Preventing Homelessness in Seniors: A report recommending a major focus on Prevention.

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Summary:

Seniors are critically important to our province. They should never become homeless. Sadly too many do. Seniors make up approximately one quarter of those experiencing homelessness. Across Canada, this proportion has doubled since 2009. We need a focused effort to prevent seniors from experiencing homelessness, and to help those who do. This is particularly important with winter approaching. Prevention efforts include reducing inflows into homelessness, reducing the risk that those who have recently become homeless transition to long-term homelessness, and reducing the risk that people who have exited from homelessness will return to be homeless. The current system offers a wide variety of supports for seniors, but it is very fragmented. Lacking in Manitoba are focused and coordinated province-wide efforts to address the needs of seniors at risk of experiencing homelessness.

We recommend a major change in the approach to homelessness in Manitoba with a strategic shift which includes a strong emphasis on the prevention of homelessness.

> "providing services without addressing the source of the problem is a hopeless task, like trying to "mop the floor" while the tap is left running, and the water continues to overflow from the sink."
>
> Pearl Eliadis, 2024

We recommend the establishment of an approach which delivers a coordinated and integrated system with a dedicated call line for seniors at risk of homelessness, a provincial linked database of resources which includes an up to date availability of spaces and a timeline for accessing, a dashboard (with accompanying app) which provides this information including the up to date availability of spaces, including housing, and a report of outcomes by organizations to enable continuous improvement. For Winnipeg, this includes establishing six regional caring centres with a coordinated, networked effort to prevent seniors from becoming homeless, with additional centres at sites around the province. The plan will provide critical preventive services locally. Local services are vital since homeless is city-wide and seniors are best helped by services in their area. These can be existing centres or new centres. The centres may already have functions to help seniors, but now need to take on as well a specific coordinating role to help seniors at risk of becoming homeless. This role should include a warming shelter, help with navigating and help sorting out problem issues seniors are dealing with, addressing financial and other issues, and finding or ensuring stable housing. The centres will need to have a linked database and dashboard (with app) to ensure easy access within each centre and to individuals to information on resources and to make sure no seniors slip through the cracks. The dashboard with app can also function to help seniors help themselves. A part of the dashboard – or a complimentary dashboard - should provide information on access to addictions, substance use and mental health issues. As an example, a proposed Red River Seniors Caring Place in South Winnipeg could become one of the seniors caring centres. Dignity for seniors is a critical principle. The approach of individual case planning coupled to individual expectations used successful by St. Boniface Street Links is important in recognizing the uniqueness of each person. An approach to housing which is nearby

to social connections, health services, public transportation and community supports and amenities is important.

Seniors may face physical and/or mental health issues as well as housing and/or financial issues. An effort needs to be made to ensure every senior discharged from hospital is housed. The St Bonface Street Links operates such a site at 604 St. Mary's Road. It is a transitional site helping difficult to house individuals when they leave a hospital to find a place to live.

To compliment the above, we provide details on specific actions which governments (federal, provincial, municipal, First Nations, Metis and Inuit) can and should take to address some current problems within the systems of support for seniors. In addition, we address the importance of nutrition, of addressing toxic chemicals and of stimulating and uplifting activities to help seniors live a better quality of life. While the establishment of a Seniors Advocate is a step forward, what we need in order to drastically reduce homelessness in seniors is a system change which starts with organizing supports for seniors to prevent seniors from experiencing homelessness.

Background and General Principles

From 2016 to 2021, the number of Manitobans aged 65 and over rose from about 199,000 to 229,000. This trend will continue as more people are living longer. Seniors are facing challenges including a) living on fixed incomes with costs increasing for numerous basic items including food, housing and medications b) increasing issues with their health, and with disabilities resulting in issues with memory and with mobility c) housing not optimally designed for seniors or for multigenerational living and d) poorly coordinated resources and navigation systems.

Every senior (elder) has a right to safe housing. Every senior needs to be treated with dignity (Chochinov 2025). Our elders have contributed enormously to our province. It is time to recognize this. Our province should operate on the principle that no senior should be homeless. There needs to be a plan to address the issue of seniors experiencing homelessness. It must be for all seniors so none are left behind. All levels of government, the non-profit sector and the private sector need to be involved in this effort. The current fragmented system of supports for seniors is not good enough (Auditor General of Canada 2024).

The current reality, as found in the most recent Street Census, is that one quarter of individuals who are experiencing homelessness are age 50 or older (End Homelessness Winnipeg 2025). Those working in the field helping those who are homeless tell us that seniors as a group are the fastest in increasing in numbers. This is unacceptable. During the course of the preparation of this report we talked with people working with individuals experiencing homelessness as well as those who are themselves seniors who have experienced or are experiencing homelessness. There is very strong support for the fact that we should not have seniors who are homeless. This must be a top priority.

The situation is so bad that city streets are being called the "hidden retirement home", with nearly half of unhoused adults being homeless for the first time.

> As we age, access to nearby social connections, health services, public transportation, and community supports and amenities becomes increasingly vital. …. We could scale up mutual support multi-faceted in-home services, and innovative supportive housing. Wipond 2026

As an **example** of the need, one centre alone, St. Boniface Street Links, which is focused on serving individuals experiencing homelessness, had 9,188 interactions with seniors from Jan 1 2025 to Dec 31 2025. These included outreach contacts, housing stabilization supports, crisis intervention, referrals to health, income and social services and follow up support. Some seniors needed multiple interactions. The results demonstrate that a caring centre can be an effective approach to helping seniors navigate Manitoba's fragmented and complicated social systems and achieve lasting housing.

The present report builds on two previous reports (Manitoba Liberal Caucus 2021, 2023). The report from 2023 emphasized getting people housed the same day they become homeless. While we are a long way from achieving this under the present government, there has clearly been a shift from the previous emphasis on putting people in shelters toward getting housing for those experiencing homelessness. The reports also emphasized having a supportive path toward independence. While we are far from achieving this, there are now more efforts in this direction. As an example, Marion Willis reports a remarkably high rate of employment (about 74%) in people who were homeless being helped at Morberg House. Those finding employment are usually younger than seniors, however. A third emphasis in the 2023 report was on creating a dashboard of available supports. In our discussions with leaders in agencies which are helping those who are homeless, we have learned that progress is being made in this area. That being said, a dashboard (with app) of the supportive organizations and the wait times for individuals with addictions or substance abuse issues is still some ways off.

The present report also builds on the discussion at a Forum on Seniors Experiencing Homelessness held in River Heights on November 30, 2025. There was a full room and a lively discussion of what is needed to help seniors who become homeless, as well as measures to prevent seniors from becoming homeless. There was a particular emphasis on the importance of local community and peer-based supports.

> "Promote neighbourliness. Ours is a fragmented, lonely, society, but research shows the more socially connected we are, the more resilient we become." Wipond 2026.

Throughout our interviews, we were incredibly impressed by the dedication of people who are working to help those who have become homeless. We were particularly impressed by the efforts of individuals who themselves had been homeless and who are now helping others who were homeless. This was particularly true for individuals who had overcome addictions and substance abuse issues. Peter McMullen emphasized that for people who have difficulties, and are so to speak "down in the valley", they benefit particularly from people who have been in the valley and can walk up the hills with them.

We noted the importance of having advocates for people who are not able to advocate for themselves. We also noted the importance of people who become homeless knowing that "It is ok to need help". Further, we learned of the importance of healthy food, and the importance of people who are homeless not only having a home, but also having "connections" with others, being treated with dignity and being able to participate in art, in music, in games like chess or cribbage and in cultural or learning activities. While there are extraordinary people doing extraordinary things to help those who are homeless, we found too many organizations are working independently and feel that whether it is prevention of homelessness or in the help for those who become homeless, there are opportunities in people working together more effectively.

Marion Willis (2026a) notes the need to "build a co-ordinated system that balances, housing, recovery, harm reduction and public safety – and finally gives vulnerable people a realistic pathway from survival to stability." For seniors, most of whom are not suffering from addictions, the pathway is different, but there is still the critical importance of coordination, integration and help with navigation as seniors move being homeless to having stable housing, sufficient financial income and personal and community social connections.

While we note the critical need to build a coordinated and integrated effort; having a single top down unified system like a Regional Health Authority is not the way to go. Rather coordination and integration can be achieved by establishing a provincial linked database of resources, a dashboard showing the availability of spaces for each step in the pathway from survival to stability (Willis 2026a), including housing, and a report of outcomes by organizations to enable continuous improvement. The intent here is not to duplicate existing efforts, but rather to build on the excellent efforts that are being made to achieve a system where seniors are not falling through the cracks.

The province needs to embed in its housing strategy, senior-specific homelessness prevention, rent supports for seniors and housing stabilization measures within its core programming. There are positive examples. One is the Paul Martin Estates in Transcona which combines affordable housing for seniors with affordable housing for families.

Homelessness in Manitoba – by the numbers:

The 2024 Street Census in Winnipeg found that there were 2,469 people who were experiencing homelessness on November 5, 2023. More recently information supplied by End Homelessness Winnipeg says that there were 8,248 people using shelters, temporary spaces or living on the streets as of the end of March 2026 (Hoye 2026). This more recent report says that the 2026 numbers represent an increase from 5,698 people using shelters, temporary spaces or living on the streets as of the end of March 2025.

Of those experiencing homelessness at the end of March 2026, "more than half (4,468) of the 8,248 people identified in the database experienced chronic homelessness, meaning they spent at last half of the year without a stable home or went through a cycle of homeless episodes adding up to 18 months over the previous three years" (Hoye 2026). This was an increase from 3,140 in 2025. While the precise number of those who are homeless who are seniors is not established, the Street Census report provides evidence that one quarter of those experiencing homelessness are age 50 or higher. (End Homelessness Winnipeg 2025). Research from across Canada provides evidence that this proportion has doubled since 2009 (Wipond 2026). If the 8, 248 number for people experiencing homelessness in Winnipeg is accurate and one quarter of these are seniors, there could be a staggering 2,000 seniors experiencing homelessness in Winnipeg alone without considering the rest of the province.

To help those who are experiencing homelessness, the Manitoba government says it has in the last two and a half years housed 249 encampment residents. In addition to this, in efforts over the last three years St. Boniface Street Links has housed more than 2,000 people who were experiencing homelessness, most from living in encampments, but some from living in cars.

It is to be noted that it is very important to help all who are homeless and not have a strategy which focuses primarily on those who are chronically homeless. It is easiest and best to resolve issues of homelessness before an individual becomes homeless or immediately after this. It is more difficult and more costly to resolve homelessness the longer a person is homeless. Any strategy to address homelessness must include ALL who are experiencing homeless or at risk of being homeless.

Understanding why so many seniors are experiencing homelessness

1) The Pandemic

The COVID pandemic had its greatest impact on seniors, with seniors disproportionately dying during the pandemic. The result was that many seniors lost their spouses and were alone. For some this meant living with less in the way of financial support. For many it meant challenges in managing their home or apartment and their lives. One result was an increase in the number of seniors experiencing homelessness. There has been, for many an assumption that life post-pandemic has returned to normal. But for seniors, everything has changed – economically, socially and institutionally – yet policy responses have reverted to pre-pandemic policies rather than adapting to the current reality. Seniors now face the simultaneous loss of income, increased cost of living, deteriorating mental health and reduced informal support networks.

2) Financial Issues

Financial issues were a major reason for seniors to be experiencing homelessness. Increasing costs and fixed or declining incomes are a major issue (**Example** – a woman came in to a warming centre with a chihuahua. She had the basic pension, was working at superstore but found her rent eats up everything and she lost her housing and ended up in a shelter). Sometimes, the situation is worsened as a result of the pandemic and the loss of a spouse. Sometime this is because the person, sometimes a wife, did not herself get much Canada Pension Plan money. As an example, Indigenous people often do not have CPP or retirement savings and disproportionately are experiencing homelessness. Sometimes there is a loss of financial resources as a result of a senior falling for a scam and losing a lot of money. This is particularly a problem with seniors with brain or mental health issue – like a delusional disorder. (**Example,** the partner of a senior died. She was caught in a situation where the partner's children took over the house and she found herself without financial resources and ended up living in her car for a time until she was found and helped). Rising costs for food, for housing and for other critical items are also contributing to financial difficulties for individuals on fixed incomes. (In another **example** a woman was paying $1500 a month in rent. Adding her cell phone, food, etc and the monthly cost is substantial. She is fearful of getting behind and terrified at the thought of having to be in a downtown shelter.) An additional reason that seniors can be short of cash is that even those with skills and the desire to work face a job market which is tough for seniors.

Issues of financial management are often an overlooked cause of homelessness among some seniors. Delusional disorders, hoarding disorder, compulsive shopping and related behaviours can have a negative impact on the ability of seniors to manage money and maintain housing. St. Boniface Street Links has encountered numerous seniors—many

discharged from Winnipeg hospitals into its hospital discharge bed program—who lost otherwise suitable housing because their income was spent compulsively, lost to scams, accumulated but withheld, or otherwise not used to pay rent. Some have been assessed for possible involvement of the Public Guardian and Trustee but found legally competent because they can understand information, recall their personal affairs and clearly express their wishes. Nevertheless, their repeated rent arrears and evictions demonstrate a serious, specific impairment in financial decision-making. These individuals may be capable in many areas of life while remaining unable to manage the one obligation essential to preventing homelessness. Addressing these behaviours is also beyond the mandate and capacity of most housing and community organizations. Without an appropriate mechanism for managing rent and other essential expenses, many will continue cycling through eviction, homelessness, hospitals and temporary shelter—even though they have sufficient income to remain safely housed.

3) Brain or mental health issues

Individuals with brain health or mental illnesses are a particular concern. People with delusional disorders and people with some level of dementia are more susceptible to losing their housing. Indeed, about 50% of seniors coming to one centre appear to have some form of a "delusional disorder", with difficulty understanding or seeing what is real. Schizophrenia is another example. While some people do well with schizophrenia, there are individuals who see themselves as doing well and stop their medications leading to a relapse and loss of ability to do well. (**Example** - We talked with one individual who is exceptionally clear thinking and well behaved on medications, but who has lost his housing on too many occasions. There is a need for support or supervision to take his meds, but sadly there is not an efficient, effective and reliable system to ensure he takes his meds, so he ends up stopping his meds when he feels well and gets into difficulties.) Borderline personality disorder, and hoarding are other conditions associated with an increased risk of homelessness (Hughes 2024).

4) Alcohol and/or Drugs

Substance use issues are less common in seniors who are homeless than in other age groups, but it remains an important contributing factor being reported in up to 60% of seniors experiencing homelessness in the latest street census for Winnipeg. Thus, attention to substance use issues is important because of the impact substance use issues have on financial well-being as well as the mental and physical well-being of seniors. The centres described in 2 above cannot be expected to deal with people with unstable substance use or addictions issues, so there will need to be the ability to refer individuals to receive such help – as for example to a RAAM clinic. (**Example** – individuals living rough – including seniors sometimes take meth in order to stay awake at night in order to be safe. Once they are helped to get housing with support, there is no longer the need to take meth to stay awake, and usage of meth often decreases or stops completely.)

5) **Issues with EIA systems:** Employment and Income Assistance (EIA) has made progress in the speed with which people can be put on EIA support which is essential to helping individuals who are homeless achieve housing. EIA has also made provision so

that the EIA money can go straight to the landlord where the person is housed. But there are areas where more improvement is needed. One change is needed to ensure that individuals receiving support from EIA for their rent owed to a private landlord get at least a two week notice if the rent money is to be cancelled. This single measure will reduce the anxiety of individuals in this circumstance. (**Example,** a senior who is on EIA gets extremely anxious toward the end of every month fearing that his EIA support might be cancelled at the last minute leaving him homeless). In another **example**, a person experiencing homelessness and for whom private sector housing is found and being paid for by EIA can very easily check a box so that the money comes to the person who is homeless instead of going to the landlord. It would seem counterproductive for a person who is homeless to want the money to go to themselves rather than the landlord, but some people want the money more than they want housing. Too often, currently, the person who checks off the box to have the rent money go to them instead of to the landlord, then spends the money on food, drugs or other matters instead of on the rent and so becomes homeless. One person working with individuals experiencing homelessness described this as the province being one of the biggest drug promoters in the city. There is a simple answer to this and that is to get rid of the box allowing the homeless person to have the money instead of the landlord and to make sure the housing money is used where it should be to house people. **(Example**, Housing was found for a homeless senior. She quickly checked the box so the money did not go to the landlord, but came to her. She was evicted for not paying rent. The landlord was unhappy. The women used the money to buy drugs and came back to the homeless support worker expecting support, but ended up living a shelter instead of being housed.**)** Under very specific circumstances with specific explanations there could be exceptions to this rule, but the current system where a person can so easily check off the box to get money instead of housing is not acceptable.

6) **Issues with the federal support of seniors.** The Canada Pension Plan (CPP), Old Age Security (OAS) and the Guaranteed Income Supplement (GIS) are all important and effective programs for helping seniors. One issue is that for all seniors, especially those who are in a precarious financial situation, there is very often a delay in getting access to OAS and GIS which can sometimes be months long. This needs to be much quicker. This will facilitate seniors who are moving onto support from CPP, OAS and GIS to be able to get housing more quickly as their financial situation will be more stable. (**Example** – a senior who had been advised to take support from the federal program during COVID even though he had been on EIA, turned 65. His OAS and GIS were delayed months. He received little from CPP as he was an artist living on the edge. While he was waiting months for his OAS and GIS he received a bill from the federal government for $6000 (He was on EIA and should not have received the CERB benefit, but at the time of COVID, it seems there was a push for people on EIA to take CERB so that they would not need EIA). He became extremely anxious about his financial situation and to deal with his anxiety started using drugs. One morning he was found dead. While the months long delay in getting OAS and GIS may not have directly contributed to his death, it certainly increased

his anxiety about the fragile state of his financial situation and illustrates the importance of the federal government acting quickly in providing OAS and GIS.)

7) Availability of affordable housing:

There is currently a very long wait list for people wanting Manitoba Housing. As of November 2023 there were 7,500 people on the wait list for Manitoba Housing. In the first quarter of 2025, an incomplete list showed a wait list of 6,385, with 4,993 people waiting in Winnipeg, 909 in Brandon, 227 in Dauphin, 176 in Steinbach and 80 in Beausejour (Gold 2025), Depending on the location, the wait time can be six months to two years. This is a long time for a person who is homeless to wait in the cold of a Manitoba winter. Currently the shelters in Winnipeg in winter are overcapacity with up to 270 people not able to get into a regular shelter and needing a temporary popup location. While there is a major shortage of public housing, St Boniface Street Links has had success housing people in private sector housing, but the organization is limited by the availability of financial support to ensure everyone housed has support. Without such support, too often housing does not last long. With such support the retention in housing is above 80%. This emphasizes the importance of having support.

The importance of housing which is associated with social supports, community connections and access to public transportation to get to hospitals and other health and social supports is to be emphasized. Whole Way Housing in Vancouver and the Dunn House in Toronto are examples of this approach (Wipond 2026).

8) Extra financial support for senior renters:

A Housing and Homelessness Prevention Benefit (HHPB) has been proposed to provide financial support to individuals who expend 50 per cent or more of their income on shelter costs, a financial benefit that brings their shelter costs down to an amount that equals 30 per cent of their income (Hughes 2024). This is similar to the Manitoba-Canada benefit which was in place but which ran out of money and it not currently operating. The Manitoba-Canada benefit should be reinstated or a HHPB specifically targeted for seniors could be considered.

9) Manitoba Housing – While there are many positives about Manitoba Housing several concerns need to be raised.

- **a. Drug dealers and criminals in Manitoba Housing** – Recent reports have highlighted the fact that drug dealers and criminals are sometimes found living in Manitoba Housing units (Buffie 2026; Gold 2026). This is a long standing problem which needs to be addressed. The government of Manitoba needs to ensure Manitoba Housing is free of criminals and drug dealers. Getting rid of drug dealers and criminals from Manitoba Housing would free up space for people who need it. (**Example**: A man in his fifties with a disability was in Manitoba Housing. Shortly after he moved into Manitoba Housing he was asked by one of the other tenants in the building to join in his drug dealing operation. When the man refused the offer, the drug dealer, a member of the Hell's Angel's gang, started harassing him. He notified Manitoba Housing about the problem, but nothing was done. In the end, he found himself evicted from Manitoba Housing while the drug dealer continued to

live there. It is disgraceful that an innocent man should be evicted while an obnoxious drug dealer was allowed to stay).

b. **Bedbugs –** When Manitoba Housing sprays for bedbugs, people on EIA and living in Manitoba Housing are told to go to a shelter for those who are homeless. In other situations (such as fire evacuations) temporary housing is generally found in hotels. (**Example,** An elder in the Indigenous community was told to get out of his apartment so it could be sprayed. Though Manitoba Housing said he need only be out of his apartment for a few hours, his previous experience told him that the odour from the pesticide used was going to be very strong for at least two days. The elder, did not like the shelter and was not going there. He rode a transit bus until well after midnight. He then found a large cardboard box and stayed inside it for several hours (at minus 30 degrees C) in a spot outdoors were there was a hot air vent from an all night restaurant until he found somewhere to go that was open. This was repeated for two nights until he could move back into his apartment).

It is also to be noted that Manitoba Housing has been called "ineffectual and irresponsible" in its treatment of bedbugs (Abas 2026). The building mentioned in the above article was described as follows: "After multiple rounds of pesticide treatments, the problem has not subsided". The building in question is not the only one where multiple treatments have been ineffective or only temporarily effective. The apartment building used by the indigenous senior (above) is an example of exactly the same story.

c. **Notice if a person's EIA support for their rent is to be cancelled.** Those on EIA who are housed in private sector housing need to receive two weeks notice if their rent support is to be cancelled for any reason.

10) Issues with the RTB (Rental Tenancies Branch) When a person is listed by the Residential Tenancies Branch, it becomes almost impossible to house that individual even when the individual has a complete change in personality or circumstances as can happen with an individual with Schizophrenia who is on treatment, and under a system which ensures he will continue to take his medications.

11) Inadequate home care

Seniors, with a higher incidence of chronic and long term illnesses have a greater need for home care than other age groups. Homecare which is not effective or not reliable can lead to homelessness. There have been major problems with the provision of home care in the last few years. The result is that many individuals who could have continued to live at home with support from home care, are now not able to do so. One result of this is increased homelessness. Improving access to high quality home care needs to be a priority in the effort to prevent people from becoming homeless. Indeed, it is important to ensure there is strong traditional planning for those in hospitals, as well as those in other public systems.

A key driver of homelessness in Canada is the lack of transitional planning and support for individuals exiting public systems including those in hospitals, those who have been in the justice system (corrections) and those who have been in child protection (child and family services). Discharging people from public systems into homelessness is never a good idea.

Stephen Gaetz 2024.

12) **Problems in navigation of systems**

Problems with seniors navigating resources to help them was an issue which came up repeatedly in the Forum on Seniors Experiencing Homelessness held November 30 2025. (**Example** – a senior who was in a financially precarious position, had not applied for OAS or GIS. Once she had been helped to get OAS and GIS she was in a much improved financial situation and was able to be housed and live reasonably with the resources she had). The development and use of databases like HIFIS (The Homeless Individuals and Families Information System) has been a positive step in this direction. Useful dashboards are also needed both to help individuals find the services they need, and to help navigators provide optimum support. There has been some progress in this direction, but much more is needed.

13) **Family separation.** Family separation and life transitions are listed as being the reason for 14.3% of people (of all ages) becoming homeless in the 2024 Winnipeg Street Census. Life transitions have been mentioned above in terms of the pandemic. Family breakup can also be a reason for homelessness in seniors (**Example**, a man in his fifties was wrongly accused by his spouse of being violent to her. The police officer involved did not make any attempt to determine which spouse was telling the truth and which spouse was making up a story. This man was arrested, given a no contact order so he could not go home to retrieve any of his belongings, and was then released late at night homeless on the street.) In the above example it was the man who became homeless. There are almost certainly many more women who become homeless after a family breakup. In another **example**, a man in his fifties living in rural Manitoba was in a situation where he was very anxious about the possibility of becoming homeless. He phoned many shelters and crisis centres. While there were shelters for women, he was unable to find a single shelter to take men in. He did not want to go to the Main Street Project, Siloam Mission or the Salvation Army as he did not perceive these as welcoming. For a person with autism, as he was, the crowds in these facilities made going there impossible for him. As it turned out, his fears have so far not been realized and he has been able to stay in the apartment where he was living.

14) **Rural issues**

People in rural areas of Manitoba are experiencing homelessness, often for reasons specific to the region they live in. There needs to be opportunities in communities around the province for seniors who are concerned about becoming homeless or who are experiencing homelessness to seek help based on what is available locally.

15) **Scams/Frauds** – Seniors are particularly susceptible to scams and fraudulent activity. There are numerous examples where seniors have been scammed by fraudulent phone calls, emails and/or social media. The is one of the reasons that some seniors are having financial difficulties. (**Example** – a man who was in Victoria General Hospital had persistent schizophrenia. His parents passed away. He has money but has no idea how to manage it and is spending lots on scams.)

16) **Treating seniors with dignity –** About one quarter of Manitobans over age 65 feel "isolated" from others, a higher proportion than other provinces. Having a centre where seniors at risk of homelessness can go for help and support and be treated with dignity is a starting point in preventing homelessness in seniors in Manitoba.

Solutions:

1) **Preventing homelessness is more effective, and cost effective than acting after a person has become homeless**
   Preventing seniors from becoming homeless is important and is most often less expensive than addressing the issue after the senior becomes homeless. Organizations like Age and Opportunity could play a very important role here. Indeed, the province should consider a formal partnership with Age and Opportunity, and perhaps other non-profit groups concerned with seniors, to provide services province wide in an effort to prevent homelessness from happening. While there are an incredible number of services for seniors in Manitoba, the large number of seniors who are homeless is a testament to the fact that these activities and services could be better coordinated and/or integrated so that fewer seniors fall through the cracks in our systems and become homeless. Prevention of homelessness needs to be a specific goal of provincial and federal government policy, and a goal which is given equal weight and funding as the help for those who become homeless.
2) **Community Caring Centres focused on preventing homelessness.**
   We propose a system for Winnipeg where there are six major community caring centres for seniors in Winnipeg **with one of the specific goals of each centre being to prevent homelessness.** The goal is to have centres which are more local and more homelike. Seniors do better if they are in an area they know and where people are friendly. The centres would be located as follows: **o**ne in south Winnipeg, one in north-east Winnipeg, one in south-east Winnipeg, one in west Winnipeg, one in north Winnipeg and one In the centre of Winnipeg. These centres would be places where seniors can find a welcoming warming centre and access to information to help with navigating to find the help and the answers that each individual needs. These centres would be part of an information network to help seniors find resources and get help quickly. The centres can serve an important role in bringing many organizations together in a common cause, and can be coordinated in a response to a situation where a senior has to be out of his/her apartment at the end of the month. Preventing evictions or finding alternative housing is an important goal. The combination of programs will also allow for longer hours for delivering services (**Example,** in South Winnipeg, we were told there is currently nowhere to go for help after 4 pm)

   The caring centres do not necessarily need to be built from scratch, but rather existing or planned Seniors or Active Living Centers could make modest changes to existing or planned facilities to include a focus on preventing homelessness. As an example, the proposed Red River Seniors Caring Place in South Winnipeg lists its planned priorities to include social engagement, health and wellness, accessibility, information and navigation. It would be easy to include the additional priority of preventing homelessness.
3) **Warming centres with navigation support – as for example to find and get housing.**
   For seniors who become homeless, access to 24/7 friendly community caring centres which include a warming centre is critical. A single caring centre is not adequate. Strategically located caring centres in various parts of Winnipeg (as in 2 above), and at certain locations around Manitoba (Brandon Dauphin and Thompson are examples) are needed. One reason for having several centres strategically located in various parts of Winnipeg is that many seniors prefer to stay in their own community and are very reluctant to go downtown where crime and vandalism are higher. The caring centres need to be seen as transitional, with access for those who are homeless being provided as a comfortable

space where the senior can be helped navigating systems, and with finding housing. This needs to be a central part of preventing and addressing homelessness and should receive funding from the federal government, the provincial government and the municipal government. For Winnipeg a network of caring and warming centres can serve a number of critical functions. They can provide safety. They can provide navigation for seniors in fragile housing circumstances (see below). They can provide an effective transition between homelessness and housing. As these will be smaller centres than the major downtown shelters, they will enable seniors to get help in their home region of Winnipeg and enable them to receive effective support. These centres should provide the services described in a) through d) below. **It would be logical to have a central call-in-line for seniors at risk of becoming homeless – perhaps similar to the homelessness prevention line set up by Argus in Waterloo (Hughes 2024)** – but in Manitoba directed at helping seniors at risk of losing their homes. Each centre would need to have certain capabilities – as for example helping seniors to set up Canadian Revenue Agency accounts and to help seniors apply for EIA, CPP, OAS and/or GIS where applicable.

a) **Navigation and navigators:** The diversity of reasons for seniors becoming homeless means that a province-wide system to help seniors navigate situations in which they find themselves is needed. This is particularly important for families without relatives or whose relatives live some distance away and are less able to help. Navigators situated at the seniors' community centres described in 2 above is optimum. Having the centres in Winnipeg and elsewhere in the province networked together will provide efficient assistance for seniors at risk of becoming homeless. Places where seniors frequent can be important in having information to connect seniors to the resources of this network. Such places include libraries, malls, community centres, medical clinics, hospitals, 55 plus housing units and other places where seniors congregate. Such places are generally senior friendly. Other sites used by seniors, like bus shelters, should be assessed to become more senior friendly.

b) **Addressing cost and inflationary pressures**
Increases in the cost of living including prices for rent, for food and for transportation make life more difficult for seniors. There are good examples of programs which can help such as the volunteer drivers in Transcona who take seniors to the grocery story, medical and other appointments etc. Transportation to lower cost food stores or to Winnipeg Harvest supported food sites can be very important for those on low budgets. Building mini-homes may help lower housing costs. More efforts than these need to be made to build and ensure a supply of lower cost housing.

c) **Addressing issues of problematic financial management in seniors.** The Province of Manitoba should establish a specialized housing-preservation and financial-management pathway for seniors whose homelessness or repeated housing loss is directly connected to an established pattern of failing to pay rent despite having sufficient income. The Public Guardian and Trustee should be authorized and resourced to participate in these cases before or immediately following eviction, including through targeted capacity reassessment, supported or substitute financial decision-making where legally warranted, voluntary trusteeship, direct rent-payment arrangements and safeguards against fraud and financial exploitation. Intervention should be individualized, subject to appropriate review and use the least restrictive measure necessary, but a finding that a person is generally competent should not prevent action when there is compelling evidence that impaired financial decision-making is repeatedly causing homelessness. The objective is not to

remove autonomy unnecessarily; it is to preserve housing, protect income and prevent avoidable institutional and shelter use.

d) Access to someone to talk to for reliable information

We live in an age where scam artists abound. Seniors are often isolated, and this is particularly true after the loss of a partner or a close friend. One result of the COVID-19 pandemic is that many seniors have lost partners. As an **example,** Gerrard met recently with a 75 year old senior who needed help with accessing financial and legal services. Her big issue was finding reliable expertise at a reasonable cost.

e) **Access to someone to talk to who is matched to the seniors interest who can provide advice and assistance in navigating access to help** . As an **example**, **in Lithuania there is a non-profit organization Sidabrine Linija (Silver Line) which offers free support to isolated older adults in Lithuania through regular phone calls with a "befriender" matched to their interests** (Costa 2026). The organization receives government funding and has befriended 6,000 older adults since its inception in 2016. While there are many organizations in Manitoba to help seniors, it is not clear which one would provide this particular service. The Canadian Red Cross in Winnipeg provides a "friendly calls" service which is for anyone over 18 years of age. The service began in 2020. It is not specific to seniors, but about 80% of the people who call are seniors. It provides access to a friendly conversation and the ability to suggest places where a person might receive services. Such an organization needs trained staff and an assessment of befrienders to ensure they help but do not take advantage of seniors who call in.

f) **Dashboard(s)**

With the complexity of housing individuals experiencing homelessness including addressing mental health and addictions issues, **there is a need for a public dashboard which shows how full various services are, the wait times for the services, and a clear statement of the mandate for each of the services.** In our work to prepare this report, we understand that work in this direction is underway, but there is still more to do to complete what is needed – including a dashboard to achieve access to addictions and substance use help as well as data on homelessness,

4) Help with specific conditions which put people at risk of experiencing homelessness

a) Schizophrenia

An efficient, effective and reliable plan to ensure individuals with schizophrenia were receiving their medications is a critical need for individuals and for society provided issues with the Residential Tenancies Branch can be addressed (see below). HIV and Tuberculosis are two other conditions where it is critical individuals receive their medications.

b) **Substance Use/Additions issues**

Regular warming shelters, like 604 St Mary's Road operated by St. Boniface Streetlinks, are not equipped to handle individuals who are intoxicated with alcohol or under the influence of street drugs. Right now, the Rapid Access to Addiction Centres (RAAM) are set up to be the first stop for those with addictions, but they only operate part time instead of 24/7. Main street project is set up to provide detoxification for those high on alcohol or on drugs. It is adequately set up to help those on alcohol, but less so for opioids and other street drugs who are better to go to RAAM clinics. At least one RAAM clinic should be set up to operate 24/7 and to become the primary place for people with substance abuse issues. With medical treatments like suboxone for opioid use

disorder, the RAAM clinics are best to treat those with this condition. Once seniors have had their initial treatment for alcohol and/or drug addictions, whether in a RAAM clinic or elsewhere, then they need to be transitioned to receive support as Marion Willis has recommended (below).

> Recovery is not a single event or a 28 day program. It is the gradual work of rebuilding health, relationships, purpose and community. What good is a doorway into care if we have not built the system on the other side of that door. (Willis 2026)

> Recovery needs a systems approach which includes "withdrawal management, stabilization, treatment, mental-health care, Indigenous led healing, recovery housing, employment support and long-term community reintegration." (Willis 2026).

c) Access to housing with supports and security.
Supports and security are essential to housing seniors who are experiencing homelessness. There has been much emphasis on housing construction without the needed capacity of organizations working with those who are homeless to provide supports for people who are housed. One agency reported to us that they could house more people, but the critical piece which was lacking was funding to provide the support and the security for people. Such support is critical to success. Without support, housing stability was low. With support it was found that more than 80% of those who were homeless and then placed in housing were able to stay housed. This was as important for private sector housing as for public sector housing.

d) P**roviding seniors the tools and supports to stay housed.** There is a large variation in the needs of individuals to stay housed. Sometimes it is attention to health issues. Sometimes it is financial issues. Sometimes it is other issues (see below). Each person has their own unique circumstance and an individual case plan is essential to success. The Individual case plan needs to include expectations for the performance and/or activities of the person being helped. A plan without expectations is hollow and not helpful to the individual.

e) Family Separations. Family separations are a significant reason for people becoming homeless. There is currently a consideration to have a social worker along with a police officer or officers when dealing with family conflicts. This could potentially provide a better way for police officers to deal with family conflicts. At the very least police officers on the scene should make an effort to investigate the situation to determine which spouse is telling the truth before making charges. Other jurisdictions have moved to providing "no contact orders" to both spouses, rather than just one, as this avoids a situation where one spouse can play games enticing the other spouse to breech the contact order. (For **example**, in one situation spouse a was coaxed by a lawyer to get a one sided no contact order for spouse b. Spouse a then enticed spouse b to breech the no contact order in order to create a situation where spouse a would have care and control of the children and spouse b would not be able to see or interact

with the children in any way.) The bottom line is that it is important to have an approach which assures that individuals involved in family separations do have a place to stay and if this is not in their home, then there is a transition plan to ensure there is a path to housing for both spouses and for the children.

f) **Food Security and Healthy Food:** Individuals who are healthier are less likely to be homeless, and more likely to transition back to being housed if they become homeless. **At the Lighthouse Mission, we saw a focus on high quality food for people who are homeless.** A big container of soup was brim full of vegetables and non-processed meat. Chef Ben Kramer also emphasized the importance of quality food for those at risk of or experiencing homelessness. As he pointed out "everything is difficult when you are hungry." For people to function well, individuals need food security and food with a diverse array of nutrients. Keeping people who are homeless healthy needs attention to food, to exercise (many who are homeless will walk long distances on many days) and to sleep (optimum sleep was noted to be a problem where many people were congregated in a single room for the night). **Example** - one person experiencing homelessness stated his urgent need for a peaceful room where he could get a good night's sleep. For him, being able to think well and make good decisions depended on his ability to get a good night's sleep. While there is growing recognition of the importance of vegetables and protein in the diets of those who are homeless, we found less emphasis on moving away from white bread to whole grain breads, in spite of a large amount of evidence that the latter is healthier – whether this is due to the presence of seeds which have more micronutrients, the presence of more fiber, or the presence of more complex carbohydrates.

It is to be noted that Harvest Manitoba is to be congratulated for doing a remarkable job of working with a network of locations to provide food for people in need all over Manitoba.

g) **People to people connections:** Isolation and loneliness can mean seniors have less access to support and help. In talking to seniors experiencing homelessness and those at risk of being homeless, we found a keen desire to associate with others with similar circumstances or similar interests. People in homeless encampments forge connections with others in the encampments. Housing groups of people in an encampment who protect each other can be of benefit as Marion Willis has shown. This helps with friendship, with security and with human to human connections. We found seniors at risk of becoming homeless had difficulty finding connections which met their need for friendship.

h) **Manitoba Housing**

Manitoba Housing needs to clear Manitoba Housing buildings of people who are drug dealers. This is an important safety measure for people living in Manitoba Housing. This has been and continues to be a significant problem. It needs to be addressed. This does not mean just forbidding drug dealing inside Manitoba Housing units, it means that anyone found activity involved in drug dealing should be evicted from Manitoba Housing. Addressing this issue will free up some space for tenants in need.

When people are forced to leave Manitoba Housing temporarily because of bedbugs whether or not they are on EIA, temporary housing in a hotel should be provided.

i) **Residential Tenancies Board**
The residential tenancies board when it lists people results in it being almost impossible to house people, even if they have changed – as for **example** we met a person with Schizophrenia who is on treatment and is under a program which assured he/she/they will take their medications but is listed as a poor tenant by the Residential Tenancies Board because of past behaviour and may find it almost impossible to find housing.

j) **Low literacy including from Learning Disabilities.** Low literacy has been associated with an increased likelihood of homelessness. One study of youth experiencing homelessness found 80% had a learning disability (Barwick and Siegel 1996). While the precise proportion of seniors who are experiencing homelessness who have low literacy and/or a learning disability is not known, it is likely a contributing factor. It is important to emphasize that it is never too late to learn. Adult education including senior education can help people improve their quality of life, indeed for many individuals it can be transformative (Silver 2026)

k) **Lead exposure:** Exposure to lead has been shown to be associated with an increased likelihood of an individual becoming homeless ((Parker et al. 1991; Coulton 2020). People with a history of working in an industry where they were exposed to lead, or have a history of living in an area where lead exposure from lead water pipes, old paint or industry was common should be assessed for their blood lead level.

l) **Implementing programs which have been shown to be effective in reducing homelessness elsewhere:** This includes such programs as Eviction Prevention in the Community (Toronto); Planned Prison Release Program (Montreal), Adult Education (Manitoba), Assertive Community Treatment and Critical Time Intervention (New York), Old Brewery Mission's partnership with hospitals (Montreal), The Namarind Housing Corporation (Regina), the Home Ownership Program Enhancement and the Gimme Shelter Program (Kahawake) and the Duty to Assist program (Wales). A proposed Housing and Homeless Prevention Benefit (Hughes 2024) is similar to the Canada-Manitoba Benefit which ran out of funds for Manitoba. This should be revived. As well some programs like the Shelter diversion program - Niagara Resource Services for Youth could be adapted for seniors.

m) **Reporting on results and outcomes:** As Marion Willis has emphasized measuring outcomes is critical. She gives the following illustration "The goal should be movement: from the street to stabilization, from stabilization to treatment, from treatment to recovery housing, and ultimately to independence and belonging. We should measure that movement. How many entered and completed treatment? How many remained housed after one year? How many found employment, reconnected with family or no longer relied on emergency departments, police and shelters." (Willis 2026).

5) The Role of the Provincial Government

The Province of Manitoba has an important lead in housing policy and has various tools including Manitoba Housing to help prevent homelessness and to help people who are experiencing homelessness. The Manitoba Government needs to exert its leadership role in partnership with municipalities, Indigenous leaders, the federal government, non-governmental organizations and the private sector. One step (details above) is to establish

a pathway to help seniors with financial management issues. Another step which needs to be taken quickly is to change EIA support so that recipients cannot easily check a box so that the rent money from EIA does not go to housing. There should only be very rare exceptions to this rule. The current practice is enabling people to get the money that would have gone to housing and use it for other purposes for example in order to purchase street drugs. Sadly the current rule is enabling drug use and drug overdoses.

The Province of Manitoba also has an important role to get the home care system operating in a much improved fashion so that there is the support to keep more people in their homes, and have fewer people becoming homeless.

The Province of Manitoba also needs to have the approach to mental health care in Manitoba operating optimally, and similarly for the help and treatment for those with substance use and addictions issues.

6) **The Role of the Federal Government**

The federal government is an important funding partner to reduce homelessness in Winnipeg. It also has programs like CPP, OAS and GIS which are critical in helping seniors to be financially secure. In general these programs work well. But OAS and GIS need to be able to be accessed more quickly to shorten the wait time till a person who is homeless gets access to their OAS and GIS funds. Someone who is homeless can't wait for months to be housed when it critically depends on the person receiving OAS or GIS funds.

The Government of Canada also needs to recognize that **provision of funding for the support and security of those experiencing homelessness who receive housing is as important as having the infrastructure (new housing).** This could be a partnered funding program with the province and municipality.

The Government of Canada has had a policy to address chronic homelessness. This policy needs to be updated to ensure there are funds for prevention of homelessness.

7) **First Nation and Metis communities**

First Nation and Metis communities, with the support of the federal government, have a responsibility to provide housing. Some communities. Behrens River is an example, have for a number of years built small bachelor houses as part of their housing efforts.

8) **Municipalities:**

Winnipeg and other municipalities have a central role in ensuring seniors are housed. Funding and oversight of shelters like Siloam Mission, Main Street Project and the Salvation Army's Centre of Hope and for warming centres (including St Boniface Street Links). The funds being provided by the City of Winnipeg are insufficient. Optimally there should be a funding partnership with other levels of government. There has been, over the last several years, a significant shift in thinking – moving people into housing rather than housing people in shelters. This is a very positive development. However, there needs to be an overall, coordinated plan to make the transition from where we are now to where we need to be – housing people directly.

9) **Dignity:**

Ensuring dignity for seniors who are homeless is an important objective. To help us understand what is needed, we consulted Dr Harvey Chochinov who has written

extensively on the subject of dignity. While Dr. Chochinov's work deals primarily with people in palliative care, at the end of their lives and not with those who are homeless, there are overlapping issues of ensuring people in difficult circumstances are treated with dignity. In both cases it is a matter or recognizing and acknowledging each individual is important. It is best to say "a person who is homeless" rather than "a homeless person". The latter puts the homelessness first. The former puts the individual's "personhood" first. It is more effort to consider and treat each individual as a unique person, but it is also a better way of connecting with a person and finding out about the person's life. People who are seniors experiencing homelessness, have lived many years, and during those years there have been many positive events as well as the negative ones. It is important to learn about and acknowledge the positive events in a person's life – and to see the person who is homeless in the broad context of a person who is a human being who has in some ways however small or large contributed to our society and our province.

It is important to avoid activities which can promote or enhance the shame and/or embarrassment of a person who is homeless. People with lived experience are often very effective in helping people without subjecting them to shame or embarrassment as they have been through difficult circumstances themselves.

In helping a senior who is experiencing homelessness, one of the first questions we should ask is "What do I need to know about you as a person to best help you?" Most seniors have amazing stories. Listening to these stories while providing help to seniors can give each senior a sense of personhood, and a feeling that they are being considered as a separate individual and not just herded en mass into shelters. Recording these stories in writing or in audio can help them feel they have something to pass on to family or friends, and that there have been positives as well as struggles in their lives (Chochinov 2012).

In caring for others, Dr. Chochinov uses the phrase "intensive caring". He emphasizes five actions: 1) Showing up – taking time to be with the person, 2) therapeutic presence – using the time with a person to be a positive or healing presence, not getting into an argument for example, 3) taking an interest in the person – being engaged, for example listening to the person's life story 4) knowing what is possible – understanding the practical realities of the situation and what can reasonably be achieved and 5) therapeutic humility – acknowledging that you can only know or do so much – recognizing that even just showing up makes a difference.

10) Stimulating and uplifting activities.

It may be considered that the full focus of efforts to help seniors should be on basic necessities like housing and food. However, experience in working with seniors quickly shows their need for "purpose" as well as for necessities. Art, music and other cultural activities can provide stimulation and help beyond just the provision of food and clothing. Siloam Mission has an "art" room where people have the opportunity to see and/or participate in an artistic endeavor. Seniors Active Living Centres like Pembina Active Living and organizations like A and O and Creative Retirement can provide opportunities for people to pursue interests that they have. Seniors participating in such activities are able to share experiences, make friends and seek advice from friends about issues they are facing. These organizations though not primarily focused on preventing homelessness do provide services which can play an important role in preventing homelessness. Some faith

communities, for example the Sikh communities in Winnipeg, are very active in recognizing the importance of seniors and for supporting seniors.

In some circumstances, seniors have found purpose in looking after grandchildren. Where this occurs, financial support for grandparents may be needed for those who take over the role of parents. Explicit inclusion of caregiving grandparents in provincial seniors strategies and planning is needed with caregiver specific supports integrated into senior health and community services. Another example is seniors partnering with students who can live with them and provide help around the house for a much reduced rent.

Recommendations:

Specific recommendations for seniors to prevent homelessness

1) There needs to be a specific focus in government and private sector funding on preventing homelessness generally and for preventing seniors' homelessness specifically. The focus needs to recognize post-pandemic realities.
2) There needs to be an easily identifiable phone number for seniors who are at risk of being homeless to call – similar to the 911 line or to the Argus phone line in Waterloo. "It is ok to need help" – could be the name of the call line, for this is the motto of a seniors hub with its dashboard and information for those at risk of homelessness and those who are experiencing homelessness.
3) There needs to be a network of Senior's centres with a specific responsibility to prevent homelessness coupled with a warming centre, knowledgeable navigators to help seniors needing support and a well-crafted dashboard full of the critical information needed to help seniors graduate from being in fragile or risky circumstances to being more stable and happier finding opportunities more than problems moving forward. A and O has the potential to be very important in helping to co-ordinate access to resources.
4) The report contains specific suggestions or recommendations for specific issues that seniors face in order to provide for the well-being and the dignity of seniors. These specific issues should be addressed and changes implemented to provide a more hopeful future for seniors in Manitoba.

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were currently experiencing homelessness or who had previous lived experience with homelessness. We thank them for sharing their experiences for we learned a great deal from them. We thank Naomi Gerrard for our using her art work showing a glimpse of the sunset of life on the prairies on the cover of this report.

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Nancy Chippendale is an activist who has been very concerned with helping those who are experiencing homelessness for many years. She was one of the first to call for 24 hour warming centres in Winnipeg during our cold winters. Her tireless advocacy and support for those who are experiencing homelessness has included working at Siloam Mission, Resource Assistance for Youth and Agape Table as well as being employed for a period with Jon Gerrard as communication director when he was an MLA.