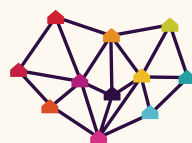




Sheltering Under Pressure:

Frontline Realities of Canada's Violence Against
Women Shelters and Transition Houses



WOMEN'S | HÉBERGEMENT
SHELTERS | FEMMES
CANADA | CANADA

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Women's Shelters Canada (WSC) is based in Ottawa, Ontario. Bringing together 16 provincial and territorial shelter organizations, we are the national sectoral voice on intimate partner and gender-based violence in Canada. We connect organizations, co-create knowledge, and advocate for the policies, resources, and relationships that make safety and equity possible.

Women's Shelters Canada acknowledges that the location of our office and the work that we do in Ottawa is on the traditional, unceded territories of the Algonquin Anishnaabeg People.

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Acronyms

2SLGBTQIA+: Two-Spirit, lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual
ASL: American Sign Language
DEIA: Diversity, equity, inclusion, and accessibility
GBV: Gender-based violence
IPV: Intimate partner violence
LSQ: Langue des signes québécoise (Quebec Sign Language)
PDF: Portable Document Format
TFGBV: Technology-facilitated gender-based violence
TH: Transition house
UN: United Nations
VAW: Violence against women
WSC: Women's Shelters Canada

Glossary

Double staffing

A staffing model in which at least two workers are present on site during a shift, so that no staff member is left alone to manage the shelter, respond to crises, or support survivors. Double staffing is widely recognized as a key safety measure for both survivors and staff.

Harm reduction

Harm reduction is an evidence-based, client-centred approach that seeks to reduce the health and social harms associated with addiction and substance use, without necessarily requiring people who use substances to abstain or stop (Canadian Mental Health Association, n.d.).

Infrastructure

The physical elements, systems, and facilities that support how a shelter building operates and is utilized. While this includes the building and physical environment, it also extends to shelter equipment, digital capacity and cyber infrastructure (e.g., internet, devices, cybersecurity), accessibility features, and essential on-site or community-based social and public services.

Post-pandemic

In this report, post-pandemic refers to the period following the lifting of public health mandates related to COVID-19 in most spaces. We acknowledge that COVID-19 is now endemic and continues to have disproportionate impacts on vulnerable populations, particularly disabled people.

Shelter capacity

At capacity: In a VAW shelter context, at capacity means every available bed or unit is full, and the shelter cannot safely admit additional survivors seeking help.

Funded capacity: A shelter has filled all the beds or units for which it has funding to operate.

Maximum capacity: A shelter has filled all available beds or units, including spaces that may not receive dedicated funding to operate, and may therefore be operating beyond its funded capacity.

Shelters by type

Emergency shelter or transition house: Provides short-term shelter to women and children in crisis, usually with private bedrooms and communal living spaces. Length of stay can be days, weeks, or months, depending on the shelter (Akbarnejad et al., 2023). These may also be called crisis shelters. This report will use the terms emergency shelters/transition houses.

Second stage shelter or transitional housing: Provides longer-term accommodation to women who may no longer be fleeing immediate abuse but require continued support and safety, often in apartment-style spaces. Length of stay may be months or years, depending on the shelter (Akbarnejad et al., 2023). This report will use the term second stage shelters.

Mixed shelter: Provides a combination of emergency and second stage shelter spaces within one building or facility.

Safe homes: Community-based networks of private homes that shelter women and their children, typically for very short stays. They also provide outreach services in small, rural communities that are often far from larger towns (Akbarnejad et al., 2023).

Survivor/Client

To be as inclusive as possible, this report uses the term survivor or client to refer to people experiencing, or who have experienced, violence and are accessing shelter and transition house services.

Woman/Women

This report may use woman or women when referring to survivors of violence. We use the following definition generated by the BC Society of Transition Houses and adapted by Women's Shelters Canada in our Tech-Safety Canada national study: "The term 'women' refers to and is inclusive of all self-identified women. Women's Shelters Canada recognizes that while violence has significant impacts on cisgender women and girls in Canada, 2SLGBTQIA+ and gender-diverse people are disproportionately impacted by experiences of violence" (Cahill, Wong, & Hoogendam, 2024).

Executive Summary

Violence against women (VAW) shelters and transition houses (THs) across Canada provide safety, healing, and pathways to independence for women, gender-diverse survivors, and their children. However, they are shouldering growing and increasingly complex demands in the context of an ongoing housing crisis, inflation, climate-related disruptions, and the rising rates and expansion of gender-based violence (GBV), even as they remain underfunded and overextended. This report updates and expands on the 2019 national study by Women's Shelters Canada (WSC), *More Than a Bed: A National Profile of VAW Shelters and Transition Houses and Transitioning to a Life Free from Violence*, bringing together data on emergency shelters/transition houses and second stage shelters into a single, integrated national profile.

Between March and July 2025, WSC administered a survey to 618 VAW shelters across every province and territory, asking them questions about shelter infrastructure, capacity and occupancy, populations served, services provided, workforce conditions, and funding. A total of 317 shelters responded, including emergency shelters and transition houses, second stage shelters, mixed shelters, and safe

houses, spanning large and small centres, and rural, remote, isolated, northern, and Indigenous communities (see the glossary for descriptions of each shelter type).

The report provides data on the state of shelter buildings and accessibility, capacity and occupancy trends across the housing and shelter continuum, the diversity of survivors served, the range of shelter services offered, and the conditions facing the shelter workforce, alongside core funding shortfalls and wider contextual pressures. It also examines the impacts of external crises, such as the COVID-19 pandemic, the opioid and toxic drug crisis, technology-facilitated gender-based violence (TFGBV), and climate-related events on shelter operations. The report traces how VAW shelters and transition houses have evolved from small, grassroots crisis houses into a continuum of sheltering and outreach services operating at the intersection of safety, housing instability, public health, and social inclusion, even as funding, policy, and infrastructure have not kept pace with these expanding roles.



Summary of Key Findings

1

Aging infrastructure and uneven accessibility emerged as among the most urgent and persistent challenges, particularly in remote, northern, and Indigenous shelters.

- A.** The median year of shelter construction is 1981. Almost half (45%) of shelters require major repairs, and a further 31% require minor repairs. Among those needing repairs or renovations, 53% lack the required funds to undertake this work.
- B.** Rural, remote, northern, and Indigenous-run shelters are overrepresented among shelters in need of repairs. Among these shelters, many do not have the funds to complete these projects, compounding long-standing gaps in infrastructure investment.
- C.** Accessibility barriers remain entrenched, with few shelters being fully accessible. Only 48% of shelters are generally accessible for survivors using a wheelchair or mobility device, and accessibility is markedly lower for Deaf or hard-of-hearing survivors and for blind or visually impaired survivors. Accessibility and infrastructure limits not only reduce capacity but can force shelters to turn away survivors with more complex accessibility needs or to place them in spaces that do not fully meet their needs, undermining safety, dignity, and inclusion.

2

Capacity pressures are severe across the shelter continuum and are directly tied to the national housing and affordability crisis.

- A.** For emergency shelters/THs, the average number of funded beds is 17.5, while the average number of operational beds is 21, meaning shelters are routinely operating above what is officially funded. A majority (64%) operate beyond even their funded capacity more than once a month.
- B.** Among second stage shelters, the average number of funded units is 8.5 and the average number of units in operation is 10.5, meaning many are already using more units than they receive funding for. Many shelters operate regularly at or near this capacity and are forced to turn away survivors.
- C.** Due to the housing crisis and deep affordability issues, survivors are staying longer in shelter, which keeps beds and units occupied and unavailable for new survivors. Although many organizations have maximum length-of-stay policies, 80% of emergency shelters/THs and 65% of second stage shelters report extending stays, contributing to longer waitlists and higher turn-away rates.
- D.** Survivors exiting shelter often face limited options, including moving in with friends or family, entering unaffordable, inadequate, or unsuitable housing, or, in some cases, experiencing homelessness, or returning to an abuser.
- E.** In the post-pandemic period, 57% of shelters report ongoing higher rates of GBV than before the pandemic, and 52% report greater severity of violence, while 75% indicate that overall demand for services has continued to increase.

3

Shelters serve increasingly diverse populations and offer expansive services to meet complex needs and fill systemic gaps, but capacity constraints and chronic underfunding make this difficult.

- A.** The majority (63%) of shelters serve exclusively intimate partner violence (IPV) survivors, while 37% have expanded mandates to support women facing other forms of violence and harm, including trafficking, forced marriage, sexual exploitation, and homelessness, without corresponding increases in funding or infrastructure.
- B.** Shelters have limited capacity to offer dedicated supports to meet the intersectional needs of all survivors. In particular, these are limited for Black survivors, as well as Two-Spirit, trans, gender-diverse, gender-fluid, or intersex survivors.
- C.** More than half (58%) of shelters offer targeted, culturally relevant programming for Indigenous survivors, but these programs are often under-resourced and cannot fully meet the demand for Indigenous-led and culturally grounded supports.
- D.** While 92% of shelters offer targeted programming for children and youth accompanying a resident, few can offer supports for unaccompanied youth.
- E.** Shelters reported supporting survivors with complex mental health needs or those using substances. A majority (83%) reported supporting more people using substances over the past three years, while 77% say their communities lack adequate substance use resources. Shelters have had to fill critical public health gaps without appropriate funding, training, or clinical support.



4

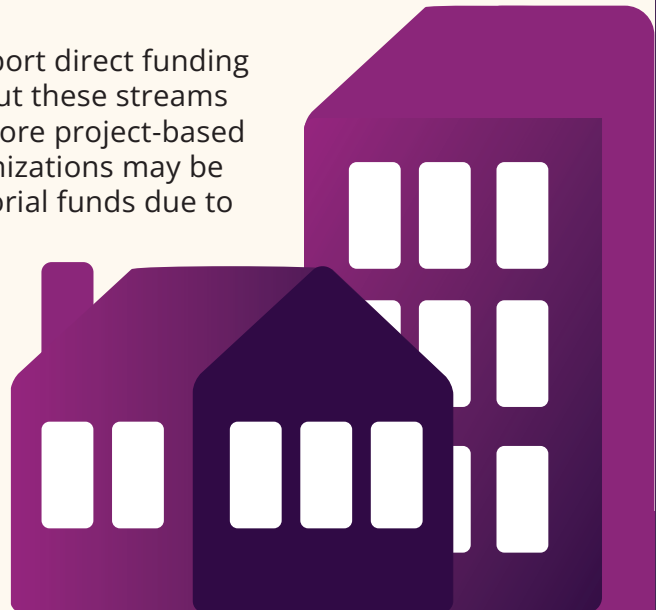
The shelter workforce is large, specialized, and under intense strain. Turnover, burnout, and the emotional toll of the work remain pervasive, with 45% reporting this as a major challenge. Of the reported 6,304 total workers, 27% are employed in precarious positions as casual or relief staff.

- A.** Shelters describe ongoing difficulties recruiting and retaining staff, covering 24/7 shift work, and sustaining double staffing, which in turn limits their ability to keep pace with increasingly complex survivor needs.
- B.** Many organizations also report limited resources for training, professional development, and mental health supports for staff, even as the scope and complexity of the work continue to expand.
- C.** Volunteers and board members remain essential to keeping services running, but they cannot compensate for chronic gaps in paid staffing and core funding.

5

Over half of surveyed organizations (56%) report a chronic shortfall in core operational funding, reflecting stagnant and insufficient government and other core funding streams that have not kept pace with costs and service demands. Many identify general shelter operations and administration, renovations and repairs, and prevention programming as among the most difficult areas to fund, leading to reliance on ongoing fundraising, competitive grants, and time-limited project streams. Shelters provide a wide array of services, both to residents and to non-residents, which support their safety and healing from violence. This work is often done with inadequate resources, forcing shelters to continuously do more with less.

- A.** More than half of shelters cannot meet operating expenses without fundraising, and 10% cannot meet them even with fundraising. Only 25% report having a dedicated fundraiser, indicating that core funding has not kept pace with rising wages, payroll costs, and basic operating expenses.
- B.** In the past 12 months, 23% of shelters reported reducing or cutting a program due to lack of funding.
- C.** A large majority of shelters (84%) identify inflation and cost of living as a major challenge, citing increasing costs for staffing, food, transportation, utilities, security systems, technology, and repairs, which have outpaced increases in operational funding.
- D.** Among Indigenous shelters, 44% report direct funding from Indigenous Services Canada, but these streams are often smaller, less stable, and more project-based than provincial sources. These organizations may be unable to access provincial or territorial funds due to jurisdictional disputes between different levels of government.





6

Broader crises and societal trends have intensified the pressures on shelters, including climate-related disasters, the ongoing impacts of the COVID-19 pandemic, the opioid and toxic drug crisis, rising TFGBV, and a deepening housing and affordability crisis.

- A.** Climate-related events such as wildfires, floods, storms, and heatwaves are a growing threat and have directly and indirectly affected shelters in recent years. While 57% of shelters report having some form of emergency preparedness plan, 43% do not, and many describe a lack of funding, staff time, and guidance as barriers to undertaking this planning.
- B.** While pandemic mandates and many public health measures have ended, shelters continue to feel the impact of the pandemic through ongoing high rates and severity of violence, poor mental health of survivors and workers, and increased demand for services.
- C.** The opioid crisis is a lived reality in Canadian shelters. The data reveal a sector attempting to respond to a public health emergency with insufficient dedicated expertise, infrastructure, and funding. In the last 12 months, shelters have seen more people using substances, with a severe lack of community programs and resources to support these individuals.
- D.** Technology is advancing rapidly. This has had many positive impacts for shelters and survivors, yet at the same time, it has also been weaponized to harm survivors and attack organizations. Due to pandemic restrictions, many shelters expanded and have maintained their ability to connect with survivors through virtual options, such as video calling and text messaging. Unfortunately, there has also been a rise in TFGBV, and while some shelters have staff with training in this area, much more is needed to address this evolving form of violence.

Recommendations



The data point to a set of interlocking changes needed to stabilize and strengthen Canada's VAW shelter system so that it can continue to offer safety, dignity, and real pathways to independence for survivors. Key recommendations fall under five main themes: capital investment for shelters, access to affordable housing for survivors, increased operational and program funding, targeted attention on the ways external crises affect this sector, and alignment of priorities with the National Action Plan to End

Gender-Based Violence. More detailed recommendations are available in the final section of this report.

1

Sustained capital investment in shelter infrastructure, especially in remote, northern, and Indigenous communities, to address aging buildings, ensure compliance with accessibility standards, support universal design and disability access, and maintain appropriate safety and security measures, while expanding capacity where population and demand indicate need. Investments in infrastructure must also clarify and address jurisdictional gaps that leave Indigenous shelters and on-reserve facilities without access to provincial/territorial capital funds and should support both repairs to existing buildings and the construction of new shelters.

2

Ensuring access to affordable housing and supportive options, as shelters are seeing increased turn-away rates that will continue to rise and put the safety of survivors at risk. Coordinated federal, provincial, and territorial action must:

1. increase capital and operational funding for housing, fast-track approvals, enable rezoning, provide land contributions, and support retrofitting and renovations to expand the supply of safe, affordable, and appropriate permanent housing and grow the shelter sector, particularly second stage shelter and longer-term transitional options; and
2. strengthen housing and income supports, including portable housing benefits, rent subsidies, and pathways to ownership.

Increased efforts to align federal, provincial, and territorial strategies are needed to better harmonize housing policies, income supports, and gender-based violence strategies with shelter realities so that survivors are not forced into unsafe, unaffordable, or inadequate housing, homelessness, or back into abusive situations when they leave shelter.

3

Providing adequate, indexed, and reliable funding for shelter operations, alongside investments in the workforce and in the programs that make shelter spaces inclusive and effective. Stable core operational funding is required to support competitive wages and benefits and to fund professional development. Dedicated, multi-year funding streams for culturally specific programming, supports for Indigenous, racialized, 2SLGBTQIA+ and disability communities, accessible information and communication tools, and services for children and youth are also needed to address the uneven availability of targeted programming and to ensure that shelters can meet the diverse needs of survivors across regions.

4

Increasing targeted attention to broader external crises, such as the opioid and toxic drug crisis, TFGBV, and the climate emergency, at the national level, with a clear focus on how they impact shelter work. Governments must collaborate to provide adequate funding to community services to address these challenges and increase funding to shelters for expanded services that respond to emerging and worsening crises. Investments are needed to meet the needs of survivors using substances, to support training so that shelters can address technology-related threats, and to ensure that shelters are prepared for and can recover from emergencies and disasters.

5

Finally, implementing the National Action Plan to End Gender-Based Violence in ways that support standardized service levels, address regional inequities in funding and accessibility, and ensure that every survivor, in every region of Canada, can access timely, appropriate, and sustainable safety, housing, and support.