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The Social and Financial Cost of Non-Permanent Shelter Systems for Addressing Homelessness

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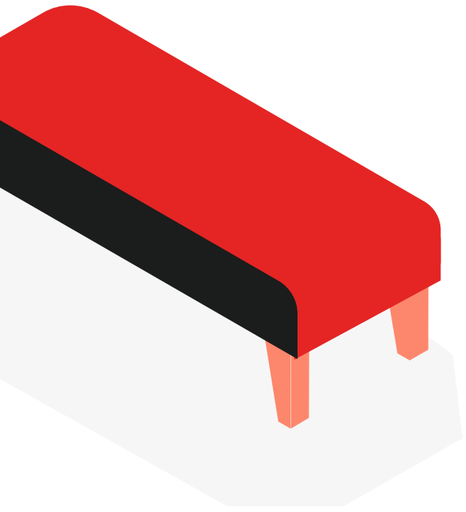


Executive Summary

Across North America, municipalities are turning to temporary shelters to address the homelessness crisis. Upper levels of government have largely abandoned building housing, relying instead on market forces and limited regulatory frameworks. The end of significant government investment in community and social housing, and deregulation of the rental market, have created an affordability crisis affecting a large percentage of the population. While mental health, substance use, and poverty are often cited as the main challenges, research points to housing market conditions as the primary driver of homelessness.

In the aftermath of the COVID-19 pandemic, visible homelessness has increased, with many people needing intensive supports to regain stable housing. *Housing First*, which prioritizes permanent housing, is the only evidence-based strategy shown to break the cycle of chronic homelessness. Unfortunately, its effectiveness is limited by a lack of affordable housing and funded social supports, resulting in the model being underused.

Expansion of Non-Permanent Shelter Systems

In response to public pressure, municipalities have increased their investment in temporary solutions such as tiny shelter communities often built in places no one else would want to live[RE1.1][CA1.2]. While such systems offer immediate relief, there is little evidence suggesting they are effective in helping individuals transition to stable housing. In fact, early findings suggest non-permanent shelter systems can perpetuate homelessness and divert resources from more effective, long-term solutions.

Role and Risks of Emergency Shelters

This report does not advocate for the elimination of emergency shelters; they play a critical role in harm reduction during crises and for populations requiring higher levels of safety, such as women fleeing intimate partner violence and vulnerable youth. But without a strategic shift toward permanent housing, so-called temporary shelters risk becoming a permanent part of how communities address homelessness.

The expansion of temporary shelters is often justified by a desire to “do something,” but this approach disguises the social and economic costs. While tiny shelters often have lower upfront costs, they are more expensive to maintain. By contrast, permanent housing becomes less expensive over time and is a valuable community asset. To illustrate the cost benefits to permanent housing: a U.K. study in 2024 of their *Housing First* pilot showed an average of £15,880 ($29,197 CAD) per year per person in benefits to the system and individuals. Additionally, the first 12 years of *Housing First* in Finland showed a savings of €40 million ($64,473,261 CAD).

Current State of Homelessness and Housing Needs in Ontario

In 2024, Ontario recorded over 81,500 individuals experiencing homelessness—a 25% increase since 2022. More than half of cases are chronic, highlighting systemic failures in the housing, healthcare, mental health, and justice systems. The numbers are stark: the Canada Mortgage and Housing Corporation estimates that up to 480,000 new units are needed by 2035 to restore affordability for all income levels. Without significant action, Ontario could see nearly 300,000 people without stable housing by 2030.

Of the 27,138 shelter and housing spaces reported in the province, the majority are emergency shelter beds (65.2%), with only 21.6% categorized as supportive housing. Currently, there is only one supportive housing space for every 14 people experiencing homelessness in Ontario, reflecting a severe mismatch between need and available resources.

Local Data: Perth-Huron

Non-profit agencies in Stratford provided supportive services to 734 people in 2025. Thirty-nine individuals were unable to secure housing due to a lack of available units, and an additional

28 required fully supportive housing. In July 2025, at least 148 households in Huron County were experiencing homelessness, with 126 classified as chronic. Similar patterns were seen in June 2025 across Stratford, St. Marys and Perth County, where 144 households were experiencing homelessness and 131 were considered chronic.

Recommendations and Path Forward

- Reaffirm *Housing First* as an evidence-based response to chronic homelessness and ensure it becomes central to local and regional policy decisions.
- Prioritize developing permanent housing over further investment in emergency and/or temporary shelter models.
- Redirect funding from short-term responses to long-term housing investments that provide stability and better outcomes for vulnerable residents.
- Advance and fund the expansion of supportive housing projects, including the 10 proposed units at the Gibbons Street Project in Goderich and the 12 proposed units at 398 Erie Street in Stratford.
- Encourage community partners, funders, and policymakers to support and advocate for permanent housing projects—including those advanced by United Way Perth-Huron's United Housing initiative—as a sustainable solution to homelessness in Perth-Huron.

Conclusion

The continued expansion of non-permanent shelter systems in lieu of permanent housing solutions is a costly and ineffective approach to homelessness. The evidence calls for a strategic pivot toward the *Housing First* model and substantial investment in affordable and supportive housing to achieve long-term reductions in homelessness. While emergency shelters remain necessary in certain situations, they cannot replace a comprehensive, permanent solution rooted in evidence and system change. Ultimately, communities and policymakers must choose between the status quo and investing in strategies that deliver lasting benefits.

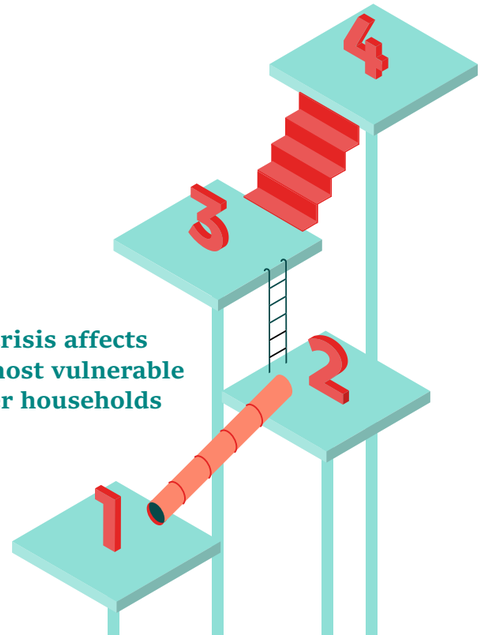
Municipalities all over North America are straining under the weight of a *homelessness crisis* that is decades in the making and largely the doing of upper levels of government.

What do we, as investors in our community, really want to accomplish? Do we want quick solutions that will cause our community more harm in the future, or do we want long-term investments that create stable, safe, and supported homes for generations to come?

Introduction

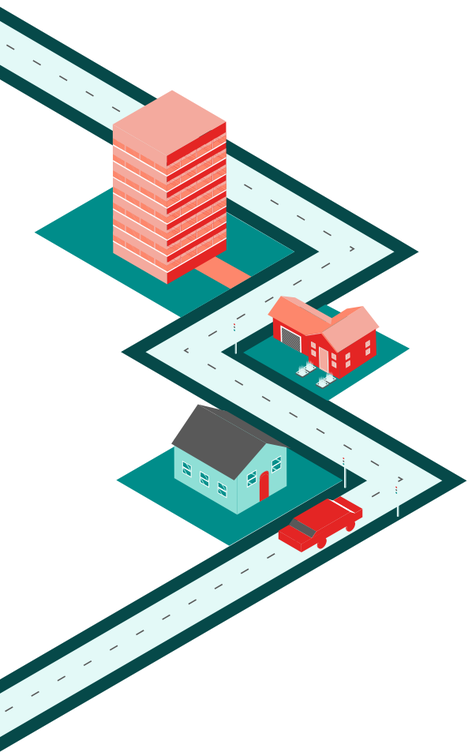
Municipalities all over North America are straining under the weight of a homelessness crisis that is decades in the making and largely the doing of upper levels of government. The crisis is mainly attributed to a failure to enact national and regional housing policies that are data-informed and community-driven. Successive governments have played only a minor role in creating housing, relying heavily on market forces to drive housing starts and affordability. Housing policy and legislation have been largely centred on the Planning Act and Official Plans and Zoning Regulations. The cessation of significant government funding for new community and social housing units, coupled with deregulation of the rental housing market, has resulted in an affordability crisis that begins with the most vulnerable renter households and ends far up the income scale at the middle class. Colburn and Aldern state that *housing market conditions* offer a more convincing explanation for homelessness than mental health, drug use, poverty, weather, low-income mobility, or public generosity.[1] Visible homelessness and the number of individuals sleeping rough have grown since the pandemic. Single precipitating life events that in the past would have led to short-lived episodic homelessness are compounded by the effects of prolonged homelessness and result in a staggering number of people requiring intensive support to maintain stable housing. *Housing First* is one of the only comprehensive strategies that is effective in helping break the cycle leading to chronic and high-acuity homelessness. Unfortunately, in the absence of both sufficient affordable housing and social supports, *Housing First*, as a philosophy and intervention, remains widely underused.

Housing market conditions offer a more convincing explanation for homelessness than mental health, drug use, poverty, weather, low-income mobility, or public generosity



The crisis affects the most vulnerable renter households first

Enter well-meaning activists, exhausted municipal social service staff, and an electorate content to do “something” as long as it doesn’t cost too much, give too much (for fear of enabling), or require anything to be built close to anything or anyone. The result is a growing network of shelter systems that are promoted as temporary and transitional but are rapidly becoming an entrenched part of our homelessness and housing strategy.[2] We are doing “something,” and it may feel good, but that should not cloud our ability to see these systems as evidence-free interventions, not workable long-term solutions. Local and national discourse is celebrating the addition



of new shelter beds; however, the question we need to ask is, "Do we have the right amount and type of options available across the housing spectrum to meet local needs?" In this paper, we examine a specific part of the growing shelter system—tiny shelters—and challenge the notion that these are either a short- or long-term solution. Like food banks and emergency shelters before them, tiny shelter communities are now at risk of becoming permanent. In the long run, they cost significantly more than building permanent housing with associated supportive services. They are supported by some activists and people with lived experience, but there is little evidence they are effective as transitional housing. Instead, early evidence suggests tiny shelters perpetuate a cycle of homelessness. Like shelters before them, they do not have evidence supporting their use on the pathway to stable housing.

Early evidence suggests tiny shelters perpetuate a cycle of homelessness.

This paper is not advocating for the complete elimination of existing emergency shelter spaces, and we are not asserting that these interventions are without value. We are in a crisis with the need "right now" for interventions that reduce harm. There will also continue to be the need for emergency shelter spaces for special populations requiring a higher level of safety including women escaping intimate partner violence and homeless youth. However, there is a long-term risk in the continued expansion of emergency temporary shelter spaces. In the absence of a concerted effort to shift resources to *Housing First* or another permanent supported housing model, the expansion of temporary shelters perpetuates the cycle of homelessness. There is a choice between continued accrual of costs and harms with the status quo or investment in a system where societal and individual benefits accrue over time. Finland has demonstrated that investments in Housing First support the gradual dismantling of emergency temporary shelter systems in favour of a more effective model. [3] [4]

Figure 1: Housing Spectrum Terminology[5]

Home Ownership	**The majority of households in Ontario own their home**
Private Market Rental	**Comprises the majority of attainable housing in Ontario**
Rent Supports	**Government funded payments that bridge the gap between household income and market rents**
Social Housing	**Housing developed with government funding**
Supportive Housing	**Housing with support services to help people live independently**
Provisionally Accommodated	**Staying temporarily with friends/family, institutional housing (e.g., hospitals or jails)**
Emergency Sheltered	**Short-term stays in shelters, motels, and domestic violence shelters**
Unsheltered	**Sleeping outdoors, makeshift shelters in public spaces, vehicles, etc.**

Figure 2: Common Supportive Housing Service Offerings

The Need for Permanent Supportive Housing

In 2024, an estimated 81,515 Ontarians experienced known homelessness, a 25% increase from 2022.[6] Chronic homelessness cases account for more than half of all known homelessness cases.[7] These significant increases demonstrate systemic failure beyond housing, particularly gaps in the healthcare, mental health, and justice systems.[8] Canada's housing shortage, estimated by CMHC, requires 430,000 to 480,000 units by 2035 to restore affordability *for all income levels.* [9] If no significant intervening action is taken, Ontario could see up to 294,266 people without stable housing by 2030.[10] Of the existing 27,138 spaces reported by service managers, 65.2% of chronic homelessness cases are in emergency shelters, 13% are in transitional housing, and 21.6% are in supportive housing. Currently in Ontario there is only one supportive housing space available for every 14 people experiencing homelessness. [11]

There is an urgent need to provide supportive housing in Perth-Huron. The non-profit agencies in Stratford supporting a total of 734 individuals reported that 39 clients who requested housing could not be assisted due to a lack of housing. Meanwhile, 28 required fully supportive housing with wrap-around services.[12]

In July 2025, at least 148 households (186 individuals) in Huron County were experiencing homelessness. Of those, 126 had been chronically homeless for six months or more in the last year. In June 2025, 144 households were experiencing homelessness in Stratford, St. Marys, and Perth County, with 131 of those experiencing chronic homelessness. In addition to supportive housing, there is a significant need for affordable housing. The Huron County community housing waitlist was 545 as of April 2025 and the Stratford, St. Marys, and Perth County community housing waitlist was 597 as of March 2025.[13]

There is an urgent need to provide supportive housing in Perth-Huron.

In addition to the units in Table 1, the Consolidated Municipal Service Managers (CMSM) manage rent supplement and portable benefit programs that are used by individuals and families to offset the cost of both market and community housing.

The longstanding shortage of affordable housing forces people to rely on shelter systems, tiny shelters, transitional housing programs, and other interventions longer than intended. When relied upon for more than short periods of time, these interventions have negative impacts that accumulate and compound over time. To mitigate the net negative impacts, a good model to follow is the "one needs six" theory.[14] Meaning, to ensure a correct mix of housing to accommodate safe and supported transitions out of homelessness, for every one shelter bed added, there needs to be six permanent supportive housing resources put in place. This is to allow for one shelter transition or turnover to occur every 60 days.

Evidence shows that the longer someone experiences homelessness, the harder it is for them to be stably housed.[15] Layered on top of the shortage of affordable housing is a growing need for supportive housing for people experiencing homelessness who have high acuity and require intensive support services to attain and retain housing. This type of housing requires social and medical services and depends on coordinated supports across multiple government ministries.[16] Addressing gaps in transitional and supportive housing programs through investment by the provincial government is essential to breaking the cycle of chronic homelessness.[17]

The only long-term solution to homelessness is affordable housing and wrap-around supports for those who need them. Not only is this a more compassionate approach, it is also more effective, costs significantly less, and has a significant return on investment through reduction of costly emergency and healthcare services.

Table 1: Shelters vs Permanent & Need of Affordable Housing in Perth-Huron

Consolidated Municipal Service Manager	Municipal Region	Emergency Shelter eg. Motel, Transitional Shelter, Shelter	Community & Social Housing eg. Supportive, Affordable, RGI	Waitlist for Community Housing as of April 2025
City of Stratford (includes St,Marys & Perth County)	Stratford, St. Marys & Perth County	117 beds (March 2025)[18]	1078[19]	597
	Perth County Only		417[20]	
	Huron County	Heart to Home Bridge Housing: 14 beds Huron Turning Point: 6 beds Artemis Huron: 10 beds	470[21]	545
Total		**147**	**1,548**	**1,142**

Tiny Shelters as Emergency and Transitional Shelter

What?

"In its initial sense," the Homeless Hub says, "a shelter is a place where one goes to avoid danger, an inconvenience, or a place where people who have no place else to go can gather;" a temporary place to avoid natural occurrences, such as the rain, the wind, the cold, or the heat.[22] In the context of homelessness, "home" refers to a place that provides physical safety and shelter, along with social and emotional security, and a sense of control, privacy, and independence.[23] It involves more than just a physical structure, encompassing the ability to maintain meaningful relationships, have roots, a sense of belonging, and control over one's living space. A shelter is not the same as a home.

There are many kinds of shelter systems, all with their own unique opportunities and limitations. In alignment with recent local and national discourse, this report will focus on the challenges of using tiny shelters as transitional and permanent housing. Tiny shelters may be shelters, but they are, by definition, not homes. *Note: There are tiny home developments that can be categorized as homes, however these are completely self-contained living spaces that include washroom and kitchen facilities, and residents have security of tenure that is not typically found in tiny shelter models.* This report will focus on 11 tiny shelter communities: nine in Ontario (Peterborough, Kitchener, Waterloo, Kingston, Chatham-Kent, Leeds-Granville, Thunder Bay, London, and Hamilton), and two in Atlantic Canada (Fredericton and Saint John, New Brunswick).

Tiny shelters may be shelters, but they are, by definition, not homes.

A proposed Hamilton project has stated the following as requirements for their furnishings: electricity, Wi-Fi (if possible), not too close to neighbourhoods, a lock and key, couples and pets permitted, insulated, and eight by 10 feet.[24] In Peterborough, a gated setting offers a bathroom unit (located outside the shelters themselves), 24/7 security guards, an indoor community space with a kitchenette, and laundry.[25] In Kingston, *Our Livable Solutions* states that the shelters are eight by 12 feet, insulated and wired, have indoor and outdoor lights, a heater, an air exchanger, and a smoke/CO2 detector. Their bathrooms are shared between all units.[26] At Fredericton's *12 Neighbours*, each tiny home is 200 square feet and includes a bathroom, a kitchen, sleeping space for two people, and living and dining spaces.[27]

Municipalities use a range of terms for similar shelter models: Chatham-Kent refers to its shelters as "transitional cabins"; Sarnia and Hamilton use "tiny homes"; Thunder Bay, "temporary village"; Waterloo, "hybrid shelter"; Leeds, "supportive cabins"; Kingston, "sleeping cabins"; Kitchener, *A Better Tent City* (ABTC); and London, "micro-shelters." Language shapes perception and it is important to point out that euphemistic project titles may lead people to conclusions that are not evidence-informed and in some instances misleading. The stated purpose of most tiny shelter projects is to serve as a transitional shelter and not permanent housing. As defined by the Homeless Hub of Canada, transitional housing is, "temporary housing that acts as a stopgap measure between homelessness and permanent housing."[28] For these shelters to be considered transitional, there must be regular turnover within these communities (every 60 days is the transition time considered for "one needs six").[29]

A couple moving into the Fredericton *12 Neighbours* project said it gave them, "hope... to start a new journey, to start a new chapter."[30] Although it's a great first step for them, Melissa and her husband moved in two-and-a-half years before the sourced article was published. The Waterloo project reported that 19 people (out of 50 units) transitioned to supportive housing in 2024.[31] ABTC has had recent reports of overcrowding due to a lack of turnover.[32]

These examples display a problematic turn from temporary and transitional emergency shelter to permanent, long-term shelter under conditions that by any normative standard in North America is not considered adequate housing.

Figure 3: Outdoor Shelters at Erbs Road[33]

Where?

The most recognizable and relevant example for our area is in Waterloo. The Erbs Road Waterloo project is on the outskirts of the municipality. It sits before the first roundabout, just in front of the city's waste management facilities. Above is a bird's-eye view of the site.

What do you see? Take a moment. Here's what we see: chain link fences, no sidewalk on the main road, next to a highway, at the edge of the city, no public transit, next to a landfill, no underground linear services (see below for new costs associated with sewer lines), no green space, etc. This project's surroundings send a message. By isolating the "problem" and pushing the residents and their struggles out of sight, this solution eases our conscience. But solving the aesthetic issue does not mean we have solved the systemic issue. As Federal Housing Advocate Marie-Josée Houle said, "Just because people experiencing homelessness are no longer visibly experiencing homelessness to the public, [it] doesn't mean that they are not vulnerable anymore or that the issue is solved."[34]

Many residents at tiny shelter projects are grateful for the shelter, and, to be fair, there are advantages over sleeping in tents. However, there are serious limitations and not everyone views these projects as positive. Some prospective tiny shelter residents in the Hamilton region were skeptical: "I think, you know, that's one of the worst ideas, look at it in the sense that we have to share accommodations, we have to share a kitchen, we have to share a bathroom, and they're little sheds."[35] These communities often also have restrictions. The Hamilton project, for example, is the first to accept and be tailored to couples and pets but then restricts access for singles. A prospective resident notes,

"Just because people experiencing homelessness are no longer visibly experiencing homelessness to the public, [it] doesn't mean that they are not vulnerable anymore or that the issue is solved."

"They want to put us down in this Tiffany Barton area, and it's contaminated and it's basically for couples and people with dogs. For me as a single person, they want to force us into a shelter."[36] At ABTC in Kitchener, there has been growing violence as well as safety concerns due to overcrowding. In response, the board invoked a total visitor ban (couples were exempted). "I don't think it's right on such short notice [with] no help [to] find a solution," a resident said.[37] Low-barrier tiny shelter projects often encounter issues as they fill up and become crowded. Keeping up with on-site services and reducing conflict becomes challenging.[38]

The placement of these shelters is heavily influenced by the community. The public's reaction to their proximity to schools, community centres, parks, and businesses confirms a negative bias towards these projects. For example, one of the site requirements for the Hamilton tiny shelter project included "not too close to neighbourhoods."[39] The resulting site for the Hamilton project was on contaminated land and not suitable for residential use, increasing costs significantly.[40] In 2023, there was an entire Reddit page dedicated to the Kingston community's discussion of the *Our Livable Solution* site.

Low-barrier tiny shelter projects often encounter issues as they fill up and become crowded. Keeping up with on-site services and reducing conflict becomes challenging.

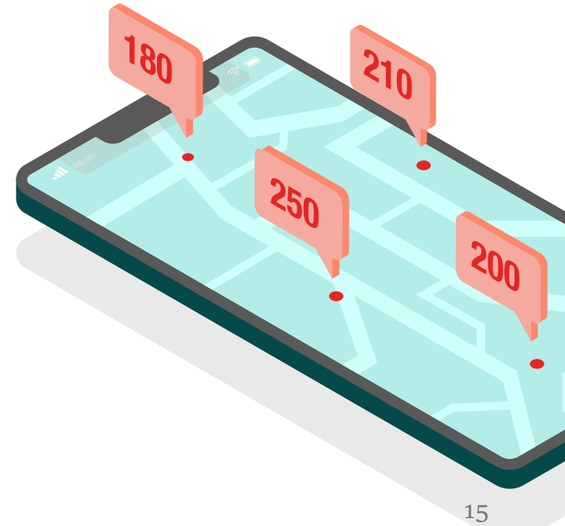
One member stated, "Like normal, everyone wants [to do something], as long as it's not in their area."[41] During a press availability for the newly opened Tiffany-Barton tiny shelters, Hamilton Mayor Andrea Horwath said that the shelters are not only impacting their residents, they are impacting "everyday Hamiltonians, their parks, their streets, their sense of community, their sense of safety."[42]

The recent announcement of a tiny shelter project in London further demonstrates the challenge of where to place them. South of Highway 401 in a farmer's field is about as remote a location as can be identified for a city with a population of 420,000.[43]

One cannot escape the fact that the choice of location for many of these projects, literally on contaminated brownfield land or at the physical margins of communities, reinforces the social marginalization and stigmatization of people who find themselves without stable and permanent housing.

CBC Interview:
March 31, 2026. Tim Magee is one of the residents at London's micro-modular housing site and says he feels isolated living on the site. *London Morning* host Andrew Brown sat down with Tim Magee to find out what life is like in a micro-modular home.

https://www.cbc.ca/listen/live-radio/1-158-london-morning/clip/16206224-micro-modular-housing-resident-speaks?onboarding=false



How Much?

Hamilton's original budget for their tiny shelter project called for $2.8 million in capital to support 80 people (two per shelter). That number ballooned to $7.9 million, $5.1 million over budget due in large part to remediation of contaminated land and the units not meeting code for electrical.[44] [45] *12 Neighbours* (Fredericton), an organization founded by millionaire Marcel LeBrun, received more than $13 million in federal and provincial funding to expand the existing *12 Neighbours* project from 36 homes to 96.[46] Each of these units is 200 square feet and unlike most tiny shelters, there is a washroom and kitchenette in each unit. The costs associated with this project amount to $1,000 per square foot, which is significantly higher than traditional housing builds. They were also awarded $3.9 million to build 28 tiny shelters (no washroom in these units) in Saint John, New Brunswick.[47]

The purchase and construction of the units themselves is not the only cost. Extending services to the sites can be very costly given the remote locations. For example, in 2024 staff estimated $570,000 to build a sewage line for the Waterloo Erbs Road hybrid shelter property, and another $2.6 million to operate in 2025, amounting to $4,333 per month per unit.[48]

Permanent housing, with supports, has initial capital costs that are higher than the tiny shelters, however there is better value [...]

Table 2 compares several tiny shelter projects with available/projected costs. These numbers are based largely on media reports and information available on service provider websites. Local examples of recent and proposed supportive and affordable housing projects are shown in **Table 3**. If one takes a narrow view of the capital costs of the shelter projects, it may seem like a cost-effective intervention. However, the annual operating costs very quickly dwarf the initial capital outlay. In sharp contrast, Dunn House in Toronto is an example of a permanent supportive housing development. Even with the projected yearly operating costs for on-site support services for residents, there is a clear investment advantage when compared to tiny shelter projects. Most of the tiny shelters are reported to be temporary in nature and have no long-term asset value for the municipalities. Unlike permanent housing, the maintenance, repair, and replacement liability of tiny shelters does not have a corresponding asset value. Permanent housing, with supports, has initial capital costs that are higher than the tiny shelters. However, there is better value for money in terms of long-term asset value, annual operating costs, and resident outcomes. The UK Government pilot studies of *Housing First* and the Finnish cost benefit analysis of *Housing First* both demonstrate that the benefits of permanent supportive housing continue to accrue over time and initial higher costs are recovered and surpassed.[49] In the first 12 years of *Housing First* in Finland they spent €310 million and saved €350 million.[50]

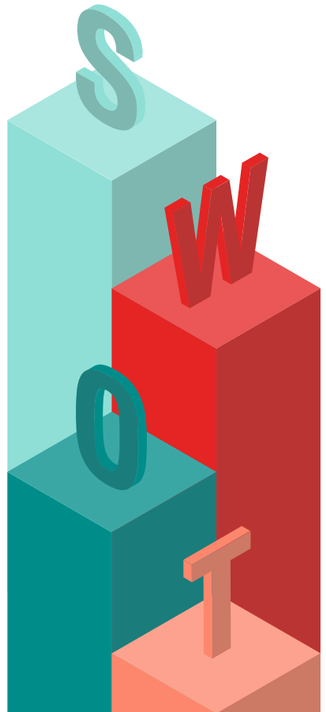
Table 2: Tiny Shelter Cost Comparison – Ontario

City/Project	# of Units	Capital	Annual	Monthly	Nightly
Waterloo Erbs Road Hybrid Shelter Sewage upgrade only[51] [52] (Not included in avg.)	50	$11,400			
Waterloo Erbs Road Hybrid Shelter[53] [54]	50	$48,000+ $11,400 (above) =$59,400	$52,000	$4,333	$142
Hamilton[55]	40	$98,750	$48,750	$4,063	$134
Kingston's Our Livable Solutions*[56]	10	$18,500	$21,600	$1,800	$59
Thunder Bay Kam River**[57]	100	$50,000 (capped)	$15,000 (capped)	$1,250	$41
Peterborough[58]	50	$50,000	$38,000	$3,166	$104
Chatham-Kent[59]	50	$86,373	$44,000	$3,666	$121
A Better Tent City Kitchener (ABTC)***[60]	24	$7,500 (capped)	$41,667	$3,472	$114
Leeds-Greenville Supportive Cabins[61]	24	$45,970	$41,667 (est.)	$4,249	$139
London[62]	60	$55,000	$57,000	$4,800	$158
Durham Region[63]	50	$80,000–$90,000 ($85K for avg)	$34,000–$44,000 ($39K for avg)	$3,250	$107
Average		**$55,650**	**$40,800**	**$3,400**	**$112**
Range		**$7,500–$98,750**	**$15,000–$57,000**	**$1,250–$4,800**	**$41–$158**

*Kingston was unique in that it only operated from January through April. The capital costs were low because they lacked bathrooms and running water. The yearly operating costs were low because no supportive services were provided and food costs were entirely the responsibility of the residents.
**Thunder Bay Kam River is the same as above. They are sleeping shelters only.
***ABTC was granted $180K towards capital costs from the Region of Waterloo; the land at the original location was donated.

Table 3: Permanent Housing – Local Affordable & Supportive Cost Comparison

Project	Housing Type	# of Units	Capital Cost Per Unit	Annual Costs Per Unit for Supportive Housing Component
Dunn House, Toronto[64] [65]	Permanent Supportive	51	$275K	$48K
Britannia St., Stratford Phase Two[66]	Affordable Rental	27	$360K	N/A
Gibbons Street, Goderich[67]	10 Supportive 30 Affordable Rental	40	$330K	TBD
398 Erie Street, Stratford (proposed)[68]	Supportive Housing	12	$415K Includes commercial space	TBD
Sanders Street, Exeter[69]	Affordable Housing	20	$373K	N/A



The Financial Case for Supportive and Affordable Housing

A 2005 study shows that institutional responses to homelessness (jails, hospitals) cost $66,000 to $120,000 annually, emergency shelters $13,000 to $42,000 annually, supportive and transitional housing $13,000 to $18,000, and affordable housing $5,000 to $8,000 annually.[70] Comparatively, a 2025 study shows psychiatric hospitals costing $378,000, inpatient hospitals $204,000, correctional facilities $132,000, emergency shelters $39,600, and supportive housing $24,000 to $60,000.[71] For chronically homeless individuals who are in the 10% highest cost category "every $10 invested in supportive housing can generate up to $21.72 in cost savings."[72]

This comes from a two-year study comparing a *Housing First* (HF) strategy to Treatment as Usual (TAU).[73] In the same study the overall cost offsets were as follows:

"On average the HF intervention cost $22,257 per person per year for ACT participants and $14,177 per person per year for ICM participants. Over the two-year period after participants entered the study, every $10 invested in HF services resulted in an average savings of $9.60 for high needs/ACT participants and $3.42 for moderate needs/ICM participants. Significant cost savings were realized for the 10 per cent of participants who had the highest costs at study entry. For this group, the intervention cost was $19,582 per person per year on average. Over the two-year period following study entry, every $10 invested in HF services resulted in an average savings of $21.72."[74]

The UK Government reported the outcomes of their *Housing First* pilot studies (2018-2023) in October 2024. They took a novel approach to assessing the costs and benefits of the program. In addition to cost offsets to the system, which most studies on Housing First assess, they included the cost benefits in well-being of the individuals in the pilot.[75] This approach embeds the outcomes to the individuals in the cost-benefit analysis. The report concludes that the *Housing First* pilots "delivered good value for money" and that the benefits would continue to accrue over time with an average of £15,880 per person per year in benefits to system and individuals in the program.

"Every $10 invested in supportive housing can generate up to $21.72 in cost savings."

An initial survey of tiny shelter projects (Table 2) extends our understanding of the financial cost of emergency shelter models. What about the effectiveness in terms of outcomes for individuals? Waterloo Region's report on the effectiveness of their "hybrid shelter" program on Erbs Road stated that these are equivalent to traditional emergency shelter beds in terms of outcomes: "These outcomes are comparable with the averages across the emergency shelter system for this same period."[76]

Adding tiny shelter beds *without* an accompanying commitment to significantly increasing permanent housing pushes the system further into deficit.

Consistent with previous research, diversion of funding from permanent supportive housing and community housing will have a long-term impact on our ability to address homelessness. Adding tiny shelter beds without an accompanying commitment to significantly increasing permanent housing pushes the system further into deficit. Like adding lanes to highways, these emergency measures act as very expensive demand generators. What is alarming is that these tiny shelter projects are proliferating despite a lack of evidence they act as effective transitional housing.

What does evidence tell us about what works? If policy and decision makers are to justify the move to expand temporary shelter systems, they will need to provide evidence this works as well as, or better than, best practice. In healthcare, treatments assessed in clinical studies that demonstrate less efficacy than known treatments are not considered ethical for use, except in rare circumstances. The same standard should apply to homelessness strategies.

Best Practice: *Housing First*

Meta-analyses of permanent supportive housing, income support interventions, and *Housing First* demonstrate strong evidence for housing stability and prevention of homelessness.[77, 78]

Housing First describes an evidence-based approach to ending chronic homelessness. Finland continues to successfully address chronic homelessness using a *Housing First* strategy in concert with increased investments in community housing.[79] In Canada, it has been proven to successfully stabilize veterans, those who struggle with substance use, and those with mental illnesses. Housing in this case is *not* inclusive of shelters, transitional housing, or tiny shelter villages. Housing is inclusive of private market rentals or social housing, with participants having immediate access to their homes and a rent subsidy ensuring no more than 30% of their income is spent on housing.[80] This model includes wrap-around services that provide the support needed to remain stably housed. Housing alone is not sufficient, but it is necessary from the beginning for the success of the model. Here are some examples of successful projects and studies:

The two-year pilot project The Canadian Model for Housing and Support for Veterans Experiencing Homelessness in 2012 was designed to address the needs of Canadian veterans experiencing homelessness. The program employed a *Housing First* approach and provided staff or volunteer resources to each participant. The program revealed promising results of an estimated $536,000 per year (in terms of cost savings) due to reductions in 911 calls and emergency shelter drop-ins.[81]

A study by the Department of Mechanical & Industrial Engineering at the University of Toronto used mathematical modelling to prove the effectiveness of *Housing First*. It showed that a *Housing First* approach to treating chronic homelessness and addiction can minimize healthcare costs and the likelihood of fatal overdoses. The model simulated how 1,000 unhoused people with opioid addictions responded to treatment with and without stable housing. Implementing the housing intervention, reduced overdoses by 11% and fatal overdoses by 9%.[82]

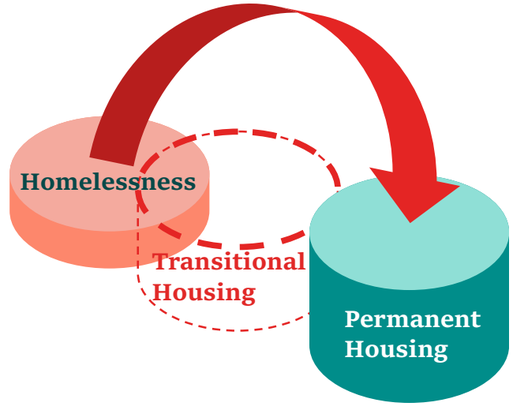
On average, those who are unhoused live 20 years less.[83] A growing body of research demonstrates that homelessness is a healthcare issue and its impact on the healthcare system, emergency rooms, and in-patient beds is significant.[84] A partnership between the University Health Network (UHN) of Toronto, the City of Toronto, and United Way Greater Toronto created Dunn House—Canada's first Social Medicine Housing Initiative. Containing 51 units, Dunn House provides homes for the UHN's most medically and socially complex patients. The project provides wrap-around services and focuses on individuals exiting homelessness. This project has been recognized by scholars, physicians, non-profit entities, and politicians as an innovative model of *Housing First*.[85]

A growing body of research demonstrates that homelessness is a healthcare issue [...]

Early data coming out of the Dunn House Supportive Housing project in Toronto clearly demonstrates the advantage of providing housing and wrap-around services both in terms of financial savings and individual outcomes for people who were previously unhoused.[86] A total of $1.66 million in healthcare savings over the first year coupled with improved health outcomes and housing stability for the 48 residents of Dunn House is just one example of how permanent supportive housing holds the key to addressing the crisis of chronic homelessness.

***Housing First* is an evidence-based, best practice solution to homelessness. Together, we have the tools and the choice to implement *Housing First* within our communities and avoid the entrenchment of shelter systems.**

***Housing First* provides a direct pathway into permanent housing**

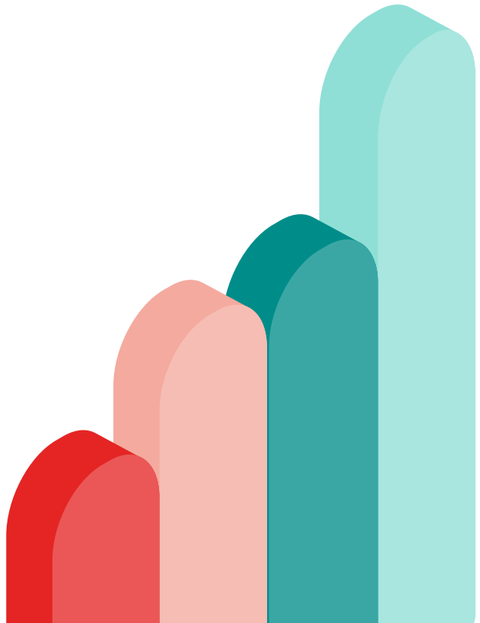


Recommendations

Decision-makers and policymakers should not abandon *Housing First* as a critical evidence-based solution to chronic homelessness. In Perth-Huron, permanent supportive housing is needed, shelters are not. Rather than putting money into emergency shelters and tiny shelters—although undeniably the quickest way to do something—this money should be invested in permanent housing, including a strong focus on supportive housing that addresses a gap in Perth-Huron's "one needs six" ratio. This approach offers a long-term investment into a system that will benefit the most vulnerable members of our community.

United Way Perth-Huron (UWPH) calls on our community to support permanent housing initiatives in any form possible, but more specifically advocate for funding the expansion of supportive housing options such as the 10 units proposed within the Gibbons Street project in Goderich and the 12 units proposed for the 398 Erie Street project in Stratford.

Here are some examples of ways local organizations and individuals can support, and have been supporting, *Housing First* in Perth-Huron:



United Housing was created by UWPH to contribute to the only long-term solution to the housing crisis: more affordable housing. As Perth-Huron's first non-profit housing organization dedicated to creating and sustaining mixed-income rental projects, United Housing's mission is to build strong, healthy communities by developing, creating, constructing, and managing affordable housing. They hold a vision: by 2050, everyone in Perth-Huron will live in housing suitable and affordable to their needs.[87]

The Social Research and Planning Council created a petition titled, *Speak Up for Housing*, targeting The Honourable Gregor Robertson, Canadian Minister of Housing and Infrastructure, and The Honourable Rob Flack, Ontario Minister of Municipal Affairs and Housing. The petition asks the Ministers two questions: "Will you invest in the long-term funding and low-cost financing needed to build community housing at scale?" and "Will you ensure your funding programs make serious investments in rural regions like Perth and Huron?"[88]

In Perth-Huron, permanent supportive housing is needed, shelters are not.

In January of 2024, the Catholic Women's League created an action plan to "Increase Supported Housing for Individuals Experiencing Homelessness with Mental Health and Mental Illness Issues."[89] Their points of action included inviting related guest speakers to local parish council meetings, carrying out workshops, writing to all levels of government, and engaging with local community-based long-term supported housing programs.

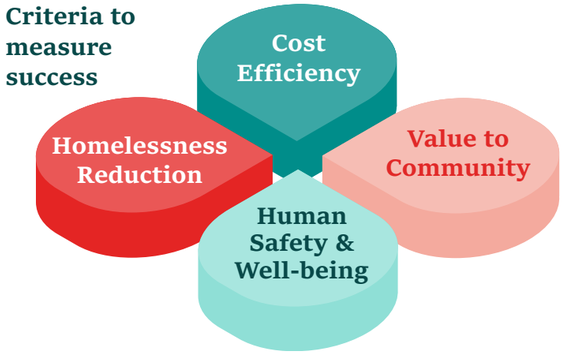
The Stratford Affordable Housing Alliance (SAHA) is a grassroots group of activists and residents collaborating with local advocacy groups, housing experts, and other organizations, to create Proportionally Mixed Income (PMI) affordable housing in Stratford.[90] They advocate for the upholding of the human right to suitable and affordable housing, as outlined in the Universal Declaration of Human Rights, to which all Stratford residents are entitled.

These are only a selection of the ways Perth-Huron has shown up for Community Housing and *Housing First* initiatives. In addition to decision-makers and policymakers, we invite you to determine how to support, fund, and accelerate housing projects within your community.

Conclusion

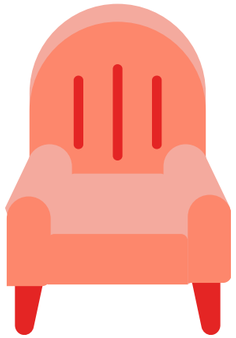
After reviewing the evidence provided, we ask you, are emergency shelters and tiny shelters effective as transitional or permanent supportive housing? Are the intended outcomes of shelter systems, and specifically tiny shelter projects, being realized? Do the perceived benefits of additional emergency shelter spaces, such as tiny shelters, outweigh the established benefits of *Housing First*? What do we, as investors in our community, really want to accomplish? Do we want quick solutions that will cause our community more harm in the future, or do we want long-term investments that create stable, safe, and supported homes for generations to come?

A recent report by United Way Greater Toronto, *Built for Good*, supports the idea that non-profit supportive housing needs further investment.[91] Twenty-two Ontario United Ways collectively created a "Submission to Build Canada's Home Design," recommending that Build Canada Homes (BCH) can help realize the potential of the non-profit and co-op housing sector; UWPH has endorsed this submission.[92] Maytree Policy in Toronto has recently published a series titled *Housing as essential infrastructure: Maytree's blueprint for Build Canada Homes*, a roadmap to transform BCH into a rights-based, large-scale delivery mechanism for deeply affordable housing.[93] The Association of Municipalities Ontario just launched an unprecedented study on homelessness that estimates an $11 billion investment in long-term housing solutions over 10 years could end chronic homelessness in Ontario.[94] As non-profit and governmental entities continue to advocate for evidence-based housing solutions, and smaller, well-meaning entities push for temporary shelters, it is clear the public narrative of housing solutions has strayed from the facts.



As supported by evidence, the most effective solution to homelessness in Perth-Huron and beyond is to provide more affordable housing, including supportive housing for our most vulnerable residents and other types of affordable housing to meet the growing demand. The non-profit world is ready to work alongside both public and private sectors to accomplish this solution. UWPH encourages everyone to think about how they can contribute to the creation of more housing and be open to additional affordable units in a variety of neighbourhoods and communities across the region. While the pathway may be different for some people, the goal should always be to provide stable, permanent housing. Some may need temporary or permanent financial, medical, and social supports, but our goal should always be a foundation that starts with safe, affordable, dignified housing. It is not only the most cost-effective strategy, but also the only proven strategy. Moreover, it is the most compassionate thing to do.

Glossary



Affordable Housing: A dwelling unit where the cost of shelter, including rent and utilities, is a maximum of 30% of before-tax household income.[95]

Chronic Homelessness: Defined by the government of Canada, chronic homelessness is used to describe an individual who is currently homeless and who has a total of at least 6 months (180 days) of homelessness over the past year or recurrent experiences of homelessness over the past 3 years, with a cumulative duration of at least 18 months (546 days).[96]

Home: A place that provides physical safety and shelter, along with social and emotional security, and a sense of control, privacy, and independence.[97]

Housing First: An evidence-based program designed to eradicate homelessness among individuals with mental illness and addiction who are experiencing chronic homelessness.[98]

Private Market Rentals: Rentals whose prices are determined by the market rent (standard rent amount for a given area).[99]

Shed/Tiny Shelter: A self-contained unit where the kitchen and bathroom facilities are separate.

Shelter: A shelter is a place where one goes to avoid danger, an inconvenience, or a place where people who have no place else to go or want to go can gather.[100]

Social Housing: Government-assisted housing that provides lower-cost rental units to households with low-to-moderate incomes.[101]

Social Prescribing: A novel way to address a patient's presenting health conditions with the prescription of tools that will ameliorate the impacts of social determinants of health. These prescriptions range from dance therapy, outdoor activity, art classes, and volunteering, to access to income support and housing interventions. [102]

Permanent Supportive Housing: Prioritizes people experiencing chronic homelessness and other vulnerable people who have the highest support needs. It provides long-term affordable housing and a diversity of customized support services. [103]

Tiny Homes: A self-contained unit where the kitchen and bathroom facilities are within the unit.

Transitional Housing: A pathway from homelessness to stable housing through non-permanent housing that often has intensive supports. There is an expectation that the person will move to permanent housing at some point.

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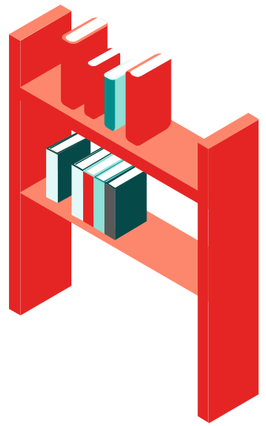

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