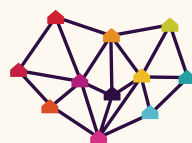




Sheltering Under Pressure:

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



WOMEN'S SHELTERS CANADA | HÉBERGEMENT FEMMES 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

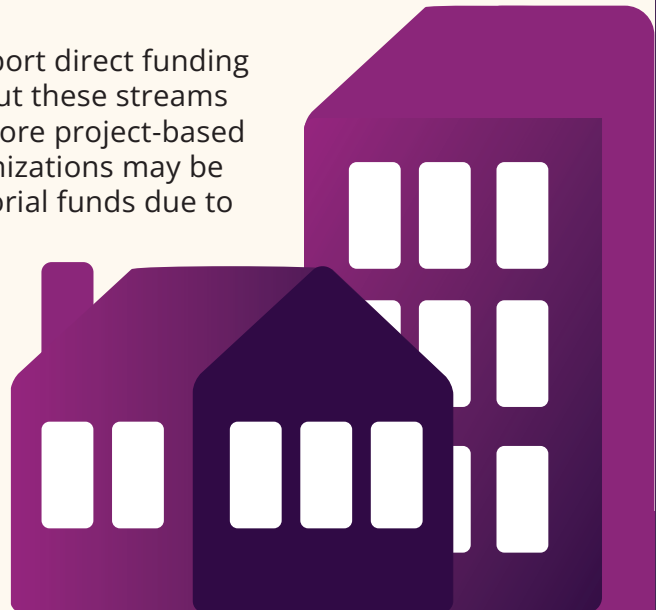
The shelter workforce is large, specialized, and under intense strain. Turnover, burnout, and the emotional toll of the work remain pervasive, with 45% reporting this as a major challenge. Of the reported 6,304 total workers, 27% are employed in precarious positions as casual or relief staff.

- 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.



Introduction

The Evolving Mandates of Violence against Women Shelters

Since their inception in the 1970s as small, grassroots feminist organizations and collectives providing temporary safety to women and children fleeing violence, violence against women (VAW)¹ shelters have represented a critical and often lifesaving response for women and gender-diverse individuals and their children seeking refuge from abuse.

Over the past five decades, these spaces have continually adapted, navigating shifting social landscapes, funding constraints, and evolving understandings of safety and justice. VAW shelters and transition houses (THs) have grown significantly in number and in scope over their history. Early shelters often operated with limited resources out of houses or improvised spaces, but quickly became key sites of feminist organizing, advocacy, and community response to violence. In 2017, Women's Shelters Canada (WSC) undertook a national survey to gain a clearer picture of the reach and scope of VAW shelters in Canada, publishing the first national study developed by and for the sector in 2019.² At the time of that survey, there were over 560 emergency shelters/THs, second stage and mixed shelters, and safe houses across Canada whose core mission was to offer residential services to women, children, and gender-diverse individuals escaping violence, alongside outreach, prevention, and advocacy work.

The 2019 national study attempted to shift the public discourse by moving beyond the image of "just a bed," presenting shelters as complex, multi-dimensional, and community-rooted service hubs committed to survivors' rights, agency, and holistic well-being. VAW shelters

provide short-term accommodation and basic needs such as food, clothing, and toiletries, and also offer individual and group counselling, child and youth programming, parenting support, system navigation, safety planning, and assistance with housing, income, immigration, and legal processes. Many shelters operate 24 hours a day in communal environments with shared kitchens, living spaces, and program rooms, and integrate trauma-informed, feminist frameworks, with a growing number also integrating harm reduction



approaches into their service delivery. In 2019, shelters reported supporting women with complex mental health concerns, substance use, disabilities, and those experiencing multiple forms of violence. This report demonstrates how the breadth of shelters' work continues to expand and deepen.

VAW shelters are multifaceted institutions at the intersection of safety, housing instability, public health, and social inclusion. Today's shelters accommodate diverse populations, including survivors facing intersecting barriers such as homelessness, precarious immigration status, racism, disability, and mental health challenges. Shelters are increasingly called upon, and are actively striving, to meet the needs of those affected by violence, sex trafficking, homelessness, and persistent forms of marginalization, often adapting policies and programming in response to urgent community needs. As in the 2019 national study, shelters in 2025 report serving women and gender-diverse survivors experiencing multiple forms of violence, as well as those survivors who may never reside in shelter through outreach and follow-up services.

Adaptability and resilience are consistent themes across Canada's VAW shelter landscape. Both the 2019 and 2025 national studies show that shelters regularly contend with chronic underfunding, unpredictable and rising demands, and a national housing crisis that keeps many residents in shelter longer than intended. Capacity issues were a concern in 2019, but despite the increase in shelters in 2025, they have worsened, with facilities and workers stretched nearly to the breaking point.

VAW shelters have evolved over their history. They now encompass a continuum

of housing and support models, including emergency shelters/THs, second stage shelters, and community-based outreach, all grounded in survivor-centred practices. Shelters even offer long-term and permanent housing options to address housing shortages. These models are further shaped by region, cultural context, and the specific populations served. Shelters serving Indigenous, Black, newcomer, 2SLGBTQIA+, rural, and northern clients each bring distinct perspectives, partnership models, and challenges, expanding what a VAW shelter is and does in a contemporary context.

WSC's national shelter surveys are designed to provide periodic, sector-led snapshots of VAW shelters/THs across Canada. By combining quantitative and qualitative data from shelters themselves, these studies inform WSC's advocacy, support policy and funding decisions, and offer shelters, governments, and community partners evidence-based information to inform planning. This 2025 survey is an update to the 2019 national study, allowing us to track emerging pressures and changes over time, and to highlight where investments and policy changes are most urgently needed.

To chart an accurate and nuanced profile of the VAW shelter landscape in 2025 is to honour the sector's history and ongoing innovation, its integration into broader systems of justice and care, and the expertise and voices of survivors and workers. Building on the 2019 national study, this report presents newly collected data and describes and analyzes how shelters are operating in the current context, highlighting key pressures, emerging practices, and the conditions that shape their capacity to provide safety and support across Canada.

Section 1



National Profile of Shelters in 2025: Background and Methodology

The 2025 Women's Shelters Canada national shelter survey builds on the 2019 national study to provide an updated national profile of VAW shelters in Canada, reflecting significant sector changes and identifying current challenges and opportunities.

Survey Methods

The 2025 survey was designed to capture a comprehensive, current picture of Canada's VAW shelter sector by gathering quantitative and qualitative data. The 2025 survey was developed by and for the sector, in collaboration with provincial and territorial shelter associations and Indigenous and other gender-based violence (GBV) sector partners.

Administered in both English and French between April and July 2025, the survey targeted all known emergency shelters/ THs, second stage shelters, mixed-model shelters,³ and safe homes⁴ across every province and territory. In total, 618 shelters were invited to participate, and organizations received a single Qualtrics survey link for each of their facilities, which they could complete partially and return to later, with tailored options for different facility types to reduce duplication while still capturing the distinct operational realities of each model.

Survey respondents were shelter staff with in-depth knowledge of their organization, operations, and facility. These were often executive directors or other senior staff members. Outreach was conducted through provincial and territorial shelter associations, targeted emails and phone calls to shelters, and social media channels. Organizations unable to access digital surveys were provided alternative options (e.g., PDF or telephone administration) to



maximize inclusion and minimize biases associated with digital access.

The survey itself comprised 109 questions, including many closed-ended queries about demographics, service delivery, capacity, and key operational data, as well as open-ended prompts to capture nuanced frontline realities and contextual explanations. Major areas of inquiry included: shelter profile and location, governance/ownership structure, physical capacity and infrastructure, populations served, types and scope of services offered, accessibility and inclusion, harm reduction and mental health, community partnerships, staff and volunteer workforce, and financial supports/gaps. While many areas of inquiry remained consistent with the 2019 national study to enable comparison over time, the 2025 questionnaire was refined to reflect a deeper understanding of the sector gained previously. It also incorporated new questions on intersectionality, substance use, technology-facilitated violence, and climate-related disruptions to better capture emerging pressures facing shelters.

The 2025 survey was designed to take less time to complete than the previous iteration, which took respondents one to one and a half hours. While the number of questions remained high, there were fewer open-text questions. The 2025 survey did not ask shelters to provide detailed budget figures because, in 2019, many organizations found it difficult and time-consuming to retrieve precise budget line data, and a significant number of respondents left these questions blank, limiting how effectively the results could be generalized. Instead, complementary information on revenues, expenses, and staffing was drawn from publicly available charitable filings, which provide consistent financial data for shelters that are registered charities, reducing the reporting burden on survey respondents.⁵

Data Analysis

This report primarily uses descriptive statistics (frequencies and percentages) calculated and analyzed using SPSS software. Frequencies were produced for all survey questions. Cross-tabulations were run by shelter type (emergency/TH, second stage, mixed, and safe house), jurisdiction, community size, and selected identity markers (e.g., Indigenous-led shelters) to examine patterns in capacity, accessibility, staffing, and policy. The results have been compared across the 2019 and 2025 survey cycles to highlight areas of continuity and change.

Narrative responses from open-ended questions were organized and coded thematically. Responses were grouped into broad themes, such as overcapacity and flexibility, housing and length of stay, staffing and burnout, harm reduction and substance use, Indigenous and culturally grounded approaches, and shifts in service delivery, including digital and hybrid models. The qualitative analysis contextualizes and deepens the quantitative findings. Illustrative quotes are integrated throughout the report to bring shelter perspectives to the foreground.

Survey Limitation

No national survey of this scale is without limitations, and a range of logistical, methodological, and environmental factors shaped the scope and reliability of the findings. Some organizations were unable to answer every question due to time constraints, staff turnover, or limited access to administrative records at the time of completion, resulting in different response numbers across questions. Shelters under the greatest pressure had less capacity to participate fully, and some questions, particularly those requiring detailed operational data, were more likely to be left blank.

The timing of data collection introduced some constraints. The survey launched shortly after the start of many organizations' fiscal year-end and remained open into early summer, a period when staffing changes, year-end reporting, and vacation schedules can reduce administrative capacity. WSC considered extending the 2025 survey window into the summer months, but anticipated very low response rates during this period due to vacations, staffing patterns, and seasonal service pressures, and therefore prioritized a shorter field period with more intensive outreach.

During the same window as the survey launch, there was an unprecedented wildfire season across the Canadian Prairies, Northern Ontario, and interior British Columbia, which was another major and unique external disruption that directly and indirectly impacted shelter operations, staff capacity, and communications infrastructure during data collection. Wildfires led to temporary evacuations, road

closures, increased demand for emergency housing, and a shift in agency attention to crisis response. While organizations indicated they would attempt to complete the survey, some prairie organizations had to delay their submissions, requested deadline extensions, or were unable to finish as a result.

Despite repeated outreach by email, phone, and through sector partners, several organizations were difficult to reach due to outdated contact lists, leadership turnover, and overwhelmed administrative staff (multiple narrative responses from the survey noted staff exhaustion, illness, and high turnover). Alternative follow-ups (e.g., individualized calls and emails) partially mitigated these challenges.

Despite these limitations, the survey report provides the most comprehensive and current sector-wide profile of VAW shelter realities in Canada to date, and offers a robust foundation for understanding trends, pressures, and resilience across the sector.

Section 2



Shelter Respondents by Type, Population Size, and Geographic Area

Of the 618 emergency shelters/THs, second stage shelters, mixed shelters, and safe homes contacted for the 2025 survey, 317⁶ – or 51% – of the sector responded. Respondents include 216 emergency shelters/THs, 46 second stage shelters, 29 mixed shelters, and 10 safe houses (n=301),⁷ reflecting the diversity of shelter models operating across Canada.

Table 1: Shelter Respondents by Type

Shelter Type	Province/Territory (n=301)													Total	%
	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	YT	NT	NU		
Emergency	38	21	8	5	64	52	8	6	1	8	1	1	2	216	72
Second Stage	12	5	1	5	8	8	3	2	1	1	0	0	0	46	15
Mixed	4	6	0	5	3	6	2	0	0	0	1	1	1	29	10
Safe House	9	0	0	0	0	0	0	0	0	1	0	0	0	10	3
Total	63	32	9	15	75	66	13	8	2	10	2	2	3	301	100

Among respondents, 77% completed it in English, and 22%⁸ completed it in French. Some agencies oversee more than one facility and completed multiple questionnaires, while others responded for a single site. Twenty organizations completed responses for more than one shelter location, covering 24 distinct shelter locations, while the majority represent single-location shelters.

Responses were obtained from shelters in every province and territory, with good representation across most shelter types and regions. At the same time, there are some gaps in the territorial data. For instance, there were no standalone second stage shelter respondents from the territories (of which there are only two in operation), although three mixed shelters in these regions reported having second stage units.

Shelter Type

Emergency shelters/THs and second stage shelters offer many of the same types of services to survivors, but they play different roles in the housing and safety continuum. Emergency shelters/THs focus on immediate safety, crisis response, and short-term stabilization. This also includes a focus on immediately-needed resources, such as new identification or support with registering for income supports.

Second stage shelters operate more like the longer-term housing programs that they are, with residents paying rent or fees in most cases (89%, n=72) and living more independently. At the same time, shelters continue to provide counselling, advocacy,

and navigation supports while survivors work toward stable housing and independence. Unlike emergency shelters/THs, second stage shelters are more likely to focus on longer-term goals, such as connecting survivors to educational programs. Many second stage residents have already accessed emergency shelter, so second stage programming often builds on earlier work rather than duplicating it, supporting survivors as they move one step closer to independent living.

“ Second stage is operated as a housing program that suits the needs of the resident... This housing model provides long-term stability and safety, allowing residents to focus on healing, rebuilding, and transitioning into the community.”

“ Second stage housing offers survivors the time and support they need to heal from trauma, rebuild their lives, and work toward long-term independence. It bridges the gap between emergency shelter and permanent housing, reducing the risk of re-victimization or homelessness.”

Population Size and Geography

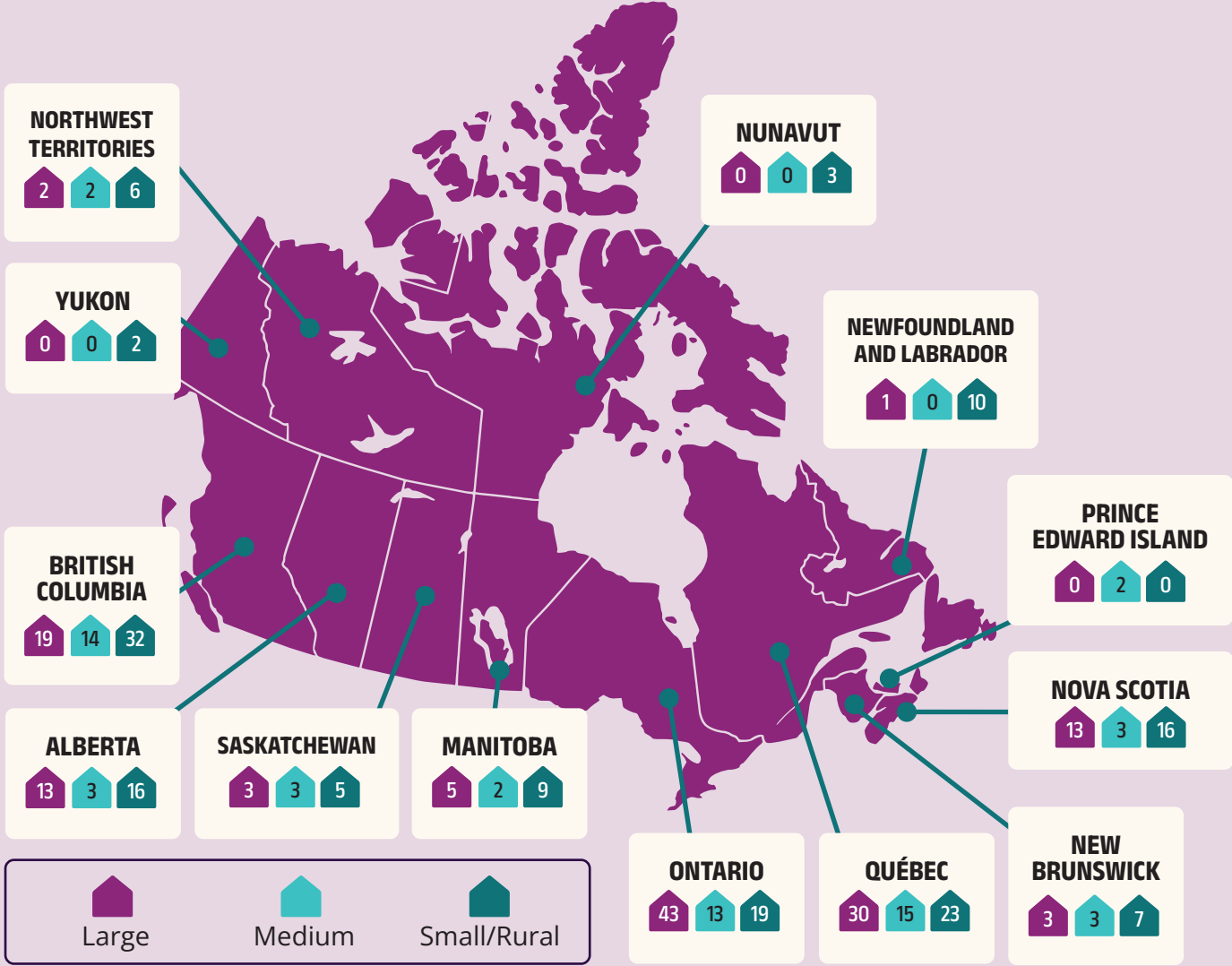
Survey responses were received from all community sizes, including metropolitan centres, large and medium-sized communities, small population centres, and rural areas. We also heard from those in remote, isolated, and northern communities. Rural shelters accounted for only 3% (n=308) of respondents, indicating a lack of shelters in these areas.

As shown in Table 2 and Figure 1, there is a relatively even distribution of shelters across the country among large and medium-sized communities, with more pronounced regional differences within provinces and territories. These patterns point to distinct needs across regions, particularly when comparing areas with larger population centres (such as Ontario or Quebec) to those with very few or no large communities (such as the territories or Prince Edward Island).

Table 2: Shelters by Population Size

Size of Community	Population Size	Category	Count (n=308)
Major Metropolitan Area	1 million and more	Large	53
Large Population Centre	100,000 – 999,999	Large	66
Medium Population Centre	30,000 – 99,999	Medium	61
Small Population Centre	1,000 – 29,999	Small/Rural	119
Rural Population Centre	Fewer than 1,000	Small/Rural	9
Total			308

Figure 1: Shelters by Province/Territory



Regional and Community-Specific Contexts

Survey responses indicate that shelters operate in a wide range of geographic contexts, including rural, remote, isolated, northern, and Indigenous communities. These contexts shape shelter operations in important ways by influencing infrastructure needs, staffing patterns, funding pressures,

transportation barriers, and the scope of programming. The associated challenges and strengths of shelters operating in these contexts are discussed in more detail in the sections on infrastructure, staffing, funding, and populations served.

Section 3



Aging and Inadequate Shelter Infrastructure

The state of VAW shelter buildings across the country varies widely. Buildings continue to age, which raises concerns about general maintenance, safety, and the physical accessibility of these spaces. While shelters want to prioritize accessibility, they struggle to access the funds needed to undertake repairs and renovations that maintain safe and inclusive spaces.

Aging Buildings

Aging structures stand out as one of the most urgent and persistent challenges facing Canada's shelters. According to the national survey, the median year of shelter construction is 1981 (n=250), meaning that many shelter facilities are nearly 45 years old, with nine built in the 1800s, and 20 being more than a century old. This aging trend is particularly pronounced among emergency shelters/THs, which make up the majority of the national stock.

Shelters are struggling to keep their buildings in a good state of repair. Respondents indicated that 45% (n=290) of shelters require major repairs (more than \$40,000), and a further 31% require minor repairs (less than \$40,000). To add to this challenge, 53% (n=288) of those needing repairs or renovations lack the required funds to undertake such projects. Many shelters, especially those built before the mid-1970s, predate accessibility legislation and modern security guidelines. Over half of all shelters (51%, n=291) were not purpose-

45%

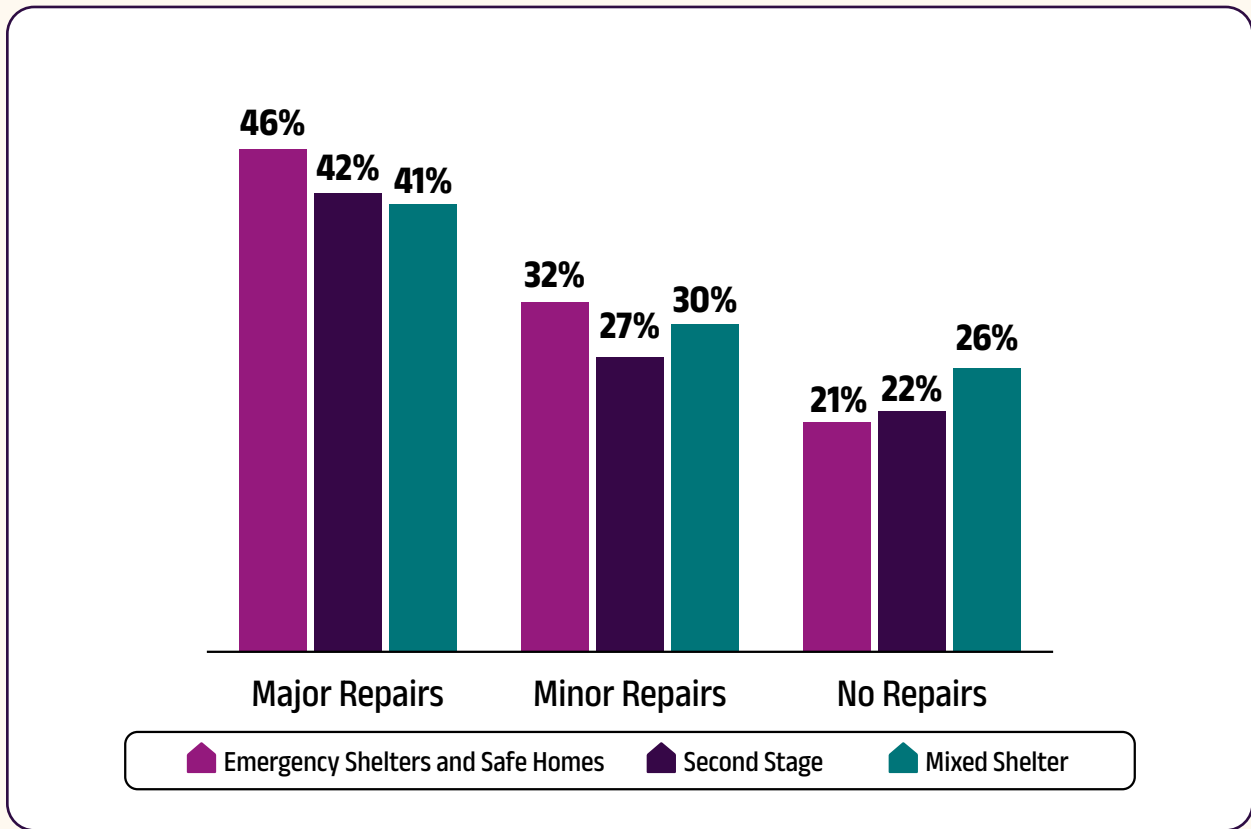
45% of shelters require major repairs (more than \$40,000).

31%

31% of shelters require minor repairs (less than \$40,000).

built but have been retrofitted, which can lead to fundamental design gaps and inadequacy for specialized service delivery. Construction costs have increased markedly over recent years (Canadian Construction Association, 2025), and for 52% (n=261) of respondents, renovations and repairs were among the most difficult areas to find funds/finance for, as government funding typically does not offer sustainable capital funding. This makes maintaining a space that provides safety, accessibility, and dignity far more challenging.

Figure 2: Facility in Need of Repairs/Renovations



Facilities frequently described chronic signs of deterioration, including leaking roofs, failing boilers, outdated wiring, insufficient insulation, and recurring water damage or mould, especially in older buildings and in regions with harsh weather. Aging infrastructure directly undermines shelter capacity, erodes survivors' sense of security and dignity, and can even threaten their health. Shelters noted unfulfilled repairs that had required them to close rooms or even sections of the shelter and reported that chronic shortfalls in capital and operational funding have forced them to defer maintenance and improvement projects for years. One respondent shared, "Our house is old and the windows are broken. We frequently get leaks that damage our walls and ceiling." Another explained, "As a rural community, it can take

weeks or months to get technical or trade support," highlighting how delays in basic repairs intersect with already high levels of demand and complexity. These conditions reduce shelters' capacity to accept referrals and force them to turn survivors away, place them on waiting lists, or refer them to distant communities.



Remote, Northern, and Indigenous Infrastructure Pressures

The infrastructure pressures discussed in this section are especially acute in remote, isolated, northern, and Indigenous communities. Among responding shelters, 15% (n=309) reported operating in communities with populations that are more than half Indigenous, and a subset of these identify as on-reserve shelters (3%, n=281). Indigenous shelters are more likely to be situated in northern, isolated, or rural communities, with substantial overlap in the physical and social infrastructure gaps they face. Indigenous-run shelters, both on- and off-reserve, are overrepresented among shelters in advanced disrepair due to chronic underfunding and jurisdictional confusion regarding responsibilities for capital support. Among Indigenous-led shelters, 80% (n=30) indicated that they needed major or minor repairs, compared to 75% (n=259) for non-Indigenous shelters. Among shelters in need of repairs, 27% reported having the funds to undertake them, meaning roughly three-quarters lack sufficient resources, as shown in Table 3. Many Indigenous shelters do not have access to provincial or territorial funds, as they fall under the jurisdiction of the federal government, hindering their ability to fund ongoing repairs and renovations to ensure that buildings are well maintained (National Indigenous Circle for Family Violence & WSC, 2023).

While shelters across the country need repairs and renovations, there are added

challenges when these spaces are far removed from urban areas. Table 3 shows that shelters are in deep need of minor or major repairs, ranging from 70% of respondents to a high of 89% of respondents. Unfortunately, these shelters often do not have the funds to undertake such maintenance, with only one-third or fewer indicating they had the funds to complete such work. While the survey did not ask directly about specific costs of items such as fuel, utilities, and building materials, responses from remote and northern shelters, along with national housing and infrastructure analyses, describe how higher transportation costs, shorter construction seasons, and limited access to skilled trades increase the cost and complexity of maintaining shelter infrastructure outside major urban centres (Housing, Infrastructure and Communities Canada, 2025; Centre for Equality Rights in Accommodation, 2021).

Ultimately, remote and northern shelters exemplify a core sector reality: geography compounds vulnerability, intensifies barriers to survivor access, and strains the sustainability of both infrastructure and staff. Ensuring equitable service provision requires policies and investments that recognize the influence of geography, as well as holistic acknowledgment of the intersectional factors amplifying harm within Canada’s remote and northern communities.

Table 3: Remote, Isolated, Northern, and Indigenous Repair/Renovation Needs

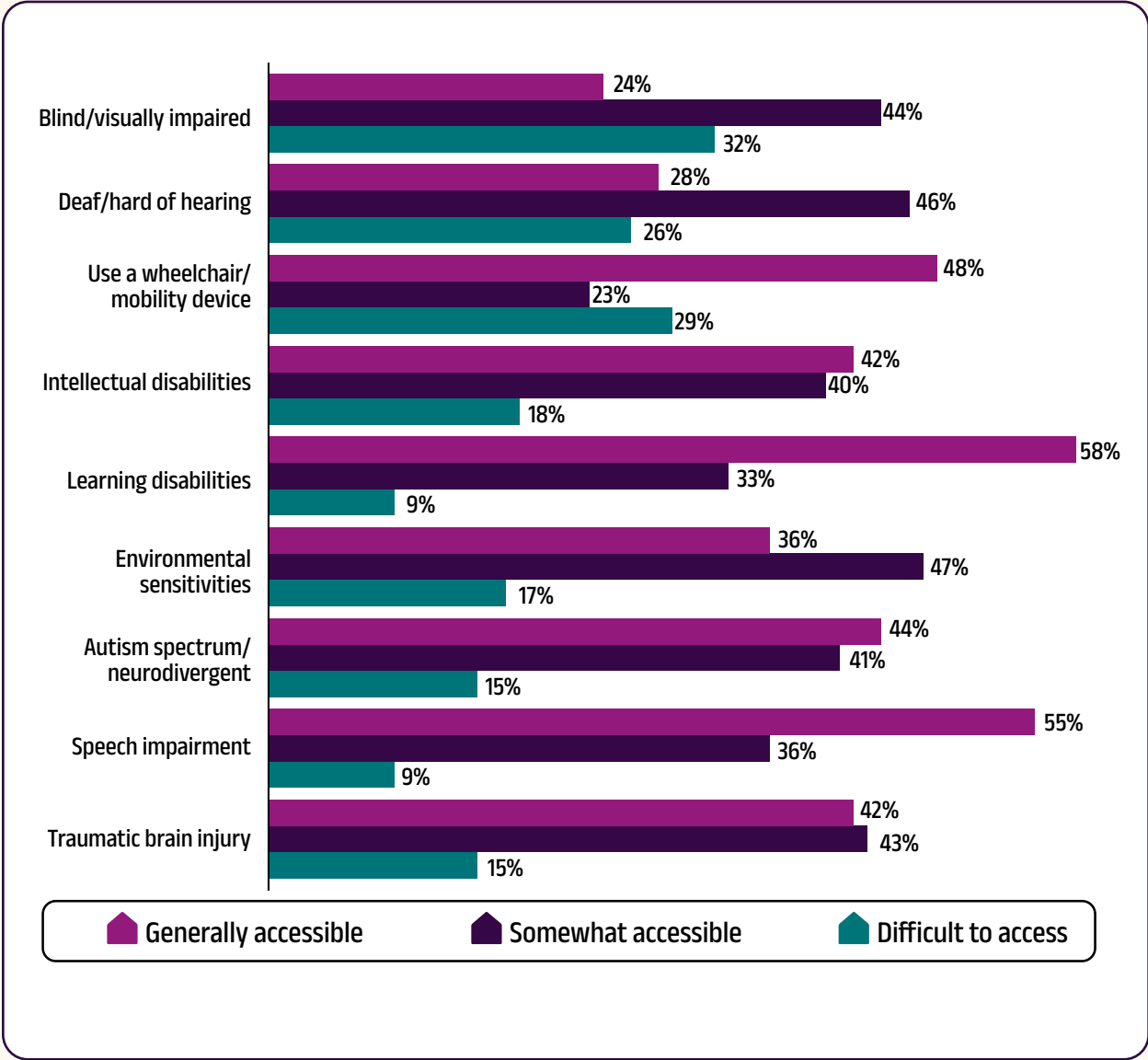
Type of Community	Need Major Repairs	Need Minor Repairs	Funds to Complete
Remote (n=42)	41%	29%	27%
Isolated (n=10)	30%	40%	20%
Northern (n=18)	50%	39%	28%
Indigenous (n=30)	47%	33%	27%

Accessibility for Survivors with Disabilities

Survey data reveal that only a minority of shelters are fully accessible to people with disabilities. Shelters reported that they are generally accessible to survivors who use a wheelchair or mobility device (48%, n=288), as well as to those with learning disabilities (58%) or a speech impairment (55%). Still, these numbers remain relatively low. As

shown in Figure 3, for those who are Deaf or hard of hearing (24%) or are blind or have a visual impairment (28%), shelters are even less accessible. This echoes broader evidence that disability remains a barrier to accessing both homeless and VAW shelters (Women’s National Housing and Homelessness Network, 2025).

Figure 3: Shelter Accessibility



With so few buildings being purpose-built and the housing stock aging, the move toward universal design has been slow. Many older facilities have narrow doorways, stair-reliant layouts, inaccessible bathrooms, and lack automatic doors. One respondent specifically noted, “There are many stairs, which impacts those who have mobility challenges.” Retrofitting older buildings and structures that were not intended for shelter use can be particularly challenging, and often very costly (Women’s National Housing and Homelessness Network et al., 2024). Unfortunately, without ongoing funds for capital, renovations aimed at improving accessibility can be deprioritized in favour of basic maintenance. The survey results demonstrate that overall accessibility has changed very little since the 2019 national study; nevertheless, 45% of shelters report having completed renovations in the past five years that were specifically aimed at improving accessibility.

In recent years, shelters have seen only gradual gains. More modern shelters and purpose-built facilities are more likely to meet national and provincial accessibility standards, featuring ramps, elevator access, and emergency call systems that are accessible for Deaf or hard-of-hearing survivors.

Accessibility gaps are even more pronounced for those in rural, remote, isolated, and northern regions, and in Indigenous communities, especially where facilities have not been newly built. With only a few exceptions, responses show that for those with any disability, accessing shelter can be difficult. Survivors with disabilities already face several obstacles that prevent them from getting to shelter, and additional barriers make finding safety very challenging.

In terms of communication accessibility, only 9% (n=281) of respondents reported having accessible websites, while 74%

“

We are not accessible and have been advocating for a new, accessible space for years.”

(n=281) were able to provide materials in plain language formats, which are key considerations for survivors with variable literacy or cognitive abilities, and those with visual impairments.

A lack of coordinated capital funding, impacts the ability of shelters to be safe and inclusive. Several facilities noted that physical barriers have forced them to turn away, or inadequately serve, survivors with complex accessibility requirements. As one shelter noted, “We only have one accessible studio unit and no elevators to the second floor, so we can’t accommodate those with physical disabilities.” The need for accessible, universally designed shelters is urgent and well documented. Presently, accessibility measures are often implemented in an ad hoc, temporary, and inadequate manner, and the issue will only become more challenging as facilities age (Canadian Centre for Housing Rights, 2024).

Safety and Security Measures

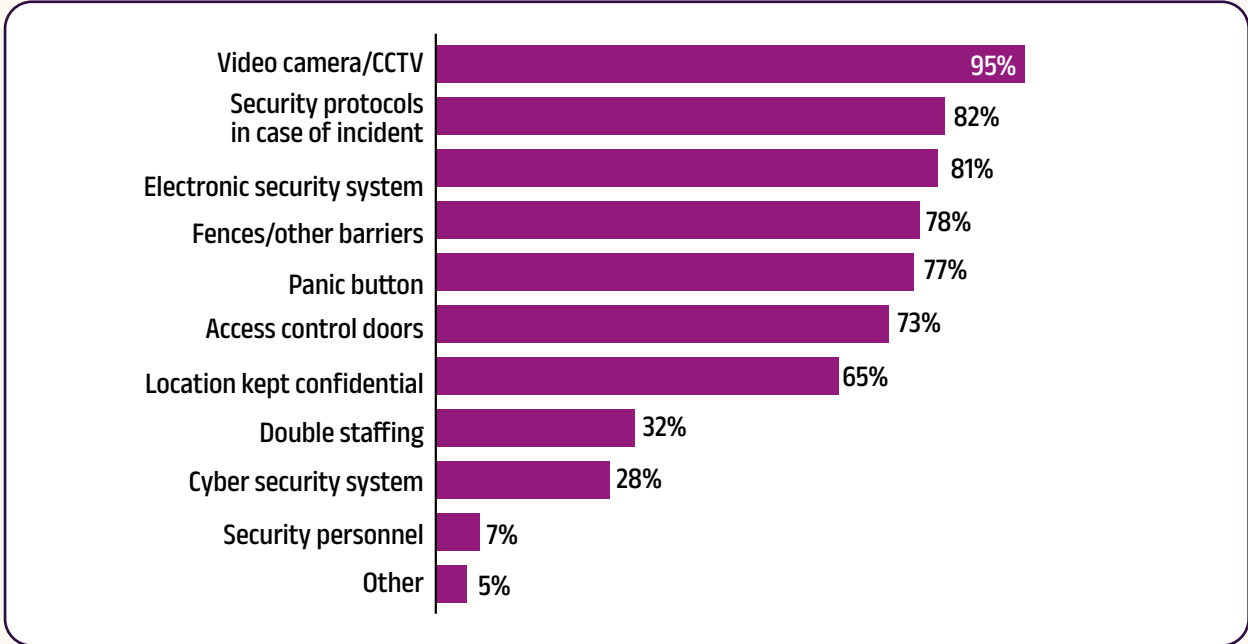
Safety and security are at the heart of VAW shelter operations and a core requirement for ensuring that survivors can reclaim their lives with dignity and protection. Across Canada, shelters employ an array of security measures, but significant disparities and unmet needs remain. As shown in Figure 4, most responding shelters have a consistent set of security measures, including cameras, security systems, incident protocols, barriers, and panic buttons. These all contribute to protect staff and survivors from abusers who may seek out the shelter. While these measures are common, there is always variation in the sophistication, integration, and monitoring of these systems.

Only 32% of shelters currently have double staffing in place, and the absence of a second worker on site is both a safety concern and a risk to staff well-being. Lack of double staffing is not a new issue for the sector. Limited funds to hire additional staff, ongoing recruitment and retention challenges, and the difficulty of covering less desirable shifts (such as nights, weekends,

and holidays) all make it hard for shelters to consistently have two workers present. When double staffing is not available, a single employee is responsible for all aspects of shelter operations during their shift, including responding to crises, supporting survivors, managing intake and departures, monitoring the building, and handling administrative tasks. This has repeatedly been identified by shelters as a safety concern and a major contributor to high workload, stress, burnout, and staff turnover, particularly in smaller shelters and those in rural, remote, and northern communities (Hoogendam & Maki, 2024).

Even though cybersecurity is recognized as a growing concern for individuals and organizations of all kinds, only 28% of shelters indicated that they have cybersecurity software in place. At the time of the survey, however, direct cyberattacks remained relatively rare. When asked about data breaches, stolen funds, or tracking software found on work devices, 5% or fewer organizations reported experiencing these incidents. A more immediate concern

Figure 4: Security Measures in Place



Only 32% of shelters currently have double staffing in place, and the absence of a second worker on site is both a safety concern and a risk to staff well-being.

for shelters is abusers using survivors' or children's personal devices to locate confidential shelter addresses. Among the 65% of shelters that indicated their location is confidential, 36% (n=205) reported that a survivor's device had been used to track them to the shelter, and 23% reported similar incidents involving a child's device. Additionally, many shelters were unsure whether this was occurring, underscoring the need for ongoing training and support on technology-facilitated gender-based violence and technology safety for staff and survivors.

“ We recognize that safety is not only physical but digital. We take ongoing steps to educate both staff and residents about technology-facilitated violence and online privacy risks. We are working toward enhancing our safety and security infrastructure to respond to the evolving nature of digital threats in intimate partner violence situations.”

Despite widespread adoption of security measures, almost three-quarters of shelters report that they do not have all the security they need. Shelters reported the lack of double staffing as a major gap, with 39% (n=267) of respondents not having the funds for this critical safety mechanism despite needing this support. Similarly, 23% of respondents were unable to upgrade their tech systems to include cybersecurity software because of funding constraints. In

addition, funding gaps prevented current security systems, including electronic systems, windows, and doors, from being adequately upgraded or maintained. Critical infrastructure, such as panic alarms, reinforced doors, and secured outdoor spaces, has been credited with preventing incidents or de-escalating threats (UN Women, 2012). However, staff in many regions cite recurring security failures due to technology breakdowns, insufficient funding for repairs, or aging infrastructure, which leave shelters without reliable alarm systems, cameras, or secure doors when they are most needed. As one shelter explained, “Security systems upgrades are constant and expensive,” and limited funding makes it difficult to keep pace with necessary replacements and repairs.

A small number of organizations indicated that it was difficult to find adequate funding for physical safety and security measures, such as cameras, alarms, secure doors, and panic buttons. While this may not be the most difficult area to fund (only 8%, n=261, indicated this was the case), some shelters (38%, n=214) were required to fundraise for these critical items because they were not fully funded through core budgets. Given that safety is a core mandate of shelters, this reliance on fundraising and short-term grants for essential security infrastructure contributes to uneven protection across the sector and highlights the need for dedicated, sustained capital and operating support (Women's National Housing and Homelessness Network et al., 2024).

“Our video camera system is very old and needs to be replaced with a more robust system.”

Section 4



Capacity, Occupancy, and the Housing Crisis

While the affordable housing crisis was identified in the 2019 national study, it has worsened substantially in recent years. This is pushing organizations even further beyond their maximum capacity. According to Statistics Canada, on a single day, shelters turned away nearly 1,000 survivors, mainly because they were at or over capacity (Heidinger, 2024). Similarly, in a 2024 report, WSC found that 97% of shelter survey respondents indicated that, over the preceding 12 months, it had become harder to support survivors in finding housing (WSC, 2024b).

Funded Beds vs. Actual Capacity

The discrepancy between officially funded bed⁹ counts and the number of beds shelters have in operation is a persistent challenge across the shelter system. Shelters exist to bridge varying needs from immediate safety to longer-term housing for survivors of violence, but chronic underfunding creates structural overcapacity and forces organizations to operate beyond sustainable limits.

Being “at capacity” in a VAW shelter context means that every available bed or unit is full and the shelter cannot safely admit additional survivors. This signals a system under strain; when shelters are full, new survivors must be turned away, placed on waiting lists, or referred to other communities, and staff have no buffer to respond to emergencies or complex situations. While there is no single ideal capacity ratio, operating at or above capacity is not a sign of success but of an overburdened system. Shelters describe the emotional and ethical strain of turning away survivors because there is simply no room, with one shelter noting that “We are not able

to support as many people as we would like to,” due to the combination of housing shortages, funding limits, and infrastructure constraints. A margin below 100% capacity – something shelters rarely have – is necessary to allow for safe intake, to respond to emergencies, and to accommodate survivors with specific needs (for example, larger families, mobility or accessibility requirements, or heightened security concerns).

Many shelters can offer space beyond that which they are funded for, which is referred to as “maximum capacity.” When shelters are forced to regularly exceed their “funded capacity,” this stretches resources and staff to their limits.



For emergency shelters/THs,¹⁰ the average number of funded beds per facility is 17.5 (n=247), while the actual average number of operational beds is 21 (n=242) – a difference of more than three beds per shelter. Among these shelters, 64% (n=245) are at capacity at least once a month, and 42% operate at capacity more than once a week. Additionally, 12% (n=247) provide a bed, cot, or other sleeping space more than once a month, which are not counted toward operational capacity. These are often only for very limited amounts of time, and in very high-risk situations.¹¹

Among second stage shelters,¹² the average number of funded units is 8.5 (n=71), while average actual capacity is 10.5 (n=72) – a difference of two beds per shelter. Among these shelters, 62% (n=72) are at capacity at least once a month, and 52% are at capacity more than once a week.

Due to the housing crisis and deep affordability issues, survivors are staying longer in both emergency shelters/THs and second stage shelters, which means beds and units remain occupied for longer periods and are not available for new survivors seeking support. Despite many organizations having maximum length-of-stay policies, 80% (n=212) of emergency shelters/THs and 65% (n=68) of second stage shelters report extending stays when survivors cannot move into their own accommodations, contributing to long waitlists and high turn-away rates. While this flexibility is often necessary for survivors unable to find housing, it is contributing to capacity constraints and rising turn-away rates, as shelters cannot accept new individuals. When shelters cannot provide an extension beyond the maximum length of stay, they support survivors in their next steps. The most common ongoing supports are outreach services or referring survivors to other social services or to another local shelter. Due to the housing crisis and chronic under-resourcing of the

shelter sector, shelters are experiencing profound and persistent capacity pressures. When organizations regularly operate at or beyond their capacity, this has negative impacts across the organization, particularly for survivors and staff. With staff stretched thin and more time devoted to housing advocacy and crisis response, workers have less time for in-depth, trauma-informed support with each survivor. Many shelters link high workloads and constant capacity pressure to burnout and difficulties sustaining the quality of care they want to provide.

As one respondent noted, “Due to inadequate staffing, we cannot contemplate areas of work beyond current essential services,” highlighting how constant pressure to meet immediate needs limits the time and space available for deeper support and innovation. Operating above capacity in communal environments can further contribute to health and safety risks, including reduced ability to monitor for illness or overdoses, increased crowding and noise in shared spaces where children are present, and heightened stress for survivors living in already constrained conditions.

Despite their best efforts, it is becoming increasingly impossible for shelters to accommodate all survivors. Shelters are often forced to refer survivors to other shelters in communities that are increasingly further away from the survivor’s home community, compounding trauma and social isolation. As one respondent observed, “We are experiencing challenges with complicated cases and waitlists for clients...we are not able to support as many people as we would like,” capturing the tension between rising demand and limited capacity. The sector reports that these capacity challenges also undermine long-term housing security, as survivors are often forced to move from shelter into unaffordable, inadequate, or unsafe housing, increasing their chances of returning to violence or becoming homeless.

Length-of-Stay Policies

Length-of-stay policies in VAW shelters vary widely, reflecting local policies, funding requirements, community context, and operational pressures. These policies are important mechanisms that both control capacity and ensure that shelter spaces remain temporary solutions by motivating survivors to find secure housing. Despite the intent of these policies, the current housing and rental market makes it nearly impossible for shelters to follow them consistently.

The range across Canada is broad, with length-of-stay limits ranging from 10 days to 1 year. Among all emergency shelters/THs, the average length of stay is approximately 10 weeks (n=67). However, two shelters reported a much longer length of stay (1 year); without these outliers, the average length of stay is 8.5 weeks (n=65). While 27% (n=250) indicated they had set length-of-stay times, 12% indicated they had no maximum, and 61% said that this varies based on case complexity, risk, or other factors.

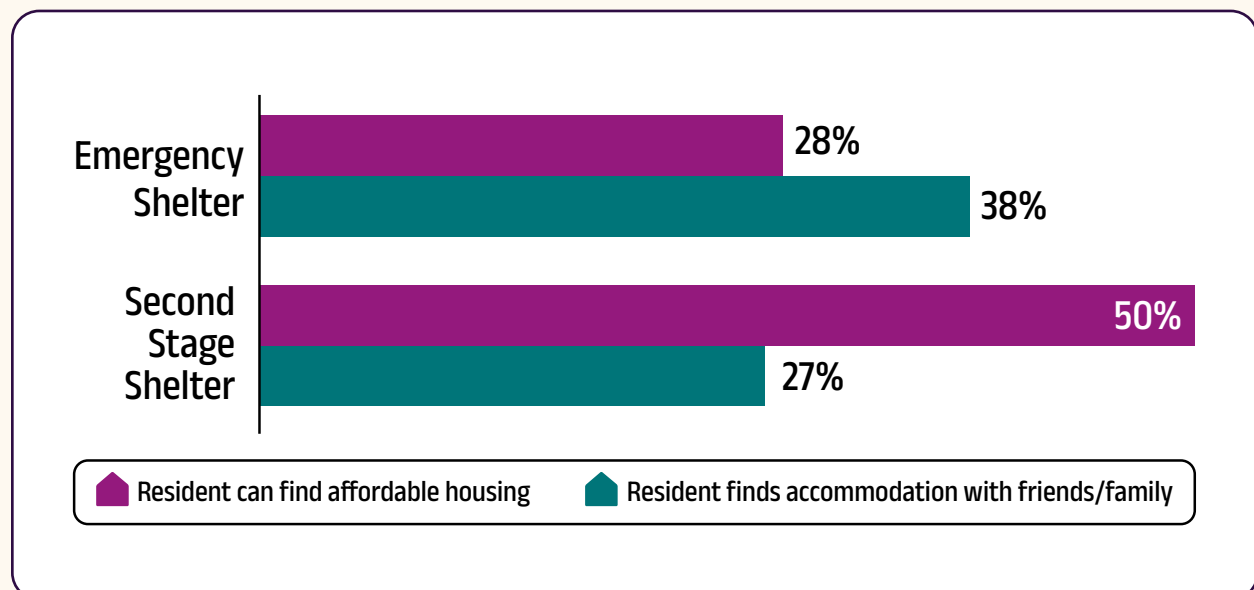
Second stage facilities are more likely to offer fixed tenancy lengths ranging from six months to two years. On average, second

stage shelters have a maximum length of stay of 18 months (n=44). Like emergency shelters/THs, two shelters indicated that their length of stay was much longer (3–4 years); the average without these exceptions is 17 months (n=42). A majority of second stage shelters indicated that they have a maximum length of stay (61%, n=72), while 6% have no maximum, and 33% have a maximum that varies based on needs and capacity.

The ongoing affordable housing crisis profoundly shapes the experience and effectiveness of the VAW shelter sector, affecting flow, capacity, staff workload, and survivor safety. Without affordable or suitable accommodation being made available in a timely way, survivors are often either staying longer or making early transitions to inadequate, unaffordable, or unsafe housing.

As shown in Figure 5, shelter residents struggle to move into affordable housing at exit. This leaves survivors with less-than-ideal options, such as finding accommodation with friends or family,

Figure 5: Housing Options for Survivors at Maximum Length of Stay



moving into unsuitable, unaffordable, or inadequate housing¹³ (Canadian Mortgage and Housing Corporation, 2019), or even becoming homeless. For second stage facilities, the rates of finding affordable accommodations are slightly better, which is likely because the longer stays allow survivors more time to re-establish themselves. What is significant is that 31% (n=68) of second stage shelters said survivors are moving into unaffordable, inadequate, or unsuitable housing when they reach their maximum length of stay. For emergency shelters, only 14% (n=212) indicated that second stage shelters were available for survivors at the end of their stay, which speaks to the shortage of such facilities and the critical need for their expansion. As one shelter put it, “Access to safe and affordable housing remains one of the greatest barriers for women fleeing violence. The housing crisis in our community has made it increasingly difficult for survivors to transition from emergency shelter to stable housing,” highlighting how limited housing options at exit undermine safety and long-term stability.

Capacity Impacts

Among the top problems shelters cited is capacity issues, which is a major challenge for 66% (n=279) of respondents; nearly all remaining shelters found this to be a minor challenge. As emergency shelters/THs extend stays beyond their intended length to avoid discharging survivors into homelessness or unsafe housing, they are no longer operating as short-term crisis response/safe havens, as they were originally conceived in the 1970s. While second stage shelters were designed to provide a longer-term solution, the entire system of sheltering is being overburdened and therefore failing to meet the national need.

This is putting enormous strain on organizations and their staff, as well as on survivors. The lack of housing options creates unsustainable pressure on staff,



Access to safe and affordable housing remains one of the greatest barriers for women fleeing violence. The housing crisis in our community has made it increasingly difficult for survivors to transition from emergency shelter to stable housing”

who spend more time supporting exit planning, engaging in advocacy with landlords, and helping survivors access social assistance. As one shelter observed, “One emerging challenge not fully captured is the increasing number of women staying longer in shelter due to the lack of safe, affordable housing. This creates bottlenecks in our ability to support new clients seeking emergency shelter... adding pressure to our limited space and resources.” This underscores how housing barriers at exit intensify workload and limit capacity for new intakes. The ability to offer a safe, stable exit is directly correlated to reducing cycles of violence and re-entry to shelter systems; its absence perpetuates crisis and undermines survivor recovery.

Section 5



Groups Served by Shelters, Multifaceted Needs, and Expansive Service Delivery

Shelters serve a diverse group of survivors and offer services that extend far beyond sheltering. They apply trauma-informed care frameworks that acknowledge the profound impacts of complex trauma on survivors' behaviour, safety, and healing trajectories. Feminist intersectional models recognize that trauma unfolds differently depending on race, class, ability, gender identity, and colonial legacy. Beyond differing identities, shelters also serve women with histories of sexual exploitation, trafficking, forced marriage, and family violence, broadening the spectrum of violence that shelters were originally created to support. These approaches necessitate staff with deep expertise in many areas.



Supporting a Diversity of Survivors and Those with Multifaceted Needs

The survey demonstrates that VAW shelters serve a highly diverse clientele encompassing Indigenous women, women living in rural, remote, isolated and northern communities, immigrant and refugee women, racialized women, 2SLGBTQIA+ individuals, women involved in sex work, and survivors of human trafficking.

Supporting women with complex and intersecting needs remains one of the most significant challenges and imperatives for shelters in Canada. The survey responses underscore that the profile of survivors seeking refuge has evolved significantly in scope and complexity over the history of women's shelters, demanding increasingly specialized, trauma-informed, and culturally safe approaches.

Table 4: Targeted Programming for Survivors – Lowest and Highest Responses

Highest	%	Lowest	%
Children and youth accompanying a resident (n=286)	92%	Unaccompanied male child/youth (n=284)	14%
Older survivors (n=286)	76%	Unaccompanied female child/youth (n=285)	33%
Those with substance use concerns (n=286)	66%	Black survivors (n=290)	36%
Wheelchair/mobility device user (n=286)	66%	Survivors who are blind or visually impaired (n=286)	37%
Those living with mental health concerns (n=289)	65%	Survivors who are Deaf or hard of hearing (n=285)	44%

Women accessing shelters today often present with multiple, overlapping challenges beyond violence alone. These include severe mental health needs, experiences with substance use, physical, intellectual or developmental disabilities, varying immigration statuses, engagement with the court or child welfare system, and histories of childhood trauma or sexual exploitation. In response, shelters offer a wide range of services to survivors, as well as targeted supports for many demographics. One of the critical strengths and ongoing challenges of VAW shelters is the extent of diversity among residents, necessitating culturally competent, linguistically accessible, and identity-affirming services. The ability to accommodate survivors in all of their identities is often uneven, reflecting differences in capacity, staffing, funding, and facility readiness. Table 4 summarizes selected types of targeted programming and

shows, for each, the proportion of shelters that report offering that specific type of program. It highlights both the areas where targeted supports are most common (for example, children and youth accompanying a resident; older survivors; and survivors with substance use or mental health concerns) and the areas where targeted programming is much less available, particularly for unaccompanied youth, Black survivors, and survivors who are blind, visually impaired, Deaf, or hard of hearing.

There are stark contrasts in shelters' ability to accommodate children, depending upon whether they are with an adult survivor or are unaccompanied. It is common for shelters to have minimum age requirements for unaccompanied youth, which often range from 16 to 18. Fewer shelters accommodate male survivors, and this is reflected in the low number providing targeted supports to unaccompanied male children or youth.

While targeted supports for Black survivors were low, when shelters were asked about targeted supports for people of colour and racialized individuals, this number rose to 47% (n=288). This is higher in metropolitan areas and larger centres than in small or rural communities, reflecting greater diversity in these more populous areas.

The uneven ability across shelters to offer targeted supports to survivors with disabilities was particularly clear. For example, for those using an assistive mobility device, more targeted programs were available than for those with visual or hearing disabilities. As shown in Figure 3 (Section 3), shelters struggle to make their buildings fully accessible. If survivors struggle to access the building, organizations are less likely to provide targeted programming.

While there are efforts to provide wide-ranging services and targeted programming for many populations, under-resourcing continues to limit the training, adaptive design, and specialist staff required to create inclusive and accessible spaces. Accessibility extends beyond physical access

and includes information accessibility and service adaptations. Ensuring shelter accessibility for individuals with disabilities and access needs is a vital priority, yet the lived reality of survivors with disabilities reveals critical systemic deficits in both physical infrastructure and service delivery, which require sustained policy and funding commitments to address.

Shelters located in larger urban centres report more programming targeted toward immigrant, refugee, and racialized women accessing services, whereas small and rural shelters tend to offer more targeted supports for Indigenous and older survivors. Despite these regional differences, the overall profile of services is broadly similar across community sizes, suggesting that shelters are adapting their programming to the populations they serve, even as persistent gaps, particularly for some disability communities, unaccompanied youth, and Black survivors, remain. These gaps are concerning and point to the need for more sustained, equitable resources to match community needs in every region.



For newcomers, language issues and cultural understanding are barriers, and we are not able to provide appropriate service.”

Immigrant and Refugee Survivors

Immigrant, refugee, and racialized women experience higher rates of violence in Canada (Women and Gender Equality Canada, 2025; Cotter, 2021). Making this more challenging are the additional barriers they encounter when trying to access supports, including language divides, immigration status insecurity, and systemic racism. Shelters offer many services to support these communities.

When asked how often they provide or connect immigrant and refugee survivors to specific supports, 43% of shelters reported often providing culturally sensitive and language-specific services (n=280), 24% often helping with settlement supports (n=275), and 24% often offering translation and interpretation (n=278). When shelters that provide these supports sometimes are included, the proportion of organizations

involved in this work increases substantially. Only 27% of shelters frequently assist with immigration applications and refugee claims (n=280), and these supports are concentrated primarily in urban shelters. While not all shelters can offer in-house translation, many make their services accessible in multiple languages through external providers such as CanTalk Canada, which offers immediate translation and interpretation 24 hours a day. Such services expand access to programming but require shelters to have the available funds. Limited staff time and resources constrain shelters' capacity to build more sustained, culturally specific supports and partnerships for immigrant, refugee, and racialized survivors. As one shelter noted, “For newcomers, language issues and cultural understanding are barriers, and we are not able to provide appropriate service.”

Survivors Living in Rural, Remote, Isolated, Northern, and Indigenous Communities

Shelters in remote and northern communities describe offering a wide range of supports within a relatively constrained local service environment. Shelters in these areas often become a central point of contact for multiple needs, reflecting both the complexity of survivors' situations and the

limited availability of other services in small centres. One rural respondent, for example, observed that, "As a rural community, it can take weeks or months to get technical or trade support," underscoring how distance and service gaps shape everyday operations and survivor support.



There is a lot of pressure on our shelter to meet needs outside our mandate due to limited shelter options in our community."

Areas that Indigenous shelters navigate with a unique cultural lens include family reunification, cultural programming, and advocacy for survivors navigating the child welfare and justice systems, often integrating these roles into already small teams that also provide crisis response, outreach, and system navigation.

2SLGBTQIA+ Inclusivity

The sector is working to adapt policies, programs, and infrastructure to better serve transgender, Two-Spirit, non-binary, and other gender-diverse survivors. Nearly half (47%, n=285) of shelters reported having specific capacity or targeted programs to support Two-Spirit, trans, gender-diverse, gender-fluid, or intersex survivors. Looking back to the 2019 national study, where 50% of respondents said they had served these populations, the proportion of shelters engaging with gender-diverse survivors has changed very little over time. What has shifted in some cases is the presence of more explicit or

dedicated supports, even though many shelters still lack such programming.

Existing research demonstrates that 2SLGBTQIA+ people experience disproportionately high rates of homelessness, violence, and discrimination in shelter and housing systems, which highlights the importance of inclusive, affirming policies, staff training on gender diversity and trauma, and physical spaces where gender-diverse survivors can safely access support (Lalonde et al., 2018, Abramovich et al, 2024, Women's National Housing and Homelessness Network, 2025).

Section 6



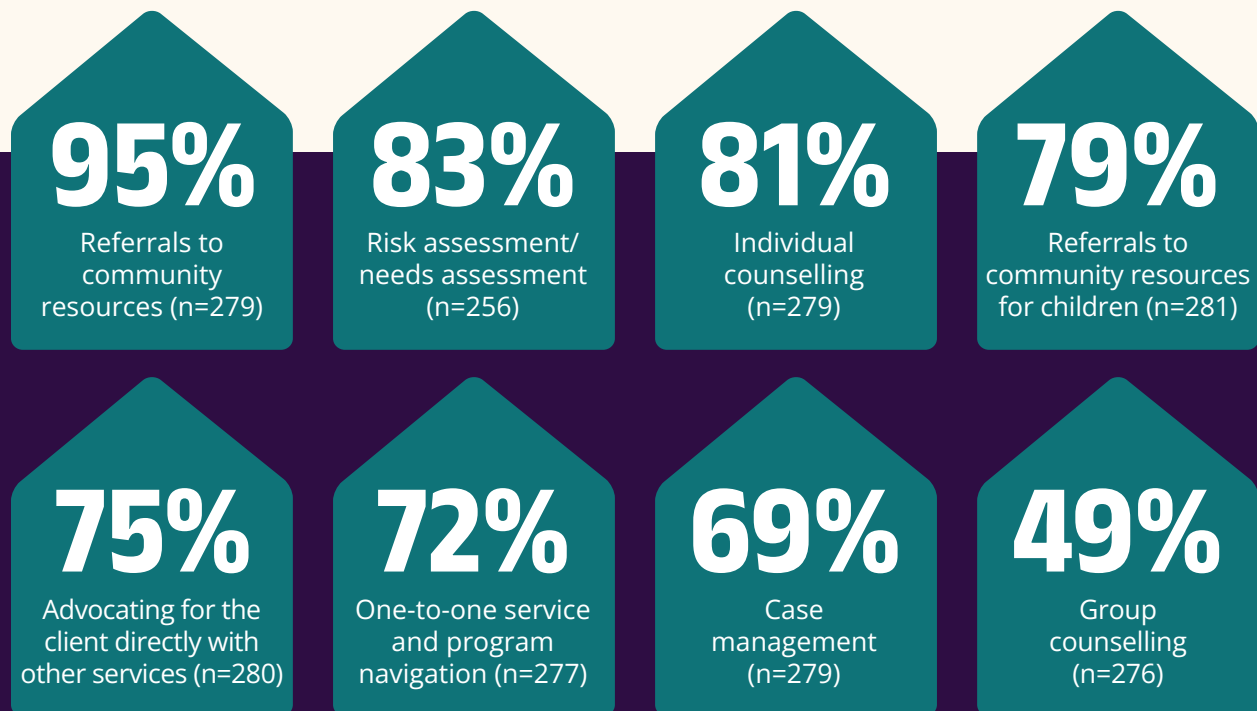
The Scope of Service Delivery

Shelters provide an integrated continuum of services that support safety, healing, and longer-term stability for survivors and their families, whether or not they are staying in the facility. With the exception of residential beds (and some on-site supports, such as in-shelter childcare), most core services, including counselling, advocacy, case management, and referrals, are also available to non-resident survivors who cannot or do not wish to enter shelter, or who have already left but still need support.

Shelter Services

Shelters offer a fairly consistent core set of services to survivors across the country. Figure 6 shows the frequency of commonly delivered supports and services provided.

Figure 6: Commonly Delivered Supports and Services



While services are tailored to individual needs, survivors can expect a crisis counsellor (or similarly titled staff person) to meet with them individually to co-create a plan for their time at the shelter and beyond. During their time engaged with a shelter, survivors will have an individual or team of staff support them through individual or group counselling, active case management, one-to-one supports, and referrals to external services. While these are common supports for survivors living in shelter, many of these remain in place for those accessing outreach services as well.

Specific programming differs across the country, but commonly includes parenting supports, children’s counselling programs, employment readiness workshops, and culturally specific services. Workers also help with individualized needs, such as housing searches, obtaining identification or other documentation, accessing income supports, securing legal supports and providing court accompaniment, and

advocating for survivors with police, child welfare, and landlords. Together, these programs and supports help sustain survivors’ holistic healing and social and economic reintegration during and after their time connected with the shelter, whether they are staying in the facility or accessing outreach support. Shelters partner extensively with organizations such as legal aid, health providers, child and family services, and immigrant and settlement agencies to extend their offerings and provide referrals.

Table 5 shows the frequency with which common services are offered, many of which help address the complex barriers survivors experience when in shelter. While these were the most common supports cited, shelters offer many other services as well. For services shelters are unable to provide themselves, 95% of respondents indicated they provide referrals to other community services (as shown in Figure 6).

Table 5: Rate of Delivery of Top Shelter Supports

Service Offered	Often	Sometimes	Rarely/ Never
Help with finding housing (n=283)	93%	6%	1%
Help accessing income supports (n=283)	91%	7%	2%
Help accessing health services - physical/mental (n=281)	79%	19%	3%
Support with the child welfare system (n=279)	73%	21%	5%
Help getting identification (n=280)	67%	27%	6%
Legal supports (n=281)	66%	23%	11%

Programming and Social Support Navigation

Survivors often face an arduous path to rebuilding independence, made more difficult by the siloed nature of social services. Social support navigation is a vital shelter function that addresses the formidable complexity survivors face when navigating legal, child welfare, housing, immigration, healthcare, and social assistance systems. As Figure 6 shows, 72% of shelters frequently assist survivors through one-to-one service and program navigation, providing critical accompaniment, information, and specialized referrals to ease survivors' transition from crisis to stability. Additionally, 75% of shelters advocate for survivors directly with other services. These navigation and advocacy supports sit alongside other commonly offered services, such as risk and needs assessments, individual counselling, and referrals to community resources, and together make it easier for survivors to access the full range of supports they need.

While navigation and advocacy are critical supports for survivors, they can be challenging for shelter workers to provide as they require ongoing partnership

development and the ability to navigate a complex web of services. As with shelters, many of the organizations offering such programs and services also have overwhelmed staff and regular turnover, which can make this navigation and advocacy role a continual challenge.

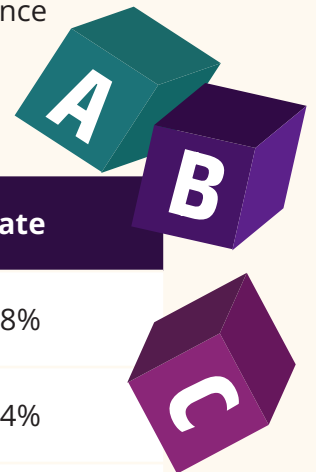
Programming for Children

Children's programming remains a strong focus, as can be seen in Table 6, with over 50% of shelters often offering supports such as school assistance, childcare, and supports for children witnessing or experiencing violence. These not only attend to children's direct trauma but also alleviate barriers for mothers engaging in other programming.

Shelters commonly provide trauma-informed mental health supports and children's counselling initiatives, recognizing the multi-generational effects of violence. Childcare is necessary to enable survivor program participation and to facilitate employment. Statistics Canada found that in a 12-month period, 39% of survivors accessing shelter were children, which makes providing these supports so necessary to the healthy development of children who experience violence (Heidinger, 2024).

Table 6: Shelter Support for Children

Support	Rate
Programs/counselling for children who are exposed to violence (n=281)	68%
School support for children (n=280)	54%
Programs/counselling for children who are survivors of violence (n=278)	50%
Childcare (n=277)	35%



Indigenous Shelters and Indigenous Survivors

Indigenous shelters, defined by governance, program mandate, or placement in majority-Indigenous communities, account for roughly 13% (n=314) of respondents. These shelters operate on- and off-reserve, within established urban Indigenous organizations, and in more remote or northern communities.

Service delivery in Indigenous shelters is deeply informed by community priorities, cultural protocols, and holistic wellness frameworks. Programming almost universally integrates Elders, knowledge keepers, and land-based healing practices; trauma-informed approaches are combined with cultural safety planning and anti-colonial frameworks.

Dedicated and culturally specific supports for Indigenous survivors and their families are provided by 90% (n=30) of Indigenous shelters, and many also serve a broader diversity of clients, reflecting the geographic realities of sparsely populated regions where a single shelter may support several communities. In this context, staff must balance roles and often serve as trauma counsellors, child and youth specialists, and outreach workers. Some shelter workers are Elders in the community. These organizations often operate with teams far smaller than their urban peers, even as they undertake intensive advocacy and system navigation work across housing, health, income assistance, child welfare, and justice systems.

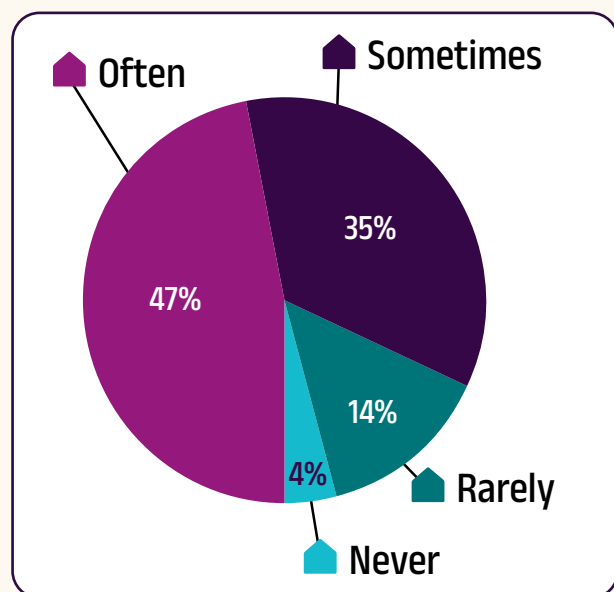
Technology and Violence

The ways survivors experience and navigate violence are changing, particularly in relation to technology. Since the 2019 national study, technology has become even more present in daily life, and because of this, concerns about how it can be and

has been weaponized by abusers have also grown (Wong et al., 2020). During the pandemic years, shelters increased their technological capacity by adding virtual crisis support, text message options, and online safety planning. Technology is not only used to connect with individuals; many people also rely on 'smart' phones, cars, and homes in their daily lives. There are online accounts or apps for everything, including banking, entertainment, and household devices, such as stoves and vacuums. While these advancements make day-to-day living easier, they also pose risks for tracking, hacking, and harassment (Cahill, Wong, & Hoogendam, 2024).

The shelter sector is working to support those experiencing technology-facilitated gender-based violence (TFGBV), although the emergent nature of this violence has made this challenging. As shown in Figure 7, nearly half of shelters are often able to provide technology safety planning. Yet, tech knowledge remains low across the sector (Cahill, Wong, & Hoogendam, 2024). One of the ways shelters work to prepare staff to support those experiencing tech-related violence is through training on tech safety and TFGBV.

Figure 7: Shelter Capacity for Technology Safety Planning



Section 7



VAW Shelter Workforce in Canada

Shelter workers are deeply skilled, knowledgeable, and engaged in life-saving work. There is no single type of shelter worker; staff come from diverse educational and professional backgrounds and perform many different roles. Despite the considerable talent across the sector, the shelter labour force is struggling with high workloads, burnout, and challenges with recruitment and retention (Hoogendam & Maki, 2024). Staff assist survivors in overcoming systemic barriers, including language access, discrimination, and bureaucratic hurdles; this role requires substantial expertise to navigate survivors' wide-ranging needs while employing trauma- and feminist-informed approaches. This work is characterized by heavy workloads, limited staff capacity, chronic funding shortages, and siloed systems, which together heighten survivors' vulnerability and strain workers' ability to sustain the support they provide.

Many workers in this sector are also themselves survivors of violence, bringing lived experience alongside formal qualifications to their roles. Consistent with this, a majority of shelters reported having a diversity, equity, inclusion, and accessibility (DEIA) policy (69%, n=285) in place, and some form of gender-based violence (GBV) policy (68%, n=284) for staff experiencing violence, signalling growing recognition that workers may also be survivors who require safety and support in the workplace. This underscores that the VAW workforce is both professionally and personally embedded in the dynamics of violence it responds to, which can bring significant strength and insight to these roles, while also creating the potential for re-traumatization if supports are not in place. Building infrastructure in areas such as DEIA and GBV workplace policies is an important step toward acknowledging staff as potential survivors and establishing essential supports, such as safer disclosure pathways,

accommodations, and clear procedures that help protect their well-being while they carry out this work.

VAW shelters employ thousands of staff across Canada. Among respondents, there were 3,546 full-time workers, 1,076 part-time workers, and 1,682 casual or relief staff. The number of employees at a shelter ranged from one part-time worker to a high of 60 full-time staff.

Table 7: Number of Employees Across All Shelters

Type of Employee	Total Number of Employees	Average Number of Employees
Full-time (n=279)	3546	13
Part-time (n=251)	1076	4
Casual/Relief (n=262)	1682	6.5

Types of Workers

Both emergency and second stage shelters/THs rely on a complex workforce that extends well beyond frontline counsellors. Drawing on the Gender-Based Violence Workforce Model (Ending Sexual Violence Association of Canada, 2025), this work includes frontline advocates and counsellors, managers and executive leaders, administrators and operations staff, policy and advocacy workers, educators, researchers, and a significant number of volunteers and students who sustain services across the country. Nearly all organizations reported at least one specialized role beyond crisis workers, such as housing workers, outreach staff, legal advocates, children’s counsellors, cultural or Indigenous support workers, fundraisers, and maintenance or housekeeping staff. This underscores how much labour, especially specialized supports, is required just to keep shelters open and safe every day.

This workforce combines full-time and part-time positions with casual or relief staff. As shelters operate 24/7, staff are needed to cover overnight, evening, and weekend shifts. While roles are typically specialized, in practice, workers often take on a variety of roles – frontline,

management, and back-office – often juggling multiple responsibilities within the same position. Frontline staff during a single shift may act as counsellor, cleaner, kitchen worker, and childcare provider. Such an environment leads to heavy workloads and high exposure to trauma, which contributes directly to stress, turnover, and burnout.

Emergency shelters/THs and mixed shelters, on average, have more employees per shelter, as they often provide more programs and services than second stage, which is more independent living. Safe houses often have very few staff, as they are less formalized than other shelters, sometimes operate in private homes, and usually offer only short-term accommodation.

Casual or relief staff are a critical pool of employees, as they cover for absent staff, as well as evenings and weekends. While these staff are a vital component of many staff teams, because they occupy more precarious positions, they often do not receive the full benefits of other employees, as seen in WSC’s 2024 Feminist Brain Drain study (Hoogendam & Maki, 2024). This can make it difficult to recruit and retain these staff members.

Table 8: Number of Employees by Shelter Type

	Full-time		Part-time		Casual/Relief	
	Total	Average	Total	Average	Total	Average
Emergency Shelter/TH	2795	13.5	872	8	1443	7
Second Stage	327	7.5	94	2	98	2
Mixed Shelter	389	15.5	97	4.5	106	5
Safe House	35	4	13	1.5	35	3.5

Recruitment and Retention Challenges

In the 2019 national study, more than half of shelters reported staff turnover and burnout as major challenges. To understand this more fully, see WSC's [Feminist Brain Drain study](#) (Hoogendam & Maki, 2024). Since the publication of both studies, staffing issues have continued to grow, which significantly impacts shelters' ability to deliver high-quality supports to survivors. With shelters often operating at capacity and ongoing high demand for shelter spaces and services, workloads have increased. For those doing this work, hearing stories of trauma each day is challenging, yet adding to the difficulties of this work are systemic barriers. In this work, staff are forced to turn away survivors, witness legal system failures, and are often overwhelmed by the administrative burdens of funder expectations. These types of challenges make this already difficult work far more taxing than supporting survivors through trauma. Similar to findings from the 2019 national study, in 2025, 49% (n=278) of shelters found turnover and burnout to be major challenges.

Staffing challenges stem from high workloads and other work-related difficulties, as well as from low pay and limited benefits. More than half of shelters (53%, n=278) identified low wages and benefits as a major challenge, and a large majority reported that compensation was at least somewhat challenging, indicating that pay remains a significant barrier to recruitment and retention across the sector.

In speaking about the difficulties of this work, one respondent noted, "Staff are not well. In our sector, we hire, and then we are dealing with medical and stress leaves early in employment. Even by offering full-time work with benefits and an RRSP, we have staff who do not want permanent employment. We onboard regularly, and only one out of three makes it through the doors to be employed."

Staff recruitment and retention remain critical concerns in remote, northern, and Indigenous shelters. Remote shelters typically operate with fewer full-time staff than the average shelter across the country (nine in remote versus 13 across all shelters). This trend is also true of shelters located in northern and isolated locations. This can force shelters to rely heavily on community volunteers or reduce program offerings.

Staff fatigue, high turnover, and recruitment challenges were frequently identified as major threats to shelters' ability to provide consistent, trauma-informed support to survivors and to sustain core programs over time. These pressures are intensified by a lack of affordable housing for both staff and survivors, rising operating costs, and heavy reporting requirements tied to short-term or project-based funding, all of which undermine organizational stability and long-term planning. Despite these barriers, Indigenous shelters were recognized by respondents for exemplifying innovation, rootedness, and community accountability, highlighting their function not only as crisis response spaces but as cultural healing hubs.

These pressures are intensified by a lack of affordable housing for both staff and survivors, rising operating costs, and heavy reporting requirements tied to short-term or project-based funding, all of which undermine organizational stability and long-term planning.

Shelter Funding and Wages

Since the 2019 national study, shelters have seen some infusions of new federal funding, including COVID-19 emergency funds and investments flowing through the National Action Plan to End Gender-Based Violence. In several provinces and territories where shelter funding for salaries had been stagnant for many years, these short-term investments allowed organizations to make long-overdue wage adjustments for some staff. However, these injections have not resolved long-standing and severe underfunding across the sector. Shelter wages and benefits remain lower than in many comparable fields, particularly public services, such as child welfare, health, and provincial or territorial income-support programs, which makes it difficult for shelters to compete for and retain qualified workers over time.

When shelters were asked about their salaries for a full-time frontline worker, we saw a wide variety across the country. The average minimum salary was \$48,898.82 (n=247), while the average maximum was \$58,479.45 (n=235). As of 2024, the Charity Insights Canada Project found that across the non-profit sector, starting salaries for entry-level positions averaged \$40,768, while mid-level positions averaged \$51,427. While the shelter sector is in line with other non-profit salaries, by comparison, the national average annual salary for all non-profit workers is \$63,856.52 (Nguyen, 2024). In the Feminist Brain Drain study, shelter leadership often referred to shelters as training centres for other employers, particularly the public service (Hoogendam & Maki, 2024). Workers will work in a shelter, gain experience, and then move on when their skills qualify them for better compensated work. This trend is not only costly for shelters but also deeply disruptive for survivors.

Shelter wages and benefits remain lower than in many comparable fields, particularly public services, such as child welfare, health, and provincial or territorial income-support programs, which makes it difficult for shelters to compete for and retain qualified workers over time.



Our capacity is limited for many things due to a lack of funding for more employees. Without additional core funding, we have had to eliminate positions and are relying more heavily on fundraising to cover basic operational costs.”

Professional Development

GBV workers build deep, specialized expertise in trauma-informed, intersectional practice, legal and systems navigation, and risk assessment, yet this knowledge is often undervalued and not reliably supported through stable funding for workforce development (Ending Sexual Violence Association of Canada, 2025). VAW shelters described professional development as both essential and difficult to resource within existing budgets. Organizations were asked whether they had an annual budget for staff training, professional development, and/or mentoring, and many indicated that such a budget line exists but is very small or insufficient to meet staff needs. Respondents noted that, as a result, staff often rely on free or low-cost webinars and trainings, and that, due to workload and staffing pressures, workers are not always able to be released from frontline duties to participate. At the same time, many shelters benefit from core training programs offered by provincial and territorial shelter associations, such as foundational shelter worker training, onboarding curricula, and specialized GBV/VAW courses, which are often provided at low or no cost to member organizations and help partially offset limited internal training budgets.

As one respondent explained, “More training dollars for staff [are needed] to keep up on emerging issues. The scope of our work has changed dramatically, and our long-term staff did not get into this work with the skills to deal with chronic homelessness, mental health challenges, and addictions.” This shows how quickly practice demands are evolving and how difficult it is to keep training current without dedicated resources.

Despite these constraints, there is evidence that VAW shelters invest in some key training areas. Shelters reported offering



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training in DEIA (91%, n=248), technology safety and technology-facilitated gender-based violence (TFGBV) (62%), and identifying and responding to traumatic or acquired brain injuries (67%). These trainings are often tied to time-limited grants or specific projects rather than core operating funds, which makes it difficult to offer them consistently, to include all staff, or to build in the reflective supervision and team-based learning time needed to integrate new knowledge into everyday practice. The Feminist Brain Drain study similarly found that workers highly value opportunities for learning and growth but frequently report limited time and funding for professional development. This, alongside low wages and high workloads, is a key contributor to burnout and decisions to leave the sector, reinforcing that under-resourced professional development is part of a broader pattern of undervaluing VAW labour (Hoogendam & Maki, 2024).

Volunteers

Volunteers, particularly board members, remain central to how shelters operate. Organizations were asked about their board volunteers, as well as any other volunteers who may work with the organization. Respondents highlighted board members' roles in governance, fundraising, oversight of strategic direction, financial stewardship, and sometimes more operational tasks, illustrating the extent of unpaid leadership required to sustain underfunded VAW services. When asked who shelter leaders turn to for organizational leadership advice or support, respondents frequently selected their board of directors (67%), as shown in Figure 8.

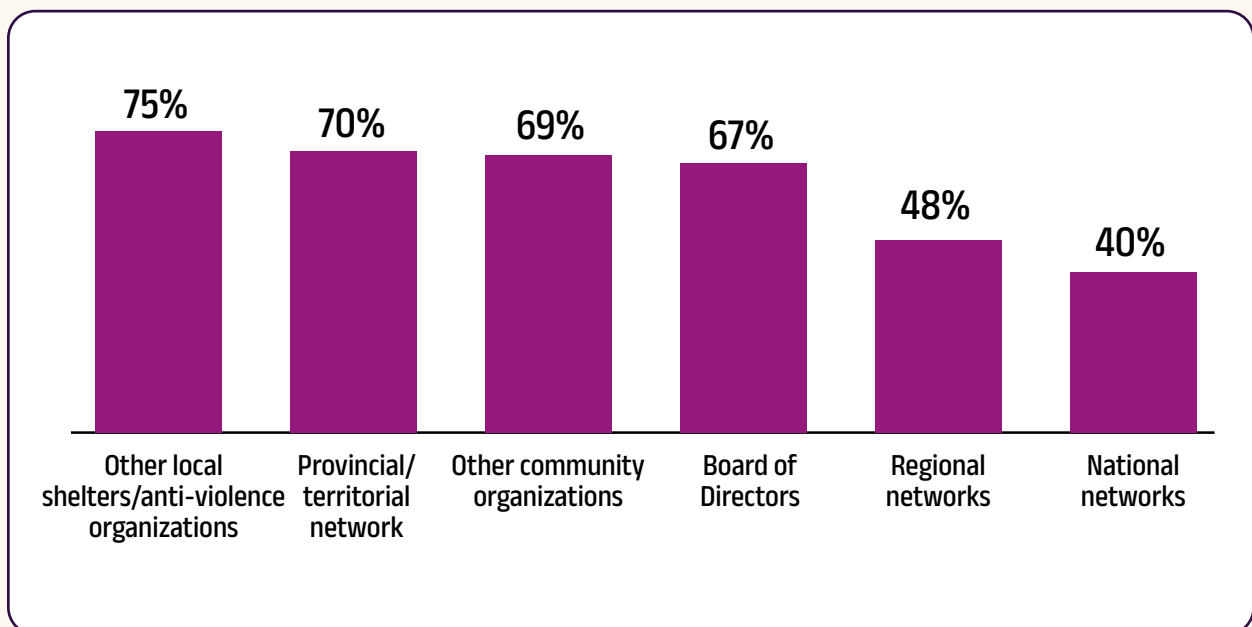
Non-board volunteers also contribute across a wide range of activities, including running or supporting crisis lines, assisting with child- and youth-focused programming, managing donations, organizing events, and

providing transportation or accompaniment, especially in rural or northern communities. This signals that the shelter sector depends heavily on unpaid and under-recognized labour to maintain basic operations and carry out advocacy, governance, and community education work that cannot be covered by existing core funding.

Table 9: Number of Volunteers

Type of Volunteer	Number of Volunteers
Board Members (n=277)	1962
Non-board volunteers (n=262)	3556 (or 2036 with 1 respondent removed) ¹⁴

Figure 8: Who Shelters Turn to for Support When They Need Help



Section 8



Finances and Funding

Shelter work has never been adequately funded, and chronic funding shortfalls were identified as one of the top challenges facing shelters in the 2019 national study. In 2025, capacity issues emerged as the top concern, but persistent underfunding continues to shape shelters' ability to retain staff, maintain buildings, and sustain relevant services.

Shelter funding models vary across provinces and territories, but most organizations rely on a mix of core operational funding from provincial, territorial, or federal funders, project-based or time-limited grants, and fundraising or donations. Core funding is typically used for staffing and day-to-day operations, while community-specific projects, prevention programming, specialized staff, and capital repairs, renovations, and new builds often fall outside these envelopes and must be financed through special grants or fundraising campaigns. Programs or projects that receive time-limited or project-based funding often are more difficult to sustain, even if they are successful, without core operational funds. For repairs and renovations, even shelters with relatively stable operating funding may struggle to secure the sustained capital investment needed to maintain safe, accessible, and

purpose-built spaces, as targeted funding for this purpose is scarce.

With rising demand for shelter spaces and services, and rising cost of living, organizations are having to do much more with less. While many organizations receive funds from their province or territory, these have failed to keep up with inflation, and they are not evenly distributed across regions or shelter types. These inequities are especially evident for Indigenous-run shelters, which often navigate more fragmented and project-based funding streams.

Funding Inequities in Indigenous Shelters

Funding inequities are systematic and acute. Among Indigenous shelters, 44% (n=41) report direct funding from Indigenous Services Canada; however, these streams are often smaller, less stable, and more project-based than mainstream provincial sources, with fundraising frequently required to cover operational costs such as repairs, staff salaries, and transportation (National Indigenous Circle for Family Violence & Women's Shelters Canada, 2023).

Survey responses show that shelters in remote, northern, and Indigenous communities are more likely to report major challenges related to funding, infrastructure, staffing, and meeting diverse client needs. While the survey did not ask directly about the risk of closure, many respondents described how chronic underfunding, difficulty recruiting and retaining staff, and unmet repair needs affect their capacity to maintain existing services or expand programming. These patterns point to heightened operational pressure, rather than imminent closure.

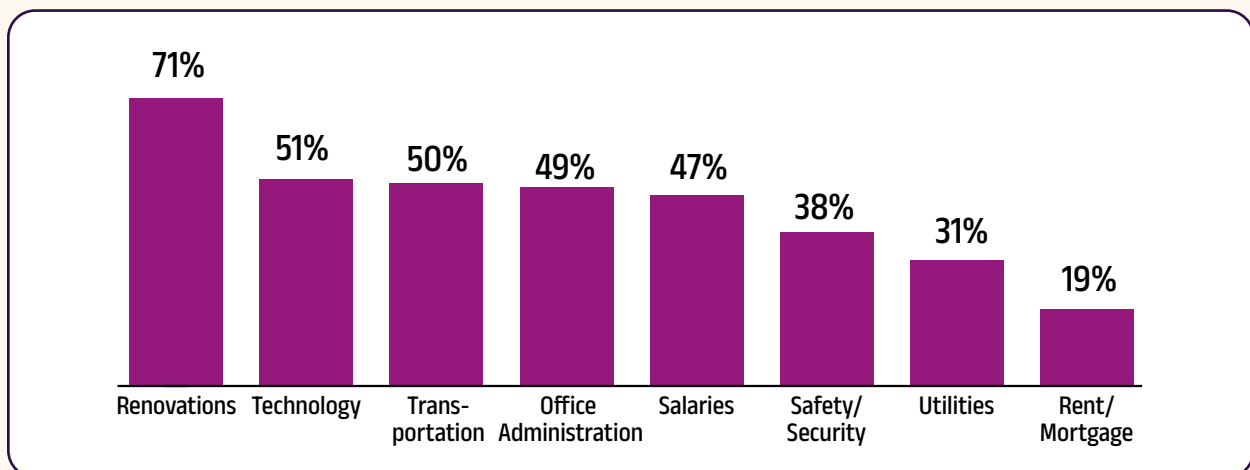
The Funding Gap

The need to raise funds for core operational costs, let alone enhancements or special projects, is nearly universal (as shown in Figure 9). Shelters must bridge persistent gaps in government and program budgets by running intensive, ongoing fundraising campaigns. As one respondent noted, “We annually fundraise over \$355,000 just for operations. Anything else, like repairs or Christmas Dinner, are grants and fundraising.” Even essential, everyday shelter functions depend on continuous fundraising efforts.



We don't want to just survive; we want to thrive and support women and their families to thrive as well. This takes investment, innovation, and the proper resources. Multi-year funding is a must to allow us some breathing room and an opportunity to innovate.”

Figure 9: Areas of Shelter Operations that Require Fundraising



WSC distributed COVID-19 relief funds from 2020 to 2024 to shelters across the country, and heard from them that cuts, reductions, and layoffs were a possibility as the funding ended (WSC, 2024a). The effects of this loss of funding are now evident.

While many organizations are required to fundraise for basic costs such as salaries and administration, it is worrying to see how many organizations must fundraise for a core piece of shelter work, namely security and safety. This challenge is even more overwhelming as very few shelters have dedicated fundraisers. Without a dedicated fundraiser, this task often falls to an already overstretched executive director. Across respondents, 25% (n=250) of shelters had a dedicated fundraiser position. Table 10 shows the growth in the number of fundraisers employed by shelters across the country since the 2019 national study. While there was modest growth among emergency shelters/THs, this number is much larger for second stage shelters. In recent years, we have seen investment in the development of these spaces, which often requires intensive fundraising efforts (Golfetto, 2024; Tanner, Owens & Golfetto, 2024). This may have led to hiring more fundraisers to secure scarce funds for new builds and expansions.

“We are not fully funded, which means we must continually engage in community fundraising efforts to make up the shortfall. This places a strain on our capacity to sustain basic operations, such as food provision, daily supplies, and essential staffing.”

Over half (56%, n=261) of surveyed organizations reported a chronic shortfall in core operational funding, finding this one of the most difficult areas to secure funding for. Despite incremental gains in government coverage of operational funding, shelters are forced to develop

Table 10: Shelter Fundraiser Positions 2019 versus 2025

	Emergency Shelter	Second Stage Shelter
2025	24% (n=179)	32% (n=41)
2019	14% (n=223)	10% (n=48)

operating budgets from a patchwork of time-limited or competitive funding streams and grants beyond their core government funding. This leaves critical supports, such as culturally specific programming, harm reduction, resources for inclusion and accessibility, and services geared to children and youth at constant risk of reduction or elimination. In the previous 12 months, 23% (n=280) of respondents indicated they had reduced or cut a program due to a lack of funding. WSC distributed COVID-19 relief funds from 2020 to 2024 to shelters across the country, and heard from them that cuts, reductions, and layoffs were a possibility as the funding ended (WSC, 2024a). The effects of this loss of funding are now evident. Describing the financial strain, one shelter noted, “We are constantly monitoring budgets to ensure we can continue providing core services, but limited funding affects our ability to maintain adequate staffing levels and restricts the range of programs we are able to offer.”

Fundraising Challenges

One of the frustrations that shelter staff indicated in the survey was the amount of effort required to fundraise, including writing grants and reporting on funding.

Applying for grants is not only highly competitive, but time-consuming and unpredictable. Further, as highlighted in the Feminist Brain Drain study, administrative burdens pull workers away from critical frontline work (Hoogendam & Maki, 2024).

Reporting requirements to primary funders are generally seen as manageable; more than half of shelters (64%, n=277) felt these requirements were reasonable for their organization, and only 18% said they were required too frequently or took too much time. At the same time, only 14% indicated that this reporting helped their organization to improve, suggesting that current processes may do more to meet external accountability needs than to support internal learning and program development. This suggests that provincial and territorial operational funding reports (often the primary funder) are less burdensome than smaller project-based reporting, while still serving an important accountability function for the use and effectiveness of public funds. However, when reporting does not also feed back into organizational planning, evaluation, and service enhancement, it can become one more checklist item for already overwhelmed organizations, rather than a tool that strengthens programs and outcomes for survivors.

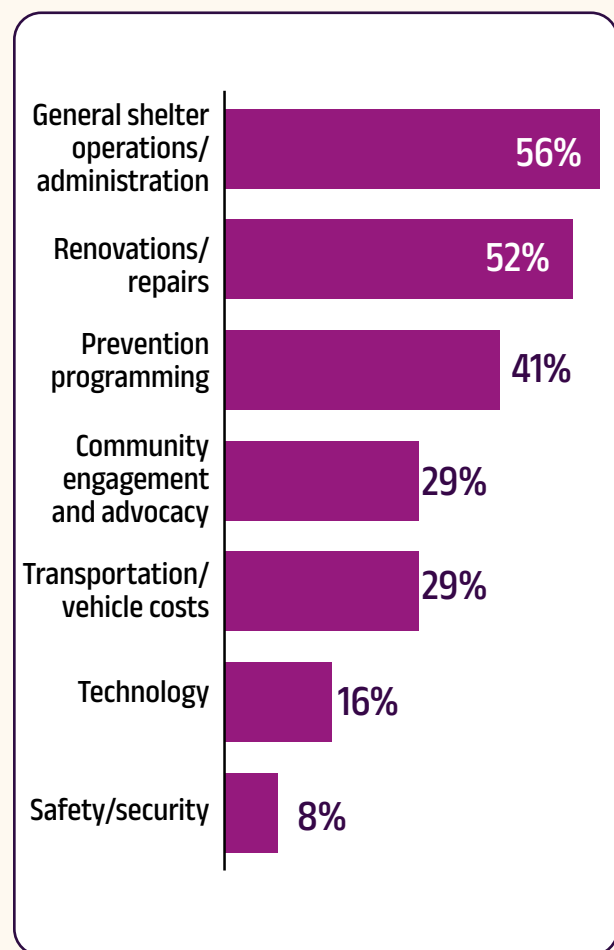
Expense Challenges

VAW shelters across the country reported rising inflation and cost of living as a major challenge (84%, n=280). This is significant for budget items, such as staffing, food, transportation, security, and technology, all of which have dramatically outpaced any recent funding increases. Organizations were asked to identify the top three areas most difficult to fund. As shown in Figure 10, the top three are general shelter operations and administration, renovations and repairs, and prevention programming. Having

insufficient funding for the first two can significantly hinder an organization's ability to provide high-quality services that ensure survivor dignity. Lack of investment in the latter reduces organizations' ability to raise awareness of and provide education on gender-based and intimate partner violence, which is a critical resource for building safe and healthy communities.

As one survey respondent put it, "We are constantly forced to do more with less, even as the complexity of client needs grows. Providing trauma-informed care, navigating housing shortages, supporting mental health, and maintaining safety standards all require investments that are no longer sustainable without additional support."

Figure 10: Areas Shelters Find Most Difficult to Fund



Section 9



Broader Contextual Events

Since 2019, the world has changed. Technology continues to advance, the climate crisis grows ever more pressing, housing is increasingly less affordable, substance use and drug poisonings have increased, and we have experienced a global pandemic. With these, there has also been increased social polarization, inflation, cost of living, and economic hardship. While some of these challenges were cited in the 2019 national study, they have only intensified and continue to significantly shape lives both in and out of shelter.

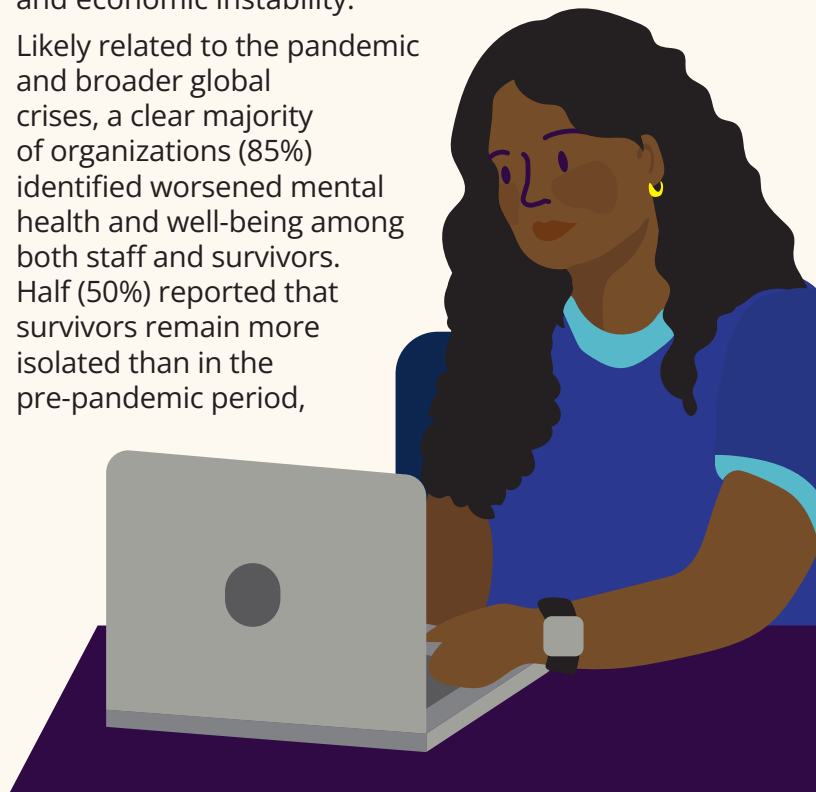
The Post-Pandemic Reality¹⁵

The post-pandemic reality for VAW shelters is defined by increased service pressures, greater complexity in client needs, and sustained system strain. Organizations are navigating higher rates and severity of gender-based violence, poorer mental health among both survivors and staff, and increasing operational and financial challenges (Trudell & Whitmore, 2020; WSC, 2020).¹⁶ National snapshots, such as [Shelter Voices 2023: Beyond Walls](#), similarly describe ongoing high demand and increasingly complex survivor needs in the post-pandemic period (Women's Shelters Canada, 2023).

During the pandemic, United Nations Women drew attention to the rise in all forms of violence alongside the health emergency (UN Women, n.d.). While there was hope that these numbers would be reduced as health mandates lifted, high rates and severity of violence persist. Many shelters (57%, n=275) report ongoing higher rates even now, while 52% saw greater severity¹⁷ of violence in survivor cases.

This escalation has been compounded by persistent barriers to leaving abusive environments, such as housing insecurity and economic instability.

Likely related to the pandemic and broader global crises, a clear majority of organizations (85%) identified worsened mental health and well-being among both staff and survivors. Half (50%) reported that survivors remain more isolated than in the pre-pandemic period,



and three-quarters (75%) indicated that demand for services has continued to increase. Organizations link this heightened vulnerability to weaker community connections and reduced informal supports. Staff are also struggling, with 71% of respondents reporting ongoing burnout and turnover; they described the emotional toll and sustained workplace stress as undermining service consistency and the quality of survivor support.

The critical funds distributed to help shelters survive the pandemic have now ended in nearly all cases. This has jeopardized expanded offerings that were supported by COVID-19 relief funds, such as the opening of additional emergency shelter sites and the expansion of counselling and outreach services.

Adaptations initially adopted during COVID-19 remain in place to protect the health and well-being of residents and staff. These include continued use of remote work for administration and service delivery, virtual counselling, online intake, and enhanced hygiene protocols (e.g., masking, isolation for illness, increased cleaning). “We continue to offer outreach support services virtually as an option. We continue running our text line and webchat 24/7. Enhanced sanitization is now standard, and masks are provided for anyone who is sick or symptomatic.” While these were pandemic-specific adaptations, they have ongoing benefits for survivors, as shelters can better meet them where they are at through virtual services. Further, as shelters are communal living spaces, it is always beneficial to have improved standards for maintaining the health of staff and survivors.

The Opioid Crisis and Harm Reduction

The opioid crisis represents one of the most pressing public health emergencies affecting vulnerable populations in Canada, particularly survivors accessing VAW shelters. Substance use intersects with complex trauma, mental health challenges, and housing insecurity among women, children, and gender-diverse people fleeing violence.

Substance use concerns are increasing across the Canadian VAW shelter system. Over the last three years, 83% (n=280) of shelters indicated that they were supporting more people using substances¹⁸ than they had in the past. This points to the need for dedicated community resources related to substance use, yet 77% (n=279) said that their community does not have adequate resources to support those who use substances.

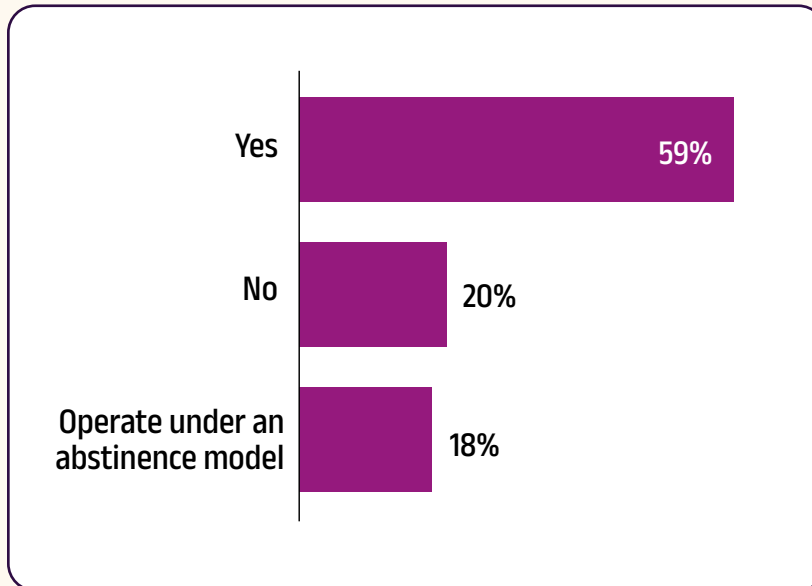
One of the challenges that has emerged for shelters seeing rising levels of substance use is overdoses; 25% (n=261) of shelters reported at least one overdose in the past year. Shelters must be prepared with policies, procedures, programs, and staff training to address this ongoing crisis. For opioid overdoses, training and access to Naloxone are life-saving interventions. The following table shows the rates of Naloxone use and access in shelters.

Overall, training and access to Naloxone for staff are high, which is critical for ensuring that overdoses do not result in deaths. While nearly half of clients can access Naloxone, less than one-quarter of shelters provide training on how to administer it.

Beyond the use of Naloxone, VAW shelters engage in harm reduction practices such as safer-use education, overdose prevention planning, and flexible substance use policies that prioritize safety over abstinence.

Nearly 60% (59%, n=280) of shelters reported having harm reduction policies, programs, or procedures in place, as shown in Figure 12.

Figure 12: Shelters Operating with Harm Reduction Models



A harm reduction approach represents a significant, though not universal, shift toward trauma-informed, low-barrier approaches. However, variation exists by shelter type, with emergency shelters/THs (63%, n=201) more likely than second stage shelters (50%, n=44) to operate under this model. Many shelters continue to operate without such models or under an abstinence model.

Introducing such systems can be costly and time-consuming, layering additional administrative, training, and infrastructure demands on shelters already coping with chronic underfunding and staff shortages. These constraints are among the reasons shelters have been unable to make strides toward harm reduction models. Further, shelters struggle with balancing the safety of those who are using substances with that of others in the space, particularly children. These conversations are made more difficult when insurance providers raise liability concerns about harm reduction practices. As one shelter noted, “The insurance provider states we cannot hand out harm reduction supplies due to liability.” This underscores how external risk frameworks can limit shelters’ ability to fully implement harm reduction models.

Figure 11: Naloxone Training and Access in Shelters

80%

(n=280)

Training for staff to administer Naloxone

22%

(n=278)

Training for clients to administer Naloxone

84%

(n=279)

Staff access to Naloxone

46%

(n=278)

Client access to Naloxone

Table 11: Harm Reduction Policies, Procedures, and Programs

(n=163)	Frequency
Training for staff on harm reduction	91%
Speaking openly with clients about substance abuse	86%
Behaviour-based policies/approaches for intake, working with clients, and determining end-of-stay	83%
Training for staff on suicide prevention and response	77%
Providing safe storage for clients	66%
Trained support for labour trafficking, sex trafficking, and or sexual assault	48%
Harm reduction supplies available to clients	42%
Implementing a critical incident/overdose response protocol	41%
Community partnerships to offer safe supply programs and/or managed alcohol programs	37%
Sexually transmitted infections and/or pregnancy screening options available	30%
Allowing clients to use legal substances on-site	28%
Creating a harm reduction committee	14%
Providing overdose prevention devices	10%
Medical/nursing support on-site to administer safe injection services	4%
Other	4%

While much of harm reduction focuses on ensuring safety when using substances, there are many other ways a shelter can implement these practices. The above table provides details of programs offered in shelters.

The top harm reduction practices are training for staff, speaking openly with clients about substance use and abuse, behaviour-based policies, and providing storage for clients. These represent much more affordable and achievable harm reduction policies than, for instance, on-site medical or nursing capacity or overdose prevention devices. As was found through WSC’s Community of Practice meetings on Harm Reduction (Women’s Shelters

Canada, 2024), these practices are not easy to implement, take time to develop, and are refined over time. As this is an area of expansion for VAW shelters, harm reduction models can be expected to grow in the coming years. Several shelters have implemented integrated models that combine on-site medical support, dedicated harm reduction workers, community partnerships, and trauma-informed approaches, which may serve as best practices for others in future.

The opioid crisis is a lived reality in Canadian VAW shelters. The data reveal a sector attempting to respond to a public health emergency with insufficient dedicated expertise, infrastructure, and funding.

Climate-Related Crises

Climate-related crises such as storms, heatwaves, wildfires, flooding, and even pandemics are increasingly shaping the landscape of risk and service delivery for shelters and survivors of violence across Canada. Most recently, in 2025, Canada experienced its second-worst wildfire season. There were 10 heat wave events across the summer, and parts of the country saw above-normal rainfall and flooding, while others faced drought and fire risks (Environment and Natural Resources, 2025; Public Safety Canada, 2025). For shelters, these are not abstract threats, but both a potential threat to operating and an immediate driver of service demand.

VAW shelters are increasingly affected both directly and indirectly by climate-related events, creating new pressures on infrastructure, staffing, and preparedness. Nearly 20% (n=277) felt the direct impacts of such events through the need for evacuations or damage to a building. While these are crises for everyone, for shelters,

evacuations can mean that survivors lose their safety entirely. Evacuation centres do not have the same security mechanisms as shelters, and survivors risk being sent to the same location as their abuser. In addition, as shown above, there is limited investment in repairs and renovations for shelters, therefore damage to buildings can be difficult to remedy in a timely way.

In the last three years, 21% (n=278) of responding shelters reported experiencing indirect effects of climate events, including the need to support evacuations or those fleeing such emergencies. When VAW shelters temporarily function as emergency reception sites for evacuees, they are often expected to absorb additional families without corresponding increases in core funding, staffing, or resources, such as food, transportation, and security. This can add additional work to already overworked staff and to organizations that have limited funds to extend their services, particularly when shelters must juggle their core mandate

Figure 13: Impact of Climate-Related Events on Shelters

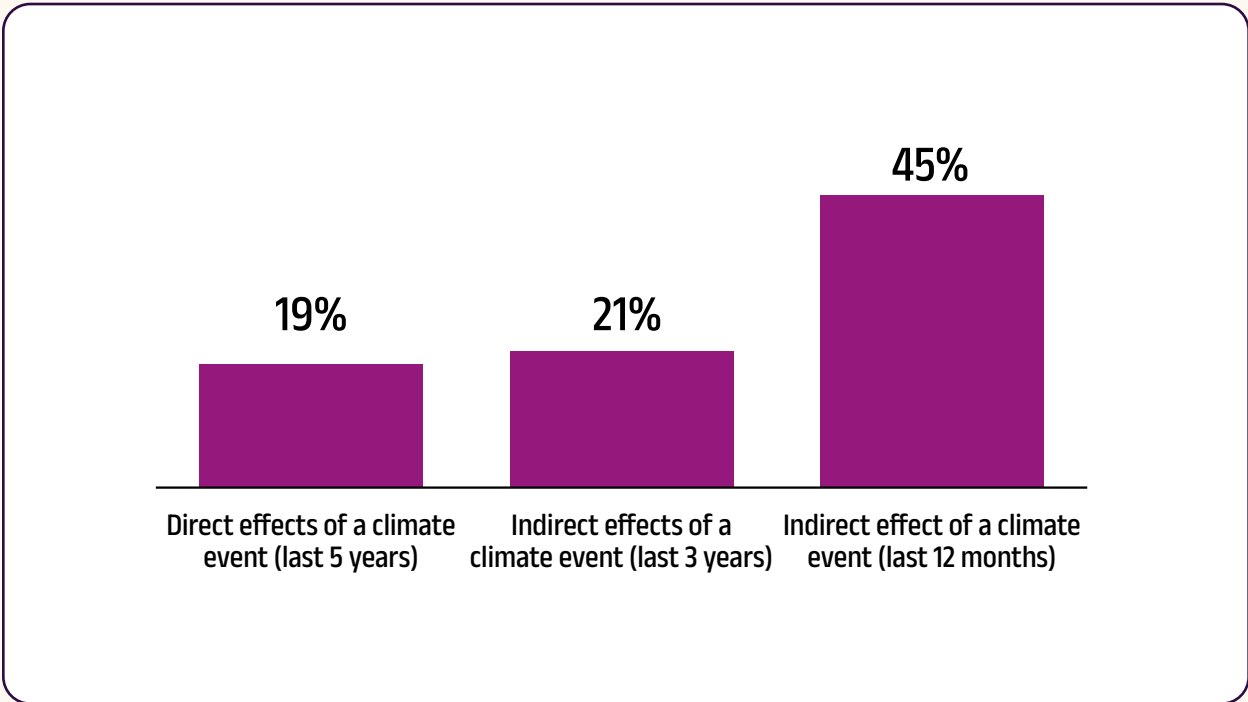
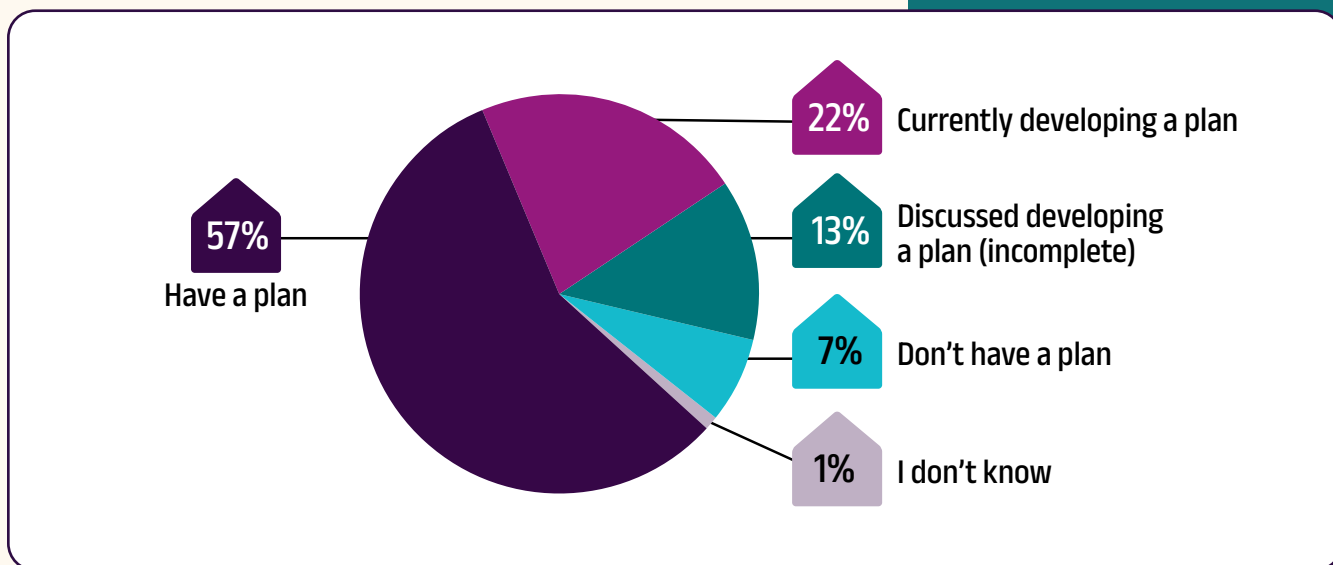


Figure 14: Emergency Plan in Place in Shelter



to support women and children fleeing violence alongside broader community emergencies. Finally, 45% (n=278) of shelters reported being negatively impacted by the indirect effects of climate events. These indirect effects include road closures, poor air quality from smoke, and water issues (e.g., rationing or water advisories).

As these issues intensify, shelters are preparing. One way shelters prepare is by developing emergency management or preparedness plans, which 57% of shelters currently have in place. That means 43% of shelters still lack a plan, possibly making it more difficult to respond to emergencies. As there is very little funding available for this type of planning, many shelters have been unable to complete their emergency plans. Some regions do require emergency preparedness plans, such as British Columbia, but even this region does not provide the funds to undertake this work.

Many shelters indicated that they are still developing a plan, or that emergency planning happens informally or is embedded in broader organizational policies, rather than outlined in a dedicated document. Shelters also emphasize limited staff time, competing priorities, and a lack of guidance or funding as barriers to developing more robust, disability- and GBV-informed emergency plans.

Climate-related events add additional work to already overworked staff and to organizations that have limited funds to extend their services, particularly when shelters must juggle their core mandate to support women and children fleeing violence alongside broader community emergencies.

Section 10



What Comes Next?

The 2025 national shelter survey highlights a sector that is indispensable to Canada's response to gender-based and intimate partner violence, yet is operating under conditions that are neither sustainable nor equitable. Chronic underfunding, aging and inaccessible infrastructure, a deepening housing and affordability crisis, and escalating external pressures are stretching the VAW shelter sector beyond reasonable limits, even as shelters continue to adapt and innovate. This section sets out policy, funding, and practical recommendations drawn from the evidence, with an emphasis on structural changes that will allow shelters, survivors, and communities not only to survive ongoing crises but to build systems that support long-term safety, healing, and justice.

Recommendations

The following five recommendations expand on the themes outlined in the Executive Summary and provide more detailed guidance for policy and funding actions across Canada's VAW shelter system.

- 1** Invest in safe, accessible, purpose-built shelter infrastructure
- 2** Address the housing crisis and expand second stage and longer-term options
- 3** Secure adequate and reliable funding for shelter operations, workforce, and inclusive, culturally grounded, and accessible services
- 4** Confront external crises: Opioid crisis, technology-facilitated gender-based violence, pandemic recovery and preparedness, and climate risk
- 5** Embed VAW shelters in a coherent national GBV framework

1

Invest in safe, accessible, purpose-built shelter infrastructure

The survey confirms that Canada's VAW shelter infrastructure is aging, strained, and often not adequately accessible, particularly in remote, northern, and Indigenous communities. There is a need for a coordinated, multi-year infrastructure strategy for shelters that includes:

- Dedicated federal and provincial/territorial capital envelopes for VAW shelter infrastructure, with clear eligibility criteria for Indigenous-led organizations.
- Prioritized investment in remote, northern, rural, and Indigenous shelters where infrastructure gaps are greatest, costs are higher, and access to trades and materials is limited.
- Funding streams that support both major repairs and renovations and the development of purpose-built, universally designed shelters that incorporate accessibility, trauma-informed design, and safety and security requirements from the outset.
- Explicit policy commitments to closing jurisdictional gaps that leave Indigenous shelters and on-reserve facilities without equitable access to provincial/territorial capital dollars, including agreements that clarify federal-provincial-territorial roles and ensure Indigenous governance over design and implementation.
- Accessibility treated as core infrastructure, not a discretionary add-on. Capital programs should explicitly fund accessibility retrofits (e.g., elevators, ramps, automatic doors, visual fire alarms, accessible bathrooms and bedrooms, and accessible communication systems) and critical safety and security measures (e.g., reinforced doors and windows, secure entries, panic alarms, and exterior lighting), and provide adequate funds for new builds to meet accessibility and safety standards.

2

Address the housing crisis and expand second stage and longer-term options

Shelters cannot respond effectively to violence when survivors have nowhere safe and affordable to go after their stay. There is an urgent need to align housing policy and GBV/VAW policy through:

- Building at least 50,000 new rent-geared-to-income social housing units per year over the next ten years, with priority given to those in core housing need and/or leaving violence, aligning with human rights-based national housing targets (Social Housing & Human Rights, 2024).
- Designated targets and funding within federal, provincial, and territorial housing programs for second stage and longer-term transitional housing, including in rural, remote, northern, and Indigenous communities.
- Integrated shelter-to-housing pathways that include dedicated housing workers in shelters, formal partnerships with housing providers, and guaranteed access to a proportion of units for survivors exiting shelter, particularly in non-market or affordable housing.
- Income and benefits policies that support survivors to maintain housing after they leave shelter, such as enhancements to the GBV Housing Benefit, so that survivors are not forced to choose between leaving violence and becoming homeless.

3

Secure adequate and reliable funding for shelter operations, workforce, and inclusive, culturally grounded, and accessible services

Adequate and reliable operational and program funding is urgently needed to stabilize the VAW sector. This funding must cover core operations and be sufficient to sustain competitive wages and benefits, ongoing professional development, and inclusive, culturally grounded, and accessible programs that meet the diverse needs of survivors. The survey demonstrates that the VAW shelter workforce is large, skilled, and chronically overextended, even as shelters are serving increasingly diverse populations facing intersecting barriers related to racism, colonialism, disability, immigration status, poverty, and rural and northern geographies. Stabilizing the workforce and strengthening inclusion and accessibility are interdependent priorities.

Workforce Funding: Stabilize and Value Shelter Staff

- Embed competitive wages and comprehensive benefits for shelter workers as core, non-negotiable components of operational funding, informed by wage-parity benchmarks with comparable public and non-profit sectors.
- Fund ongoing professional development and training in key areas identified by shelters, including trauma- and violence-informed practice, harm reduction and substance use response, mental health and suicide risk, culturally grounded and anti-racist practice, disability inclusion, tech safety and cybersecurity, and climate and emergency preparedness.
- Invest in supervision, debriefing, mental health supports, and reflective practice for shelter staff, recognizing the cumulative impact of exposure to trauma, vicarious trauma, and moral distress in overcapacity and under-resourced environments.

Program Funding: Inclusive, Culturally Grounded, and Accessible Supports

- Create dedicated, multi-year funding streams for culturally specific and community-led programming for Indigenous, Black, racialized, 2SLGBTQIA+, newcomer, refugee, and disability communities, including supports that are designed and governed by those communities.
- Sustain investment in Indigenous-led shelters and Indigenous-governed programming, centred in rights-based, decolonial, and land-based frameworks that go beyond project-based funding and recognize Indigenous shelters as essential infrastructure in reconciliation and anti-violence agendas.
- Expand targeted supports for children and youth, including those not staying in shelter, and for unaccompanied youth, who currently face limited shelter-based options, particularly in smaller communities.
- Invest in disability inclusion, including accessible information and communication, interpretation services (e.g., ASL, LSQ), assistive technologies, and staff training on disability justice so that disabled survivors can safely access and navigate shelter services.
- Support collaborative, cross-sector models that link shelters with immigrant and refugee settlement services, disability organizations, Black- and Indigenous-led community groups, 2SLGBTQIA+ organizations, and youth services, with funding mechanisms that reward partnership and shared governance rather than competition.

4

Confront external crises: Opioid crisis, technology-facilitated gender-based violence, pandemic recovery and preparedness, and climate risk

The survey makes clear that VAW shelters are contending with chronic funding shortfalls and crises that extend beyond previous violence-response frameworks, including the ongoing impacts of the COVID-19 pandemic, the opioid and toxic drug crisis, technology-facilitated gender-based violence (TFGBV), and climate-related emergencies. These pressures are reshaping what safety means and what shelters must be equipped and funded to do. Policy and funding responses should:

- Integrate shelters into community- and system-level responses to the opioid and toxic drug crisis by funding harm reduction approaches that fit shelter contexts, including appropriate infrastructure, staffing, and partnerships with health and substance use services.
- Build TFGBV capacity by funding technology safety training for staff and survivors and upgrading digital and cybersecurity infrastructure so that shelters can prevent, detect, and respond to technology-enabled abuse.
- Recognize and address the ongoing impacts of the COVID-19 pandemic on survivors and workers, including higher rates and severity of violence and poor mental health, by funding mental health supports, flexible service models, and adequate infection-prevention and ventilation measures where needed. In addition, provide supports to ensure that shelters are prepared for potential future pandemics.
- Integrate shelters into climate adaptation and emergency management planning at municipal, provincial/territorial, and federal levels, recognizing their dual role as potential evacuee sites and as organizations that may themselves need to evacuate, and fund the development, testing, and implementation of emergency plans.

5

Embed VAW shelters in a coherent national GBV framework

The National Action Plan to End Gender-Based Violence needs to support a coherent national framework that acknowledges shelters as central pillars in Canada's social and justice systems and as partners in advancing gender equality, reconciliation, and human rights. Key actions include:

- Fully implementing and adequately resourcing the National Action Plan to End Gender-Based Violence, with explicit commitments and dedicated funding for the VAW shelter sector.
- Creating mechanisms for ongoing GBV and shelter sector leadership and participation in federal policy design and evaluation, including strong roles for Indigenous, Black, racialized, 2SLGBTQIA+, disability, rural, northern, and survivor-led organizations.
- Aligning federal, provincial, and territorial funding agreements so that shelters are not forced to navigate conflicting requirements across multiple levels of government, and so that funding streams support long-term planning rather than short-term project cycles.

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Endnotes

1. In this report, we use the term violence against women to refer to the type of violence shelters/THs are mandated to address. We recognize that terminology in this sector is a source of debate, particularly as organizations increasingly serve survivors with a broad range of identities and experiences, including gender-diverse survivors. We have opted to use the term VAW, as it continues to recognize the high prevalence of violence being directed toward women and girls.
2. Throughout this report, the 2019 study and report completed by WSC will be referred to as the “2019 national study.”
3. Mixed shelters are often not discussed independently throughout this report. These spaces are usually captured within discussions of emergency shelters/THs or second stage shelters.
4. As there are very few safe home respondents to the survey, we have often captured these responses with those of emergency shelters/THs to ensure confidentiality.
5. We have pulled Canadian Revenue Agency (CRA) charitable filing data, which provides valuable funding information. This includes information on organizations’ revenues and expenses, funding levels from different sources, and staff details. While it is not a complete data set, as not all shelters are registered charities, it is consistent, and this decision reduced the burden on shelters responding to the survey.
6. A total of 317 organizations initiated the survey. Not all organizations responded to all questions; throughout the report “n” indicates the number of respondents to each specific question. For example, Table 1 presents data for the 301 shelters that provided both shelter type and province/territory information.
7. In this report, “n=” refers to the number of shelters that responded to a particular survey question, not the number that selected a specific response option. Percentages for any given statistic are calculated using only those shelters that answered that question.
8. Because of rounding, not all tables or figures will sum to 100% throughout this report.
9. We are using the term “beds” to refer to the number of spaces available in a shelter. When we are speaking about emergency shelter/TH spaces, we will continue to use the term beds, but when we are directly speaking about second stage shelters, we use the term “units” as these are apartment-style spaces.
10. These numbers include emergency shelters, as well as organizations reporting on the emergency beds in their mixed shelter.
11. Due to the sensitivity of these questions, any identifying information has been removed.
12. These numbers include second stage shelters, as well as organizations reporting on the second stage units in their mixed shelter.

- 13.** CMHC defines core housing need as: Adequate housing - Housing is considered adequate when it isn't in need of major repairs. Major repairs include defective plumbing or electrical wiring, or structural repairs to walls, floors, or ceilings. Suitable housing - Housing is considered suitable when there are enough bedrooms for the size and make-up of resident households. Affordable housing - Housing is considered to be affordable when housing costs less than 30% of before-tax household income.
- 14.** One respondent indicated that they had more than 1500 volunteers, compared to the next highest of only 160. The total number is also displayed without this outlier.
- 15.** As first mentioned in the Glossary, we are using the term "post-pandemic" to represent the period since public health mandates have been lifted in most spaces. We acknowledge that COVID-19 is now endemic and continues to have disproportionate impacts on vulnerable populations, particularly those with disabilities.
- 16.** We only asked about this post-pandemic period, as the WAGE pandemic relief funds reporting provided many details of shelter experiences of the pandemic from 2020-2024.
- 17.** In this report, increased severity of violence refers to shelters' reports of more extreme and high-risk forms of abuse, such as strangulation, escalating physical and sexual violence, and persistent stalking or cyber-harassment.
- 18.** We did not differentiate here between illegal versus legal substances, as both require policies and supports. As we asked about challenges, this implied issues related to the harmful use of substances, but we also wanted space to acknowledge that legal, including prescribed medications, can require organizations to have clear policies around access and use.