total number of nights stayed at an emergency shelter also went up - by 6 percent.

Most other indicators, however, showed an improvement. A decrease was seen in the average length of stay per shelter visit - 5 nights, compared to 6 in 2016 - and the average number of nights stayed per client decreased from 27 to 26. We also saw a decline in the number of youth who accessed an emergency shelter. While this is simply a year-to-year comparison and not necessarily an indication of trends, it is encouraging to see even a modest decline on these important measures.

Still, overall, the shelters remained near or at-capacity for a good portion of the year, clearly demonstrated by Outflow Men's Shelter's occupancy rate of 103%. Overall, the shelters each saw an increase in demand, and had a combined occupancy rate of 86%. The tables below provide a breakdown of the year's data.

Combined Emergency Shelters (Outflow & Coverdale)			
	2016	2017	Change
Total number of unique individuals	327	356	↑
Total number of nights stayed	8,828	9,369	↑
Average length of stay in a shelter (nights)	6.0	5.1	↓
Average number of nights stayed per client (over the year)	27	26	↓
Number of Youth (24 or younger)	57	56	↓

Coverdale Centre for Women		
	2016	2017
Number of Shelter Beds	10	10
Number of Unique Individuals	76	93
Average Length of Stay (per visit)	8.7	10
Average # of Nights Stayed (over the year)	21.6	20
Occupancy Rate	N/A*	50.3%
Average Age	34	37
Number of Youth (24 or younger)	21 (28%)	22 (24%)

* The 2016 version of this report relied on room-based occupancy. This report uses a more informative indicator for occupancy rate: bed-based.

Outflow Men's Shelter		
	2016	2017
Number of Shelter Beds	20	20
Number of Unique Individuals	251	263
Average Length of Stay (per visit)	5.6	4.6
Average # of Nights Stayed (over the year)	29	29
Occupancy Rate	98%	103%
Average Age	39	40
Number of Youth (24 or younger)	36 (14%)	34 (13%)

Updates from the Shelters

Coverdale Centre for Women



The dedicated staff at Coverdale continue to do the hard work of providing assistance to homeless women in our community. Our staff are qualified, skilled and experienced individuals who lead by example and work hard to support the women with all of their unique needs. Coverdale continues to provide shelter to women who would otherwise be forced onto the streets, where they are at high risk of violence, or into situations that compromise their safety, such as staying with people they do not know very well.

At Coverdale we believe in meeting the client where she is; if she is not ready to make changes we accept her where she is. Once a level of trust is achieved, she will let us know she is ready to make changes. Our biggest barrier is getting the women to believe that they are worthy of making positive changes to better their lives. We see our women turn their lives around. They have thanked us for our ongoing support during times they struggled the most.

In 2017 our shelter saw 93 women ages 18+. Thirteen of these women were over the age 60, three were 78. All women are encouraged to participate in our self-help programs like Emotions Management, just one of the many programs we offer. We have fun activities to help alleviate stress such as art, belly dancing or working out in our wellness room. These activities are open to all women in our community.

- Crystal Scott, Coverdale Centre for Women

Outflow Ministry



Two truths came to light as Outflow served the community of homeless men in Saint John in 2017. When juxtaposed these truths seem contradictory, but they actually show a larger reality.

In 2017 Outflow started a Rapid Rehousing program, which predominantly served the men who use our homeless shelter. Eleven people found housing by the end of the year, nine of whom accessed our shelter at one point. The men who received help now have a foundation to work from as they begin to take next steps in their lives. We are fortunate to be allowed to walk alongside them as they journey. This program also made nine shelter beds available, which makes it easier for us to fulfill our mandate of providing shelter in emergency situations.

The second truth is that the number of men using our shelter nightly increased by about 5% between 2016 and 2017. In 2017 more than 20 men used our shelter on an average night. In December, the beginning of the winter months, we saw more than 22 every night.

In parallel to the Outflow Rapid Rehousing program finding homes for 11 people, the need for the Outflow Men's Shelter increased. These two facts beside one another demonstrate something. 2017 taught us that homelessness is still a significant problem in Saint John. The work being done is good but it is not complete. 2017 also taught us, however, that when people are given the opportunity to find success, they oftentimes will.

- Anthony Dickinson, Outflow Ministry

Housing Programs



Housing programs are an essential component of any community's approach to tackling homelessness. In Saint John, several such programs are funded through the federal and provincial governments and are delivered by non-profit agencies. The programs highlighted here (Housing First and Organized Departures, operated by Housing Alternatives Inc. and Rapid Rehousing, operated by Outflow Ministry) target specific populations with complex needs - all of whom are homeless or at imminent risk of homelessness. These are direct housing programs that focus on affordability and stable tenancy.

Through these three targeted programs, a total of 56 individuals found housing in 2017. It is important to note that outside of these programs, many individuals who lack safe, affordable housing find placements through New Brunswick Social Development. Those numbers are not captured here. The importance of collaboration with community partners in the success of these programs should also be acknowledged. The advocacy efforts and referrals from other community agencies, as shown in the 'Referral Sources' chart on the following page, play an essential role in securing housing for many of these individuals.

Housing Programs		
Program	Operated By	# of Individuals Housed in 2017
Housing First	Housing Alternatives Inc.	11
Organized Departures	Housing Alternatives Inc.	34
Rapid Rehousing	Outflow Ministry	11
Total		56

Housing First

Operated by:

Housing Alternatives

Funded by:

The Homelessness Partnering Strategy (HPS)

Clients require:

Moderate to high supports.

Clients are provided:

Unconditional housing, a case manager, and intensive wraparound supports (that are low barrier and client-led).

VS

Organized Departures

Operated by:

Housing Alternatives

Funded by:

New Brunswick Social Development

Clients require:

Low to moderate supports.

Clients are provided:

Affordable housing, a case manager, and a connection to additional support services, all individualized to meet client needs.

VS

Rapid Rehousing

Operated by:

Outflow Ministry

Funded by:

The Homelessness Partnering Strategy (HPS)

Did you know?

In 2017 the Canadian Observatory on Homelessness (COH) unveiled a Definition of Indigenous Homelessness in Canada. As the report suggests, "Unlike the common colonialist definition of homelessness, Indigenous homelessness is not defined as lacking a structure of habitation; rather, it is more fully described and understood through a composite lens of Indigenous worldviews. These include: individuals, families and communities isolated from their relationships to land, water, place, family, kin, each other, animals, cultures, languages and identities."

Find the full definition at: www.homelesshub.ca/indigenoushomelessness



Did you know?

December 2017 saw the implementation of the Flexible Assertive Community Treatment (FACT) model of mental health support through Horizon Health. FACT is a multi-disciplinary approach to supporting the highest needs mental health consumers by using clinical teams, including Doctors, Psychologists, Occupational Therapists, Registered Nurses, Social Workers, and Peer Support Workers, to provide thorough clinical support to those experiencing serious and debilitating mental illness. As many of these long-term mental health consumers have experience with homelessness and instability, this model is of great interest to Saint John's various housing programs, like Housing First.

Housing Alternatives: Housing First & Organized Departures

2017 was the most successful year to date for Housing Alternatives' Organized Departures (OD) and Housing First Saint John (HFSJ) programs. 45 individuals were housed in total, 34 through OD and 11 through HFSJ. December 31 ended our fifth year operating the OD program and almost completed our second year with HFSJ (program year end is March 31).

To date we've been able to transition 120 individuals out of homelessness through the Organized Departures program and our 34 moves in 2017 is the most we've had in one year. Our target for HFSJ is 10 moves per year but we've been able to free up enough resources to move 11 as of December 31 and we expect to move 13 individuals with that program by its year end of March 31.

This year was also the first year we've been able to partner with the Saint John Learning Exchange to support our HFSJ participants through life skill development.

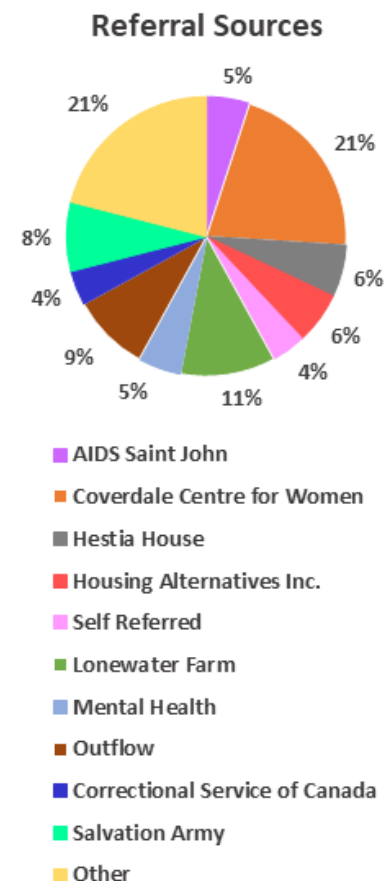
Basic skills of life management and apartment maintenance such as hygiene, cooking and food prep, pet care, cleaning, and money management are things we often take for granted but for many of the clients we serve they are the difference between a stable and successful tenancy and eviction. We identified a gap in our community in meeting these needs. With the experience and expertise the SJLE has in these areas it seemed a logical choice to partner with them in developing a program tailored to HFSJ participants. We are confident our support is more client-centred and holistic now that this partnership is in place.

- Ben Appleby, Housing Alternatives



HOUSING ALTERNATIVES INC.

Referral Sources for Housing First & Organized Departures



Harm Reduction



Harm reduction is a pragmatic philosophy that guides policies and initiatives serving individuals who engage in risky behavior (most often drug use). At its core, harm reduction acknowledges that with the proper supports in place, risk can be mitigated. The harms associated with drug use (or with sex work as another example) are not always inherent; they are often peripheral to the act of doing drugs (or of selling sex). By addressing these peripheral risks, harm reduction programs can be very impactful. In Saint John, harm reduction informs a number of initiatives and guides the actions of many agencies. In this section, we highlight two of those agencies: AIDS Saint John and RECAP.

A few key tenets of harm reduction (as applied to drug use):

- Abstinence isn't always a circumstantially realistic or desired option.
- People who use drugs have agency. Harm reduction is a client-centered model that meets people where they are at and offers choice.
- In order to improve the lives of those who use drugs, it is often necessary to look beyond addictions to address underlying needs (housing and homelessness, mental health, trauma, etc.).
- Putting people in danger in the name of morality isn't ethical. Harm reduction is evidence based.
- Stigmatization and criminalization both create significant barriers for those who use drugs.

Some examples of harm reduction in action:

General risk:

Drug use can lead to the spread of HIV and Hepatitis C.



Specific risks:

Sharing needles and other paraphernalia.



Possible harm reduction practices:

Provide clean needles and crack kits, and a safe way to dispose of them; offer accessible and non-judgmental medical services, etc.

Overdose



Unregulated/laced drugs; using drugs in isolation.



Safer consumption sites; Available Naloxone kits/overdose prevention training; Decriminalization of drugs, Opiate Substitution Therapy, etc.

Did you know?

Harm reduction is one of the key pillars of the Housing First model.

When housed through a Housing First program, individuals aren't expected to be abstinent of drugs or alcohol. Overall, there is no requirement of 'readiness' for participation. Rather, those who are chronically homeless are met where they're at, and offered housing and supports. They are given choice, and treated with dignity and respect. Often, once their housing is secure, housing first clients choose to tackle their addiction and mental health concerns.

AIDS Saint John:

AIDS Saint John offers support for persons living with and/or affected by HIV/AIDS. In addition to providing advocacy and education programs, the agency operates a Needle Exchange Program. In 2017, **306,467** needles were distributed - a **50%** increase from 2016.



Did you know?

To better reflect the nature and diversity of its activities, AIDS Saint John is changing its name to *Avenue B*.

AIDS Saint John Needle Exchange Program		
	2016	2017
Unique Clients	749	848
Needles In	128,342	102,874
Needles Out	204,312	306,467
Crack Kits	7,602	8,161
Condoms	19,880	25,342
Visits	8,373	10,550



RECAP:

RECAP (Research, Education, Clinical Care for at Risk Populations) is a community access clinic in Waterloo village rooted in the care of patients with Hepatitis C. Using a harm reduction approach, RECAP is focused on lessening the negative consequences of problematic substance use through individualized and family holistic care including opiate substitution therapy (OST), primary care, psychology, specialist care in infectious diseases, internal medicine and pediatrics. RECAP has had 368 active patients as of April 24, 2018, 233 (63.3%) of whom are hepatitis C positive, 56.8% (209) who are OST (24.4% or 51 of those considered stable, with carry privileges), 85 (23.1%) without a primary care provider. The average 2.5 year retention rate for all patients is 87%. There have been over 700 visits to the nurse practitioner alone in the past 7 months and more than 80 specialist visits in the clinic in that same period.

A recent survey of 68 RECAP patients demonstrates that:

- **32%** go hungry because there is not enough food
- **32%** have had legal problems in the past 6 months
- **25%** do not feel as if they have a support system to depend on
- **69%** are unemployed
- **41%** report that they don't feel they have a dependable source of income
- **88%** report being happy with the progress they've made since coming to RECAP
- **47%** live on an income of \$999 or less per month



Additional Support Services



Emergency shelters, housing programs, and harm reduction agencies all work in close collaboration to meet the needs of some of Saint John's most vulnerable populations. They're joined by a variety of other support services as well: transitional housing providers, soup kitchens, drop-in centres, and outreach programs, to name just a few. When considering the state of homelessness in Saint John, these services - and the ongoing demand they experience - are important indicators. As was highlighted earlier in this report, Saint John's emergency shelters saw more individuals in 2017 than 2016. We have also seen that 300 more people are on the waiting list for affordable housing in the region, and that there was a 50% increase in the number of needles distributed through the Needle Exchange Program. These indicators all speak to a sustained, perhaps increasing, need in our community: for food, shelter, or a variety of other supports. It is not surprising then, to see that need reflected in other service areas as well. This section looks at just a few of the many service providers who continued to see a demand for services in 2017.

In 2017, Fresh Start Services for Women assisted **285** new clients

- **31%** disclosed that they are living with an addiction and/or mental illness
- The **majority** reported that they have experienced homelessness, intimate partner violence, sexual assault, or other traumatic incidents.

Fresh Start Services for Women / YWCA / Elizabeth Fry Society

When the Elizabeth Fry Society of Saint John, Fresh Start Services for Women, and YWCA came together to co-locate a year ago, we united with a collective vision: to enhance our services by providing them in a more convenient and accessible 'one-stop shop' format, and to create a place where women in our community would feel safe, supported, and valued. Although we each carry a unique mandate, we possess a common philosophy based on anti-oppressive, feminist, harm reduction, and holistic principles and a shared passion for women's equity and equality.

Our work becomes more and more collaborative each day. A coordinated intake utilizing the SPDAT (Service Prioritization Decision Assistance Tool) has been implemented, streamlining the process for our clients to attain assistance. We have also teamed up on several programs and countless cases. Fresh Start and YWCA are currently taking steps toward merging into one agency, and though E Fry remains a distinct entity, we identify ourselves as sister agencies within a collective and actively engage in all decision-making together. That being said, we recognize that a greater sense of collaboration in our community is essential; nothing can be accomplished if we continue to operate in silos. We hope to deepen our relationships with other like-minded and women-focused agencies, and are excited for the possibilities that the future has in store for us.

Finally, we would like to acknowledge our incredible colleague, Lois Merritt. Her dedication to helping women and families experiencing or at risk of homelessness is an inspiration to all of us. She has been bravely battling cancer over the course of this past year, and we are truly in awe of the strength that she has exemplified. Her spirit is a driving force behind everything that we do, and we look forward to welcoming her back.

- Katie Stevens, Fresh Start Services for Women

Safe Harbour House



In March of 2017, Safe Harbour House - operated by Partners for Youth Inc. - opened its doors. Providing transitional programming support for homeless youth, the ultimate goal of the house is to provide residents with a supportive environment and offer them programming to help boost self-efficacy and equip them for independent living. To accomplish this goal, Safe Harbour House relies on a client-centered approach in which residents are guided to develop a road map for their time there. Such plans generally include components related to career guidance, life skills development, building supportive relationships, and healthy living. The length of each resident's stay at Safe Harbour House can vary, as it operates under a philosophy that values impact over strict time constraints. The duration of each resident's stay is based on their needs, their level of readiness to transition to independent living, and their financial stability.

For more information on Safe Harbour House, visit www.partnersforyouth.ca

The Salvation Army

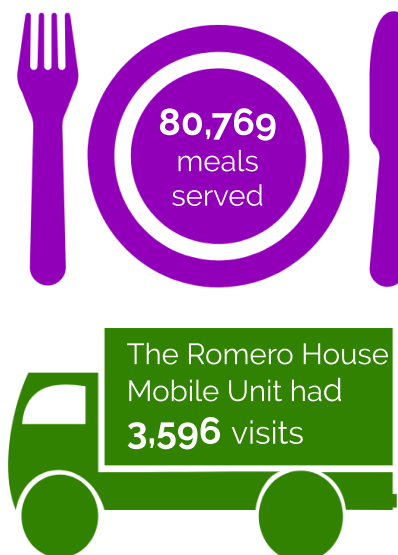


Giving Hope Today

The Salvation Army has had a presence in the City of Saint John since 1885 and, from 1982 until 2014, operated the Centre of Hope Homeless Shelter in the city's South End. But while residential services are no longer part of the agency's mandate, it continues to offer a variety of support services to homeless or at-risk individuals in Saint John. The Hope Cafe, for example, serves meals to approximately 65 individuals daily, and their advocacy services assist individuals in finding housing. In 2017, the Salvation Army directly assisted 49 households in finding accommodations. It also provided financial assistance with rent payments for 20 households, affecting 35 people. 18 pillow beds were distributed to individuals who were sleeping rough, and the agency provided 16 beds to those who were exiting homelessness and entering housing.

Romero House

Since being established in 1982, Romero House has served over one million meals to Saint John residents. But according to Executive Director, Evelyn McNulty, they have never seen a greater level of need than now. In 2017 Romero House served 80,769 meals - and while the soup kitchen is likely their most well known service, they have expanded over the years to include a number of others as well, including emergency food orders, outreach, and a health centre each Tuesday. As of December 2017, the Romero House Clothing Room had 4,033 registered households with 5,094 visits throughout the year. Their mobile service, which provides hot drinks and warm clothing through the winter months, had 3,596 visits. And a program to provide lunch or an afternoon snack for students saw 3,641 drop-ins.



Community Resources

Abuse/Assault

Emergency.....	911
Domestic Violence Outreach.....	632-5616
Fundy Region Transition House (for women).....	466-4485
Hestia House (for women).....	634-7570
RCMP (Hampton).....	832-5566
RCMP (St. George).....	755-1130
Rothsay Regional Police.....	847-6300
Saint John Police Force.....	648-3333
Social Development (Govt of NB).....	1-866-441-4340
Sussex Vale Transition House (for women).....	433-6999

Addictions

Alcoholics Anonymous.....	650-3114
Gambling Help Line.....	1-800-461-1234
Narcotics Anonymous.....	1-800-564-0228
Portage (residential program for youth with drug dependencies).....	1-888-735-9800/839-1200
Ridgewood Addiction Services.....	674-4300
Sophia Recovery Centre (non-residential care for women recovering from addictions).....	633-8783

Clothing/Food/Meals

West Side

Guy's Frenchy's Family Clothing Outlets.....	635-8944
West Side Food Bank.....	635-1060

East Side

Lakewood Headstart Association (food, clothing).....	696-6164
Saint John East Food Bank.....	633-8298
Value Village.....	696-5301

City Centre/South End

Community Food Basket of Saint John.....	652-2707
Outflow.....	658-1344
Romero House.....	642-7447
Salvation Army (Hope Cafe).....	634-1633
St. Vincent de Paul.....	634- 3097
Teen Resource Centre (youth).....	638-2372
Food Bank.....	634-7403

North End

Rivercross.....	642-8060
ONE Change.....	635-2035

Grand Bay-Westfield

River Valley Food Bank.....	738-2088
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Kennebecasis Valley

Kennebecasis Valley Food Basket.....	847-5854
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Sussex

Freddy's New Frenchys.....	433-8210
Sussex Sharing Club.....	433-6047

Help Lines

CHIMO Suicide Crisis Line (24/7).....	1-800-667-5005
Kids Help Phone.....	1-800-668-6868
Mobile Mental Health Crisis Service.....	1-888-811-3664
Emergencies (Police/Fire/Ambulance).....	911

Employment/ Life Skills Training

Coverdale Centre for Women.....	634-1649
GED Information: Saint John.....	658-6701
Sussex.....	433-6109

Job Bank.....	1-888-434-7070
John Howard Society.....	657-5547
Key Industries.....	634-6715
NBCC (Continuing Education).....	658-6600
ONE Change (North End).....	635-2035
Options Outreach Employment.....	652-3977
Saint John Learning Exchange.....	648-0202
Anglophone School District	
Hampton Education Centre.....	832-6143
SJ Education Centre.....	658-5300
St. Stephen.....	466-7300
Teen Resource Centre (TRC).....	638-2372
Service Canada.....	1-800-622-6232
YMCA.....	693-9622
YWCA.....	608-3112
The Work Room.....	1-855-412-3330
Simonds High.....	643-7422
Agar Place.....	658-5580
KVHS.....	848-6693

Financial Assistance/Social Assistance

Social Development NB.....	1-866-441-4340
Student Loans NB.....	1-800-667-5626
Canada.....	1-888-815-4514

Gay/Lesbian/Bisexual/Transgender

PFLAG.....	1-888-530-6777 ext. 555 /609-3434
Saint John Pride.....	333-2224
Trans Lifeline.....	1-877-330-6366
UBU Atlantic (Transgender support).....	sound@nbnbt.nb.ca

Health Clinics/Hospitals

After Hours/Walk-in Clinics	
Crown Street Medical Clinic.....	635-2273
KV Medical Clinic.....	849-2273
Millidgeville.....	642-3627
West Side Medical Clinic.....	693-2273
KV Oasis Youth Centre.....	847-2383
Market Place Wellness Centre.....	674-4335
North End Wellness Centre.....	649-2704
Saint John Regional Hospital.....	648-6000
St. Joseph's Hospital, Walk-in/Urgent care.....	632-5555
Telecare Nurses (24 hours).....	811

HIV/AIDS

AIDS Saint John.....	652-2437
HIV Anonymous Testing.....	632-5782
RECAP (Hep C).....	657-5699
Sexual Health Centre.....	658-3998

Mental Health/Counselling

Canadian Mental Health Association.....	633-1705
Community Mental Health Services.....	658-3737
Family Plus/Life Solutions.....	634-8295
Gentle Path Counselling.....	652-7284
Mobile Mental Health Crisis Service.....	1-888-811-3664
PEER SJ (Drop-In).....	658-5374

Needle Exchange

AIDS Saint John.....	652-2437
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Pregnancy/Parenting

Clinic 554 (All Inclusive).....	1-855-978-5434
Family Resource Centre.....	633-2182
First Steps Housing Project (16-29).....	693-2228
Mother/Baby Clinic.....	648-6379
Motherisk. Helpline.....	1-877-439-2744
Postnatal Breastfeeding Class.....	648-6379
Public Health.....	658-2454

Sex Work Support

Coverdale Centre.....	634-1649
Fresh Start Services for Women.....	638-1409
Sex Trade Action Committee/AIDS SJ.....	652-2437
YWCA.....	608-3112

Sexual Health/Birth Control/Condoms

STI Information Line.....	1-877-784-1010
AIDS Saint John.....	652-2437
Sexual Health Centre/Public Health Office:	
Saint John.....	658-3998
Sussex.....	432-2691

Shelters/Housing/VAW Transition House

Coverdale (Females only).....	634-1649
First Steps Housing Project (Females 16-29).....	693-2228
Fundy Region Transition House.....	466-4485
Hestia House (Females only).....	634-7570
Housing Alternatives Inc.....	632-9393
One L.I.F.E. (transition housing for youth).....	635-2035
Outflow Men's Shelter (males only).....	658-1344
Safe Harbour. House.(Youth 16-19).....	642-6647
Social Development NB.....	1-866-441-4340
After Hours.....	1-800-442-9799
Sussex Vale Transition House (females only).....	433-6999

Support Services

Coverdale Centre.....	634-1649
Drop-in - Teen Resource Centre (TRC).....	632-5531
Elizabeth Fry Society.....	635-8851
Fresh Start Services.....	638-1409
John Howard Society.....	657-5547
RiverCross Church Outreach Programs.....	642-8060
Shower, Laundry, etc. - Oasis Room (Youth).....	632-5531

Other

Birth Certificate.....	1-888-762-8600
Employment Insurance Inquiries.....	1-800-206-7218
GST Credit (Cheques).....	1-800-959-1953
Income Tax Assistance:	
P.U.L.S.E.....	632-6807
Salvation Army.....	634-1633
Legal Aid.....	633-6030
Medicare Card.....	1-888-762-8600
NB Rentalsman.....	1-888-762-8600
Saint John Transit.....	658-4700

References

- Canada. 2016 *Highlights of the National Shelter Study 2005-2014*.
file:///C:/Users/User/Downloads/PDF_FINAL_HPS_highlight_En.pdf (April 10, 2018)
- CMHC. 2017. *Rental Market Report: Saint John CMA*. 2017
https://www.cmhc-schl.gc.ca/odpub/esub/64439/64439_2016_A01.pdf?lang=en
- Gaetz, Stephen, Erin Dej, Tim Richter, & Melanie Redman. 2016. *The State of Homelessness in Canada 2016*. Toronto: Canadian Observatory on Homelessness Press
http://homelesshub.ca/sites/default/files/SOHC16_final_20Oct2016.pdf
- Statistics Canada. 2017. *Housing in Canada: Key results from the 2016 Census*. Component of Statistics Canada Catalogue no. 11-001-X. Ottawa.
www.statcan.gc.ca/daily-quotidien/171025/dq171025c-eng.pdf (April 5, 2018).
- Thistle, J. 2017. *Indigenous Definition of Homelessness in Canada*. Toronto: Canadian Observatory on Homelessness Press.

Prepared by Michael MacKenzie with the Human Development Council, a local social planning council that coordinates and promotes social development in Greater Saint John.

Copies of the report are available from:

Human Development Council

www.sjhdc.ca

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