

# THE JOURNEY TO HOUSING STABILITY FOR SURVIVORS OF GENDER-BASED VIOLENCE



Advocacy Centre  
for Tenants Ontario | Tenant Duty  
Counsel Program

# TABLE OF CONTENTS

Land Acknowledgement.....	ii
Writing Acknowledgement.....	iii
Executive Summary .....	1
Introduction .....	7
Methodology .....	12
Findings.....	21
Background .....	22
Forced to Leave Home .....	24
Securing Affordable Housing.....	51
Maintaining Rental Housing.....	85
Discussion.....	138
Policy Recommendations.....	151
Conclusion.....	163
Bibliography .....	168
Glossary of Terms.....	188
Glossary References.....	201
Literature Review	

# LAND ACKNOWLEDGEMENT

The Advocacy Centre for Tenants Ontario acknowledges that we live and work on the traditional territories of many Indigenous Nations, and that our work is part of an ongoing relationship with these lands and Peoples.

We acknowledge the sacred land that is the traditional territory of many Nations, including the Mississaugas of the Credit, the Michi Saagig, the Anishinaabeg, the Chippewa, the Haudenosaunee, and the Wendat peoples, and which is home to many diverse First Nations, Inuit, and Métis Peoples. Our office in Toronto is located on lands covered by Treaty 13 and the Williams Treaties.

As settlers working in the social work, law, and research professions, we recognize that our work continues within a colonial legal framework that often upholds systems of oppression. We are mindful of the harmful impact of our respective professions in implementing policies that led to land dispossession, the denial of human rights, and the breakdown of communities and families. These acts are at the root of the disproportionate rates of violence inflicted on Indigenous women and girls, and gender-diverse people.

We are guided by the 2015 Truth and Reconciliation Commission's Calls to Action and the Calls for Justice outlined in the *Final Report on the National Inquiry into Missing and Murdered Indigenous Women and Girls*, which call on all sectors to redress this harmful legacy and its impacts on Indigenous families and communities. We acknowledge the urgent need to abandon the colonial policies of the past, address their legacies, and engage in a meaningful process of reconciliation with the Indigenous Peoples of Canada.

We acknowledge that we walk upon the territories and original Nations of the First Peoples of this land, whose children, families, adults, and Elders continue to call out for justice. We recognize not only the harms of colonization but also the resilience, resistance, and leadership of Indigenous Peoples in the pursuit of housing justice, human rights, and community well-being. We are committed to ongoing learning, relationship-building with Indigenous communities, and aligning our advocacy with the goals of Indigenous sovereignty and justice.

# WRITING ACKNOWLEDGEMENT

Our deepest gratitude goes out to the lived-experience participants who generously shared their stories and insights with us. Your courage and openness made this report possible, and we are profoundly grateful for your contributions.

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# EXECUTIVE SUMMARY



## Introduction

Across Canada, 30% of women have experienced sexual assault and 44% have experienced intimate partner violence (IPV) during their lifetime — about 6.2 million people. The risk is higher for those living in rural areas and for people with intersecting marginalized identities, such as Indigenous women and gender-diverse people. According to the National Inquiry into Missing and Murdered Indigenous Women and Girls, the violence against these groups constitutes a genocide.

The dire convergence of the COVID-19 pandemic and the increased prevalence of gender-based violence (GBV) became evident in Ontario shortly after the announcement of the province's lockdown measures. In the first few months of the shelter-in-place mandates, crisis centres and emergency shelters for those fleeing violence reported a dramatic increase in calls for assistance. Even post-pandemic, shelters continue to be overwhelmed, and survivors face a critical shortage of affordable housing, leaving many trapped in unsafe situations.

In 2022, the Canadian Department of Justice, through the Victims Fund and the Justice Partnership and Innovation Fund, provided funding to nine Ontario legal clinics, including the Advocacy Centre for Tenants Ontario (ACTO). This funding was to be used to expand and enhance legal services to better support survivors of GBV with access to justice.

Recognizing the gap that exists in housing-related legal supports, ACTO undertook research to inform the design of a specialized housing legal service to meet the needs of survivors who rent. The project identified the core barriers survivors experience when forced to leave their homes, including an overburdened shelter system, a lack of affordable rental housing in the private market, complex rules governing social housing access, and difficulties navigating the housing legal system. Survivors and service providers shared insights that shaped the report's policy recommendations to promote the right to housing and allow them to access secure and sustainable housing.

The research also informed the design and implementation of a new, specialized housing legal service to improve housing stability for tenants experiencing GBV.

## Research Methodology

The research was designed in consultation with key stakeholders and peer reviewed by an evaluator from the Centre for Research & Education on Violence Against Women and Children. Researchers continuously incorporated feedback from participants as the work progressed. It was important that interviewees, especially those with lived experience of GBV, left the research process feeling empowered rather than retraumatized, so researchers relied on a **trauma-informed** approach.

The project incorporated five research methods and information sources:

1. A literature review
2. Jurisdictional, policy, and service scans
3. Qualitative research interviews with 82 key informants, including lived-experience participants, legal professionals, shelter and transitional housing workers, social housing providers, and service managers
4. Quantitative surveys of survivors of GBV, legal professionals, and housing-service providers
5. A policy roundtable event with 52 attendees from 32 organizations, and lived-experience participants

## Findings

GBV is the leading cause of homelessness for women and gender-diverse people. The link between GBV and housing instability is critical yet often overlooked in Ontario. The research findings provided new insights into the challenges women, Two-Spirit, transgender, and gender-diverse people face when seeking safe, adequate, and affordable housing, including a dire lack of housing options, homelessness services, and legal support. Survivors face constant setbacks, forcing them to move in and out of homelessness, shelters, precarious housing, and even back to the violent situation they left before reaching housing stability—for far longer than prior research has suggested.

Renters experiencing violence have limited legal options if they wish to stay in their homes. They often have limited awareness of their rights and are faced with overburdened legal clinics, eligibility hurdles, and retraumatizing experiences at the **Landlord and Tenant Board (LTB)**. The legal system often lacks trauma-informed practices, contributing to further harm.

Survivors of GBV also face multiple barriers when trying to access private market housing, including a lack of affordable or accessible units, strict rental requirements, the prohibitive cost of required rental deposits, and discrimination from prospective **landlords**. They also frequently face the threat of losing their housing due to arrears, unsafe or unhealthy living conditions, abuse from landlords and roommates, and **bad-faith evictions**.

Social housing and supportive housing were survivors' best option for permanent affordable housing, especially for lone-parent survivors who rely on social assistance and/or have disabilities. Yet a lack of subsidized housing means that there is a severe shortage of purpose-built, affordable homes.

Our research found that survivors' experiences with housing do not follow a straightforward path along the housing continuum. Instead, they experience frequent setbacks, mirroring the loss of control, agency, and choice that characterized the violence they fled. Realizing the right to safe, affordable, and stable housing is critical for recovery, autonomy, and protection against further harm for survivors of GBV.

## Discussion

Across the housing system, survivors of GBV are pressured and forced into making housing decisions that do not align with their safety, needs, or healing. The housing affordability crisis compounds these pressures, pushing survivors into long-term shelter stays or into housing that is unaffordable, inaccessible, or unsafe. In rural and Northern regions, survivors are often forced to move away from their communities to access housing, separating them from cultural supports and intensifying their trauma. This is especially harmful for Indigenous survivors.

Survivors often felt that they had no choice but to accept housing that was unsafe, unsuitable, or unaffordable because of the threat of losing access to shelter, being faced with extensive social housing waitlists, or being timed out of transitional housing programs.

Rental housing was also often weaponized against survivors. Abusive partners would withhold rent or damage units, leaving survivors financially and legally liable. Survivors experienced a lack of agency and choice in what happened to them, frequently relinquishing their needs and sense of dignity to secure a rental unit.

Without meaningful access to justice, the cycle of violence is tightly linked with the cycle of homelessness. Survivors were often pushed out of their homes or faced eviction, leading to cycles of homelessness and instability. Those who experienced absolute homelessness reported the lingering effects of trauma, which complicate efforts to regain and maintain stable housing. In the context of an affordability crisis, the limited protections offered by housing legislation and housing policies do not reflect the lived realities of survivors of GBV and have failed to mitigate the risk of further violence. Despite laws intended to support survivors of GBV, access to housing and related resources is inconsistent and largely dependent on discretionary decisions made by individual workers, lawyers, or shelter staff. This unpredictability creates a system in which support feels arbitrary and success is perceived not as a right, but as something achieved by chance.

Despite the National Housing Strategy Act's recognition of housing as a human right (2019), Ontario's housing and legal systems remain largely reactive. Without legal reforms and proactive, trauma-informed interventions, survivors are left vulnerable to chronic homelessness, exploitation, and femicide. Meaningful change therefore requires a proactive, systemic response that prioritizes the prevention of homelessness, stability, and long-term support so that survivors can access safe, affordable, and stable housing that supports their recovery and autonomy, and protects against further harm.

## Policy Recommendations

The research findings culminated in the creation of 17 key recommendations for action by all levels of government to guarantee the right to housing for survivors of GBV through improving their long-term housing stability and breaking down barriers in the justice system:

1. Declare IPV and GBV an epidemic.
2. Re-establish the Ontario Roundtable on Violence Against Women.
3. Increase funding for Indigenous-led solutions to the housing crisis, including the expansion of Indigenous housing and support services which understand the needs of Indigenous survivors and the depth of systemic trauma that their community has experienced due to colonial violence.
4. Increase the supply of transitional housing, including in rural and Northern locations.
5. Increase the supply of specialized supportive housing for survivors to best serve the needs of survivors with complex needs including trauma-related mental health concerns.
6. Reform the Housing Services Act and Special Priority Program to reduce barriers for survivors that are counterintuitive to the intended goal of prioritizing the housing needs of people in vulnerable situations.
7. Restore rent control. Lived-experience interviewees considered affordability to be the greatest barrier when it came to leaving situations of violence and securing new housing.
8. Increase social assistance rates, which are inadequate and leave survivors that rely on social assistance unable to secure private rental market units.
9. Build credit scores and rental history for GBV survivors, who are often unable to provide credit scores or references needed to secure housing in the private rental market.
10. Expand and extend the Canada-Ontario Housing Benefit program to include applicants who have been deemed ineligible for SPP.
11. Rebuild financial pathways for survivors of violence.
12. Address the limitations of the Residential Tenancies Act, 2006.
13. Improve access to justice for renters experiencing GBV.
14. Improve safety for renters through landlord training and accreditation, thereby reducing the discrimination faced by survivors in the rental housing market.
15. Provide trauma-informed legal and housing services.
16. Invest in specialized wraparound services for survivors facing rental housing challenges.
17. Build opportunities for learning and collaboration.

## Conclusion

This project highlights the urgent need for specialized legal housing services for survivors of GBV. The complex relationship between violence, housing instability, and justice system failures creates persistent barriers to safety and recovery. Survivors have told us, time and again, what they need: to be believed, to be treated with fairness and dignity, and to have real, equitable access to safe, stable housing. Without access to justice, security of tenure cannot be realized.

Future research should focus on the experiences of marginalized survivors from specific communities to better understand their unique needs and nuanced help-seeking patterns, and to create targeted recommendations. There is a need for additional quantitative research to further validate these findings.

Implementing survivor-informed, trauma-responsive practices is not just good policy—it is a justice imperative. Real change requires systemic transformation that restores survivors' autonomy, dignity, and access to safe housing. These best practices, when consistently implemented, create legal and housing services that not only respond to trauma but help to restore agency and dignity.

# INTRODUCTION



On March 11, 2020, the World Health Organization (WHO) released a statement declaring the rapidly spreading new coronavirus, COVID-19, a pandemic. This unprecedented threat to public health mobilized governments around the world to enact emergency measures, notably mandatory lockdowns.

For many people, however, sheltering in place would not amount to safety. Heightened financial stress, relationship breakdowns, isolation, and reduced access to supportive services would only exacerbate another global crisis: the “shadow pandemic” of **gender-based violence** (GBV) (UN Women, 2020; Trudell & Whitmore, 2020, p. 6; Koshan et al., 2021, p. 740; Boucher, 2023, p. 1981).

The term “GBV” refers to the violence that women, girls, and gender-diverse individuals face disproportionately because of their gender, perceived gender, sexual identity, or gender expression (Women and Gender Equality Canada [WAGE], 2025). GBV is a broad term that can be applied to several forms of violence, including sexual violence, **intimate partner violence** (IPV), and **human trafficking**. It also describes a range of behaviours, including physical violence, threats, coercion, manipulation, and the denial of resources (Javed & Chattu, 2020, p. 33).

The term also contextualizes the disproportionate rates of violence experienced by women, girls, and gender-diverse individuals within structural power dynamics (Montesanti & Thurston, 2015, p. 1). At the root of GBV is **heteropatriarchy**, the existing socio-political power dynamic that allows **cisgender** men to have more power than women, girls, and gender-diverse individuals, including more social capital and greater access to the **social determinants of health** (Javed & Chattu, 2020, p. 33; Montesanti & Thurston, 2015, p. 2).

Situating violence within structural power dynamics roots the higher rates of violence that marginalized women, girls, and gender-diverse individuals experience within intersecting forms of oppression. Kimberlé Crenshaw coined the term “**intersectionality**” to describe how various forms of oppression are linked and overlap. This means that every person experiences varying degrees of advantage—or disadvantage—depending on the ways each part of their identity is situated in relation to power (Crenshaw, 1991, pp. 72–73).

Across Canada, 30% of women and girls have experienced sexual assault and 44% have experienced IPV (Cotter, 2021, p. 5). This means that approximately 6.2 million women and girls in Canada have experienced IPV during their lifetime. Police reports of IPV show that women and girls from rural communities are twice as likely than those from urban communities to experience IPV (Conroy et al., 2019, p. 25).

Women, girls, and gender-diverse individuals with intersecting marginalized identities face GBV at a disproportionately higher rate. Sixty-seven per cent of **2SLGBTQ+** women had experienced IPV, starting at the age of 15 (Jaffray, 2021, p. 14). Another national survey of transgender women also indicated that three in five of them had experienced IPV, starting at the age of 16 (Trans PULSE, 2021). Women with a disability were nearly twice as likely as women without a disability to have been physically or sexually assaulted (Savage, 2021b, p. 10). And 61% of Indigenous women have experienced IPV (Heidinger, 2021, p. 4).

Although women and gender-diverse individuals face pervasive violence, Indigenous women are disproportionately affected, as they are twice as likely to experience physical violence and eight times as likely to be killed by a partner than non-Indigenous women (Heidinger, 2021, p. 5; Smye et al., 2020, p. 1589). The high rate and intensity of violence that Indigenous women, girls, and gender-diverse people have faced amounts to genocide and is the “consequence of the intersecting effects of colonization, racism, classism, and sexism” (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019; Smye, 2020, p. 1589).

The dire convergence of the COVID-19 pandemic and the increased prevalence of GBV became evident in Ontario shortly after the government announced the province’s lockdown measures. In the first few months of the measures, crisis centres and emergency shelters for those fleeing violence reported a dramatic increase in calls for assistance (Boucher, 2023, p. 1985; Hoogendam, 2024, p. 3; Koshan et al., 2021, p. 748; Owen, 2020a).

As the demand for crisis services surged, **GBV shelters** that were already operating at or above capacity had to significantly reduce that capacity to adhere to social distancing guidelines (May & Shelley, 2022, p. 67). GBV shelters reported a 49% increase in calls for help, and simultaneously reported a 31% drop in shelter admission—illustrating that an unintended consequence of the public health measures was that hundreds of families facing housing insecurity and fleeing violence were turned away from homelessness and crisis services when they needed help the most (Ibrahim, 2022, p.3).

Women and gender-diverse individuals from marginalized groups—especially migrant/temporary foreign workers, seniors, youth, individuals with disabilities, racialized people, and those experiencing a **digital divide**—were more susceptible to experiencing further harm from GBV due to structural inequalities (Dlamini, 2021, pp. 585–87).

It was clear that the government had to intervene to prevent survivors from remaining trapped in violent living situations or being forced into homelessness. Thus, in response to this crisis, the Canadian government allocated \$36 million of emergency funding to Women and Gender Equality Canada in 2020 for the purpose of expanding shelter, and transitional housing services (Maki, 2022, p. 5). Temporary shelters were set up in hotels and community centres, and shelters received enough funds to cover expenses needed for new safety measures and supplies, such as personal protective equipment and extra staff wages, and to complete bathroom renovations. For chronically underfunded GBV shelters, this funding was vital to stabilizing services (Hoogendam, 2024, p. 14).

Between 2021 and 2024, an additional \$85,548,062 was allotted to shelters to ensure they could continue to meet the increasing demand for services. However, once WHO declared an end to the COVID-19 emergency, the Canadian government, in turn, clawed back the emergency funding for GBV shelters and services in 2024 (von Stackelberg, 2023).

After the health crisis was over, the economic impact of the pandemic contributed to a relentless housing and affordability crisis, which meant that shelters in Ontario have continued to experience an increase in demand for their services (Bogdan, 2024). Without the additional funding, GBV shelter services have found themselves stretched even further because of scarce resources.

This was evident in a Centre for Addiction and Mental Health report that showed that violence in the Toronto shelter system had increased by 238% due to overcrowding issues that arose during the pandemic (Jefferds, 2024). As emergency GBV shelters continue to struggle with increasing demand for services, survivors have also faced a severe lack of affordable housing options, leaving them with nowhere to go when attempting to flee violence (O'Manique, 2024).

## Your Way Forward: New Funding to Address GBV

Within this grim post-pandemic climate, and as part of a broader initiative to address the burgeoning crisis of GBV, Justice Canada provided new funding through its Victims Fund and the Justice Partnership and Innovation Fund to nine Ontario community legal clinics. This funding was to be used to expand and enhance legal services to better support **victim-survivors** of GBV with **access to justice**.

This initiative was called Your Way Forward, and it is a collaborative project between the following organizations:

- The Advocacy Centre for Tenants Ontario (ACTO)
- Justice for Children and Youth
- Legal Assistance of Windsor
- Elgin-Oxford Legal Clinic
- Community Legal Assistance Sarnia
- Durham Community Legal Clinic
- Peterborough Community Legal Centre
- Northumberland Community Legal Centre
- Community Advocacy & Legal Centre

ACTO agreed with key stakeholders in the GBV sector that the pandemic created a “pressure cooker” for Ontario **tenants** experiencing GBV. A lack of affordable housing options and a shelter system consistently operating at capacity means that renters experiencing GBV are increasingly forced to remain trapped in abusive environments or are pushed into homelessness.

The ACTO team began by conducting a mixed-methods feminist-action research project to assess how well the current Ontario housing legal, policy, and service context meets the needs of survivors trying to secure and sustain housing. Lived-experience experts and service providers from across Ontario helped the ACTO team identify legislative gaps and services barriers hindering survivors’ ability to sustain long-term housing.

Your Way Forward focuses on expanding legal services to support survivors with their family and criminal law matters. Because ACTO is a specialty housing legal clinic with a provincial mandate to protect and promote the rights of low-income tenants, ACTO focused its efforts on developing a new housing legal service to support renters experiencing GBV through exploring survivors’ journeys across the housing continuum within the post-pandemic housing and affordability crisis context.

ACTO's findings reveal that current legal, policy, and service frameworks fail to recognize the gendered nature of homelessness and the severity of the housing crisis. The research followed survivors' housing journeys along a continuum, from being forced to leave unsafe homes, to securing affordable housing, to sustaining that housing in the rental market.

Part one of this report examines survivors' initial stages of displacement, including the effect of inadequate legal protections under the Residential Tenancies Act, 2006 and the limitations of emergency shelters and **transitional housing**. Part two explores the challenges survivors face in accessing **social housing, supportive housing**, rental subsidies, and the private rental market. Part three focuses on the barriers survivors encounter in sustaining stable housing, including rental disputes, limited access to legal support, and systemic failures within the Landlord and Tenant Board. Together, these findings highlight critical gaps in both housing and legal systems and point to an urgent need for specialized, survivor-informed supports.

As a final step in the research, ACTO invited key stakeholders and lived-experience experts to a policy roundtable event. The research team presented the preliminary findings and collaborated with the attendees to create a set of multi-pronged, multi-faceted set of policy recommendations aimed at systems change.

The invaluable insight gathered during the research process and at the policy roundtable event then informed the design and implementation of a new specialized housing legal service to improve housing stability for tenants experiencing GBV.

# METHODOLOGY



A review of existing literature identified a knowledge gap regarding the long-term housing stability of survivors who rent their homes in Ontario. Little is known about whether the Ontario housing legal landscape adequately protects renters experiencing gender-based violence (GBV) from further violence, forced eviction, or homelessness.

Research on the gendered experience of homelessness suggested that there is a legal service gap for survivors who rent their homes, and that this gap has potentially exacerbated the destabilizing effects of GBV on housing. Because there was very little research available on the housing journey of survivors in Ontario, it was crucial to contextualize their experience within the housing and legal systems before attempting to fill an apparent legal service gap. The Advocacy Centre for Tenants Ontario (ACTO) team therefore undertook a mixed-methods feminist-action research project to fill this knowledge gap and inform the design of a specialized housing legal service for renters experiencing GBV.

The research was guided by the following question: How do survivors of GBV experience the process of securing and maintaining permanent housing in Ontario? That is, how well do the legal context and housing services meet survivors' needs?

## Theoretical Perspectives

Grounded in feminist standpoint theory, ACTO's research aimed to better understand the lived experiences of women, girls, and gender-diverse survivors of GBV. Feminist standpoint theory states that knowledge production can reproduce oppressive power dynamics by prioritizing the perspectives of dominant groups in knowledge gathering and analysis. It was therefore important to not only centre the experiences and perspectives of survivors in this research project, but to also contextualize their knowledge within hierarchical social structures and to integrate their contribution into subsequent action (Wiggington & Lafrance, 2019; hooks, 2004; Harding, 2004; Brooks, 2007).

The use of feminist standpoint theory strengthened the research, as prioritizing the voices of survivors allowed for the unique structural barriers impeding their housing stability to emerge during the research process.

The goal of the research was to design a specialized housing legal service to meet the needs of survivors who rent. A feminist-action research design allowed the ACTO team to both contribute to scholarly knowledge and improve housing stability for survivors who rent, through service design and implementation (Bleijenbergh, 2023; Boilevin et al., 2019; Ilyniak, 2022). The project was further strengthened by grounding the findings in a systemic, legislative, and housing-rights analysis. This comprehensive analysis allowed researchers to better understand and subsequently respond, in future service delivery, to the unique needs of survivors who rent. Research participants thus directly contributed to social change by influencing the design of a specialized housing legal service to improve access to justice for survivors.

The research was designed in consultation with key stakeholders and was peer reviewed by an evaluator from the Centre for Research & Education on Violence Against Women and Children. The process was iterative, and researchers continuously incorporated feedback from participants as the research progressed.

It was important that interviewees, especially those with lived experience of GBV, left the research process feeling empowered rather than retraumatized. To ensure meaningful participation, researchers relied on a trauma-informed approach. This meant that researchers approached their work with an awareness of the challenges associated with retelling painful experiences.

This approach is centred around six key principles (Nonomura et. al, 2020):

1. Safety
2. Trustworthiness and transparency
3. Empowerment and choice
4. Mutuality and collaboration
5. Peer support
6. Cultural safety

The research process was collaborative; both researchers and participants occupied dual and multi-disciplinary roles (Bleijenbergh, 2023, p. 117). Spiller and colleagues (2014) highlighted that multi-disciplinary research broadens the scope of a project, provides a unique space to create new knowledge, and collaborates across sectors “to answer questions beyond the scope of one discipline” (p. 553). By expanding the research frame, the team was better positioned to understand the unique barriers that prevent survivors of GBV from achieving long-term housing stability.

Researchers approached participants with ongoing sensitivity and care, and at times shifted out of their researcher role and into a lawyer or social work role. For example, during a pre-screening call, a potential participant experienced a mental health crisis. This prompted the researchers to immediately shift out of their roles and rely on their counselling skills. Because the participant’s housing challenges were ongoing and causing them significant distress, the researchers felt that it was unethical to proceed with a research interview.

Similarly, when it was revealed during another preliminary call that a potential participant was facing an imminent eviction, the co-lead researchers offered to forgo an interview and instead offered legal advice to the participant.

It was crucial that the safety and needs of the participants were prioritized through the process. The researchers therefore continuously checked in with participants and offered them breaks during the interviews.

Research participants were also invited to share their ideas for policy improvements and best practices for service delivery. Their contributions appear in the Policy Recommendations section and were integral to successful service design.

The research process was guided by the ethics principles outlined by the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (Panel on Research Ethics, 2022).

## Methods

To best answer the multi-faceted research question, this action project was grounded in academic socio-legal research and incorporated five distinct research methods:

1. Literature review
2. Jurisdictional, policy, and service scans
3. Qualitative research interviews with key informants
4. Quantitative research surveys to corroborate the interview data
5. Policy roundtable event

## Literature Review

The research team conducted a literature review using academic databases and web-based searches to focus and narrow the research problem.

Search terms included but may not have been limited to: gender-based violence; intimate partner violence; domestic violence; violence against women; human trafficking; family violence; sexual violence; housing rights; housing as a human right; Housing First; unsheltered; homelessness; shelter; unstable housing; housing instability; security of tenure; supportive housing; transitional housing; second stage housing; social housing; community housing; rental housing; market rent; affordable housing; financialization; commodification of housing; access to justice; Landlord and Tenant Board; residential tenancy law; eviction; hidden homelessness; chronic homelessness; pathway to homelessness; rental discrimination; housing discrimination; intersectionality; newcomer; refugee; immigrant; precarious status; gender-diverse; BIPOC; racialized; Black; MMIWG; Indigenous; colonial violence; 2SLGBTQ+; youth; violence against men and boys; mother; family; Ontario; Canada.

The search terms were linked using Boolean operators to broaden or narrow each search.

Reviews of existing research, including systematic reviews of qualitative and quantitative studies, allowed patterns and themes to be identified. The team compiled a comprehensive bibliography of relevant existing research, which was referred to throughout the writing process. The literature review allowed the team to develop its research questions.

## Jurisdictional, Policy, and Service Scans

A jurisdictional scan was completed, comparing relevant legislative protections for survivors in residential tenancy and social housing legislations across Canada. In addition, a policy scan was conducted to better understand federal and Ontario housing and GBV strategies.

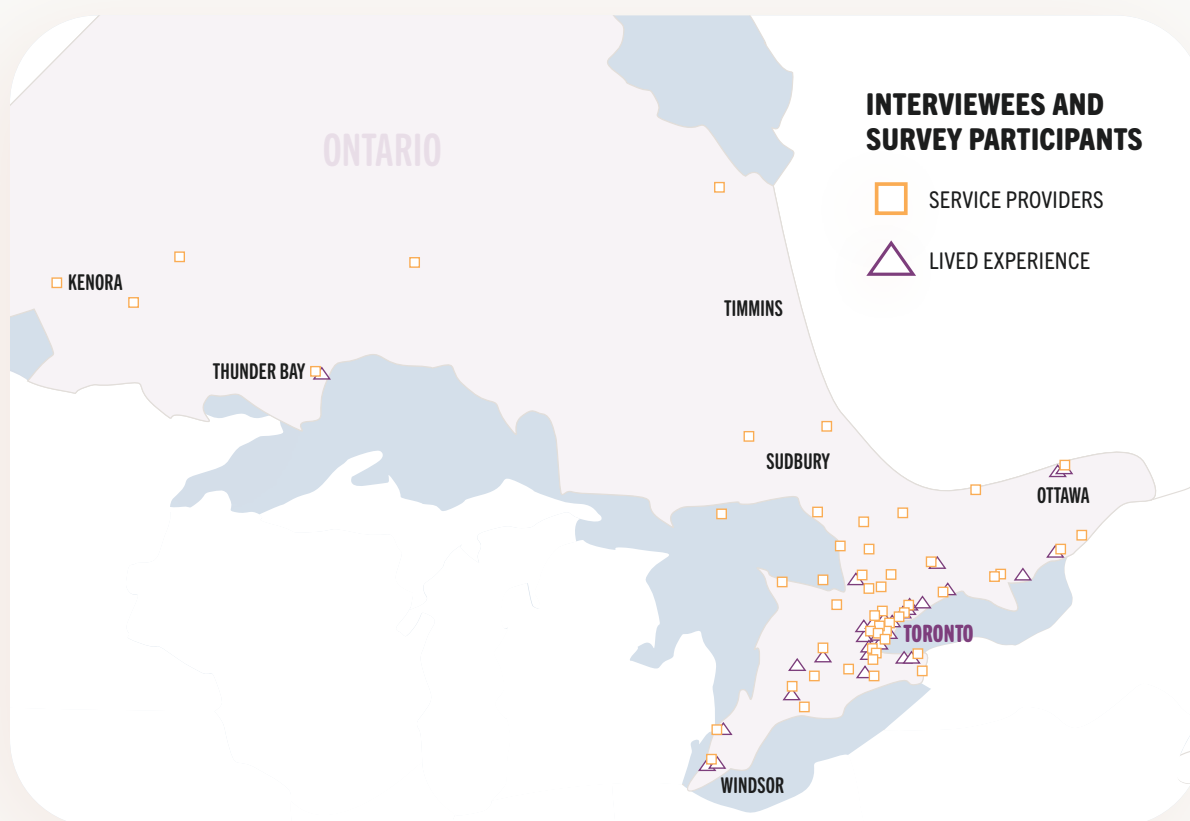
An Ontario housing and legal service scan helped the research team understand the existing supports available to renters experiencing violence. This was an important preparatory step to ensure that researchers could adequately engage with participants during interviews.

## Interviews with Key Informants

Because the research aimed to gain an in-depth understanding of the housing journey of renters experiencing GBV, the research team primarily used qualitative research in this mixed-methods study.

The team first recruited service provider participants using purposive sampling. Intentional recruiting allowed the researchers to target organizations that provide direct support to survivors facing rental housing challenges. Because ACTO has a provincial mandate, purposive sampling also ensured geographic spread across Northern and Southern Ontario, and participation from both rural and urban communities (see Figure 1).

FIGURE 1: GEOGRAPHIC DISTRIBUTION OF INTERVIEWEES AND SURVEY PARTICIPANTS



Sixty service providers from 53 organizations participated in a 1½ -hour semi-structured interview. Interviewees included a mix of legal professionals, shelter and transitional housing workers, social housing providers, service managers, and staff from organizations working toward ending GBV.

The team then recruited 22 lived-experience interviewees using snowball sampling with the service-provider interviewees. Service providers shared a research flyer with select clients who had experienced rental challenges and were further along in their housing journey (i.e., no longer at immediate risk of homelessness). Interested lived-experience participants then contacted the researchers for screening. This process helped ensure that lived-experience experts were connected to peer support throughout the research process. The lived-experience participants were also invited to bring in a support person of their choice during the interview process. The use of 1½ -hour semi-structured interviews gave participants the opportunity to raise the parts of their experiences that felt most relevant to them. All lived-experience interviewees were compensated for their time.

All 82 interviewees provided informed consent verbally at the onset of the interview and in writing through consent forms that highlighted the purpose of the research as well as the risks and benefits of participation. Each interview was recorded and transcribed, and interviewees were offered a copy of this documentation for their own records. Recordings and transcripts were anonymized, assigned a unique code, and stored securely in a password-protected hard drive.

Interviews were conducted between August 2022 and February 2023, at which point the research team felt confident that they had collected enough data to draw conclusions and themes. The qualitative data was analyzed in multiple rounds of deductive coding via NVivo, using research journals, and through exploratory meetings between researchers. Patterns that emerged in the coding and analysis process formed the basis of the narrative research findings. To improve generalizability and transferability of the findings more broadly, the findings were written up using quotes from participants and “thick descriptions” to convey the interviewees’ subjective experiences using as much detail and nuance as possible.

Quotes were cited using the unique code assigned to each participant:

- Lived-experience interviewees: LE01 to LE22
- Service-provider interviewees: SP01 to SP60
- Narrative from survey respondents: LESR

## Surveys

Between February 2023 and March 2023, three online surveys were disseminated to:

- Survivors (aged 18 and over) who had experienced rental housing challenges in Ontario;
- Rental housing legal professionals practising in Ontario; and
- Shelter providers and housing workers supporting survivors in Ontario.

All survey responses were anonymous and stored securely in a password-protected hard drive.

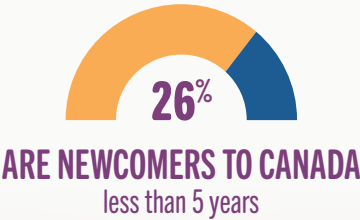
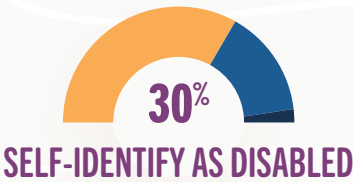
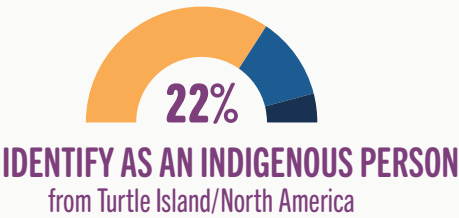
The survey for rental housing legal professionals was shared with select **private bar** rental housing lawyers and legal professionals through Legal Aid’s housing listserv and internal email lists. The survey questions focused on practitioners’ knowledge of GBV and the relationship between GBV and rental housing issues, as well as their exposure to trauma and violence-informed training. In total, 45 unique respondents participated.

The Ontario Association for Interval and Transitional Housing (OAITH) disseminated the survey for housing and shelter professionals through the OAITH network. The survey questions focused on service barriers and housing access issues that were raised most frequently by service providers during the interviews. Altogether, 73 unique respondents participated.

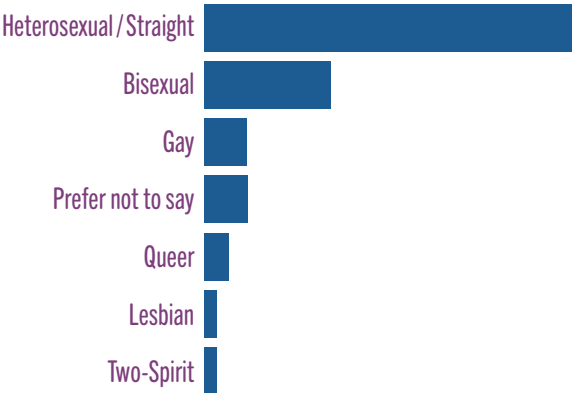
WomanACT disseminated the survey for survivors of GBV. The survey questions focused on rental housing issues and service barriers before and after the experience of violence. Lived-experience survey respondents were compensated with a \$5 gift card for their participation. At one point during the survey period, there was a sudden influx of quick respondents in the middle of the night, suggesting that the survey was attacked by a bot (an automated software application that performs repetitive tasks over the internet). The survey was closed as soon as the unusual responses were discovered and the data was then analyzed using a bot-detection tool. After data clean-up, 47 unique respondents had participated.

The survey response rate was lower than the researchers had anticipated. While survey data was used to corroborate the findings narrative, it could not be generalized to the broader population (see Figure 2).

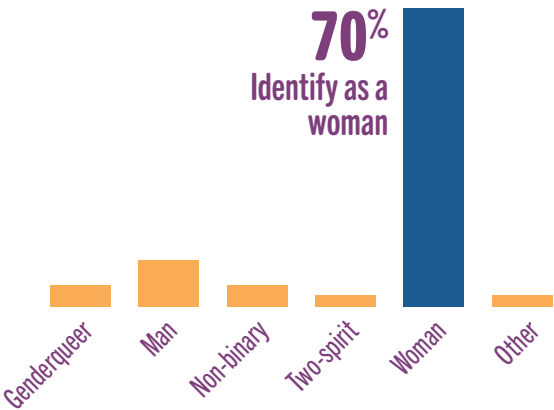
FIGURE 2: LIVED-EXPERIENCE SURVEY DEMOGRAPHICS



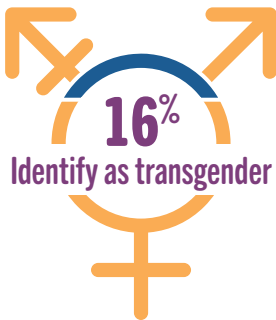
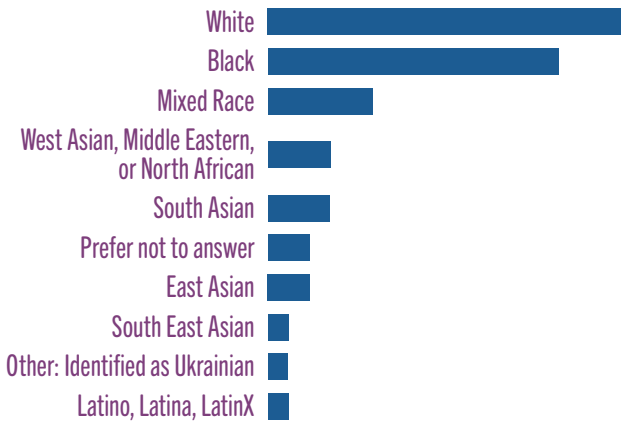
**SEXUAL IDENTITY**



**GENDER IDENTITY**



**RACIAL/ETHNIC IDENTITY**



## Policy Roundtable

In the final stage of the research, the ACTO team hosted a policy roundtable event in May 2024. This event was organized to ensure that policy recommendations centred on the housing priorities of survivors and aligned with the advocacy work of professionals supporting survivors.

During the event, the research team presented a preliminary overview of its findings and provided two discussion opportunities for attendees to share their policy suggestions. The discussions focused on six key topics from the research:

1. The housing affordability crisis
2. Housing Services Act improvements
3. Residential Tenancies Act, 2006 improvements
4. Landlord and Tenant Board improvements (i.e., access to justice)
5. Trauma and violence–informed housing system
6. Trauma and violence–informed legal system

In total, 52 attendees from 32 organizations participated in the event, including 10 lived-experience participants. Lived-experience attendees were recruited by key stakeholder organizations, with three having also participated in a research interview.

## Recommendations for Future Research

This research presented a broad, nuanced overview of the challenges renters experiencing violence face when forced to leave their homes. To build upon the findings of this study, future research must narrow its focus to the experience of marginalized survivors from specific communities to better understand their unique needs and nuanced help-seeking patterns, and to create targeted recommendations. For example, survivors with complex needs and disabilities were identified as being especially vulnerable to further violence and homelessness.

In addition, further quantitative research is needed to capture the frequency with which survivors face rental housing challenges, including the rate of eviction for reasons related to GBV. This would strengthen the generalizability of the research findings.

# FINDINGS



# BACKGROUND

Gender-based violence (GBV) is a key risk factor for imminent homelessness and is the leading cause of women and gender-diverse people's homelessness in Canada (Baker et al., 2010; Bullock et al., 2020; Gaetz et al., 2012; Gilroy et al., 2016; Jeffrey & Barata, 2017; O'Campo et al., 2015; Pavao et al., 2007; Schwan et al., 2020; Sullivan & Olsen, 2016; Tutty et al., 2014). It is estimated that women who have experienced intimate partner violence (IPV) are four times more likely to experience housing instability than those who have not (Pavao et al., 2007). Transgender and gender-diverse people also experience disproportionate rates of GBV and are more likely to face homelessness and housing instability for longer periods of time than cisgender people (Nelson et al., 2023).

Research has shown that legal systems fail survivors of IPV who rent because of a lack of available housing legal services and resources, as it restricts their access to justice (Buhler & Tang, 2019; National Indigenous Feminist Housing Working Group, 2022; The National Right to Housing Network & Women's National Housing and Homelessness Network, 2023; Schwan et al., 2020; Schwan et al., 2021; Šimonović, 2018). Legislative protections for survivors who rent are also limited, which means that when renters experience GBV, they are more likely to be forced out of their homes or evicted (Buhler, 2022; Paglione, 2006). As a result, survivors are often forced into homelessness and lengthy cycles of housing instability. This is known as the **legal facilitation of homelessness** (Gander & Johannson, 2014, p. 5).

Previous research examined the correlation between GBV, homelessness, and housing instability. It focused mainly on the transition period after survivors leave situations of violence to the point at which they access new housing. Survivors often struggle with this challenging transition period, which can include a period of homelessness, a stay in the shelter system, and unique challenges associated with accessing new rental housing. It is estimated to take approximately six months for survivors to re-stabilize after leaving home due to their experience of GBV (O'Campo et al., 2015, p. 9).

The Advocacy Centre for Tenants Ontario (ACTO) sought to build on existing research to better understand survivors' housing journey beyond this transition period. While there has been limited research conducted on the unique housing challenges of survivors who rent, no research has been done (to our knowledge) that frames survivors' journey at the intersection of the Ontario housing and legal systems.

To address this research gap, ACTO completed multi-disciplinary action research that asked the following question: How do survivors of GBV experience the process of securing and maintaining permanent housing in Ontario? That is, how well do the legal context and housing services meet survivors' needs?

Through systems-level research, ACTO sought to uncover structural barriers that prevent survivors from achieving housing stability. The findings are meant to inform the design of a specialized housing legal service to improve access to justice and housing stability for survivors who rent in Ontario.

## The Housing Continuum

The research findings are based on an analysis of 165 survey responses and narratives shared by 22 lived-experience interviewees and 60 service-provider interviewees. The findings are structured as a housing journey, showing survivors' experience moving along each step of the **housing continuum**, from homelessness to renting a home in the **private market**. Homeownership was not included in this research project, as it was not considered to be a feasible housing option for low-income renters.

The housing journey of a survivor is framed within the context of a housing system established, supported, and monitored by the provinces. Although all levels of government (federal, provincial, and municipal) fund housing and homelessness programs, the provinces have constitutional authority over rental housing policies, programs, and legislation. In Ontario, the primary pieces of legislation governing rental housing are the **Residential Tenancies Act, 2006 (RTA)** and the **Housing Services Act, 2011 (HSA)**.

Many housing researchers and decision-makers conceptualize housing options along a sequential continuum (see Figure 3). In a functioning housing system, households would ideally move forward along the housing continuum, which ends at the ideal goal of homeownership.

FIGURE 3: THE HOUSING CONTINUUM



The findings highlight that survivors face a severe lack of housing options, homelessness services, and legal support in Ontario. Limited protections under Ontario's residential tenancy laws mean that renters experiencing violence are most often forced to leave their homes. Rather than progressing linearly along the housing continuum, survivors face constant setbacks, forcing them to move in and out of homelessness, shelters, and precarious housing before reaching housing stability.

Prior research has suggested that the transition period after leaving home because of GBV averaged six months (O'Campo et al., 2015, p. 9). ACTO's findings, though, suggest that, because of the relentless affordability crisis and a chronic lack of funding for social services, survivors now experience a much longer stretch of homelessness and housing instability, often lasting several years. Survivors face a lack of control, agency, and choice in their housing journey that mirrors the experience of the violence they fled.

The findings make it clear that without meaningful action to address the ever-worsening housing crisis, low-income survivors are at a heightened risk of homelessness, exploitation, and further violence, including femicide.

# FORCED TO LEAVE HOME

*I really can't overstate...the power of having my own home. And I know I don't own my home, but to me, it really doesn't make a difference. (LE20)*

Renters experiencing violence have limited legal options that would allow them to stay in their homes. Residential tenancy law does not consider the ways in which GBV creates rental issues, nor does it protect survivors from being held responsible for the violence they have experienced. A lack of legal rental protections and housing legal support means that survivors are forced to leave their homes more often than they are given the opportunity to stay. After leaving home, survivors usually face a lengthy period of homelessness and housing instability.

All but one of the lived-experience interviewees had to leave their homes because of the experience of GBV. This was further reflected in the lived-experience survey responses, in which 72% of responders indicated that they had to move out of their home due to GBV (see Figure 4).

FIGURE 4: PROPORTION OF SURVIVORS WHO HAVE HAD TO MOVE DUE TO GBV



## The Residential Tenancies Act, 2006

In Canada, the Canadian Constitution gives the provinces and territories the power to legislate residential tenancies (Constitution Act, 1982, ss. 92, 92A, 93). In Ontario, tenant rights and obligations are found in the RTA. The RTA defines a tenant as a “person who pays rent in return for the right to occupy a rental unit and includes the tenant’s heirs, assigns and personal representatives” (RTA, 2006, s. 1). This relationship between a tenant and landlord is established through a **lease** or **tenancy agreement**, which can be written, oral, or implied (RTA, 2006, s. 2(1)).

Not all forms of rental situations are covered by the RTA, including emergency shelters, long-term care homes, seasonal or temporary vacation homes, and units where the landlord and tenant share a kitchen or bathroom (RTA, 2006, s. 5). Rental housing on First Nations' reserve lands and military rental units and accommodation are also excluded from the RTA (Indian Act; Framework Agreement on First Nation Land Management Act, s. 121; Canadian Forces Housing Agency, 2025). The RTA also established the Landlord and Tenant Board (LTB), which is the administrative body that resolves disputes between landlords and tenants.

Interviewees highlighted that the RTA lacks adequate legal protections for survivors who rent. This is, in part, due to the difficulty of separating **joint tenancies**, which is when more than one person is listed as a tenant on the same lease. Joint tenancies can also cause additional legal problems for survivors if they are held responsible for damages resulting from violence or for arrears accumulated by the **person causing harm**.

As well, survivors were not always named on a lease; this offered them little-to-no legal protection under the RTA.

## Joint Tenancies

In Ontario, joint tenants are considered joint and severally liable for the payment of rent and upkeep of the unit. This means that all the renters listed on a joint lease agree that they will be held equally responsible for any missed rent or damages while living in that unit. For example, if one tenant causes damage in the unit, then all tenants on the lease are responsible for paying for the cost of repairs. This is problematic in situations of GBV, as it means that survivors who rent are held financially responsible for damages or arrears caused by the person causing harm.

It also is not legally permissible for survivors to remove the person causing harm from the lease without creating a new lease. Lived-experience interviewees recounted the difficulty they had with altering their lease because it required the consent of the landlord, as well as all tenants on the lease, which often included the person causing harm.

One lived-experience interviewee explained that her private market landlord would not agree to a new lease even though the person causing harm had moved out:

*I wanted to re-do the lease to have just my name....I spoke to the landlord [and told him] I'm the only one living here now. I'm going to be responsible. Can you re-word the lease? He said, no, you came in as two. You either leave or you stay as two. What if something happens to you? You can't pay me my rent, I need my money. So, if your husband doesn't live here anymore, you should go. (LE07)*

Alternatively, landlords may pursue evictions in situations of violence so that they can have the person causing harm removed from the rental unit. However, in joint tenancies, this would also lead to the eviction of the survivor. As one legal-professional interviewee explained:

*If they go to evict him, it's like, they all get evicted, because they're joint tenants, you can't just evict him, it would end the whole lease, [because] technically, it ends the whole lease, and they're all evicted. And...so what they would have to do is... they would have to try to evict all of them, but then offer her a new lease with the kids but not him. (SP04)*

Landlords would more often insist on creating a new lease after the person causing harm moved out. A new lease would also allow the landlord to increase the rent above Ontario's **rent increase guidelines**, which is the maximum a landlord can increase most tenants' rent during a year without the approval of the LTB (Government of Ontario, 2024b). Because survivors were often unable to afford a hike in their rent, a new lease would render their tenancy unsustainable and force them out of their homes.

When survivors opted to stay in their unit under the same joint lease with the person causing harm, they faced safety concerns. This occurred even when a survivor had a **protection order** stating that the person causing harm must stay a certain distance away from them. For example, one lived-experience interviewee continued to feel unsafe because her ex-partner remained on the lease, even though she had successfully obtained a **restraining order**:

*He had an extra key which he refused to give up and nobody knew where he was. They had a warrant for his arrest, but he was nowhere to be found. Sometimes I would come back from work and see that things were changed around or things were moved. So, coming into the house and knowing he was there, or he could come...for my safety...I didn't feel safe staying there even though I was paying my rent. (LE11)*

Survivors in these circumstances tried to protect themselves from further harm by changing the locks to their unit. However, legal-professional interviewees explained that “since there’s no kind of mechanisms that the LTB [has] right now, to get a partner off the lease,” the landlord is obligated to provide a key to everyone on the lease, including the person causing harm (SP31). This meant that even if the person causing harm was charged with assault, they maintained their housing rights. Although some survivors installed security systems and cameras and had notified their landlord of their safety concerns, they could not guarantee that the person causing harm would not attempt to resume their tenancy.

## N15: Tenant's Notice to End my Tenancy Because of Fear of Sexual or Domestic Violence and Abuse

The RTA includes specific provisions for renters experiencing abuse, violence, or sexual violence. Survivors may give their landlord notice to end their tenancy early with an **N15: Tenant's Notice to End my Tenancy Because of Fear of Sexual or Domestic Violence and Abuse**. This notice allows survivors to terminate their fixed-term tenancy early, with just 28 days' notice rather than the usual 60 days' (RTA, 2006, s. 47.1, 47.2). This also frees a survivor from any financial liability for the unit once they leave.

To qualify for the N15 notice, the survivor or their child must have experienced IPV from an intimate partner, former intimate partner, or family member (RTA, 2006, s. 47.3(4)). Survivors of sexual violence also qualify for the N15 notice. Sexual violence includes exploitation, harassment, stalking, or assault. It may also be used in situations of **gender identity abuse**, which is a form of abuse in which the person causing harm uses a person's gender identity or expression to demean, manipulate, and control them. This can involve tactics such as denying their identity, using the wrong pronouns or name, or controlling their gender expression. In instances of sexual violence, the person causing harm can be anyone, not just a partner, former partner, or family member (RTA, 2006, s. 47.3(3)).

Interviewees noted that the N15 notice is an easy legal tool for survivors to use when they need to leave their homes quickly. Legal-professional interviewees shared that survivors did not face much pushback from landlords when an N15 notice was served. One legal-professional interviewee noted that most landlords accepted the N15 notice without hesitation because its purpose was to sever the lease. They further speculated that this was because the N15 notice also benefited the landlord, who could raise the rent to market rate between tenancies. Legal-professional interviewees mostly reported that when they had raised the use of N15 notice at the LTB, adjudicators handled the matter with sensitivity (SP31).

Although the N15 notice allows survivors to sever their joint tenancies and leave as soon as possible, there are certain ramifications. When a survivor terminates their part of the joint tenancy, they cannot use the last month's rent deposit to help them pay for part of the first and/or last month's rent in their next unit (RTA, 2006, s. 47.2(8)). This also means that survivors cannot claim a portion of this deposit, even if they paid for all of it.

Some service-provider interviewees were aware that the N15 notice was a legal tool that would allow survivors to escape an abusive home. Forty-four per cent of legal-professional survey respondents also indicated that they were familiar with the early-termination provisions under the N15 notice, compared with only 32% of shelter-provider survey respondents. Only one of the lived-experience interviewees had used the N15 notice to leave their home due to IPV.

One lived-experience interviewee who terminated their sole tenancy using an N15 notice stressed its importance, stating that it saved them from having to pay another month of rent for a unit that was no longer safe for them to live in. However, 28 days was not enough time for this interviewee to secure a new unit, and so they reluctantly moved into their car after leaving home (LE15).

Similarly, one service-provider interviewee felt that the N15 notice had limited usefulness within the context of the affordability crisis. While they had encouraged survivors in joint tenancies to use the N15 notice to ensure they were not held responsible for rental issues after leaving, they also stated that “the thing is, we would do the N15s more if people had a place to go. There’s just nowhere to go” (SP21).

Some survivors had also opted not to use the N15 notice because they were afraid to tell their landlords about the violence they were experiencing. Landlords must keep any N15 notice served in a joint tenancy confidential from the remaining tenants to ensure the safety of the survivor. However, service-provider interviewees shared examples in which the person causing harm had discovered that an N15 notice had been served. The most dangerous time for a survivor is the point at which they leave the person causing harm. Thus, survivors would refrain from disclosing the abuse to their landlord until after they had already left the unit, to ensure that the person causing harm was not made aware of their plans to escape.

Service-provider interviewees also noted that survivors refrained from using the N15 notice because of their attachment to the person causing harm. Survivors may forgo their own needs to ensure that the person causing harm is not evicted, even if it meant that they could end up being responsible for future arrears or damages. This sense of compliance, guilt, and responsibility for the person causing harm is a typical effect of emotional and psychological abuse and can prevent survivors from leaving or asserting their rights. As one service-provider interviewee stated:

*Women have been hesitant to use it because they still feel like they’re responsible for [their] abuser so...“Okay, I left, we’re both on the lease...If I handed my N15 notice to end the lease I know my partner can’t afford [the place] by himself and they are just gonna kick him out.” (SP38)*

Although the RTA provisions for the N15 notice are intended to help survivors escape violence by allowing them to leave their homes, the provisions can also inadvertently contribute to homelessness and housing instability.

## Homelessness

After leaving home due to GBV, survivors faced a challenging housing journey while securing a new home. Many of the lived-experience interviewees described a lengthy period in which they cycled in and out of periods of homelessness and housing instability.

Some survivors had lived in situations of **absolute homelessness**, where they were unsheltered, but more often they had lived in situations of **hidden homelessness**, where they relied on unstable, short-term “accommodations” (e.g., using a hotel or **couch surfing**). Survivors also accessed homelessness outreach programs, housing help services, and community or faith-based organizations in an attempt to not remain homeless.

To coordinate services, the Ontario government introduced a **centralized access system**, which directly connects individuals facing homelessness to available shelters or housing programs through a single access point (Ecker & Mifsud, 2020, p. 35). Individuals’ needs are determined during intake using standardized assessment tools such as the **VI-SPDAT**. Data from the centralized access points is collected and monitored using tools such as **by-name lists**. However, the centralized system and by-name lists struggle to capture situations of hidden homelessness. Because many survivors do not seek help from formal services, they may find themselves trapped in a cycle of homelessness.

Survivors with complex needs, disabilities, substance dependencies, and precarious or newcomer status can face cycles of **chronic homelessness** and housing instability in the most extreme forms and for longer periods of time. One lived-experience interviewee explained that the lack of **affordable housing** options and accessible homelessness services left marginalized survivors like her vulnerable to discrimination, exploitation, and more violence as they tried to survive:

*I was lucky. And the reason I say I was lucky, is because I could have been a full-blown drug addict, alcoholic, prostitute because that’s what the government gives us. That’s the choice the government gives us to survive on the street. And anybody who treats you any way they want because they...once they find out your condition, and know you don’t even have a place to stay...treat you any way they want. And especially immigrants, your case is worse because you don’t even have status. So, you’re even scared to complain about the people abusing you, because then they’re saying, “Well, I’m gonna call Immigration.” It’s the system. (LE19)*

The research interviewees stressed that survivors often had no choice but to figure out how to survive absolute homelessness, even if it led to an increased risk of violence, discrimination, and exploitation.

## Absolute Homelessness

Due to a lack of housing options, 27% of the lived-experience interviewees resorted to living outside or in **encampments** during their housing journey. One lived-experience interviewee who faced years of chronic homelessness due to GBV explained that the housing crisis had left survivors in visibly worsening and desperate situations, without any better options but to remain living outside:

*That didn't go on before. Back in my day when I started this ordeal, you know, like, 12–13 years ago, you didn't see this shit. Like I mean people they weren't outside sleeping, it wasn't like that. They didn't sleep outside, like outside the [shelter], out in yards, they didn't camp at the parks, and this and that. This is all getting worse and worse. (LE05)*

Service providers shared that they adjusted their outreach priorities in response to an increase in absolute homelessness, from supporting unsheltered clients with housing access to offering suggestions on how to survive living outdoors in inclement weather. Service providers completed safety plans and gave their clients food, warm clothing, tents, and waterproof supplies. They described working with seniors, pregnant youth, and individuals with disabilities while they were living in encampments, tents, cars, sheds, garages, and unwinterized camp cabins.

Service providers also expressed frustration because there was not much more they could do to help their clients besides calling their local shelter or centralized access points to try to secure space in the consistently full **emergency shelters**. One service-provider interviewee noted that “If you call the city...it is very typical to hear, ‘Well, we don’t have any space.’ So now what?” (SP40).

Interviewees shared examples in which survivors had no choice but to live outside and then developed frostbite that led to amputation. In other instances, survivors experienced sexual violence or trafficking, or witnessed lethal drug poisonings. A service provider from an Indigenous-led organization warned that “I don’t say these words lightly; I know that a real possibility for clients who would become **houseless** is they may very well end up dead” (SP37). Yet several service providers also stated that many survivors chose to remain in situations of absolute homelessness rather than deal with the racism, ableism, homophobia, transphobia, or bullying that they had previously experienced while living in the shelter system.

### Encampments

Although encampments could be unsafe, they also simultaneously provided a sense of home for some lived-experience interviewees. Thus, municipal decisions to tear down encampments had profoundly affected the survivors who relied on them for shelter.

A lived-experience interviewee who was violently “evicted” by the police from an encampment in a park not only lost all of their possessions in the encampment-clearing process, but felt that their sense of safety, community and belonging had been destroyed. They asked, rhetorically:

*“Where are we allowed to exist? Please tell me, where am I allowed to exist? Nowhere” (LE15).*

An Indigenous-led service-provider interviewee highlighted that clearing encampments did not necessarily mean the encampment had been destroyed—it merely forced its unsheltered residents to move into discrete or hidden locations. This had dangerous implications for marginalized survivors with complex needs, disabilities, or substance dependencies, and for Indigenous and racialized women. The interviewee commented that “where they have been cut from the herd, they end up camping in spaces where they are alone...and some pretty dreadful stuff happens” (SP40). Service providers stressed that the more isolated a survivor experiencing homelessness was, the greater the risk of facing more extreme forms of sexual and physical violence.

### **Belongings and the Digital Divide**

The personal belongings that unsheltered survivors kept with them often got lost, destroyed, or stolen. Interviewees shared that it was difficult to hold onto valuable belongings such as identification, electronics, and medications while living outside, especially when they did not have access to storage space. As well, if an unsheltered survivor did not have access to any electronic devices (e.g., a cell phone, tablet, or laptop computer) it was more challenging for them to escape homelessness, especially if they were on a social housing waitlist. This is because social housing providers contact housing applicants via phone or email to offer them available housing units. If social housing providers cannot contact their housing applicants within 48 hours, the applicants risk being taken off the social housing waitlist. This only prolongs periods of homelessness for unsheltered survivors. As one lived-experience interviewee explained:

*And you know what, if you don’t keep up with your address for housing, you don’t get that house because they sent that letter to the very first address that you gave. You don’t give a phone number; they don’t call you. It has to be that address that you gave on file when they find you a house because that letter goes to that address. Otherwise, you ain’t getting that letter and you lost your house. Isn’t that stupid? (LE05)*

The 48-hour timeline intensified stress for unsheltered survivors and their housing workers, some of whom described going out to search for their clients in encampments to prevent them from losing their chance to secure a rental unit. The timeline had also caused the most vulnerable unsheltered survivors to disengage from the social housing process altogether, as they believed the requirements set them up for failure.

## Structural Trauma

Service providers stressed that when survivors were forced into situations of absolute homelessness due to a lack of housing options, the trauma from the experience made it much harder for them to re-stabilize, even after being housed. This was echoed by the lived-experience interviewees' narratives: if they had been unsheltered at any point in their housing journey, they had then experienced post-traumatic stress disorder (PTSD)–related challenges that led them to lose their housing once again. One lived-experience interviewee explained that ongoing structural trauma led to an “awful, vicious, vicious, vicious circle” of chronic homelessness and housing instability (LE08).

## Hidden Homelessness

To avoid absolute homelessness, many of the lived-experience interviewees had no other option but to turn to friends, family, or religious communities, or to pay for hotels or motels. This fact was echoed by service providers, who described increasingly having no other “solution” to offer besides couch surfing, hotel/motel stays, or even tents. These situations of hidden homelessness were sometimes noted by interviewees to be practical short-term housing options.

## Couch Surfing

Fifty-nine per cent of the lived-experience interviewees spent months and even years couch surfing after leaving home due to GBV. Survivors had resorted to couch surfing to avoid the shelter system if they could not afford a hotel/motel room, or if they were unable to secure a rental unit. Survivors also opted to couch surf if they needed to remain close to work, school, doctors, or community services.

For example, one lived-experience interviewee who lived with a rare chronic disability described having to give up their rental unit in their more affordable rural hometown to couch surf in an unaffordable major city because they needed to be close to their medical specialists (LE02).

Couch surfing was described as uncomfortable and even unsafe for survivors. Lived-experience interviewees with children fled their family homes only to find themselves in shared multi-family housing where their family size could not easily be accommodated. For example, survivors had been forced to share a bed with their children in the cramped spare bedrooms of relatives or had slept on the couches or floors of strangers.

Lived-experience interviewees described living with non-stop anxiety, worrying that they would overstay their welcome and be asked to leave their temporary accommodation at any moment. If survivors had to couch surf in social housing rental units, they were also wary of jeopardizing this housing, as most social housing providers have occupancy-standards policies that restrict the amount of time unauthorized guests are allowed to stay without permission. Survivors would move between couch surfing, hotel/motel stays, and situations of absolute homelessness to ensure that their friends or relatives were not threatened with eviction or did not become frustrated with them for staying longer than anticipated.

Some of the lived-experience interviewees described their horror when, after leaving one abusive situation for safety reasons, they found themselves experiencing further violence while couch surfing. Lived-experience interviewees shared examples in which, after leaving an abusive marriage, they were forced to couch surf with abusive family members. Similarly, some youth who had fled historic family violence were forced into dangerous couch surfing situations in which they experienced sexual violence. The lived-experience survey also indicated that 15% of respondents had experienced GBV while couch surfing.

In Northern, rural, and Indigenous communities, couch surfing had become so prevalent that it was sometimes discussed by interviewees as a permanent housing option. Service providers from these communities explained that there had not been any housing built in their communities for several decades, which led many residents to live in severely overcrowded and dated units to avoid absolute homelessness.

One Indigenous-led service provider noted that the extent of the overcrowding issue both facilitated conditions for violence and made it impossible to move clients experiencing violence when the only other available housing options were also overcrowded, shared homes (SP40). A Northern service provider added that in the context of the **missing and murdered Indigenous women and girls** crisis, the lack of political will or action to address the Northern housing crisis amounted to “an unconscionable mess” (SP48).

Broadly, couch surfing was seen as an increasingly normalized “solution” to homelessness. However, survivors gained no sense of permanency, comfort, or protection from experiencing further harm when they were forced into couch surfing. The experience of living in multi-family, overcrowded, and unsafe units was described by a service provider as undignified; they highlighted that it also put a strain on the survivors’ relationships, as “you don’t always think that in your fifties you’re going to be sharing your home with your adult daughter and her son, right? But they have no choice” (SP57).

## **Hotel/Motel Stays**

Interviewees mostly considered hotel/motel stays to be an emergency measure to prevent absolute homelessness or further violence from occurring. Service providers sometimes had discretionary funds to cover a few nights’ stay at hotel/motels when their clients were at risk of imminent harm. However, because of the housing crisis and a lack of available shelter space, service providers stated that they were increasingly using more of their funds to move survivors into inexpensive hotel/motels for as long as they could afford.

A Victim Services interviewee noted that:

*For intimate partner violence, we have folks calling us who want to flee, like, they're at the stage when they are ready to go. And so, they're in a crisis, [and] we're trying to get them into a violence-against-women's shelter first, if possible. But they're full all the time. It's very hard to get in... So we will use our hotel program for three nights' stay so we can ensure that we can get the person out when they're ready to go. But the problem that we have now is that we only have so much capacity financially to do hotels. (SP09)*

While service providers had previously counted on hotel/motel stays as an emergency measure, they also noted that survivors were increasingly unable to afford even one night in hotel/motel rooms due to soaring room rates. In addition, although lived-experience interviewees felt that the hotel/motel stays could be a temporary blessing because they provided privacy, warmth, and running water, they had also, at times, felt unsafe in these spaces. For example, one lived-experience survey interviewee described being retraumatized by the sounds coming from the neighbouring rooms of her homelessness diversion program located in a motel:

*They housed me in a motel for their clients. It was not safe, and I regularly heard what sounded like domestic violence from motel neighbours. Also, the man living above me would go into rages and throw furniture on his floor/my ceiling, which triggered flashbacks for me. (LESR)*

Similarly, Northern service-provider interviewees shared that they were hesitant to send clients to hotel/motels because some of the locations were believed to have been targeted by traffickers or gangs. They gave several examples in which they had lost contact with clients almost immediately after they checked into hotel/motels that had notorious reputations in the community.

Both service-provider and lived-experience interviewees noted that hotel/motels could rarely be counted on to be safe places and that they should therefore be used sparingly for homelessness prevention.

## Emergency Shelters

Emergency shelters are government-funded spaces that provide short-term overnight homelessness relief, from a single night to a maximum of three months. Seventy-three per cent of the lived-experience interviewees had to enter the emergency shelter system during their housing journey. However, many of them described how reluctant they were to go to these spaces, with one

interviewee stating explicitly that “there’s a lot of breaking that has to happen before you get there” (LE12). Although some of the lived-experience interviewees expressed gratitude that they could leave situations of GBV for the relative safety of the shelter, they more often described fear, shame, and ambivalence toward the shelter system and conveyed an overall sense of defeat that there were no better options available to escape homelessness.

## Stigma and Shame

Interviewees raised the stigma of GBV and homelessness as key deterrents to entering the shelter system. Many of the lived-experience interviewees who had experienced IPV avoided seeking help from formal services because they were ashamed to admit that their marriages and long-term partnerships had violently broken down. GBV stigma was described by the interviewees as layered and nuanced, and that it could be set within specific religious, cultural, or social contexts.

For example, one lived-experience interviewee explained that it was taboo for her to return to live with her parents after the breakdown of her marriage. In her culture, once a person was married, it was considered a curse to move back into the family home. She therefore stayed in her abusive marriage for as long as she could bear.

A service provider explained more broadly that stigma around marriage breakdown forced many survivors from diverse backgrounds to keep their experience of GBV hidden. Survivors were afraid that their family, friends, or wider community would not understand or support their choices, would dismiss them, or could even aggravate the abuse. Thus, avoiding the social consequences associated with GBV was prioritized over their own safety, seeking a space in the shelter system, or looking for new housing.

For example, one lived-experience interviewee shared that even though she feared for her life while living with her now ex-husband, she refrained from disclosing the IPV to her family in case they minimized what was happening:

*My dad, okay, I wasn’t telling him so much. Because...it was painful for the family...it was my high school sweetheart. So, we grew up together, our families were actually close from when we lived back home. So, I didn’t want to divulge too much to them because I didn’t want them to try to talk me out of [the] process. (LE07)*

The fear of repercussions or social rejection was often warranted, as involving outsiders had, at times, led to retaliation from the person causing harm or to extended family violence or ostracization. One lived-experience interviewee was abruptly forced out of her home and into a shelter because she disclosed her experience of sexual assault to her family.

While reflecting on her pathway into homelessness, she stated that “I think about all the things that went downhill, moving away from my family, and my family calling me damaged goods, and kicking me out and locking the door. It’s really hard” (LE14).

Calling emergency services for help had sometimes led to survivors’ removal from their rental units by police, getting charged for the abuse themselves, and experiencing further judgement from emergency service workers. Lived-experience interviewees shared experiences in which police officers had mocked and laughed at them when disclosing details of the abuse, assumed they were using substances, attributed violence to a mental health crisis, or dismissed their concerns entirely. Indigenous, racialized, and gender-diverse survivors stated that they felt they were placed in even more danger after calling formal services for help. The fear of racial profiling, compounded with the stigma of GBV, also dissuaded some survivors from disclosing their situation to formal services.

Further layered on top of the stigma of GBV was the stigma of homelessness. Lived-experience interviewees did not want anyone to find out they had become homeless because of GBV and would opt to live in situations of hidden homelessness rather than enter a shelter. They shared that they were in denial about the abuse and had minimized or rationalized their experience of homelessness. One lived-experience interviewee explained that she kept her experience of homelessness secret to avoid disclosing IPV or facing further social repercussions:

*I was always embarrassed from my story. I lied so much. I told people I was single. I told people I was never married. I never had kids. Even my workplace, I was really petrified that I will lose my job. So, I was hiding the whole time. (LE11)*

It was only when finally seeking help or moving into a shelter for safety that survivors struggling with stigma were forced to confront the severity of their situation because of IPV. The shelter itself also carried the stigma of homelessness. Survivors heard horror stories about their local shelters and did not consider them to be safer options than homelessness or remaining in abusive situations. Lived-experience interviewees discussed being worried about who they would have to share their space with and agonized over the possible negative effect a communal-living environment would have on their children.

One lived-experience interviewee described the judgement she felt from her family when she relented, gave up her rental housing, and moved her family to a shelter for safety reasons:

*Even my mother was not kind when we were in the shelter, she would not help us. Because to her, people that ended up in the shelters, they were of a certain type. And I would say, “But Mom, there’s a woman here that was on the Dean’s top ten list. So, it can happen to anyone.” (LE21)*

In rural communities, there was a higher chance of knowing fellow shelter residents or the shelter workers, as “everyone here knows someone” (SP56). Fearing that their experiences of GBV and homelessness would become the subject of local gossip, interviewees also explained that survivors from rural towns would avoid the shelter there regardless of how severe the abuse was at home. A service provider noted that “strangely, it seems like somehow people seem to know a lot about each other’s business. I do not know how people find out so much” (SP55).

Another service-provider interviewee shared that shelter residents could be criticized by community members for staying there:

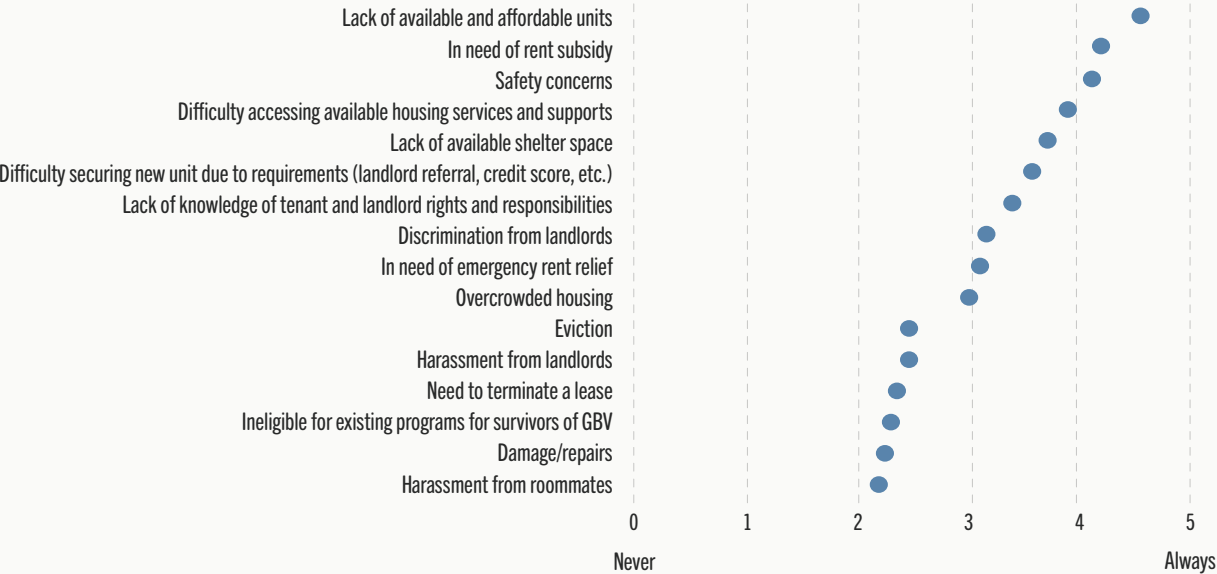
*There’s lots of judgment, tons of judgment. [They say] “Why don’t they get jobs while they do this?” And it’s like, well, you know, think about what stress is like for you, and you know, wanting to work, or not being able to work, because of everything else that’s piled up, let alone the safety piece. (SP39)*

In most of the lived-experience interviewees’ narratives, admitting the severity of the situation, asking for help, and moving into a shelter was seen as a last resort. Survivors only sought shelter services after exhausting all other options to avoid homelessness or when they were at imminent risk of harm.

### Shelter Capacity

Many of the lived-experience interviewees explained that after they finally decided to go to a shelter, they were turned away because all of the shelters in their respective areas were full. This was corroborated by the shelter and housing professional survey, in which service-provider respondents indicated that survivors were frequently unable to access the shelter when they had needed it (see Figure 5). Twenty-six percent of lived-experience survey respondents could not access shelter when they needed to.

FIGURE 5: FREQUENCY OF HOUSING-RELATED CHALLENGES FOR SURVIVORS OF GBV



Shelter-provider interviewees confirmed that they were constantly experiencing capacity issues, forcing them to turn away callers in crisis. This also meant that if a shelter bed became available, that availability was short-lived:

*If we happen to not be at capacity, it would only be for a day or so...for the most part, if we have a discharge in the morning, that room is being cleaned, and it's occupied again, either by that evening, or by the next day. (SP13)*

Because shelters typically do not maintain waitlists, survivors must call within a small window of time to secure an available bed. Gaining access to a shelter was thus considered a “stroke of luck” for survivors. A rural shelter-provider interviewee shared a snapshot of their internal data to describe how difficult the situation was: from 2021–2022, the shelter was forced to turn away more than 900 individual callers (not including any accompanying children). Another shelter-provider interviewee noted that calls to their shelter increased by 90% from 2022 to 2023, even though the provincial lockdowns had ended and pandemic funding for shelters was rescinded (SP32). This had led to the shelter experiencing its highest-ever turn-away rate.

Lived-experience interviewees explained that being turned away when they needed help left them in desperate and dangerous situations. For example, one lived-experience interviewee who was newly settled in Canada described not having a community to turn to when her abusive partner was removed from the home due to IPV. After confiding in her landlord that she was struggling to pay rent on her own, the landlord then began to sexually harass her. Her last remaining option was to contact her local shelter for help. In the weeks it took her to secure a spot in the shelter, she had to barricade herself and her child in her bedroom to prevent the landlord from entering during the night. She explained:

*I [was] just continuously praying and just continuously crying every day for the shelter and all this. And luckily, I got in after 20 days, I got [into] the shelter. I feel so relieved because I was under so much stress. I was going through so much in that 20 days. That was really tough for me. (LE06)*

In addition, survivors with disabilities were confronted with shelter accessibility barriers when seeking help. One lived-experience interviewee explained that “I have a disability, I cannot climb stairs. And a lot of places I realized, later on, have stairs. So that’s another aspect, like, later on, when I was trying to find a shelter, I couldn’t get it because of this reason” (LE17). This interviewee had to return to live in a rental unit with her abusive landlord for several months because the only available shelter space she could find was unable to accommodate her physical disability.

## Relocation

To reduce the risk of such harm, service providers had at times urged survivors to look further afield for a space in the shelter system and to consider relocating if a bed was available in a neighbouring community. One lived-experience interviewee shared that the suggestion that she should move more than six hours' drive away from her community felt like she was the one being punished for the abuse.

As well, if a survivor was willing to relocate to a different community to secure an available shelter bed, it was often up to them to find their way there. Service providers from Northern, rural, and Indigenous communities explained that transportation could be costly, inaccessible, and even dangerous, especially for youth or survivors with complex needs. Some rural communities were inaccessible by road during the winter or had infrequent or non-existent public transportation, so fleeing in a hurry was extremely challenging, if not impossible, for survivors. For example, a Northern service provider estimated that the cost of moving a family out of a fly-in-only community would be well over \$500 per person and explained that it would require time and extensive coordination between members of the community and the receiving shelter (SP56).

Relocation was more likely to be contemplated as a last resort in crisis situations to prevent further harm from occurring. However, a service provider from a rural, Indigenous-led service was adamant that sending Indigenous survivors away from home was always a harmful practice:

*When we ask them to uproot their lives at a time when it's really challenging and to leave their community, their supports, all the family they know...there's been no good outcome....Let's just say I have not had one successful situation where a woman has left the community and been successful. (SP02)*

Service-provider interviewees stressed that when they sent their most vulnerable clients several hours away to shelters with availability, it was common to lose contact with them into what felt like a never-ending **cycle of violence**. This service provider highlighted that the substantial risk of further harm meant that services must take the utmost care when sending a survivor out of their community:

*I have to have enough staff to make sure they have everything they need, because I do not want one more missing person on my watch. If I don't have them getting everything they need, then they're going out to find it from someone on the street corner, that's when they're going to get put in that van. And they will be a missing person. I will say yes to everything because...not one more on my watch. (SP02).*

The lack of available shelter space not only led to displacement but to situations in which survivors experienced even more extreme forms of violence. Indigenous-led organizations emphasized that this is a devastating reality for Indigenous communities grieving thousands of their missing and murdered women, girls, Two-Spirit, and gender-diverse peoples.

## The Shelter Experience

### Length of Stay

The lived-experience interviewees who managed to secure a spot in a shelter described it as an overwhelming experience, primarily due to the expectation that they had to stabilize within a few weeks. One shelter-provider interviewee explained that residents in emergency shelters are typically allotted a stay of up to three months. She noted that this limited timeline is due to the high demand for shelter services, stating that “As soon as one woman is gone, there are six other women that have been calling” (SP01). Shelter workers thus communicated a sense of urgency to their residents and prepared them to leave almost immediately after arrival. This length-of-stay policy was to ensure that the shelter could accommodate as many survivors calling in crisis as possible.

However, it was challenging for the lived-experience interviewees to contemplate leaving the safety of the shelter within a few weeks. Moreover, experienced service-provider interviewees commented that they had noticed an uptick in the severity of abuse in recent years. A shelter-worker interviewee stated that:

*It’s just gotten so much worse over the past few years, like the injuries that we’re seeing, and the effects of mental health impacts on kids are like nothing I’ve ever seen in the 20 years that I’ve worked in the sector. (SP29)*

Service-provider interviewees proposed that this was because survivors of IPV remained trapped in abusive households for longer stretches of time due to the lack of housing and shelter options that would permit them to leave. Most survivors also showed up with a wide range of new and existing legal, financial, and housing issues, which they were expected to navigate while simultaneously processing the effects of severe and complex trauma. Although residents were obliged to begin a housing search from the outset of their shelter stay to ensure that they had enough time to find new housing, serious issues such as a lack of income, threats of deportation, potential criminalization, or the fear of losing custody of their children meant that housing searches were often placed on the backburner.

Shelter workers provided intensive case management and counseling to support their residents with their legal, financial, and housing issues. Service-provider survey respondents indicated that they helped shelter residents with their housing-access needs primarily through social housing and income-support applications, connecting survivors to housing subsidies, and searching for private market rental units.

This kind of housing support was welcomed by the lived-experience interviewees, who described housing access as a complicated, frustrating process to navigate, especially in the context of a housing affordability crisis. It was described as an especially daunting process for survivors with language barriers, newcomers, those with precarious status, Indigenous and racialized survivors, and individuals with disabilities. Survivors from these marginalized groups had faced overt discrimination and exploitation from prospective private market landlords.

When considering the added barriers to housing access, shelter-provider interviewees explained that they tried to be flexible with the shelter timeline, if possible. They also shuffled existing residents around in the shelter to make room for more residents and to allow for longer stays if needed.

However, even with shelter extensions, it remained challenging for survivors to find adequate, affordable housing before their stay ended. An external service-provider interviewee considered that even with the case management support, it was unreasonable for shelters to expect that survivors would be able to prioritize housing applications to meet arbitrary deadlines, especially when their residents were simultaneously juggling trauma, health issues, and serious socioeconomic challenges:

*Trying to apply for housing for people in the midst of a crisis, [who] have just left violence...a lot of them [are facing] mental health, addiction, PTSD that's untreated and now they need to fill out the big stack of paperwork...just have to manage all of it right away. And, you know, stay on top of their social assistance paperwork...and just all the issues...really compound on top of the other...they're not even housed, but they're supposed to be able to think clearly enough to make all these phone calls and to organize their lives. (SP59)*

The multitude of health problems survivors faced because of GBV, including PTSD, depression, anxiety, substance abuse, and chronic pain, meant that stabilizing themselves within such a short timeframe was extremely difficult.

## **Service Barriers**

Notably, several lived-experience interviewees explained that their housing issues were exacerbated after they had entrusted shelter workers with important paperwork that would help them leave the shelter within the timeline. These interviewees shared examples in which workers had made consequential mistakes, such as missing deadlines and submitting incomplete applications to housing providers. These administrative mistakes had cost the lived-experience interviewees housing opportunities and prolonged their experience of housing instability. Thus, many of the lived-experience interviewees felt they could not rely on their shelter workers and had navigated social systems without help.

Yet the same lived-experience interviewees also extended compassion to the shelter workers and felt that the inconsistency in their casework was because the workers were overwhelmed by the demands of their job. As one lived-experience interviewee explained:

*I had a worker I was assigned to, who was supposed to help you with stuff...but she's running around feeding people. And so she...can't sit down and help me with all these applications and all this...hard-core stuff, so that I had to outsource support. They'd be like, "What about your shelter worker?" And I'd be like, "I pretty much don't have one, that's not what she can do." (LE15)*

Shelter-provider interviewees admitted that a chronic lack of funding meant that emergency shelters could not meet the increased demand for their services. They explained that they did not have the funds to hire and retain experienced staff, which led to existing staff juggling multiple roles and struggling to maintain their demanding client casework.

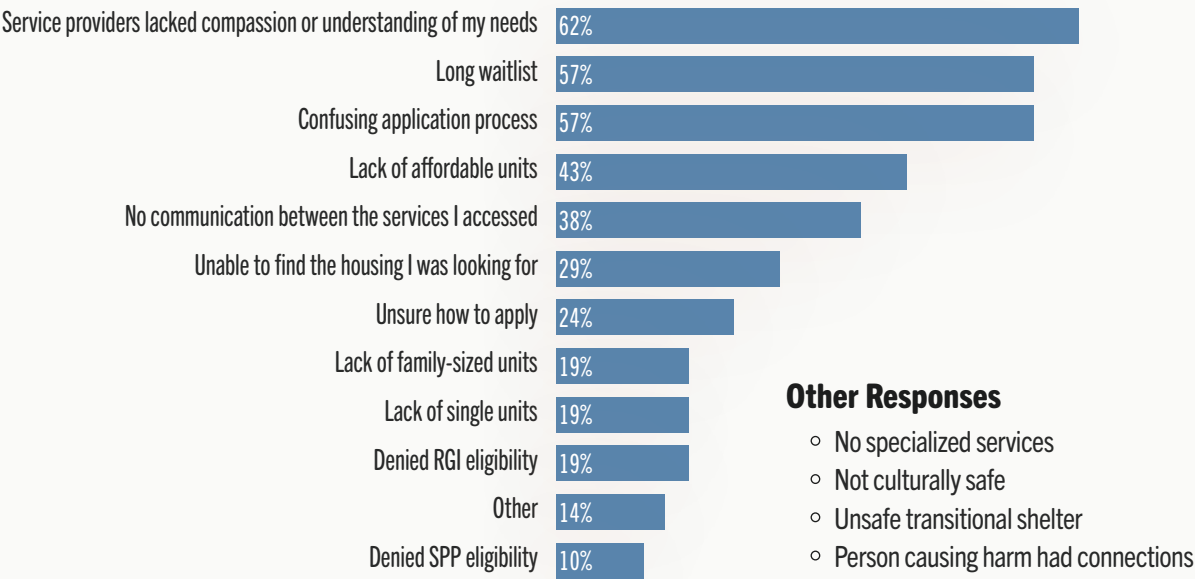
Although most shelter-worker interviewees raised the lack of funding as a major barrier to service, Northern and rural shelter providers faced the most significant hardships. A Northern shelter worker interviewee noted that "There isn't funding to have custodial staff in our environment and cooks and cleaners...so the staff wears those hats. You know what I mean? The management wears those hats....It's what we need to do to survive" (SP16).

The lived-experience interviewees wondered whether understaffing had also led to a diminished sense of empathy and patience toward the shelter residents. Many of the lived-experience interviewees suggested that their shelter workers appeared to have been experiencing **compassion fatigue** or **vicarious trauma** due to their repeated exposure to the aftermath of abuse. One lived-experience interviewee offered that:

*I think their job must be tough, because they deal with all kinds. Right? And...I think maybe it's a coping thing for them. Maybe they just have to go a bit blasé after a little while, like, you know, paramedics and that, where they deal with scraping people off the streets. And it's like, they just have to turn a bit "ugh" to it all, I think that's what happens. (LE18)*

Similarly, 62% of lived-experience survey respondents indicated that service providers had lacked compassion and understanding when trying to access housing services and supports (See Figure 6).

FIGURE 6: THE MAIN CHALLENGES SURVIVORS FACED WHEN ACCESSING HOUSING SERVICES AND SUPPORTS



\*Percentages add up to more than 100 because respondents could select more than one option.

Although the lived-experience interviewees conveyed a sense of understanding about the demands of shelter work, they also shared concerning stories that suggested a widespread culture of surveillance, bullying, and punishment. Lived-experience interviewees shared examples in which they had been threatened with **Children's Aid Societies** (CAS) calls if they did not cooperate with staff, warned that they would be discharged immediately if they did not follow shelter rules, and had experienced bullying and prejudice from workers and fellow residents.

Service-provider interviewees attested that their marginalized clients, especially residential school survivors, those who had formerly been incarcerated, or those who had lived in state care as children, found the communal shelter spaces to be triggering. When shelters began to mirror the punitive experience of institutional facilities, it caused residents with traumatic institutional experiences to disengage from shelter life or to leave the shelter entirely.

Broadly speaking, a consequence-based approach led survivors to constantly anticipate being punished for making minor mistakes. One lived-experience interviewee considered that being immersed in a punitive culture may have shifted the attitude and behaviours of even the most compassionate worker:

*To be that kind of caseworker, makes you a little harder, you know, a little thicker-skinned so you can't differentiate [between] who needs a lighter touch and who is going to respond to martial law. So, it was martial law all the time. (LE12)*

This was also problematic because the lived-experience interviewees were grappling with the effects of the abuse they had fled. They described being forgetful, anxious, depressed, and reactive, and having heightened sensitivity to harsh words or actions. Thus, it was particularly upsetting when they were scrutinized by shelter workers over trauma symptoms. Some of the lived-experience interviewees expressed feeling judged or misunderstood during moments of crisis, with one survivor recalling that “instead of helping me, they [shelter workers] were too busy trying to get rid of me” (LE19).

Many of the lived-experience interviewees stated that the tense environment of the shelter had mirrored or at times felt worse than the abuse they had fled, and recalled that they felt safer at home than they did at the shelter. Another lived-experience interviewee felt she was better equipped to survive the abuse from her ex-husband than the bullying and surveillance she experienced at the shelter:

*I lost 10 pounds in less than a week, kind of thing. Like, that’s just my body in a constant state of panic. And I was like, I can’t even survive it. I can’t survive doing this. I’m just going to...waste away to nothing. And I can’t....I have to go home. It was just like, I have to make it work at home. (LE20)*

Within a few months, this lived-experience interviewee returned to the same rural shelter after the abuse from her ex-partner intensified.

Along with struggling with the punitive environment in the shelter, lived-experience interviewees shared that they had experienced racism, ableism, homophobia, or transphobia from both staff and fellow residents. For example, lived-experience interviewees felt that they were not taken seriously when they complained about racism between residents, others were offended by the assumptions workers had about their cultures, and some were refused help entirely.

Interviewees highlighted that although shelters often promoted **anti-oppressive** values such as inclusion, **cultural safety**, and respect in their materials, these values were not necessarily implemented in practice. A shelter provider interviewee admitted that in her workplace:

*We had this beautiful poster that said we were trans inclusive, and “that all women were women” and you know, all great on the poster, but then also, when we did have, like, an individual who identified as a woman and, for example, was trans, they were transferred because there just wasn’t any support. (SP25)*

An overreliance on punishment and a lack of anti-oppressive practice meant that the most vulnerable residents faced a higher risk of discharge from the shelter. For example, some shelter locations were known to the interviewees as having zero tolerance for residents they deemed “difficult,” such as survivors with complex mental health needs or anti-social behavioural tendencies, or those who used substances.

A shelter-worker interviewee admitted that due to capacity constraints and understaffing, the shelter had to consider transferring out residents with complex needs:

*It's like mental health stuff is really, really challenging. And especially trying to manage it in a communal environment where there's other families and other kids... and we're just single staffed. So, it's not actually humanly possible for one person to manage that kind of dynamic. (SP29).*

This led some of the lived-experience interviewees to feel that the shelter was not a viable option for them, even when they were faced with the prospect of absolute homelessness, stating “What’s the point of trying to get into the shelter, when I’m just going to get kicked out?” (LE19).

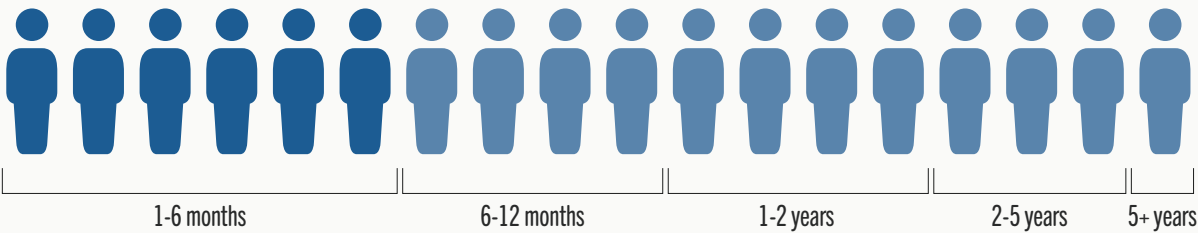
### **Shelter Discharge**

Shelter-worker interviewees described being repeatedly confronted with the same ethical dilemma when contemplating the discharge of their residents. Regardless of whether residents’ allotted time had ended or they had been asked to leave for misbehaviour, the workers considered which decision would cause the least amount of harm to survivors. One shelter-worker interviewee complained that:

*Our back is against the wall, because we need to sort of push people to go to these places so that we're making room for the next person who needs to come in...like an emergency. But it sucks, because we know we're taking choice away from people. (SP29)*

Another shelter-worker interviewee stressed that their residents “can’t live with us for six months to a year waiting for the unit they want” (SP18), so when survivors’ stays neared an end, they resigned themselves to taking inadequate, unaffordable, or shared rental units in the private market. When survivors could not find a suitable place to rent in the private market, they returned to situations of absolute homelessness or couch surfed, or returned to live with the person causing harm. One lived-experience interviewee described her length of stay at the shelter as like “walking the plank” (LE14). Lived-experience survey respondents highlighted that only one-third of survivors were able to secure housing in under six months (see Figure 7).

FIGURE 7: LENGTH OF TIME SURVIVORS OF GBV WAITED TO GET PERMANENT HOUSING



Lived-experience interviewees recalled being at their most vulnerable when discharged from the shelter without permanent housing to go to, especially if they were forced to return to unsafe situations. A lived-experience interviewee explained that “there’s a time period between after the shelter, and between getting the housing, and that period is a very difficult time” (LE6). During this fragile period, lived-experience interviewees felt that they could not disclose their experience of homelessness to anyone, especially formal services, as they feared being rejected, judged, or facing more severe consequences such as child apprehension.

Even when the lived-experience interviewees were discharged from the shelter into rental housing, they found the transition period to be challenging, because their trauma from GBV was compounded by their experience of residing in the shelter. A recently housed lived-experience interviewee shared that:

*It’s gonna be a long process of rebuilding, like, it’s going to take me years to rebuild up to...having the capacity that I once did for...a lot of reasons, but a lot of it is just recovering from this. (LE15)*

Interviewees further described trauma symptoms that they attributed to their shelter stay, including nightmares, flashbacks, phobias, and depression. For example, a former shelter resident disclosed that she avoided being alone in her apartment during the day and had recurrent anxious nightmares during which she often awakened from sleep, yelling, “I don’t want to lose my bed, I don’t want to lose my bed” (LE14). Another lived-experience interviewee recounted that she believed the shelter had:

*Saved and killed us at the same time. I was assaulted twice at the shelter. It was infested. I was harassed. My daughter was bullied...she still wakes up in the middle of the night, thinking that somebody’s coming in. (LE12)*

The shelter system left lingering impacts that were not limited to the shelter residents. Shelter workers also expressed feelings of overwhelming disconnect and frustration. A shelter-worker interviewee stated that she was worn down:

*Not so much [from] the work that I do with women, or the work that the people I talked to do with women that causes burnout, it's working in a system that you know, is actively broken [and] you can't fix it. (SP38)*

Most interviewees echoed this shelter worker's palpable sense of despair when talking about their experience in the shelter. Although the interviewees unanimously agreed that shelters were crucial for the safety and well-being of survivors in crisis, a lack of funding had created a dysfunctional, overburdened system that had inadvertently caused significant harm to survivors.

## Transitional Housing/Second-Stage Shelter

Interviewees identified a need for a variety of additional housing and shelter options to ensure that survivors were not pushed into homelessness, extended shelter stays, or unsafe housing, or forced to return to the person causing harm. Interviewees suggested that the expansion of transitional housing would prevent pathways into homelessness. This is because residents of transitional housing are granted a longer stay—up to two years—in mostly self-contained units and have access to support workers. This second-stage shelter model has been shown to improve outcomes, including long-term housing stability.

### Transitional Housing Capacity

Transitional housing does not receive core funding from any level of government, which has led to a scarcity of units. A service-provider interviewee noted that although there is a high demand for transitional housing units, they were as “rare as a hen’s teeth” (SP40). This meant that while “there are certainly clients that need transitional housing...only a very small percentage of people [will] get access” (SP45). This was reflected in the lived-experience survey. Although 67% of survivors had taken longer than six months to secure permanent housing, only 19% of respondents had accessed transitional housing support.

One transitional housing-worker interviewee highlighted that the situation mirrored that of the shelter system: “Every single time I have a vacant unit, I have to turn away dozens and dozens of applicants, people who are needing this space and who are ready for this space. But we simply just don’t have the resources” (SP08).

As described by this worker, transitional housing organizations may not necessarily accept residents on a first-come, first-served basis. Instead, admittance to transitional housing may be based on applications or referrals, with consideration given to the likelihood of the applicant's success in the program, in which it "comes down to just really minute, small details, that kind of, you know, make the difference between two applicants" (SP08). The lived-experience interviewees who were accepted into transitional housing thus echoed the sentiments of the interviewees who had accessed the emergency shelter: they stated that being there felt like winning the lottery.

## The Transitional Housing Experience

Thirty-two per cent of the lived-experience interviewees had stayed in specialized transitional housing for survivors of GBV. All the lived-experience interviewees who had resided in transitional housing were accepted and referred there from an emergency shelter. This may have prompted the interviewees to compare their experiences in transitional housing to their experiences of living in the emergency shelter. Although the lived-experience interviewees felt that both services helped them to leave situations of GBV, they used more positive language when describing their time residing in transitional housing.

Consistent with existing research, a stay in transitional housing was described by the lived-experience interviewees as improving their overall well-being and contributing to their success in reaching housing stability. The lived-experience and service-provider interviewees raised three key factors that contributed to the success of the transitional housing programs:

1. Support workers and programs (e.g., regular counselling, employment assistance, and intensive case management) had helped them build life skills.
2. The residents bonded over their shared experiences, creating an environment of peer learning and support.
3. The longer timeline allowed them to strategize their next steps, without overwhelming them.

## Supportive Services

The lived-experience interviewees who had resided in transitional housing all lived in self-contained units. A lived-experience interviewee explained that the person causing harm had controlled every part of her life, and so the experience of living in an independent unit allowed her to regain self-confidence and a sense of agency (LE11). This experience was echoed by fellow transitional housing interviewees.

In addition, the lived-experience interviewees had benefited from the policies and programs that had been developed for their unique needs. For example, specialized transitional housing for survivors of GBV had privacy policies that required their location to be kept secret for safety reasons. A lived-experience interviewee was relieved that she did not have to share her location, stating that

“I have never been in so much peace like before. Nobody’s allowed to come to my house here because it’s a woman [transitional] shelter” (LE13). She further noted that having this space, away from her community, helped her process the experience of IPV and become more comfortable with setting boundaries with her ex-husband’s family.

Transitional housing workers were also able to spend more time helping residents navigate the housing system, which included searching for affordable units in the private market, social housing applications, and accompanying residents to scheduled viewings. The extra time with caseworkers contributed to the interviewees feeling like they had a better understanding of their rights and responsibilities as tenants, and that they were well-equipped to make informed choices about rental housing offers.

As well, lived-experience interviewees were grateful to have direct access to programs offered through their transitional housing organization, including counselling, child care, support with job searches, and after-school programs. Each program allowed them to further stabilize their situation.

### **Sense of Community**

The lived-experience interviewees found that being part of a community of survivors had helped them process their experiences of abuse. It reduced their feelings of guilt and shame and fostered a sense of belonging and understanding between peers. One lived-experience interviewee shared that it felt “like I’m living with my family, you know” (LE03). The lived-experience interviewees supported each other through their ups and downs and talked fondly about learning from each other. A former transitional-housing resident stated that “I have met very good friends at the [transitional] shelter who have helped me and advocated for me” (LE22). When workers were not available, survivors were known to rely on each other for help.

Many of the lived-experience interviewees worried a lot about the impact the abuse had on their children. However, the former residents of transitional housing commented that their children’s well-being had noticeably improved while living there. For example, prior to moving into the transitional-housing unit, interviewees noted that some of their children had been withdrawn, but after moving into their transitional housing unit, they had begun playing with other children.

One lived-experience interviewee shared that her child, who had been diagnosed with PTSD, finally started talking again after several months of silence. She attributed this change to the counseling programs and the opportunity to socialize with other children who came from similar experiences.

### **Length of Stay**

The lived-experience interviewees highlighted that the longer length of stay in transitional housing allowed them to shift out of survival mode and regain their sense of safety. While the shelter had required survivors to immediately work toward an exit plan, in transitional housing the survivors were encouraged to take time to process their trauma. For example, a lived-experience interviewee was told by the transitional-housing workers to take “the first year [to] try to unwind, to try to calm down (LE16).”

This extra time significantly improved their well-being and ability to cope with stressors. Lived-experience interviewees described emerging from a mental fog during the first few months of their transitional housing stay, which allowed them to better focus on their next steps. Similarly, the transitional housing workers felt that they could prioritize working on long-term goals with their residents without overwhelming them. A transitional-housing worker interviewee explained that:

*The whole point is to break that cycle of violence, and having a client leave where there is a chance that they might return back is counter to the work that we're trying to do. Those two years of work that we did with them will basically be pointless if we had them leave before they were really ready. (SP08)*

Although residents were granted extensions whenever possible, the two-year timeline was still a major stressor for many of the lived-experience interviewees who faced leaving their affordable transitional housing unit and having to grapple with the rental housing crisis. While in transitional housing, a lived-experience interviewee had wondered:

*After the two years, where do I go? Start over again? Do I go live in my brother's house? Do I start the whole process again, 15 days there, 4 months there, then find the housing again? We're just left in the middle. I don't understand why. (LE16)*

This experience mirrored the experience of the emergency-shelter residents, where lived-experience interviewees had felt pressured to move into any available unit they could find. A lived-experience interviewee noted that although the transitional housing workers could better “help [them] to stand by [themselves] and educate to get something, to get a job, they can't solve the housing problem” (LE03).

# SECURING AFFORDABLE HOUSING

After leaving situations of GBV, survivors focused on finding new housing. However, both interviewees and housing-provider survey respondents identified the lack of available and affordable housing as the main barrier preventing survivors from achieving housing stability. The **Canada Mortgage and Housing Corporation** (CMHC) defines affordable housing as rent that costs no more than 30% of a household's income (CMHC, 2024). In Canada, 33% of renters (compared with 16.1% of homeowners) pay unaffordable rent (Statistics Canada, 2022).

Despite an increase in rental stock in recent years, CMHC's 2024 *Rental Market Report* states that rent continues to be unaffordable for low- and middle-income households (CMHC, 2024). The housing affordability crisis can be attributed to what is known as the **financialization of housing**. This refers to housing being redefined as an investment, rather than a right. Lax housing regulations have proven attractive to **institutional investors**, which have mass purchased Canadian residential property (including single-family homes and multi-unit rental buildings), developed luxury housing complexes, and traded and over-specified on housing investments on the stock market. This has led to the rate of rent increases surpassing the rate of income increases. For low-income renters, this has resulted in a disparity between rising rental prices and their stagnant or declining income levels.

The affordability crisis was exacerbated in 2018 when the Ontario government relaxed rental price regulations by eradicating rent control on buildings constructed after November 2018 (Tranjan & Vargatho, 2024, p. 15). This lack of **rent control** lets landlords of residential units constructed after this date to increase their tenant's rent annually by any amount they wish. Although this decision was aimed at incentivizing rental housing development, it has instead contributed to the housing affordability crisis and driven up average rental costs.

Statistics on average rent costs are calculated by the CMHC and encompass all rental units, including rent-controlled units. However, this rate does not reflect what a renter could expect to pay when seeking new housing. Table 1 outlines the **average asking rent** for different sizes of rental units.

TABLE 1: AVERAGE ASKING RENT IN ONTARIO, 2024

Ontario Rent	Total	Studio	1 bedroom	2 bedrooms	3 bedrooms
Average rent (CMHC)	\$1,666	\$1,307	\$1,540	\$1,749	\$1,966
Average asking rent (rentals.ca)	\$2,351	\$1,790	\$2,143	\$2,591	\$3,034

SOURCES: CANADA MORTGAGE AND HOUSING CORPORATION, 2024, RENTAL MARKET STATISTICS SUMMARY TABLES; RENTALS.CA & URBANATION, DECEMBER 2024 RENT REPORT.

With average asking rental rates in the private market surpassing \$2,000 a month in Ontario, low-income survivors forced from home often have few remaining options when trying to secure affordable permanent housing. Survivors may try to access social housing, supportive housing, or subsidized housing, or be forced to rent inadequate private market housing.

The interviewees considered social housing or supportive housing to be their best option for permanent affordable housing, especially for lone-parent survivors who rely on social assistance and/or have disabilities. However, a lack of government investment in subsidized housing means that there is a severe shortage of purpose-built affordable housing.

Survivors of GBV may apply for the **Special Priority Program (SPP)**, a provincial program that allows eligible survivors facing violence in their home to move to the top of the social housing waitlist. However, the shortage of units and strict eligibility requirements mean that survivors struggle to secure units. This led to interviewees referring to securing affordable housing in terms of probability, chance, or fortune. For example, one lived-experience interviewee stated that “I basically won the lottery when it comes to that because most people, I guess, are on waiting lists for years and years. So, my situation is pretty much as lucky as [it] can be for someone in my situation” (LE20).

When survivors were unable to secure a subsidized unit, they turned to the unaffordable private rental market, where they often compromised on their needs. Broadly speaking, the housing crisis means that the transition period between leaving home and securing new housing is getting longer and longer—often years instead of weeks or months.

## Social Housing

“Social housing” is an umbrella term used to describe purpose-built rental housing whose rentals rates are not dictated by market rates and which does not generate profit from rent (Atkey et al., 2022, p. 1; Tranjan, 2023, p. 41). Instead, rent is calculated at 30% of a household’s income. This is known as **rent-geared-to-income (RGI)** housing and is one of the only affordable housing options available to low-income Ontarians (Atkey et al., 2022, p. 14).

Social housing may include government-owned and -managed housing, **cooperatives**, supportive housing, and **non-profit housing** that is owned by charitable organizations (e.g., Fred Victor, Good Shepherd, YMCA, etc.). Fifty per cent of the lived-experience interviewees lived in social housing or had been part of the priority waitlist for at least one year at the time of their participation in the interview.

## The Housing Services Act

Social housing in Ontario is governed by the HSA. The HSA provides the legislative framework and policy guidelines for subsidized housing and homelessness services in Ontario. Ontarians who meet certain household income requirements can apply for RGI housing and the SPP.

### Rent-Geared-to Income (RGI) Assistance

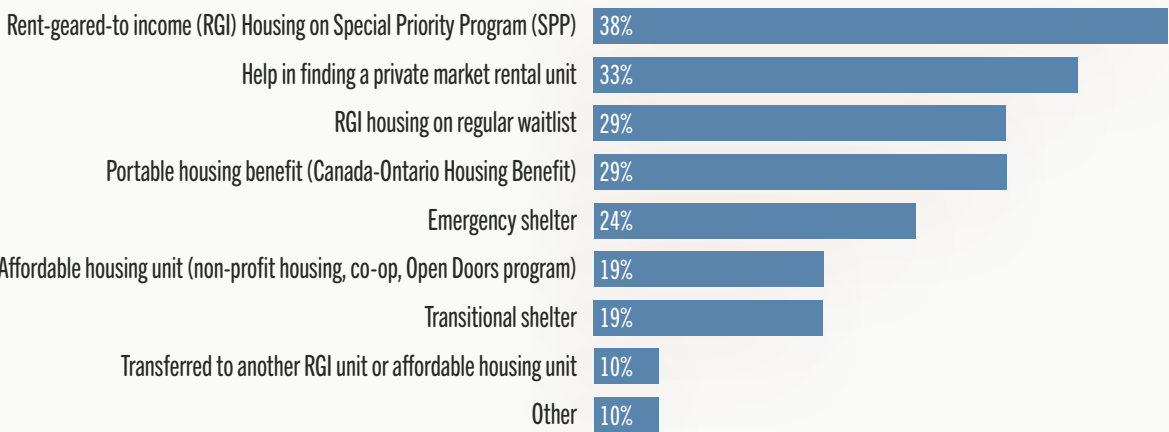
To qualify for RGI, an applicant must be at least 16 years of age and a Canadian citizen, or have applied for permanent residency status or made a claim for refugee protection in accordance with the Immigration and Refugee Protection Act (s. 24). In addition, applicants must not owe any money to a former social housing provider in Ontario, including rental arrears; **over-payments** of RGI assistance where income, assets or household size were not declared to the service manager; and fees for any damage that occurred in the rental unit (HSA, 2011, s. 26(1)).

**Service managers** can waive the requirement that applicants are excluded from social housing for amounts owed to a former social housing provider if there are extenuating circumstances—e.g., if an applicant has made a repayment agreement for the arrears or if they have made “reasonable efforts” to obtain a repayment plan (HSA, s. 26(2)). The service manager can also choose to reduce the arrears or money owed by half if the arrears occurred when an applicant was in a joint tenancy (Ontario Regulation 367/11: General, s. 26(3)). However, it is up to the service manager to decide whether to consider extenuating circumstances in applications that do not meet the eligibility requirements.

The lived-experience interviewees who had pursued RGI applications described the process as lengthy, confusing, and invasive. A lived-experience interviewee with mental health challenges stated that she gave up on applying for social housing because she “didn’t understand the process so well” (LE17).

This experience was echoed by the lived-experience survey respondents who indicated that the application process was a barrier to accessing housing services and supports. Survey respondents also highlighted that they usually required help completing housing applications (see Figure 8).

FIGURE 8: TYPES OF HOUSING SERVICES AND SUPPORTS RECEIVED BY SURVIVORS OF GBV



\* Percentages add up to more than 100 because respondents could select more than one option.

Social housing applications varied by region but, as required by the HSA, all applications require proof of identification, status, and income, and a declaration of assets. Depending on the region, applicants submit their applications online, via mail or fax, or in person. Interviewees shared that it was challenging for unhoused survivors or those with complex needs to submit completed applications without support from workers. One lived-experience interviewee explained that:

*They want so many documents that...obviously we're not applying for housing if we weren't fucked up or homeless, but you want me to have everything perfect....If someone else doesn't take me by the hand and help me, I'm not going to get it done. (LE05)*

Submitting proof of identification could be a barrier for survivors, especially for those who had fled in a hurry or who were victims of certain forms of violence such as trafficking or **coercive control**. A service-provider interviewee explained that completing housing applications could be delayed when they had to support survivors with replacing their identification. She noted that:

*Abusers will take [survivors'] identification, and either destroy it or withhold it. So, we often have to help them apply for new status cards, new health cards, birth certificates, that kind of thing. We do all of those things for them. Because that's required in order for us to apply for housing, right? (SP40)*

If an applicant managed to gather the necessary documentation and was approved for RGI housing, they expected to wait up to 15 years for a social housing offer due to high demand. Applicants may bypass the long wait for a social housing unit by applying for SPP, which is a housing program designed to support survivors of IPV or trafficking.

## Special Priority Program

SPP gives eligible survivors a priority designation on the social housing waitlist under two categories (HSA, ss. 52, 54, 54.1): abuse from a member of the same household, and trafficking. However, the eligibility rules for SPP were challenging for many survivors because they did not reflect survivors' experiences of violence or their previous living situations (see Table 2).

TABLE 2: ELIGIBILITY RULES FOR SPP UNDER THE HSA

	Applicants must:
1	Apply within three months from cohabitation with the person causing harm.
2	Provide proof of cohabitation with the person causing harm.
3	Identify the type of relationship and name of the person causing harm.
4	Declare arrears owed to any Ontario social housing provider.

To be eligible for either SPP category, the survivor must have been living with the person causing harm or been sponsored for immigration by the person causing harm within the past three months (HSA, s. 54(2)). Survivors must also agree to live permanently apart from the person causing harm, and to name them in the application process (HSA, s. 54(1)). The survivor must have been in an intimate partner relationship; familial relationship; emotional, physical, or financial-dependent relationship; or immigration sponsorship relationship with the person causing harm to qualify for the category of “abuse other than trafficking” (HSA, s. 1(2)). The second SPP category, trafficking, does not require the survivor to have been part of the same household as their trafficker.

In addition, survivors must submit proof-of-cohabitation documents to verify that they lived with the person causing harm within the past three months. However, service managers can waive this rule (HSA, s. 57). The HSA stipulates that service managers do not require documents if a survivor would risk abuse if they were to try to obtain them or if the documents were related to ongoing legal proceedings (HSA, s. 57). The HSA mandates that a survivor must also provide verification from an authorized professional confirming that they are experiencing abuse or are at risk of abuse (HSA, 2011, ss. 58, 58.1).

**The Three-Month Time Limit**

To be eligible for SPP, survivors had to apply within three months of living with the person causing harm. However, survivors found it extremely difficult to submit their application within this time limit. Interviewees explained that often by the time survivors had found out about SPP, it had already been more than three months since they left home. Survivors may have not known about or attempted to access formal services and thus had not been directed to the program. As well, survivors were unable to find a spot in the shelter system immediately after leaving the person causing harm.

One service-provider interviewee explained:

*We're noticing more that they're leaving and going to stay with friends because they couldn't come into the shelter because the shelters have, you know, been running at full capacity. So, they've been able to manage by couch hopping, getting the support that they need. But then they wear out their welcome. What's happened now is that three months has gone by that they didn't realize, "Oh, shoot, I should have been applying for housing." (SP39)*

Similarly, survivors living in under-resourced or rural areas with fewer services were often required to get placed on a waitlist for services such as **identification clinics**. A Northern service-provider interviewee noted that "90 days is not an unreasonable expectation to be waiting even just to see somebody" (SP22). Survivors' identification may have also been destroyed or withheld by the person causing harm. As well, Indigenous survivors, including residential school or **Sixties Scoop** survivors, may have never had any identification.

As one Indigenous-led service-provider interviewee stated:

*There's sometimes...a lag in in getting paperwork back and getting identification replaced, [like] status cards...we can get a letter saying that this person is a valid member of this particular band, and that their status card will be renewed. But there have been barriers in that they want photo ID, which a lot of people don't have and to get that takes time. (SP40)*

Survivors were also often unable to apply within three months because of concurrent legal issues. For example, many newcomer survivors had their sponsorship cancelled by the person causing harm, which left them without status. One service-provider interviewee explained the following issue, which occurs when individuals apply for subsidized housing while navigating their immigration status:

*And so, what that means is, you have clients who have been here for let's say, a year or two years waiting for status, and that three-month gap is gone. But they were still...experiencing violence and escaping violence from their abuser. But guess what, three months is over. So, you're not going to get housing. (SP08)*

Survivors who applied for SPP after the three-month time limit could submit an exemption request explaining their circumstances. However, survivors had been denied even with a strong exemption request noting that they could not have reasonably applied within three months.

For example, one lived-experience interviewee who resided in transitional housing was denied SPP in five regions because her immigration status was revoked because the person causing harm cancelled her sponsorship. By the time she resolved her immigration issues with the help of a lawyer, the three-month timeline had passed:

*They [the service manager] say you're separated more than six months and I tried to explain to them [that's] because I don't have a status. And now I have a status. They say, "Sorry, we can only follow the rule here and you waited more than six months when you are separate with your ex." But when I don't have the right to apply before that, what can I do? (LE03)*

When this interviewee requested a review of the SPP denial, the initial decision was upheld. The service manager stated that the survivor should have applied within 90 days of leaving her ex-husband, despite the inclusion of support letters from legal professionals documenting the survivor's exceptional circumstances. The interviewee was instead placed on the regular RGI waitlist.

Often by the time survivors had accessed services, obtained their identification, and resolved their immigration challenges, the three-month timeline had passed. This meant that service capacity and "red tape" prevented marginalized low-income survivors from accessing SPP, with disproportionate impacts on unsheltered, Indigenous, and precarious-status survivors.

## **Proof of Cohabitation**

Service managers require SPP applicants to provide documents that prove they lived with the person causing harm. Survivors must include acceptable documents showing their name, residential address, and the person causing harm's name with the joint address. Difficulty obtaining proof of cohabitation was the most discussed eligibility barrier by interviewees, with many sharing stories of low-income survivors who were denied because they either had not lived with the person causing harm or could not prove it.

In many cases, survivors were never named on any housing documents or accounts, did not think to take a utility bill when they fled, or could not safely retrieve documents with the person causing harm's name on them. To meet the eligibility requirement, interviewees noted that survivors will risk their safety to "literally steal mail belonging to their abusers sometimes, just to prove that they [were] living together" (SP29). Telephone bills, delivery packages, and subscription mail were not considered acceptable proof of cohabitation documents for survivors, which only made it harder to secure evidence without putting themselves in harm's way.

One service-provider interviewee also noted that the proof-of-cohabitation requirement did not reflect the digital landscape:

*The proof of cohabitation has become a real issue because a lot of things are online. They don't have access to it. It's not like they can go steal the mail or something from the husband. You know, it's online, he has access to it and they don't. (SP10)*

As well, the affordability crisis meant that many survivors were often living in temporary or precarious housing situations without a lease. This meant that the most vulnerable survivors were excluded from the program because they could not provide any documentation that would deem them to be eligible for SPP. As one service-provider interviewee noted:

*Where the rental market is so...it's such a crisis, and it's so competitive. So many people are living without the official contract forms, and they're living on informal rental agreements. So, proving cohabitation is sometimes difficult. And when people are with precarious status, things like filing police reports is something that a lot of people are not comfortable to deal with. (SP10)*

Lived-experience survey respondents indicated where they resided when they experienced GBV. Most of them would not have been able to provide proof of cohabitation (see Figure 9).

FIGURE 9: WHERE SURVIVORS LIVED WHEN EXPERIENCING GBV



\* Percentages add up to more than 100 because respondents could select more than one option.

Survivors and their support workers thus had the additional burden of finding government records, requesting letters from landlords, searching land registries, or asking for help from professionals (e.g., a community nurse) to meet the proof-of-cohabitation requirement. For example, one lived-experience interviewee was only successful after she approached the manager of her building, who saw her in the family home:

*I was not on the tenancy agreement, but she wrote a separate paper for me....She was giving proof that yes, this woman was living with her husband in this house for the past four years. That helped me a lot. (LE16)*

While some survivors successfully applied for SPP using alternative documentation, many had no way to prove cohabitation. For example, when survivors lived with the family or friends of the person causing harm, they could not ask them for a support letter. A housing-support worker interviewee shared that her client was denied SPP in such an instance:

*She was living with the abuser's parents, they were renting, like they were actually renting a basement unit from them. And the mom, the landlord, refused to write an email to say, hey she lives there, yeah, right, because it was her son. So, she's protecting her son. So again, she didn't have proof of cohabitation. (SP39)*

The proof-of-cohabitation requirement was further challenging for unsheltered survivors who did not have permanent addresses, marginalized survivors who were afraid of calling the police to press charges, and survivors who never lived permanently with the person causing harm. Despite not cohabitating, the person causing harm may have had keys to their unit, stalked or harassed the survivor, or forced their way into survivors' units. The rigid application of rules for proof of cohabitation thus left the interviewees feeling that SPP excluded the most vulnerable survivors. As one lived-experience interviewee stated:

*It just feels like that program is tailored to, like, a really specific experience, that kind of...it leaves out like poor people. In a way it's kind of catered toward a middle-class married woman leaving her abusive husband in the same home that they bought together. Like, [I'm] exaggerating a little bit, but...it's catered toward that experience and that experience only. (LE15)*

## Relationship with the Person Causing Harm

Service managers also applied strict parameters for eligibility regarding the type of relationship in which a survivor experienced violence. Unless they were trafficked, survivors must have been in an intimate partner relationship or familial relationship, or been dependent on the relationship for financial or immigration reasons. This meant that survivors were ineligible for SPP when they faced abuse from a landlord, neighbour, roommate, or someone from outside their household.

One lived-experience interviewee who experienced GBV from her landlord, with whom she had formed an intimate partner relationship, stated that:

*When I was trying for priority housing and stuff like that...initially my application was rejected because they felt that my boyfriend is my landlord now, so a landlord is not covered under priority housing. So, what? Like, I had to fight back and say that he's also my ex, so that does not negate the fact that it also comes under domestic partner violence. (LE17)*

A service-manager interviewee explained that different forms of abusive relationships were considered less dangerous than intimate partner relationships regardless of whether violence had occurred. While survivors may have relied on landlords for shelter, the power imbalance between an abusive landlord and tenant did not carry the same significance as the power imbalance in intimate partner relationships under the HSA.

## Previous Arrears in Social Housing

The HSA states that applicants will be deemed ineligible for RGI if they owe any moneys to a former social housing provider in Ontario (HSA, 2011, s. 26). This meant that when survivors had arrears caused by financial abuse or costs due to damages in a unit they had fled, they were unable to access social housing.

A service-provider interviewee highlighted that “Sometimes women won’t even know that they have arrears. So, it becomes a shock, you know, when they go to apply for housing and find out that they have this outstanding payment” (SP17). For example, a lived-experience interviewee who faced family violence explained that she found out she could not access social housing after being added to a joint lease with her parents when she turned 16.

When her parents abandoned the survivor shortly after her 16th birthday, they also stopped paying the social housing provider and accumulated arrears under her name. She stated:

*Apparently, my name is flagged in their system for fraud basically because one of my family ended up leaving me. What happened was they left, but even though I was under 18, they kept my name as living with them and they claimed they were still living there and just didn't pay. So, my name was basically flagged in the low-income housing computer. (LE02)*

Interviewees reported facing a difficult ad-hoc process when survivors attempted to regain RGI eligibility after owing money to a social housing provider. A legal-professional interviewee stated that their regional service manager expected applicants who had outstanding arrears to “pay 50% and then make a payment arrangement, and then [they'd] let you get on the list” (SP22). Similarly, lived-experience interviewees were told by service managers that they would only reconsider RGI eligibility if their arrears were paid off in full. Even though service managers had the power to consider extenuating circumstances for outstanding arrears, exceptions were rarely granted.

### **Use of Discretion**

The HSA permits the use of discretion to mitigate the risk of harm when determining eligibility for RGI or SPP. One service-manager interviewee explained that when survivors provided a reasonable explanation as to why they could not meet the eligibility requirements, the service manager would waive them. They talked about the application of discretion under the HSA using the three-month requirement:

*The RGI manual also allows the service manager to go up to 12 months. We just need to understand what that situation is. So, if that applicant, for example, is going through court proceedings, or they're going through counseling, which prohibited them from initially applying within that three months—because, let's be honest, it's short—when somebody's going through this type of situation, the legislation allows for that flexibility. (SP43)*

However, interviewees reported that the use of discretion was either not used at all or applied inconsistently between applications and municipalities. A service-manager interviewee noted that their municipality had decided to uniformly extend the SPP time limit from three months to six months to address the problems survivors had faced with meeting the deadline:

*So, the decision was arrived at through consultation with social housing providers and service agencies working with women experiencing intimate partner violence.... I think we would say we aren't working around the legislation—but we are fulfilling the intent, the intent is about accessibility. And by extending it by three months, we're making it that much more accessible. (SP55)*

However, such decisions resulted in inconsistent municipal thresholds for considering extenuating circumstances. This meant that a survivor's chances of being approved hinged on the specific service manager's interpretation of the legislation, rather than the severity of their circumstances. This lack of uniformity created a fragmented social housing system in which service providers had to tailor their applications based on the municipality they were applying to.

One service-provider interviewee stated that:

*In our region we've been able to support client's documents dated up to one year, but other municipalities are very, very strict. It has to be within the three months, the criterion. If not, they're not going to process it. And if there's no extenuating circumstances that prevented the client from doing it in three months, they're not going to be accepted, right? It has to be a very legitimate case for them, or circumstances, to be accepted. (SP45)*

Service providers would pre-emptively include as much supporting evidence as possible to push for discretion when supporting a client who did not meet the eligibility requirements. As one service-provider interviewee stated, "We'll try our best to advocate and write support letters. But if that's not there, housing departments at various municipalities are at the discretion to deny, because it doesn't meet that mandate" (SP21). They also noted that while they have had success with clients applying to urban centres such as Toronto, they did not have the same success in other regions despite including the same supporting documentation.

Even when service providers challenged egregious denials for cases of severe violence, service managers had been unwilling to use their discretion and waive the requirements.

As one legal-professional interviewee stated:

*I did an internal review, and they [the service manager] upheld it. And basically... said to her, "Nope, too bad. You have to have done it within the 90 days"...despite... the internal review outlining that there's actually that whole other area of discretion. Our Social Services Board has blinders on a lot of the time, for lack of a nicer way, when it comes to discretion. They just kind of go, "Do you fit in the box? Do you not fit in the box? Nope, okay," and then double down on their decision. (SP22)*

While service-provider interviewees felt that service managers should apply discretion more often to ensure that vulnerable survivors at risk of violence or homelessness are not excluded from SPP, they also empathized with service managers struggling to balance the high demand for social housing with a lack of available units.

One service-manager interviewee explained that social housing applicants were all struggling with poverty, trauma, or had disabilities, and so it felt uncomfortable to determine which priority household needed a unit more than another. This meant that some service managers relied on a strict interpretation of eligibility rules for the mandated priority groups, "otherwise everyone's a priority, which also means that no one's a priority" (SP44). Extensive social housing waitlists had thus forced service managers to limit how often they would apply discretion to applications that did not meet eligibility criteria.

## **Waitlists**

Once granted SPP, survivors were placed on lengthy social housing waitlists. An experienced service-provider interviewee confirmed that she had once housed residents with SPP status within a couple of weeks, but that those days were long gone. Instead, service-provider interviewees noted that survivors waited increasingly longer for a social housing offer. Fifty-seven per cent of survey respondents noted that long waitlists were one of main challenges they faced when accessing housing services. The long waitlists led to survivors compromising on their housing preferences. Many of the lived-experience interviewees had applied for social housing outside of their community to escape violence and homelessness as quickly as possible. One service-provider interviewee wondered whether relocation had only spread the waitlist problem into rural regions:

*You know in areas that [the waitlists] used to be not quite as long and it's, you know, it's not... it almost sounds unfair because I'm not saying, "Oh, somebody in Toronto shouldn't be allowed to live in this region," it's not what I'm saying. But just at what point does the bubble burst, right when, everywhere, when nowhere is accessible, and nowhere is affordable? (SP32)*

## Centralized System

A provincial directive was issued to service managers in 2022 to relieve pressure from the increasing demand for social housing. This directive outlined a “choice-based” centralized system in which social housing applicants pick which units most closely match their housing needs and priorities during the housing-access process.

Each region approaches the centralized housing access system differently. For example, waitlisted applicants for social housing in the City of Toronto select available social housing units in biweekly housing cycles, whereas waitlisted applicants for social housing in Northumberland County must pick their preferred buildings as part of their initial application process.

This system was expected to streamline the housing process for both applicants and providers, as applicants were less likely to receive and subsequently decline a social housing offer for a unit that did not meet their needs. However, service-provider interviewees highlighted that the centralized system had unintended consequences for unsheltered survivors. For example, the City of Toronto’s biweekly online-selection process had overwhelmed applicants, especially unsheltered survivors or those with complex needs, as they could not keep up with the process.

One service-provider interviewee admitted that she had directly intervened to bridge the digital divide faced by unsheltered survivors because she worried that they would miss housing opportunities:

*Since they don’t have access to anything...I have a client I see on the street every week, because she doesn’t have a phone, so I had to create an email address first, then I use that email and I’ve set up some password or something to create an online application. Now I have to actually go in and select for them. When the [housing] cycle starts, that’s a lot of work for us, like, our work has doubled because of all of this. (SP10)*

In addition to the administrative burden added to service providers, many of the interviewees noted that the units offered in the housing cycle were not as advertised when survivors viewed them. As one lived-experience interviewee explained:

*The pictures are unclear, they don’t give you many pictures or they crop it. And they’re like, “Well, that should be enough.” But no, at least, sometimes they recycle the same picture that was like taken 10 years ago, that unit could be not even the same thing, it could be a completely different unit to the one that, you know, you made your choice based on. (LE14)*

It was difficult for survivors to accept a social housing offer based on a listing with outdated or missing information, especially because the province amended the HSA to only give households a single offer before being removed from the waitlist.

### **The One-Offer Rule**

In 2019, the provincial government amended the HSA to reduce the number of housing-unit offers a household may receive from three to one (HSA, s. 32.2). Specifically, the one-offer amendment states that social housing applicants will cease to be eligible for RGI assistance and be removed from the waitlist if they refuse an offer of social housing.

Interviewees highlighted that the one-offer rule had diminished survivors' sense of choice and created barriers to housing stabilization. For example, a lived-experience interviewee described her initial excitement when she received an offer of a townhouse in a central location. However, during her lease signing, she discovered that the condition of the unit had been misrepresented in the listing. It was evident that the unit had been occupied by unauthorized residents and had not been cleaned up before her scheduled viewing. The front door was broken, there was an open sewer grate in the front yard, and the surroundings were strewn with garbage. Inside the unit, the walls were covered in graffiti, there were signs of pests, and strong odours emanated from the carpets.

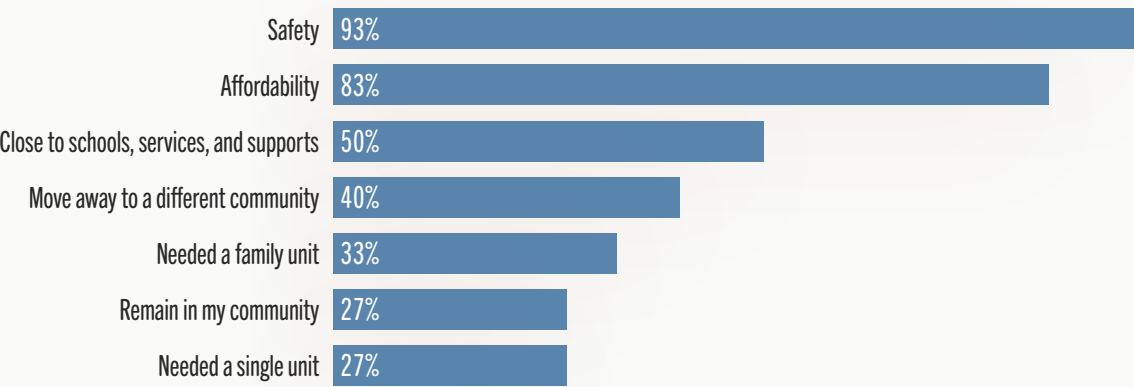
The social housing provider accompanying the survivor tried to pressure her to sign the lease regardless of the condition of the unit, reiterating that she would lose her spot on the housing waitlist if she declined. The lived-experience interviewee made the difficult decision to turn down the offer as she worried about bringing her children to live in a unit in such a state of disrepair:

*It was very horrible because I didn't know what to do. I knew in my heart I didn't want one that was not safe. Plus, the area was not safe either. It's just like them pressuring me, so I told them, "No, I cannot come live here." I hope, like, I had a feeling in my heart something will come up, and I'm gonna get it. But they pressure you to take the first offer: "This is it or nothing else." So, it's very hard. (LE13)*

After declining the unit, the interviewee was removed from the waitlist in her preferred region.

The one-offer rule was also problematic for survivors when their housing unit was close to the person who caused harm. For example, a lived-experience interviewee from a rural community turned down a social housing offer after running into her abusive ex-partner's family at the viewing (LE21). Safety was identified as the top housing priority for lived-experience survey respondents (see Figure 10).

FIGURE 10: WHAT IS IMPORTANT TO SURVIVORS OF GBV IN A NEW HOME



\* Percentages add up to more than 100 because respondents could select more than one option.

This was corroborated by the interviewees, who noted that survivors were concerned they would be found by the person causing harm, stalked, or further harassed. Survivors preferred secure housing close to neighbours, family, or on-site security staff such as a concierge.

Interviewees noted that the one-offer rule had forced survivors to abandon their safety priorities. As one lived-experience interviewee explained:

*I was scared because they gave me the first floor. Like, honestly, there are nights I cannot sleep because it's literally, the window is at your waist. So, it's very easy to push the mesh and window and you open it very easy. So, it's scary, you know, they give you the housing not based on your needs. It's whatever's available, right now. (LE11)*

A service-manager interviewee explained that although the one-offer rule had helped them manage the waitlist, it had also flooded their housing internal review board with appeals from applicants who could not accept their first housing offer due to safety or accessibility concerns (SP39). However, it also emerged that many interviewees were unaware that they could appeal to have the one-offer rule waived for safety or accessibility reasons. The assumption that there was no room for flexibility had led survivors to accept unsafe units or to them being needlessly removed from the social housing waitlist.

While survivors were adamant that the SPP was their best route to housing stability, accessing social housing through the program was extremely challenging and time-consuming. For many survivors, it was also not a feasible option to meet their emergency housing needs when fleeing violence.

## Supportive Housing

Supportive housing is a subsidized permanent housing option for individuals or families from priority groups who have complex needs, substance dependencies, or disabilities. Residents of supportive housing pay affordable rent and have access to case management and personal care services, depending on their needs. Applicants typically access supportive housing through a centralized housing system in which they provide evidence of need through risk assessments completed in consultation with intake workers and the supportive housing provider.

While 64% of the lived-experience interviewees self-disclosed having mental health–related challenges (including ongoing PTSD symptoms), and 26% self-disclosed as having used substances, only 14% of the lived-experience interviewees had resided in supportive housing or had used outpatient services while on a supportive housing waitlist. Many service-provider interviewees felt that survivors who had complex mental health needs, disabilities, or substance use dependencies would have benefited from immediate access to supportive housing. However, a severe lack of supportive housing units and supportive services in Ontario meant that survivors with complex needs did not have access to the care needed to maintain their housing stability.

One service-provider interviewee noted that the lack of supportive housing led to the housing system functioning like a “revolving door” for survivors with complex needs, as such individuals were forced to become reliant on shelters or hotel programs to avoid homelessness. However, survivors with complex needs also described being turned away from shelters, hospitals, and housing programs due to stigma. A lived-experience interviewee explained that it was only after being hospitalized for a mental health crisis that she finally received ongoing housing help. She commented that she should not have had “to be hospitalized or literally die or come near dead...to feel safe” (LE17).

Unhoused survivors with complex needs were referred to social housing through **Housing First** emergency programs when supportive housing was unavailable. However, social housing providers warned that it was irresponsible to treat social housing as being equivalent to supportive housing. They explained that social housing did not have the resources to provide intensive support to their tenants with complex needs, nor could they require their tenants to use their existing supportive services. This meant that survivors with complex needs faced an increased risk of eviction when they could not manage the transition to independent living.

The lack of community support led to the eviction of renters with complex needs due to noise complaints, damages, and arrears. A social housing–provider interviewee shared one example in which a survivor with complex needs was not provided with adequate support after moving into a social housing unit through a Housing First program for homeless individuals. This social housing tenant later set her unit on fire during a mental health crisis. Luckily, the fire only caused property damage, but the potential consequences of a fire that engulfed the entire apartment building haunted the social housing provider (SP52).

Although interviewees stressed the need for more supportive housing units, they also talked about the importance of more accessible, “wraparound” supportive services for survivors who were living in social housing or private market rentals. Integrated community outreach services were considered to be an essential component of maintaining housing stability for survivors with complex needs.

For example, a social housing–provider interviewee stated that the government “can give me a hundred more units and I can house people in there, but it’s keeping them housed, well, that’s the challenge” (SP11). Another social housing provider expanded on this point, sharing that:

*You can’t just say, “Oh, here’s a roof.” So, once we get through all those hurdles of getting you a place, you can’t just leave people and say, “Okay, well, there it is.” Because then what happens is people are unsupported. So, they don’t have supports for all of those things. And then they’re getting evicted. And then they’re starting the process over again, except they’re starting it with arrears, or they’re starting it with a bad reputation with the landlord, or they’re starting it with damages. (SP22)*

Many of the service-provider interviewees felt strongly that the housing system, particularly the lack of supportive housing, had deeply failed survivors with complex needs, substance use dependencies, and chronic disabilities.

## Subsidized Market Rent

### Canada-Ontario Housing Benefit

All of the interviewees identified a lack of affordable housing as the top factor prolonging homelessness and chronic housing instability for survivors. In 2020, the federal and provincial governments jointly introduced the **Canada-Ontario Housing Benefit** (COHB) in response to the housing affordability crisis and the stress on the social housing system (Government of Ontario, 2024).

COHB is a **portable benefit** calculated as the difference between 80% of local average market rent and 30% of the household’s monthly net income. It is only available to low-income Ontarians who are on a social housing waitlist and who have been identified by service managers and their referral partners as the most in need of housing help. The groups prioritized for receipt of COHB are survivors of IPV or human trafficking, refugees and asylum seekers, Indigenous persons, those with disabilities, and individuals experiencing chronic homelessness (Government of Ontario, 2024).

Since its introduction, COHB has replaced many existing municipal housing subsidies. Twenty-three per cent of the lived-experience interviewees lived in private market housing subsidized by portable housing benefits, including COHB. Survey respondents indicated that survivors are frequently in need of a housing subsidy, such as COHB, to cover part of the unaffordable average asking rents in the private market.

Interviewees stressed that COHB helped families stabilize after a forced move due to GBV because it provided them with an immediate, affordable housing option in the private market. As one service provider noted:

*The housing crisis isn't going to be solved anytime soon, but by creating more rent supplement programs, it solves it. Kind of like...these units that are exorbitantly priced, you know, with rent, and now individuals are now able to rent those places, right? (SP53)*

A lived-experience interviewee explained that while she was still recovering from all the parts of her life that deteriorated after leaving the person who caused harm, “The good news is I have a job, such as it is, and COHB has saved us. So...if I can say something, anything, for the research, is that it saved our lives” (LE12).

Interviewees acknowledged that affordable housing stock could not be developed as quickly as housing needs were rising. A service-manager interviewee explained that they were optimistic about the introduction of COHB as a portable rental subsidy, since it is an “immediately responsive resource” compared with a social housing waitlist (SP55). However, this interviewee was surprised by the minimal uptick in COHB applicants, especially from the GBV shelter system. They wondered whether the hesitancy over COHB could be attributed to the stipulation that survivors must be removed from the social housing waitlist and because of the time-limited nature of the program.

### **Removal from Social Housing Waitlist**

A stipulation of COHB is that recipients must agree to be removed from social housing waitlists. Interviewees explained that if COHB were to expire, they would have to reapply to social housing starting at the bottom of the waitlists, which soar upward of 15 years. A service-provider interviewee noted that:

*The portable subsidies are like a great thing in some ways, but, but there's also often a trade-off, so she could accept the portable subsidy, but then her name comes off the housing list, as well. So, women are often really concerned that that portable subsidy might dry up someday, or depending on the government that's in [power], could decide to end that program, where, once you're in subsidized housing, it's a lot more stable and permanent. (SP26)*

Although COHB allowed lived-experience interviewees to secure housing faster than waiting for a social housing offer, the perceived risk to a permanent affordable housing option prevented survivors from participating in the subsidy. As well, the amount of COHB funding was not enough to meet the demand for affordable housing. A service-provider interviewee explained that sometimes, in the time it had taken to convince her clients to accept COHB, the allocated funding had run out. She explained:

*They're like, okay, "I'm willing to go off the waitlist and apply for COHB, but now there's no funds. So, it's like, that's not fair either. How is that being helped at all?" So, you try to come up with a solution, and that solution, well, it'd be great because women would be able to get all these places. But then COHB always runs out before the fiscal year [ends]. (SP39)*

Inconsistent funding was frustrating and confusing for service providers doing their best to connect their clients to tangible resources that would directly support their housing needs.

### **Program Lifespan**

A lived-experience interviewee receiving COHB discussed their anxiety over the lifespan of the program, which is slated to end in 2029, noting that:

*Nobody's really sure how long it's gonna last because as I'm told by my COHB worker, it has to do with the political climate. We think eight years' funding has been secured for...but we're not really sure. Like, that doesn't make me feel like I can relax. (LE12)*

Recipients of COHB who had lived experience of chronic homelessness worried about the possibility of losing their subsidy. For example, a lived-experience interviewee explained that COHB was the only way she “was keeping a house above her head” (LE02). In the context of a growing housing affordability crisis, the threat of expiration made her feel uneasy, as she felt she would likely face homelessness if required to pay market rent.

A lived-experience interviewee living with a progressive disability noted that if COHB expired without a replacement subsidy, then she would “go straight for MAID [medical assistance in dying].” The fear of struggling through another period of homelessness was so palpable that this survivor had already submitted a MAID application.

As she said:

*I'd rather peacefully go, just peacefully go than, you know, being in the physical pain and the agony of like, my heart rate going crazy, my blood pressure going nuts, the frickin' daily freakin' panic attacks, all that is just...no. (LE02)*

COHB recipients thus felt uneasy about their long-term housing stability, because if funding were to end, they would also be forced out of their rental homes into a more expensive private rental market than when they had first accessed housing using their subsidy.

## Private Market Rent

Most of the lived-experience interviewees first attempted to rent a private market unit after leaving situations of GBV. In private market housing, tenants pay rent that is determined by the landlord who owns the rental building.

There are two main types of private rental housing: primary and secondary rentals. The primary market consists of purpose-built rentals of three units or more. The secondary rental market includes housing such as condominiums, basement apartments, or duplexes (ACTO, 2021, p. 6). Only 18% of the lived-experience interviewees were successfully able to secure a private market rental unit.

Survivors faced multiple barriers when trying to access private market housing, including a lack of affordable or accessible units, strict rental requirements, the cost of last month's rental deposit, and discrimination from prospective landlords. One lived-experience interviewee explained that the difficulty securing an affordable rental unit after leaving her ex-partner meant that she had no choice but to seek space in a shelter:

*I was already in the talks to find a basement apartment...or apartments wherever I could fit in within my budget, which was hard, which was...like, it was heart wrenching because you don't have that money. And there's no way you can get that sort of money in literally a month when you've got kids as well. (LE16)*

Interviewees stressed that survivors preferred to find their own rental unit as quickly as possible, but that the cost of living relative to their income meant that they often had no option but to rely on formal services or their community for housing.

# Affordability

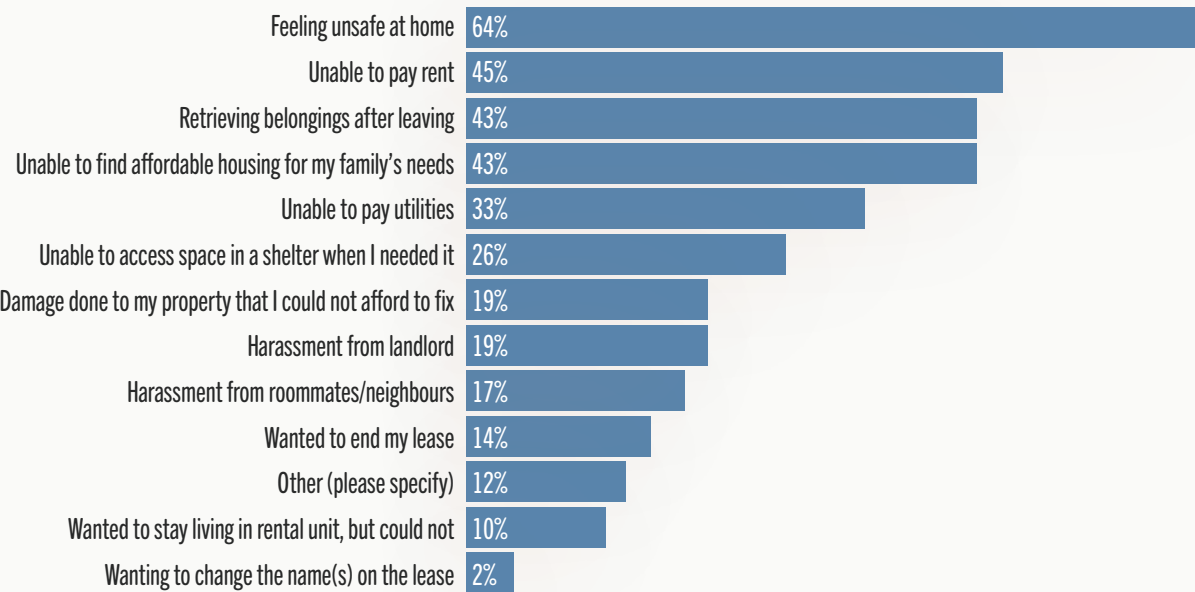
Interviewees and survey respondents identified affordable rent as both a key priority for accessing new housing and the main barrier preventing survivors from securing new housing. A shelter-provider interviewee explained that survivors often relinquished all their housing needs and priorities for affordable rent:

*Affordability right now...kind of dictates everything else....Many years ago...it was, you know, “Oh, I would really like to stay in the same school district so that my kids don’t have to switch schools.” Or they might have had the opportunity to say, “Well, I’ve got a couple of kids, so a three bedroom would be better than a two bedroom.” But the unfortunate [thing] right now is it comes down to affordability. They are just so desperate for something that falls within their budget. (LE13)*

Interviewees noted that the lack of government regulation on rent control meant that affordable housing was increasingly hard to find. This led survivors to take unaffordable units they knew they could not sustain and that did not meet their household’s needs.

While 64% of the lived-experience survey respondents indicated that they felt unsafe at home, 43% also indicated that they were unable to find affordable housing for their family’s needs when experiencing violence. Interviewees noted that this led survivors to remain in violent homes, even when they were ready to leave (see Figure 11).

FIGURE 11: HOUSING ISSUES FACED BY SURVIVORS FACING GBV



\*Percentages add up to more than 100 because respondents could select more than one option.

It is well established that low- and middle-income households are priced out of homeownership in Ontario. However, interviewees stressed that the housing crisis also meant that low-and middle-income survivors are priced out of renting in the private market. As one lived-experience interviewee noted, “It’s not even in my dreams, that I can even buy or rent even a place. I cannot, you know, give all of what I make for the whole month. It’s not even enough for it to be even two weeks for [rent of] a house” (LE11).

Interviewees shared that it was common for low-income survivors to spend about 80%–90% of their income on their rent in the private market. Survivors were thus forced to rely on community organizations or food banks, and to take on extra “gig” jobs to make ends meet. To keep up with their unaffordable rent, lived-experience interviewees had also sold valuable belongings, turned to sex work, or deprived themselves of basic needs.

### Income Insecurity

When considering the severity of the housing affordability crisis, interviewees stressed that the current amounts survivors were entitled to from Ontario Works (OW), the Ontario Disability Support Program (ODSP), and Old Age Security (OAS) were dangerously inadequate. Interviewees highlighted that the provincial **shelter allowance** was a significant barrier to finding a unit and staying housed. A shelter allowance is a monthly payment covering housing costs—including for rent, utilities, or heating—that social benefit programs provide to their recipients. The maximum amount of shelter allowance is calculated based on rental price and household size. However, the maximum amounts are significantly lower than average rental prices. For example, a two-person household receiving OW receives a maximum shelter allowance of \$642 per month (Ministry of Children, Community and Social Services, 2024). Table 3 outlines the social assistance rates for OW and ODSP for 2024.

TABLE 3: SOCIAL ASSISTANCE RATES, 2024

Social assistance rates (2024)	Basic needs amount	Maximum shelter allowance	Total monthly payment for 2024
Ontario Works			
Single person	\$343	\$390	\$733
Single parent: one child	\$360	\$642	\$1,002
Single parent: two children	\$360	\$697	\$1,057
Ontario Disability Support Program			
Single person	\$786	\$582	\$1,368
Single parent: one child	\$929	\$915	\$1,844
Single parent: two children	\$929	\$990	\$1,919

SOURCE: CITY OF TORONTO (N.D.); GOVERNMENT OF ONTARIO (2024).

A lived-experience interviewee highlighted that average asking rent had far outpaced the rate of social assistance she received:

*Yeah, it's ridiculous. And our cheques ain't went up. I get, what, \$489 for rent and the rest comes out of my cheque. Where am I finding a place for that? I get...1,200 and some dollars total. I can't even find a one-bedroom for \$1,200. Honestly. (LE05)*

Lone-parent survivors were described as having no choice but to turn to social assistance immediately after leaving situations of violence. Seventy-seven per cent of the lived-experience interviewees were lone parents and 68% received social assistance. This was contextualized within housing affordability challenges, immigration barriers, and child care responsibilities. Survivors struggled to maintain stable employment if they had been forced to move out of their community for safety reasons or to secure housing.

Lone-parent survivors also struggled to juggle full-time employment with full-time child-care responsibilities. For example, survivors were forced to miss work when their children were sick and unable to attend school. It was described as especially challenging for lone-parent survivors to maintain employment while also supporting children with disabilities. This situation forced survivors onto OW, which was not enough to cover rent in the private market. A lived-experience interviewee noted that:

*I was shocked at the amount of the housing allowance. It was very low, wouldn't cover a studio apartment. And here I am, a single parent with an almost two-year-old and a newborn. What am I going to do, I gotta find something. And finding places that are subsidized rent is next to impossible. The waitlists are years long. So I didn't know what I was going to do. I couldn't stay with my parents long term. (LE10)*

In addition, the immigration status of lived-experience survivors had been jeopardized if they were sponsored by the person causing harm. This meant that after fleeing violence, the survivors had to prioritize securing legal status in Canada, which took a long time to process. This had also forced newcomer survivors onto social assistance and hindered their employment opportunities.

One lived-experience interviewee described the cascading issues she faced after her husband was removed from her rental home and cancelled her sponsorship:

*I struggled for a long time. I didn't have any status, I can't go to work, I can't work, I can't rent. I can't apply for housing. And I really struggle with the situation. Even...I don't have child benefits for three years. My kids are Canadian citizens but because I don't have any status, they say I have no right to child benefits. (LE03)*

A lack of status, income, and employment opportunities caused this survivor to be trapped in homelessness with meagre financial support for more than six years.

Income insecurity was further exacerbated if a survivor had language barriers, disabilities, or substance use dependencies. For example, a lived-experience interviewee suffered injuries that would eventually cause her to lose her job, and subsequently her housing. She stated that:

*My medical issues became worse and worse, [and] finding employment was hard. And when I did, and had to go for treatment, my job wouldn't allow me. They were driving me crazy because I had to leave at a certain time to catch the bus. While trying to make sure I didn't become homeless again. Well, that didn't last. (LE19)*

Lived-experience interviewees further noted that even if they were to secure stable employment, it would likely be for low-paid work and not enough to cover their family's basic needs, especially for astronomically priced rental units with two bedrooms or more. The only option was to compromise on apartment size and amenities, which led to situations of severe overcrowding.

Many lived-experience interviewees who relied on social assistance had also resorted to taking on substantial debt, over-extended their available credit, or borrowed money from their community to survive. Once they had stretched their income as far as they could, survivors were known to make sacrifices to meet their basic needs.

## Food Insecurity

The fear of homelessness meant that paying rent was the priority. Many lived-experience interviewees were left with so little after paying their rent that they relied on food banks and community services for the rest of their basic needs. Survivors with babies worried about being able to afford their rent and pay for formula.

As one lived-experience interviewee noted:

*Groceries are so expensive. I don't know what to buy and what to not buy. But the groceries I have to buy, because my daughter...she drinks the milk [formula], like, I can't avoid that. I can avoid eating myself, but my baby cannot. (LE22)*

Similarly, lived-experience interviewees with disabilities shared that their medical conditions had worsened due to their inability to pay for rent and cover their medical expenses. For example, a lived-experience interviewee struggled to save up for first and last month's rent as she was paying out of pocket for medication (LE07); another opted to forgo supplements that eased arthritis symptoms to pay for unexpected rental costs (LE01). Unaffordable rent had significantly reduced low-income survivors' quality of life. A lived-experience interviewee shared that:

*Even [in] my retirement, I'm really, really tired. I'm really tired. I'm friggin...I'm drowning now. And each month it's like a struggle just come up with that, you know, another \$1,000 for the rent, for the rent and to live. Meagrely too. This isn't living, it is certainly not thriving. It's hardly even living. (LE01)*

Lived-experience interviewees also suggested that they kept the severity of poverty they were experiencing hidden from their support networks due to their fear of stigma or child welfare involvement or apprehension.

## Low Vacancy Rate

A lack of available rental units in areas with high renter demand creates what is known as a low **vacancy rate**. Canada reported its lowest vacancy rate on record in 2023, particularly for affordable units (CMHC, 2024). The limited supply led to significant barriers when survivors attempted to access private market housing.

A service-provider interviewee shared that when their clients applied for affordable housing listings, they now competed against "30 to 40 applicants at least" (SP57). The competition for affordable units was known to take a toll on survivors, especially because securing an affordable rental unit could take several months. This was echoed by the lived-experience survey participants, most of whom noted that it had taken more than six months to secure permanent housing.

A lived-experience interviewee with a mobility disability shared that she gave up on her housing search to couch surf with family after unsuccessfully competing with dozens of qualified prospective tenants. As well, because she relied on the paratransit system, her housing search was not only mentally exhausting but physically grueling: “I was out from eight in the morning till one o’clock in the night searching for a place and my knee pain also increased. So, you know, it had a bearing on me physically as well as emotionally” (LE17).

## Accessibility

Survivors with disabilities, or who had children with disabilities, similarly had housing priorities that they could not compromise on when seeking private market rentals. For example, the units needed to have elevators, ramps, wide doors, or walk-in showers. Interviewees noted, though, that accessible rental units were scarce and often more expensive. This led to survivors with disabilities being unable to leave abusive situations or trapped in the shelter system for longer than their able-bodied peers.

The cost of affordable units had also forced survivors to take inaccessible units. As one service provider noted:

*There’s such a large population trying to access these so it just it makes the wait time really a lot longer. And then...that’s how people end up just going and taking non-accessible units, and then they end up hurting themselves. (SP08)*

The difficulty securing an accessible rental unit led one lived-experience interviewee to wonder:

*Where are you going to live then? Like...if you are able, maybe you will go to a shelter or crisis home, but if you are disabled, where will you live? And, you know, that’s I think one of the reasons why there are so many people who are disabled out on the streets, you know, homeless? (LE17)*

When survivors were unable to secure an affordable or accessible rental unit in their community, it had forced them to migrate to different communities.

## Relocation

When asked about their housing priorities, 40% of lived-experience survey respondents indicated a preference to move away from their homes. Interviewees elaborated, sharing that survivors were primarily looking for safety in their new housing, so moving to a different community may feel like the best option. However, survivors also wanted to be close to schools and services, and to regain a sense of community and belonging.

At times, survivors had relocated to different communities, including to rural regions they had never visited before, to secure affordable rental units. Yet an influx of urban dwellers to rural regions had also put pressure on the limited services and resources of smaller communities. A service-provider interviewee noted that:

*The issue is just migrating further and further north, I think, where there's, like, fewer services, especially [because] the most vulnerable of our clients that are moving further north, where there's even less services for them. So, their lives are not getting any better, they just have a place to go. (SP54)*

Relocation could also present challenges to survivors with complex needs, as they were forced to choose between affordable housing or access to their supportive services in urban centres. For example, a lived-experience interviewee with a disability shared that after fleeing family violence, she spent “about four to five years, desperately trying to stay in the area, because that’s where all [her] specialists were” (LE02). After struggling with chronic homelessness, she opted to leave her medical specialists, who were located in an urban centre, to find housing in a more affordable rural region.

Similarly, racialized, newcomer, and gender-diverse survivors experienced heightened stress, service barriers, and isolation after relocating to smaller communities due to a limited number of specialized services that catered to their unique needs. As one service-provider interviewee explained:

*Those regions are not used to having these types of populations, right, like, non-status, racialized populations. So, there's certainly some issues around that, especially around language services. So, you can usually, in the GTA, find people to come take the client to a call or make an application in [their] language, but not in other parts of the province. (SP03)*

During the pandemic, a surge of investment buying in **cottage country** further reduced the vacancy rate in rural areas. Housing-worker interviewees from rural communities noticed that affordable housing stock had dwindled, while Airbnb and holiday rental listings increased. This led to 0% vacancy rates in some rural Ontario regions during the pandemic, which had grave consequences for local survivors.

Interviewees shared that when survivors from rural communities could not find rental units, they returned to the person causing harm or moved into undignified spaces such as wooden shacks, squatted in summer camps, or lived in overcrowded, unsafe units. The housing affordability crisis in rural regions had also forced services to turn away survivors calling from different regions. A service-provider interviewee stated that:

*We have a lot of people calling in from out of the county, that for some reason, they think it would be lovely to move to our county. And we can't take them on as clients, [so] we give them rental listings. But that's as far as we can go. Because we have... our own housing situations and very low apartments available. (SP56)*

Conversely, rural service providers had encouraged survivors, especially those with complex needs, to move to urban areas for supportive services and hospitals, to escape overcrowding, or to find any available rentals. However, when survivors migrated from Northern, rural communities into large urban centres, they could be more vulnerable to exploitation and further violence. An Indigenous-led service provider noted that Inuit youth from Northern Ontario were particularly vulnerable to such harm when they moved south into major urban centres. She explained that:

*We are seeing more in the anti-human trafficking area, because a lot of Inuit are coming, sometimes even accompanying a family member down for medical [care]. And then they choose to stay because they think it's going to be fabulous down here. And it's not. The poverty, the discrimination, a lack of housing, and the trafficking that goes on. And they target young Inuit, young Indigenous people, boys as well, who are lured into working for them, because they've had nothing, so they're willing to try, you know? So...they victimize them in that way, as well. (SP40)*

To secure new housing as quickly as possible, survivors turned to communities far away from home, under the impression that the housing crisis was not as bad elsewhere. However, rather than find sanctuary further afield, survivors often faced isolation, housing instability, and further violence.

## Rental Requirements

Private market rental applications across Ontario have extensive eligibility requirements, including employment letters, proof of income, acceptable credit scores, and landlord references. The difficulty in securing a private market rental unit was reflected in the lived-experience survey, where most respondents indicated that they had required support from a professional to navigate the rental market. A service-provider interviewee noted that even landlords of dilapidated housing units now expected applicants to adhere to the same strict requirements as the landlords of luxury condominiums:

*We have some apartment buildings around the corner, they're rundown and they're really not safe and they don't look good, but they're sort of affordable. And even then, it's so competitive. They want to know your credit score. They want to know that if you don't have a good credit score, so you need somebody to co-sign with you, and you know many of these women have been so isolated for so long that they don't have anybody to co-sign for them. (SP08)*

Survivors who fled home without possessions, or who had faced financial abuse, coercive control, or landlord harassment, were often unable to produce such documentation or to have the finances required for last month's rent deposit. One lived-experience interviewee was concerned that she would have to resort to "begging on the street" to afford both first and last month's rent for a private market unit that would accommodate her children (LE11). This forced survivors to take private market units that were unsafe or in disrepair, as they were often the only units that landlords were willing to rent out without meeting the rental requirements.

A lived-experience interviewee shared that she had attended a viewing for a well-maintained unit that met her family's needs but left feeling disheartened that the only housing options she could afford would be inadequate:

*At one point, I kind of quite liked this ad that I saw about a place over there, and it was so unrealistic, because there was no way I was going to be able to do it. But I was just indulging it, I suppose. And so, they said, "I'll send you an application." So, I was like, okay, and that gave me the chance to look at one. And they want to know everything. They want to know what you had for breakfast and how many, you know, all that. It is intense, and they want your bank account info, and they want all this personal stuff. And then thinking, well, where? Where does the person get the opportunity to know about you? What kind of person are you? Like, there's nothing like that...and the rents are massive. And people are saying there's no availability, and these people are asking like \$4,000 a month, and they want you to provide first, last, this, that and the other, and no guarantees, and you're just left feeling a bit "ugh." (LE18)*

Interviewees had also encountered predatory private market landlords who had offered survivors rental units in exchange for sex or manual labour when they were unable to fulfill rental requirements. Interviewees shared examples in which survivors had become so desperate to find affordable housing that they had been coerced into exploitative arrangements or had fallen for online scam rental listings. A service-provider interviewee highlighted that:

*I think it's a real dilemma for the tenant involved, they're having to weigh out what feels...it's the balance of safety and exploitation...And so oftentimes, people will choose safety, even though there's an element of exploitation involved. (SP57)*

Stigma, prejudice, and vulnerability compounded for survivors who were Indigenous, newcomer or of precarious status, youth, recipients of social assistance, or who had disabilities. Interviewees highlighted that marginalized survivors were thus more likely to face exploitation and discrimination when accessing housing in the private rental market. A lived-experience interviewee described having anxiety over disclosing her immigration status to prospective landlords:

*I faced a lot of issues as a new immigrant, as a woman; again, you don't know the laws, you are scared because you are alone, you know, in a new country, or a new city and you don't know whom to trust, you prefer staying in places where apparently there are maybe some [same] gender people so that you feel safer. But a lot of landlords also take advantage of this, I've heard cases of such things as people asking for six months' [rent] upfront from immigrant women. (LE17)*

A legal-professional interviewee noted that threats of imminent homelessness dissuaded survivors from asserting their rights in these situations of exploitation, discrimination, and harassment from prospective private market landlords:

*We know that people have the right to recourse, but so many people are fearful of reprisals. And so, I think there's no question: affordability and accessibility are two major priorities, and also avoiding predatory practices. But what to do if you are in that position, right? It's so competitive. (SP20)*

As well, when private market landlords made an exception around rental requirements, survivors would later put up with landlord negligence, exploitative requests, or harassment. A service-provider interviewee highlighted the consequences of the power dynamic:

*Survivors feel like they're being given a favour, that they have somewhere safe and affordable to live. And so, they will become small, and they'll try to make themselves as small as they can so that they don't disrupt anything. And it's an experience that the typical person wouldn't have, it just really complicates the entire situation for them. And it makes them even more vulnerable than they were before. (SP08)*

Service-provider interviewees thus described encouraging survivors not to disclose anything about themselves to prospective landlords for fear it would lead to more harm.

## Discrimination from Prospective Landlords

Survivors also faced discrimination from prospective private market landlords when they attempted to secure new housing. This was most often due to prejudice, particularly the stigma associated with GBV, poverty, and homelessness. For example, a lived-experience interviewee who received social assistance reported that she struggled to access housing, as “there are so many listings where they outright will state, ‘No ODSP, no pension, no OW’” (LE02).

Similarly, survivors had been unsuccessful when using their rental subsidies, such as COHB, as proof of income in rental applications. One lived-experience interviewee noted that she also felt that her subsidy alerted prospective landlords to her situation of homelessness: “It’s like, who is going to pick the person that...has this weird income situation where I’m going from EI to OW, where I have this rent subsidy, where, you know, I’m homeless; like, no one’s going to pick that” (LE15).

Service-provider interviewees also explained that private market landlords had openly rejected lone-parent survivors receiving social assistance, as they felt this population would not pay their rent on time or would cause damages and disturbances. A service-provider interviewee reiterated that she struggled to support lone-parent families with housing access due to negative stereotypes, noting that:

*They don't have enough income. It's hard to convince the landlord that they can pay the rent. Especially if you're on Ontario Works, they don't want you there. The landlords generally don't want you. Yeah, it's really difficult if you have a number of children, for example; that's always an obstacle. (SP10)*

Similarly, a lived-experience interviewee was confronted with GBV stigma when she was honest in her housing applications about escaping abuse in her housing applications. She shared, “I thought, in my little fantasy world, that they would want to help this woman with two children. Right? But they didn’t help. They judged” (LE21).

Prospective landlords were also known to ask survivors intrusive questions to determine their family situation, personal affairs, or health status. For example, a lived-experience interviewee stated that:

*I had one person who was really shady about it and wanted me to, like, give a lot of weird level of personal information to prove I was on disability. Like they wanted my doctor's phone number at one point. (LE02)*

Survivors also faced racism and xenophobia when applying for private market housing. A service-provider interviewee shared that she was barred from entering a rental viewing while accompanying a survivor who required interpretation to communicate with the landlord. She stated that “once [the landlord] heard that there was, like, some translation for language, or like some help with English, they were like, ‘You need to get out right now! Like, we’re not renting to the client!’” (SP23).

Similarly, several racialized interviewees faced discrimination from several prospective landlords after their rental applications were initially accepted. For example, a lived-experience interviewee noted that it only was after she showed up to viewings that she would be passed over without explanation:

*Being Black with dreadlocks — nobody wants to rent to me. Even though I have a credit score of like, 720, nobody would rent to me. That was that was a struggle in itself, which I know is totally illegal. But yeah, it was a nightmare. (LE08)*

Indigenous-led service-provider interviewees shared that Indigenous survivors also frequently faced landlord discrimination when trying to secure new housing:

*So some landlords will be very keen on the phone. And when my workers, who are all Indigenous, get there with their Indigenous clients, suddenly, the unit's been rented. And we're very used to this phenomenon of...instantly, it disappeared. (SP40)*

Many service-provider interviewees from Northern Ontario highlighted that it was common for landlords to reject the applications of their Indigenous clients as soon as they were made aware of their surname. Discrimination led survivors from marginalized communities to, more often, accept inadequate housing or exploitative arrangements, or face homelessness.

## Inadequate Housing

Affordable housing was described as increasingly synonymous with inadequacy. Service-provider interviewees explained that when survivors secured an affordable unit, it was more likely to be of poor quality, including having pests, mould, or structural damage, or lacking basic amenities. Service-provider interviewees provided examples in which survivors had moved into rental units that did not have electricity or running water, contained toilets, and even windows. To avoid being forced to rent units in such disrepair, survivors were increasingly forced to turn to shared units. Broadly speaking, available rental listings data shows a 78% increase in shared accommodations listed between 2023 and 2024 (Kassam, 2024).

### Roommates

Service-provider interviewees noted that it was becoming increasingly common for lone-parent survivors to combine their households into one rental unit. As one interviewee explained, “We have family members who have decided that, you know, between the two of them, they have a handful of children, let’s just all rent one townhouse unit and cram in as best as we can” (SP13). Interviewees shared further examples in which survivors had shared bedrooms, rented rooms in divided kitchens, or lived in crowded apartments with more than 10 people.

One service provider stressed that lone-parent survivors viewed living with roommates as a last resort, but that the lack of housing options meant that survivors had to compromise on their independence and comfort (SP01). A lived-experience interviewee noted how difficult it was to compromise on shared accommodation because she worried for her children’s safety:

*Having kids, there were so many things that I had to tick off; it needs to be a safe place, the person I’m renting it from should be a nice person, it should not be too many men in the house, it should not be abusive or aggressive people in the house, I had to do so many checks. And it was bringing me down mentally and emotionally. (LE16)*

When survivors shared their homes, they continued to experience tense and unpredictable situations that had even led to further violence.

# MAINTAINING STABLE HOUSING

Interviewees were asked to discuss the range of rental issues that survivors experienced in their housing journey that were either a direct result of GBV or occurred in the aftermath of GBV. Survivors of GBV frequently faced the threat of losing their housing due to arrears, unsafe or unhealthy living conditions, abuse from landlords and roommates, and bad-faith evictions. Many survivors who were already in economic precarity had little choice but to accept substandard housing, while those in social housing encountered additional barriers such as stigma and difficulty accessing urgent transfers due to the rigid eligibility criteria. These systemic challenges led to further displacement, cycles of homelessness, and a fear of losing their housing.

Accessing justice and housing support was another major hurdle, as survivors often lacked knowledge about their rights and faced limited legal services, strict eligibility requirements, capacity constraints in legal clinics, and the high costs of private legal assistance. Many had to rely on non-legal support or self-representation, which often resulted in further complications. Survivors also identified concurrent legal issues—including family, criminal, immigration, and social benefits matters—as barriers to housing stability, with some facing litigation abuse by the person causing harm.

Additionally, landlords frequently failed to recognize the impact of GBV when issuing eviction notices for damages or noise disturbances. Survivors often felt dismissed or misunderstood due to a lack of trauma-informed practices and GBV awareness among legal professionals and adjudicators at the LTB. Long wait times and inaccessible hearing formats at the LTB also added to the emotional toll. Despite these obstacles, some survivors reported positive experiences when legal professionals provided transparency, trauma-informed care, and meaningful advocacy.

## Private Market Rental Issues

### Arrears

Service-provider interviewees cited **arrears** as the most common rental issue leading to survivors being evicted from their units.

Arrears most often occurred during the breakdown of a relationship. For example, if the person causing harm left the rental unit, survivors often fell behind on their rent, as they struggled to keep up with payments on their own. A lived-experience interviewee shared that after her ex-partner was removed from the home by police following a violent assault, he immediately cancelled her sponsorship, and she was left without any way to pay her rent (LE03).

Survivors most often faced arrears due to **financial abuse**, when a person controls another's ability to "access, use, or maintain economic resources." This kind of abuse includes impeding a survivor's income, stealing their money, not providing banking information, and telling them if and how they can spend their money (Adams et al., 2019, p. 1325).

One legal-professional interviewee highlighted that the person causing harm often threatened to stop paying rent as a way to frighten survivors with the possibility of losing their home. This was more common when survivors were financially dependent on the person causing harm, including in situations in which they were not permitted to earn income or access household finances.

Interviewees reported that the threat of arrears had dissuaded survivors from reporting GBV. For example, a lived-experience interviewee shared that:

*If I said anything, he said I'd be out on the street, and I said, "Better to be out on the streets than dead in the bed"...so, anyway, he was paying my rent at first by paying \$1,140 but then my husband was only giving me \$940, so I had my credit card and so I had to start putting stuff on that...and the pandemic hits and was like, that was it. He hasn't been paying ever since. (LE01)*

Although this interviewee did everything she could to remain in her unit, she struggled to keep up with the rent after her ex-partner left the unit and stopped paying his portion of the rent.

Similarly, survivors may have also been led to believe that their rent had been in paid in full, only to discover that the person causing harm had not been paying rent for several months. A service-provider interviewee noted that "it can become kind of a cascade of problems [when] the abuser, you know, put the unit in her name and then hasn't paid the rent. And then she is stuck with...the consequences of that" (SP32). While survivors often chose to leave their rental unit once they found out about the extent of the arrears, service-provider interviewees also explained that survivors were evicted because they could not cover the arrears ahead of their hearing. A legal-professional interviewee also noted that the LTB did not understand the connection between arrears and financial abuse:

*The focus on domestic violence at the LTB is on the actual physical abuse and not really [taking] any account [of] financial abuse and how that can play into and how that is domestic violence, right? And, obviously, how that leads to arrears issues, right? And then the possibility of eviction. (SP31)*

Due to a lack of understanding about the impact of abuse for a GBV survivor, relief from eviction in the context of GBV was quite limited. Landlords are also not required to consider their tenants' circumstances when pursuing an eviction because of arrears, because a landlord will face financial hardship if they cannot collect rent.

Tenants are also not excused from paying rent even when the landlord has significant financial resources. For example, service-provider interviewees noted that social housing providers had proceeded with filing for eviction even when they were made aware that GBV was a contributing factor in the accumulation of arrears. A social housing-provider interviewee also noted that survivors might be shown leniency the first time arrears occurred in social housing, but that they would likely face an eviction application if they breached a repayment plan (SP28).

While survivors may attempt to pay down their arrears, the amount they submitted was often not enough to prevent the landlord from pursuing an eviction. To prevent eviction due to arrears, social assistance recipients can apply for a lump-sum payment once per year through the **Housing Stabilization Fund** (HSF). Rent must be considered sustainable and within 85% of the recipient's monthly income for an applicant to be approved for HSF (City of Toronto: Employment and Social Support, 2025).

Service-provider interviewees noted that survivors were denied HSF for arrears when rent was not considered to be sustainable. This had occurred even in situations in which the survivor would only require a small sum of money—such as \$100—to pay off their rent arrears. One service-provider interviewee shared that her client was denied HSF because her monthly rent was \$150 over the OW affordability guidelines. Even though this survivor provided evidence of living independently in her rental unit for three years and had only recently accumulated arrears, she was still considered ineligible for HSF. Yet her OW provider explained that she could access HSF if she sought out a new rental instead. The service-provider interviewee noted that:

*So basically what you're saying is that you need her to get evicted, be homeless, lose her stability, her children need to lose their stability, all of this stuff she needs to experience trying to find a place in this market and you would give her the money on the flip side versus giving her that money now. And they were, like, "The guidelines are the guidelines." (SP22)*

The lack of discretion when issuing HSF also highlighted that decision-makers were disconnected from the realities of the housing crisis. The service provider noted that her client would not be able to find a comparably priced unit for her family size due to the significant increase in average asking rent that had occurred since she moved into her current unit.

Many regions also have emergency housing funds for tenants who are not social assistance recipients. However, like HSF, these programs have strict eligibility requirements, and survivors had at times struggled to access them.

As one service-provider interviewee shared:

*With **Rent Bank**, there's a bunch of conditions. So, they have to have proof of employment, so they can make sure [clients] pay it. Then a lot of my clients...that were exiting violence were seniors...[or] were, like, stay-at-home moms. And they don't have proof of anything. And now they don't have the financial support. (SP23)*

Service barriers thus made it difficult for survivors to gain access to the only financial assistance available that could prevent an eviction from occurring.

In addition, the affordability crisis meant that survivors struggled to keep up with their rent after being forced to move into new rental units. Service-provider interviewees explained that, at times, survivors would take whatever housing they could access to ensure they would not face homelessness, even if they knew they could not maintain the rent. A service-provider interviewee noted that:

*We know people will rent a place, knowing that, you know, three or four months down the road, they're going to be in arrears, and then they can have...however many months of not paying...and I mean, that's it, when you think about it, it's a nightmare on both sides, because people are having to do that. So, they know that...they will be evicted, but they want a place to live. And so, I've had clients where they were going through that, and they've [got]...three kids, [they] need a place to live, they rent it knowing that they're going to be evicted, knowing that they're not going to be able to afford it. (SP57)*

This meant that survivors had, at times, viewed the accumulation of arrears as necessary for their survival and to ensure that their family would not face imminent homelessness. As well, survivors with complex needs and those who received social assistance or who had limited income were at greater risk of falling into arrears due to the affordability crisis. For example, a lived-experience interviewee with a disability explained that she could not keep up with her rent as she struggled to maintain employment. She felt that had supportive housing been available, it would have prevented her from cycling through years of housing instability and homelessness (LE17).

## Damages

Interviewees reported the issue of damages as the second most common reason for eviction. Damage to the rental unit often occurred due to physical violence and included anything from minor damages to the complete destruction of the unit, where it was no longer habitable.

For example, a lived-experience interviewee who was a survivor of human trafficking was evicted when, in retaliation for trying to leave, the person causing harm had set her unit on fire (LE12). While emergency funds (e.g., the **Victim Quick Response Program+**) may provide financial support to cover some of the costs for damages caused by violence, they are not always enough to prevent eviction.

Survivors faced threats of eviction from their landlords through the **N5: Notice to End your Tenancy For Interfering with Others, Damage or Overcrowding**. The N5 notice allows landlords to pursue an eviction when either a tenant, visitor, or person residing with the tenant causes damage to the unit or the building (RTA, 2006, s. 62). A tenant can void the N5 notice by repairing the damaged property or paying the landlord the cost of the damages within seven days of receiving the notice. If the tenant does not repair the property or pay the landlord within seven days, though, the housing provider or landlord can pursue an eviction at the LTB.

If the damage was wilfully caused or was considered severe, the landlord can serve the tenant with an **N7: Notice to End Your Tenancy For Causing Serious Problems in the Rental Unit or Residential Complex**. Unlike the N5 notice, the N7 notice does not require the landlord to give the tenant an opportunity to correct the issue to stop the landlord from proceeding with an application for eviction (RTA, 2006, ss. 63, 65).

Interviewees explained that survivors were often unable to void an N5 notice because they could not cover the cost of the repairs. One service-provider interviewee recounted an example in which a client had received an N5 notice and told the interviewee that “My ex came over and beat the shit out of me and, like, damaged the wall in the process, and now I have to pay, like, \$3,000. How am I supposed to do that?” (SP27). Although the damages were caused by the person causing harm, the financial burden of repairing the damages fell on the survivor.

Damages could also be the result of cycles of abuse, in which escalating violence caused multiple incidents of damages and led to receiving an N7 notice. A service-provider interviewee remarked that “Nine times out of ten, it’s partners returning” (SP11). Survivors had let the person causing harm return to avoid making the situation worse for themselves, or when the person causing harm forced their way in.

A service-provider interviewee shared that her client faced eviction because she let the person causing harm into her unit as he was banging relentlessly on her apartment door:

*So, because [the survivor] didn't want that scene being caused, or you know, the landlord being called on her, she was, in turn, letting him in. Well, then we have kicked-in doors, we had damage on the inside. And then when the inspection time came, and the housing unit was inspected, there was property damage that had happened. So, then there was an order for her eviction. (SP13)*

As with arrears-related evictions, survivors struggled to fight damage-related evictions because landlords and adjudicators lacked an understanding of GBV. A legal-professional interviewee shared that her client was evicted after her ex-partner broke into her unit and caused damages. She recounted her client's traumatizing experience at the LTB:

*The representative for the landlord was badgering the client..."So why did you allow this person to be back?" Why would you do that, like, all of those things, so they're getting re-victimized. We've seen people who've gotten notices for damages from instances of violence, of domestic violence. And even when they bring that information forward...it doesn't matter. Like, we're not seeing any flexibility on that side. Typically, even in social housing, like they're just like, "Well, the damages were the damages." (SP22)*

Another legal-professional interviewee explained that to stave off eviction, they completed "a lot of advocacy around damages to the units because of abuse that happened in the unit" (SP53). She also noted that providing information about GBV and available supports had been "really hit or miss, case by case, but [they were] usually able to work a lot of those out...before it hits the LTB" (SP53).

However, even when survivors had repaired damages to their unit, some landlords were known to proceed to filing for an eviction. Interviewees explained that this was because many landlords did not want to deal with "problem tenants" and would rather have their tenant experiencing violence leave the unit.

One legal-professional interviewee provided an example of a client who faced eviction despite having covered the cost of the damages:

*This abuser had completely smashed their toilet in the rental unit. And the client had called the landlord and said, “Hey, our toilet is broken, I can tell you why, and I have bought a replacement. I bought a replacement. Like, I’ve taken that financial responsibility. I can’t install it. I don’t know how to install it. Do you have the ability to have someone come in and install it?” And they did. They had someone come in and install it. But not long after that, there was an eviction notice. (SP38)*

Interviewees reported that survivors may choose to leave their unit rather than proceed with a hearing to avoid having to share their experience of GBV in a tribunal setting, or when they could not afford to cover the full cost of the damages. Leaving their home over damages could then lead to cycles of homelessness or housing instability. One service-provider interviewee shared an example:

*There was not really a great solution, because even if we could bite off the N5 she couldn’t afford her place. And then, of course, as I’m sure you guys know, she has lived in her place for a few years, and the rents have gone up massively, and, like, nothing in her neighborhood was anywhere near what she had paid. And...I think she ended up like moving in with family. I’m not even actually sure. So, there are very few choices, you know...the economic conditions really impact them as well. Like, if you can’t afford to get your own place, that’s hard to leave. (SP24)*

This fact also meant that survivors might opt to keep their experience of violence and resulting damages hidden to ensure they were not penalized for the actions of the person causing harm.

## Maintenance and Repairs

Although landlords are responsible for keeping a rental unit “in a good state of repair and fit for habitation and for complying with health, safety, housing and maintenance standards” (RTA, 2006, s. 20(1)), most of the lived-experience interviewees reported that their landlords failed to do so. Maintenance and repairs issues such as mould, pests, or structural damage are commonly faced by low- and moderate-income tenants. However, because survivors were often pushed into economic precarity following violence, they frequently moved into units that were in a state of disrepair, as these were the only housing options they could afford in the private market.

Survivors sometimes also overlooked the quality or size of their unit and compromised on their sense of safety and comfort to secure new rental housing. This could cause further instability, as the condition of their housing continued to deteriorate. A service-provider interviewee shared that she tried to consider the cycle of housing instability when supporting her clients with housing access:

*I don't want to put a client somewhere with like, pests or mice or anything like that, because then they're just going to have to move again. Now they're uprooting themselves again. And that's for somebody that's already so uprooted, it's difficult to keep going through that process of, okay, now we have to find a different housing and now you're gonna go under another tremendous stress. (SP23)*

One lived-experience interviewee experienced this kind of housing instability when she was displaced from the rental unit she had moved into after fleeing violence, due to flooding:

*I'd like to say it's been a happy story, but we had to move in February because there was a catastrophic leak, and we lost all of our belongings again. We had just replaced them, and we lost them again. And there's been two more leaks (LE02).*

Many of the lived-experience interviewees who moved into social housing units through the SPP faced similar maintenance issues and described their units as being of poor quality. A service-provider interviewee who regularly accompanied her clients to their lease signing stated that:

*A lot of subsidized housing is actually very, like, old and outdated, at least the units that I've seen...and sometimes issues of safety would also arise. So, you know, ranging from holes in the walls to pest infestations where clients would actually go and see their unit and we'll see, for example, cockroaches running around. (SP25)*

However, both social housing providers and private market landlords were known to frequently disregard survivors when they requested maintenance or repairs. For example, a lived-experience interviewee living in social housing shared that “I got very sick, the longer I stayed in the unit. I tried to make it homey for when it was time to move in. And then I got more and more sick” (LE14). Her social housing provider only agreed to treat the rental unit after laboratory testing confirmed an infestation of 12 varieties of mould. Another lived-experience interviewee who resides in a private market unit shared that “there [are] cockroaches, and my flooring is starting to come up, and you know what? I keep telling the landlord, you know, and...he's not doing anything about it” (LE04).

Legal-professional interviewees noted that they had encountered landlords ignoring maintenance issues as a tactic to push tenants out of their units so that they could raise the rent. A lived-experience interviewee described being forced out of the unit she moved into after fleeing violence, due to pests. However, this was a pattern that her housing support worker witnessed, in which the landlord was “purposely not doing things so that people will leave” (LE04, SP53).

As well, legal-professional interviewees shared that when they had assisted survivors with maintenance requests, landlords had, at times, used the state of the unit to serve an eviction notice so that they could renovate or demolish the unit.

One lived-experience interviewee was forced to leave permanently after her landlord refused to fix a crack in the wall, which later led to flooding and then to the unit becoming uninhabitable:

*I had flooding issues and I had to stay in a hotel for a few weeks because the whole place was underwater. There was a crack in the wall and he said, “Well I can’t fix it, if you have a problem go buy and build your own house,” was what he told me. (LE07)*

Tenants can report their landlords for failure to maintain the unit using a **Form T6: Tenant Application about Maintenance**. However, survivors more often chose not to report their maintenance issues, as they feared retaliation. One service-provider interviewee explained that, from the perspective of her clients, “I better keep this instead of, you know, stirring the pot. I better keep this because I don’t know what’s going to come next.’ So, they live in an unhealthy and infested unit, and...non-liveable conditions” (SP12).

## Noise and Interference

Survivors also faced eviction threats from their landlords due to noise, disruptions, and interference with reasonable enjoyment of the unit. Landlords can serve tenants an N5 eviction notice when their behaviour, the behaviour of a visitor, or the behaviour of another person residing with them interferes with the reasonable enjoyment of the property by the landlord or other tenants in the building, or with other rights of the landlord or other tenants in the building (RTA, 2006, s. 64(1)). The N5 notice covers a broad range of disturbances, including loud noise. Tenants who receive an N5 notice can cancel the notice of eviction if the behaviour stops within seven days of receiving the N5 notice (RTA, 2006, ss. 62(3), 64(3), 67(3)).

An N7 eviction notice is served when the tenant lives in a residential building that has three or fewer units in the building and behavioural issues occur (RTA, 2006, s. 65). The N7 notice also covers interference that seriously impairs the safety of others in the unit or rental building (RTA, 2006, s. 66). Tenants do not have the option of voiding a N7 notice.

As with damages, survivors faced threats of eviction for interference even if it was caused by the person causing harm. A service-provider interviewee shared one example:

*I have a client right now who has a boyfriend who has...trespassed...[at] the building. And he still comes over all the time. It's kind of unclear, you know, how much control she has over letting him in. But there's frequent complaints about fighting and shouting. And then security is called and they remove him. And so, she's gotten an N5. (SP46)*

The noise and interference often resulted in neighbours complaining to the landlord and asking them to resolve the issue. A lived-experience interviewee shared that the GBV she experienced resulted in her landlord attempting to evict her over her neighbours' complaints:

*He gave me a notice before I even found a place. He said he wasn't comfortable that there were police, that the neighbors were talking, and were asking him questions, and I think he would hear a lot of screams and noise. So, he didn't know how to help me. He was minding his business, but he just didn't want to get involved. He just wanted us out. (LE07)*

Even when survivors explained that the problematic noise was due to GBV, landlords could be unsympathetic. A legal-professional interviewee highlighted this pattern:

*Even when the person says, "Yes, this is what happened, right? This is why like, the sound that you're hearing was actually the sound of me being abused," they're still going through those processes. And we're seeing...landlords on the other side, who are still pushing to evict people after that. (SP22)*

Rather than accommodate survivors, landlords also used noise complaints to justify forcing them out of their rental units. A legal-professional interviewee stated that her client faced numerous noise complaints due to violence, and was told by her social housing provider that "the shelter system would be better for this [her]. And...that was a better solution than her maintaining her housing" (SP04).

## No-Fault and Bad-Faith Evictions

Survivors also faced the constant threat of losing their stable housing through no-fault and bad-faith evictions. No-fault evictions occur when landlords terminate a tenancy because they or a purchaser want to use the unit for their own use or because they intend to renovate (RTA, 2006, ss.72, 73). This must be done in good faith—that is, the landlord must intend to use the unit for personal reasons or to renovate it (RTA, 2006, ss.72(1), 73(1)(a)).

Bad-faith evictions occur when a landlord uses a no-fault eviction as a false pretence to get a tenant to move out but does not actually intend to use, sell, or renovate the unit. For example, a bad-faith eviction occurs when a landlord evicts a tenant by giving notice that the landlord intends to live in the unit, but instead of moving in, the landlord rents the unit out again at a higher monthly rental price.

Although bad-faith and no-fault evictions have become more common, survivors were particularly affected because these type of evictions further destabilized them after the traumatizing experience of violence.

For example, after her abusive ex-husband finally left the rental unit, a lived-experience interviewee was then threatened with eviction because her new landlord intended to renovate her building: “She’s [the property manager for the landlord] just not going to stop. Her job was to come in here and evict the whole building. They’re renovating as we’re speaking, every day until five o’clock” (LE01)

Another lived-experience interviewee who intended to remain in her unit after the person causing harm moved out was forced into homelessness with minimal notice after her landlord issued an eviction notice for the landlord’s own use following her ex-husband’s departure:

*He thought the money was actually coming from my husband, but it was coming from both of us. So, he assumed that if he wasn’t even there, I wouldn’t be able to pay. But that wasn’t the case. I was able to afford it but there’s just a dynamic...I don’t know what it was. That was a man-to-man thing. I never really interacted with the landlord by myself. (LE07)*

After the lived-experience interviewee moved out, the landlord immediately re-rented the unit.

Bad-faith eviction notices were also issued to survivors when landlords found out about their gender identity or sexual orientation. For example, an 2SLGBTQ+ lived-experience interviewee described being discriminated against by her landlord under the guise of a lawful eviction process shortly after moving into a new unit after fleeing a situation of IPV, in which her life had been threatened. “[My landlord] found out that I’m LGBTQ+ and that didn’t align with their beliefs....But they knew not to evict me for that. So they said, ‘Oh, we’re selling the house.’ And they evicted me based on selling the house” (LE10). After she had moved out of the rental unit, she discovered that the landlord had removed the unit from the real estate market.

The threat of no-fault and bad-faith evictions due to the stigma of GBV or discrimination, or as a method for the landlord to handle situations of violence within the rental unit, prolonged situations of housing instability and homelessness for survivors.

## Housing Not Protected by the Residential Tenancies Act, 2006

Because of a lack of affordable housing, survivors frequently ended up living in precarious housing situations after fleeing violence. Often, the housing they moved into was exempt from the RTA. Examples of RTA-exempt living situations include couch surfing, long-term care homes, seasonal or temporary vacation homes, accommodation provided by an educational institution, and units in which the landlord and tenant share a kitchen or bathroom (RTA, 2006, s. 5).

Survivors faced difficulties, including exploitation, when their living situations were not covered under the RTA. For example, a lived-experience interviewee who was couch surfing explained that her family member's landlord wanted her to complete building maintenance work for free after she notified them of the stipulations of her protective order while she was living there temporarily (LE11).

While legal arguments can be made as to why the RTA should apply in some of these cases, interviewees highlighted that it is difficult to have the LTB side with survivors. This often arises with seasonal accommodations, such as hotels and vacation homes. As a housing legal professional at a community legal clinic explained:

*And while you can definitely have RTA protections and live in a motel, it's a little bit more of a grey area...we have lost cases at the Board, where to us, it was very clear this person should have RTA protections, but the Board did not agree. And so that often happens with domestic violence victims or survivors where they leave, they end up in a place where they don't have RTA protections, and they're sort of in a cycle of homelessness. (SP54)*

These "grey area" situations can lead to survivors becoming hesitant to ask for help when they are experiencing GBV. A lived-experience interviewee who lived with their abusive landlord stated that:

*I was scared because...I had called even a legal clinic then and they told me that because it's his house...normally, if there's an abuse, which happens, the police will come in, and they'll try to keep distance between you two, but because it's his house, you know, in that sense, like, he can kick you out or whatever. What happens? We don't know. So, in that situation, I was scared to call the police. Because if they want to put distance between us, and it's his house, I would have to leave, and I didn't have any place to go. (LE17)*

Similarly, survivors had limited legal protections when the person causing harm was the only person listed on the lease agreement. While survivors can make an argument that there is an implied tenancy, they may not assert this argument because of a fear of retaliation from the person causing harm. As one lived-experience interviewee highlighted:

*If the abuser is renting, or the primary tenant or the owner, then they feel that they will be kicked out and they would have no place to go. So, this also kind of forces the abuser to keep abusing, like in my case, because he knew I couldn't do anything. (LE17)*

This kind of situation can lead to continued cycles of violence for survivors, in which they may escape the person causing harm only to end up living in abusive landlord or roommate situations.

## Landlord Abuse

Interviewees reported that survivors had faced exploitation and abuse from landlords after leaving the person causing harm. This was due to the increasing scarcity of affordable rental housing, which meant that survivors were willing to put up with abusive or intrusive landlords to keep a roof over their head.

An interviewee who had experienced GBV and subsequently moved into a unit with an abusive landlord noted that:

*Housing, I feel...is a very big problem. Especially for, I mean, it's a problem for everyone, but especially for women you know...and even for immigrant women who are alone because we don't know the laws, rules...and people take advantage and then it often leads to abuse. (LE19)*

After years of chronic homelessness, another lived-experience interviewee who was ineligible for social housing due to financial abuse arrears moved into a shared-accommodation unit with her landlord, as it was the only unit she could afford in the private market. The landlord, who appeared to be experiencing dementia symptoms, began to act as though she was his wife. While she was sympathetic to his deteriorating condition, he was also increasingly aggressive and controlling with her:

*I do everything for him. Like, I make sure he has breakfast, lunch, dinner. I do his bedding. I do this. I do that. For some reason, he thinks I'm not allowed to have no man. I can't talk to a man like that. He treats me like his wife. But I am the one that's like, why can my daughter have her boyfriend sleeping there, and I can't even have a man visit me? You know what I mean? So, I think in his mind, because his dementia, he controls me that way. Like, he'll hit me with the paper. He'll slap my face. (LE05)*

The interviewee felt that her family was trapped in this rental unit due to a lack of affordable alternatives. She continued, “I don’t want to be closed in here, I just want to have my own freedom” (LE05).

Service-provider interviewees highlighted that, because landlords had access to extensive personal details on their tenants, they had, at times, used that information to harass, stalk, or coerce tenants. They described situations in which landlords continuously called their clients in the middle of the night, had set up hidden cameras, or had entered their units without notice (SP32, SP33, SP34, and SP35). A service-provider interviewee shared that landlord abuse had further displaced her client who moved into the rental unit following IPV. She noted that “the landlord would let himself into this woman’s apartment, unannounced and, and you know, she felt really threatened by him. And so, we had to move her out” (SP40).

Similarly, a lived-experience interviewee explained that after she rented the only affordable room she could find, the landlord falsely claimed that he was in a sexual relationship with her to the other tenants in the building. She eventually left her unit without notice after the landlord unlawfully raised her rent in retaliation for not submitting to unwelcome sexual advances (LE11).

Survivors also experienced abuse after they had entered into sexual relationships with their landlords. As one lived-experience interviewee shared:

*It was a bit of a weird situation because he was also my landlord...he would lock out my belongings and he would lock me out of the room or keep threatening me, stick Post-its on the mirror, and things like that. And then he would keep threatening me that he'll throw my belongings [out] and once he actually did. (LE17)*

Interviewees also reported that landlords took advantage of survivors who remained in their rental unit after being issued protection orders that forbade their abusive ex-partners from returning. For example, a lived-experience interviewee recounted an incident shortly after her ex-partner was charged with assault in which the landlord “was saying very unrespectable things, very personal things...he was asking me those type of questions which only belong in the bedroom” (LE06). Ongoing sexual harassment forced her to move into a shelter.

## Roommate Abuse

The affordability crisis also led survivors to pursue accommodations with roommates. This even occurred among survivors who would not typically seek out such accommodation, such as lone parents with accompanying children. When survivors needed to find housing quickly after leaving situations of IPV, they would sometimes settle for whatever they could find. For example, one lived-experience interviewee stated that:

*My safety was at risk just because it was the cheapest option I found on Kijiji, but I didn't realize that it was someone who [had] just come out of jail. Someone who was on parole. It was two men. They looked harmless when I went to check out the place and because it was so cheap, and I thought like, okay, I have to save right now, I'm just going to take it. But it wasn't safe for me because at 3 am in the morning, I would hear knocks on my door. (LE07)*

Lived-experience interviewees shared additional examples in which their roommates had harassed them, broken into their bedrooms, thrown out their belongings, and assaulted them. This emerging issue was also identified by the lived-experience survey respondents, 17% of whom indicated that they had experienced roommate harassment or abuse. The interviewees who faced roommate abuse discussed putting up with the situation for as long as possible, as they could not afford to leave.

Service-provider interviewees felt that this kind of situation was becoming too common and stressed that when survivors were forced into shared living situations with people they did not know, it made them susceptible to more situations of abuse (SP26). For example, one lived-experience interviewee experienced violence after she disclosed to her roommates that she was transgender:

*One time I made the mistake of trying to be honest with my roommates and be like, "Hey, look, if you started seeing mail under my name, my proper name, that's for me, right?" Next [thing], the guy knew. I was being told that I was sub-human and had a friggin' kitchen knife taken out at me. (LE02)*

This survivor was so afraid of telling anyone what was happening that she endured months of harassment. She only left her rental unit after collapsing due to sleep deprivation.

Similarly, an Indigenous-led service-provider interviewee also shared that Indigenous 2SLGBTQ+ survivors had been forced to leave their rental units due to GBV from neighbours and roommates:

*We've had neighbors and roommates that are consistently racist and homophobic where we've placed LGBT people or Indigenous Two-Spirit people. They've been systematically attacked by [them]. And then just some, some neighbors are just really difficult in [the] community to live with, you know, there'll be constantly phoning police and making reports calling CAS, saying that the children are being abused when they're not. (SP40)*

Service-provider interviewees noted that survivors who had abusive roommates were especially vulnerable when they had a joint tenancy—i.e., when both tenants are listed on the same lease agreement. This is because joint tenancies cannot be unilaterally severed, and survivors can be held responsible for issues within the unit even after they leave. As one service-provider interviewee explained:

*I've had clients trapped in roommate situations and they can't get out of them, because they won't sever the lease, they won't...they can't, you know, get rid of the roommate, because everybody's on the lease. So, they can't just say it's an unwanted guest. And they can't move...they can't just kick the person out. Or they wouldn't even be able to afford the place...there's too many rooms for them to be there by themselves....And I've had people then go live in parks and choose to live in a tent because they can't stand being where they are. (SP37)*

Survivors in these abusive roommate situations have few legal avenues they can pursue to protect their tenancies. Instead, they end up stuck in situations of severe abuse or are forced to leave and face homelessness.

## Social Housing Rental Issues

The lived-experience interviewees who resided in social housing experienced many of the same issues faced by private market tenants. They also shared similar mixed feelings of relief at having secured new housing, and defeat regarding the concessions they had to make to their housing needs.

For example, a lived-experience interviewee who resided in a unit with severe structural damage, mould, and leaks overlooked the housing issues because of her renewed sense of safety. She stated, “It hasn’t really sunk in, I kind of constantly have to remind myself this is my place, and no one is gonna take it from me” (LE22). Lived-experience interviewees highlighted that while they were glad to have escaped a tough period of violence and homelessness, they also wished that they had more autonomy and choice when securing their new home.

Despite facing many of the same challenges as tenants in private market rentals, tenants in social housing also experienced unique rental issues. Interviewees discussed challenges associated with a lack of trauma-informed care, the inability to transfer units in crisis situations, and housing-unit takeovers.

## Social Housing Providers

Social housing tenants often had limited support from their housing provider to help navigate rental issues. Many social housing providers have designated tenant support staff (typically social workers or social service workers) who act as intermediaries between the social housing landlord and their tenants. Support staff can intervene to prevent eviction, advocate for tenant rights, and connect tenants to appropriate supportive services.

However, interviewees noted that there is an inherent conflict of interest between the tenant support staff and the tenants. For example, social housing providers can request that their staff provide their client notes to use as evidence in eviction applications or that staff appear as witnesses at the LTB. A tenant support-worker interviewee described how challenging this relationship could be when IPV was occurring:

*I had a client who...their abusive partner kept coming back and they would take them back. Cycle of violence, completely normal in that situation. But the problem then was [the survivor] was screaming at [the person causing harm], telling them to get off them and punching holes in walls out of frustration. And then that led to an N5 [eviction notice], and then it was that weird balance of being a social housing provider, while also being the support, so...it was hard because I had to write letters, as a warning, like, if you don't stop this behaviour, you're gonna get an eviction notice, but then also being, like, how can I best support you? (SP23)*

Social housing providers seemingly viewed common rental issues such as arrears or damages as clear-cut issues, without fully considering the context or extenuating circumstances. Service-provider interviewees felt that there was a lack of compassion when social housing providers pursued legal action against their tenants experiencing GBV.

For example, a legal-professional interviewee who represented a tenant experiencing GBV described an eviction hearing in which a social housing provider's lawyer "testified on the record that the shelter system would be better for this person — that like that was a better solution than her maintaining her housing" (SP04). She also noted that many of her social housing–client files could have been resolved amicably by the social housing provider without the situation resulting in a hearing had they been willing to consider the circumstances of the eviction.

However, a social housing provider contextualized this kind of situation this as a delicate balancing of the rights of all their tenants. In situations of IPV, they may decide to pursue an eviction of the survivor to try to resolve dangerous issues for the wider community:

*The biggest challenge is the partner coming back in, you know, same old story, it's the partner coming back, disrupting neighbors. And the hard part for me is, by coming from the homelessness side of things, I want to house all the people and keep people housed. But when you're in a duplex, and it's constant traffic, or just all the things that happen in a unit, I have to keep in mind the other person as well. So, I sometimes have to move toward eviction, because of the disturbance [that] is happening. (SP11)*

## Stigma

One social housing–provider interviewee wondered if burnout had led their colleagues to become overly reliant on rules, policies, and procedures. This punitive approach perpetuated further harm and led to evictions of their most vulnerable tenants, many of whom were multiply marginalized: "[The workers] are beaten down a little bit. And then they become sort of, like, almost discriminatory toward the people that they are...working for. I don't know. They're, like, almost contemptuous toward tenants, sometimes to certain people" (SP27).

Service-provider interviewees had similar experiences, in which social housing employees had used derogatory language and perpetuated stereotypes when discussing, in correspondence, their tenants experiencing GBV. An Indigenous-led service-provider interviewee highlighted that her clients' concerns and struggles were routinely dismissed by the social housing provider:

*There's...an almost...“othering” of folks who live, you know, in [social housing] or of Indigenous people, where the mainstream just kind of accepts that's their norm. You know, that's their normal, they're used to that. That's how these people live. That's how it is, that's the vibe that I get. (SP37)*

One service-manager interviewee acknowledged that some social housing employees perpetuated the misogynistic “**welfare queen**” stereotype, which posits that women “are working the system to get faster access” to social housing units through SPP (SP55). This misconception is due to the higher number of survivors offered social housing units compared with other priority groups.

This characterization of SPP recipients exacerbated stigma against survivors and led to them not being believed and being blamed for the actions of the person(s) causing harm. Sixty-two per cent of the lived-experience survey respondents also felt that when service providers lacked compassion about their situation, it was a barrier to accessing housing support.

One service-provider interviewee shared an example in which stigma had pushed the social housing provider to pursue an eviction in a situation of IPV:

*There was one I was so upset about because all the neighbours said he's back, he's back. And the [social housing provider] felt that she deliberately took him back. So, they issued her an eviction notice. What for? The eviction was for the fact that he had come back, and he damaged the property, and hurt another person. But she said, “I didn't ask him to come back, he pushed his way back.” And that's education about domestic violence. (SP52)*

Interviewees outlined a troubling pattern in which social housing providers lacked education about the realities of GBV, were ignorant to the difficulties of the shelter system and homelessness, and had few internal policies or procedures on how to best respond when they suspected their tenants were experiencing GBV. This was evident when survivors living in social housing pursued **crisis or urgent transfers**.

## Crisis or Urgent Transfers

Social housing tenants must adhere to the RTA and, as such, have limited legal recourse if they experience IPV in their unit. Chiefly, tenants cannot remove an abusive partner from a joint lease, which places the onus on survivors to leave their home for safety reasons.

Social housing providers have the authority to instead permanently move a victim of violence to another unit via a crisis or urgent transfer. However, interviewees highlighted that these transfers are rarely granted due to the strict criteria required for approval.

Only two of the lived-experience survey respondents indicated that they were granted a crisis transfer to escape violence. A service-provider interviewee shared that for applicants to be successful with a crisis or urgent transfer:

*It has to be like a super-dramatic case, you know, for them to recognize [that] this person's life is in danger now, or it needs, like, really a strong advocate that words it strongly and doesn't mince words, you know—minimize in any way—what the risks are. (SP37)*

Social housing providers typically required a police report as evidence of an imminent risk of violence, or proof that violence causing severe harm had already occurred. This stipulation proved to be a barrier, as survivors from marginalized groups were hesitant to report violence to the police due to a fear of retaliation, mistreatment, or further violence. One service-provider interviewee provided an example of a client who had been denied a crisis transfer because she refused to file a police report, even though she included proof of her hospitalization due to severe physical violence.

As well, even when tenants met the threshold requirements for a crisis or urgent transfer, social housing providers admitted that they preferred to exhaust all options before authorizing a move. An interviewee explained that administrators had concerns that if they were to grant every crisis transfer request, then “everybody’s gonna want [them]” (SP28).

It was suggested that the “super-rigid and harsh” stance on crisis and urgent transfers was evidence of an organizational culture in which the stigma of GBV had led to “**victim blaming**” and the denial of support. One service-provider interviewee shared an example of a social housing provider who denied a transfer request for reasons of sexual violence, as they “attributed [the] assaults to [the survivor’s] risky lifestyle” (SP54). The social housing provider had rationalized their position, stating that an approval was “just transferring the bad behaviour with the person,” which would lead to problems for neighbouring tenants (SP37).

Rather than approve a crisis or urgent transfer, social housing providers encouraged survivors to terminate their tenancy and apply for SPP, even though they would likely wait several months for re-entry into social housing. A service provider explained that she tried to intervene when her newly housed client saw her abusive ex-partner outside her building, but that both the service manager and social housing provider would not offer to intervene:

*Once you're in housing, they cannot transfer [you]...it's like, out of their hands, their role is to approve you for a special priority. And then it's between you and your management office. There's nothing they can do. If somebody is not safe anymore in that housing unit, they can't do anything. They have to re-apply. This takes time. Those are the people...we get some of those clients and we don't really know what to do for them. (SP10)*

Social housing—provider interviewees justified this, stating that they would prefer that regional service managers determine the criteria for a move for safety reasons related to GBV. They also noted that implementing an internal social housing policy would over-complicate the issue, as there was already a safety mechanism in place to support survivors through SPP (SP05).

However, one service-provider interviewee stressed that it was problematic for social housing providers to ask their clients who have experienced violence to move to another unit:

*It is the most valuable thing they own. Like, they're not allowed to own anything else, the most valuable thing they own, literally that [RGI housing]. And so, you're telling them, they have to give up the most valuable thing they own in order to escape a domestic violence situation. It's insane. It doesn't make any sense. (SP04)*

The expectation that survivors should abandon their social housing tenancies puts them at risk of homelessness and housing precarity. Because social housing tenants were often recipients of social assistance, they were unlikely to find a comparable affordable housing unit in the private market while they waited for another social housing offer.

## Housing-Unit Takeovers

The prevalence of **housing-unit takeovers** was raised as an emerging issue in social housing by interviewees. This situation occurs when an existing social housing tenant is exploited or trafficked by another party for access to their housing unit. Victims of housing-unit takeovers were the most vulnerable social housing tenants and were known to have complex needs, substance use dependencies, or disabilities. They faced the most extreme forms of violence, including trafficking, psychological terror, physical violence, and sexual assault. The person(s) causing harm was often involved in criminal activity and used the unit to conduct that activity, which included drug or weapons trafficking, extortion, and robbery.

A service-provider interviewee explained that social housing tenants caught in these extremely vulnerable situations were often held responsible for problems or damages. She shared an example about the person(s) causing harm:

*[They were] trafficking her and the SWAT [special weapons and tactics] [team] came and raided her unit, destroyed it, blew off all the windows, all the doors of her unit, ripped everything up, drywall down, everything. Because everything was, like, hidden. And [the social housing provider] was like, “Well, it’s your place. So, you’re also responsible.” And there was nothing to help. Like, it was like, basically, they tore the house down to the studs, and they were like, “[It’s]not a problem.” But...what do you do, right? I understand where the landlord’s coming from but...what about [the] place now, it’s destroyed. But it’s...they can’t afford to fix that when she herself is a victim. (SP53)*

Social housing providers involved the police when they suspected a housing-unit takeover and were often forced to evict the victim to protect their buildings and the neighbouring tenants from further harm. Service-provider interviewees shared that evicted survivors were known to subsequently experience homelessness, exploitation, and further violence. One service-provider interviewee explained the consequences of a lack of support for tenants trapped in these situations:

*Women are being evicted from social housing because of drug trafficking happening in their units, by people who are trafficking those women also. And so, they’re... losing...instead of being transferred to a secure place or being supported to get out of that dangerous situation. The housing provider is like, “I don’t want to have to deal with this problem, I’m going to evict you for drug trafficking,” when in fact, that woman is...totally being exploited by the people who are using her home as a hub for trafficking drugs in low-income communities. (SP41)*

Rather than receiving trauma-informed, survivor-centred interventions, tenants exploited through housing-unit takeovers were often criminalized and evicted, further entrenching their victimization. Although an eviction resolved the criminal activity in the single unit, the person(s) causing harm was known to re-establish control over another vulnerable tenant nearby. As a result, evicting the survivor did nothing to disrupt the broader cycle of violence. Instead, it reinforced that violence by pushing already marginalized individuals into deeper precarity.

## Access to Justice

Access to justice is considered a “fundamental value” of the Canadian legal system. The Department of Justice Canada states that “timely access to a fair and effective justice system, as well as access to information, resources and informal service, will help support the wellbeing of individuals and communities” (Department of Justice Canada, 2021).

Survivors are unable to fight for their legal right to remain in their rental housing units without adequate access to justice. This is exacerbated when legal systems and protections fail to establish laws that promote **security of tenure**.

### Tenant Rights

Lived-experience interviewees remarked that understanding their rights as tenants made them more confident when raising rental issues to their landlords. It also helped survivors gain a sense of security and safety, especially after the experience of violence with a controlling partner. As one lived-experience interviewee stated:

*I feel comfortable now that I know more about them to be able to say, “That’s crossing a line. It says here in 13.1, that you’re not supposed to ask about my sexual such and such, right...” And that takes confidence because that’s what shuts people down. And if that shuts them down, while I’m looking for a house or safety, then that I know that that’s not a safe place for me. (LE12)*

However, interviewees reported that survivors were often unaware of their legal rights when experiencing rental housing issues, had struggled to assert their tenant rights, and faced difficulty when obtaining housing legal help.

Interviewees noted that survivors often lacked knowledge about their rights as tenants, and that this led to many preventable evictions. For example, survivors had been forced out of their homes without an **eviction order** from the LTB, had provided illegal deposits to secure a new unit, and were unaware that social housing providers must follow the RTA. The lack of knowledge about their rights was highlighted by one lived-experience interviewee, who stated that:

*People just don’t know. Because now you have a victim of abuse, a woman who did not get legal support, so the children were taken away. Who was being kicked out of the shelter because they have overstayed, who then had a place, but then the landlord abused her, so she left. (LE19)*

Interviewees highlighted that because survivors were unaware of their rights, they would often vacate their units when landlords threatened eviction. This was due to survivors not realizing that an eviction is a legal process that requires notices from the LTB, scheduled hearings, and issued orders. For example, a legal-professional interviewee explained that her clients would move out as soon as a landlord sent them a personal eviction letter or notice because they misunderstood it as a legal eviction order:

*They'll get that threat, "Well, the **sheriff** is coming to remove you," and I'm like, "No the sheriff isn't coming to remove you. You haven't gone to the tribunal yet. There's no possible way, right." But they literally believe the landlord on that, over...myself or the other workers, because they're just...so used to things going wrong and so on. (SP10)*

The lack of legal knowledge also left survivors susceptible to being taken advantage of by their landlords. For example, a lived-experience interviewee shared that she had been charged an **above-guideline increase** by her landlord, who was also sexually harassing her. She explained that she paid the increase in her rent without realizing it was illegal, and to prevent retaliation:

*They wanted to increase the rent all a sudden without informing me. So, I was billed with the charges without notice or even they tell me in advance, and I had to pay them. I had to pay the amount without even negotiating or giving me a chance even to move out. (LE11)*

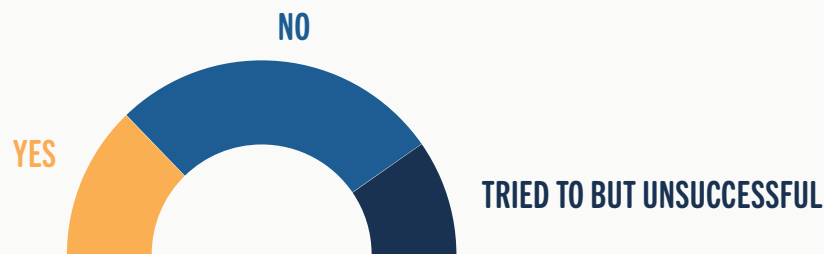
Legal-professional interviewees also highlighted that survivors who lacked legal knowledge had, at times, made decisions that led to eviction notices because they were unaware of the potential consequences. A housing legal professional discussed an example in which a client who had experienced GBV withheld rent because her landlord refused to follow through with maintenance and repair requests (SP23). The survivor was later served with an eviction notice for arrears. She did not realize that her landlord could file an eviction application against her or that she could have filed her own **tenant application** asking for monetary remedies over the unit's state of disrepair.

Interviewees reported that even when survivors were aware of their tenant rights, they often chose not to enforce them because of fear of retaliation or mistrust of the legal system, or because there was too much on their plate.

As well, interviewees reported that often survivors did not know they could pursue housing legal help to support them through rental issues. A lived-experience interviewee stated that “I didn’t even know there was something like a housing lawyer, I had no idea” (LE22).

Most lived-experience survey respondents indicated that they do not use any legal services for their housing issues (see Figure 12).

FIGURE 12: PROPORTION OF SURVIVORS OF GBV WHO USED HOUSING LEGAL SERVICES



Survivors expressed fear of losing their home because of retaliation from their landlord. A lived-experience interviewee who experienced unwanted sexual advances from her landlord noted that:

*I didn’t even have my own space, like privacy. And he decided to increase the money and he wanted me to beg him not to increase the money. So, I didn’t want that and I left even though he refused to give me back my last month’s pay even though I paid it, and I just left. I didn’t want anything. (LE11)*

Another lived-experience interviewee chose not to pursue legal action because the living situation with their former partner was too dangerous:

*I should have sought some sort of legal help there. But I also didn’t want to stay there. Yeah. I wanted to get out of there and get away from them as soon as I could. But I knew I was being illegally evicted. But it wasn’t...it wasn’t a safe place for me to be (LE10).*

Even if a survivor could assert their rights at the LTB, they often opted not to because they feared losing their homes. Legal-professional interviewees who assisted survivors living in unsafe situations explained that they were hesitant to raise issues with their landlord or file with the LTB, even when they had the chance to. As one legal-professional interviewee explained:

*Yeah, definitely the dynamic's with the landlord. I will say clients are not in the best of apartments. Landlords are kind of like slum lords, who are not, like, fantastic landlords, and that's only what they can afford. And then there's that dynamic, like, yeah, you have a notice and then they're kind of like, "Well, I don't want it to add to my case in front of LTB, like I don't want it to look bad." Even if we advise differently and kind of advise them of their rights, and what that kind of looks like, they still are very hesitant to do it. And we can't force their hand in it, but they don't want it because they think it'll really affect their hearing. (SP23)*

This meant that survivors would downplay or ignore the landlord or abusive partners' part in their rental issues because they wanted to remain in their homes.

## Housing Legal Services

Survivors experiencing rental housing issues can access legal services for residential tenancy resources, information, representation, or advice. Four types of housing legal services are available to low-income renters:

1. Legal clinics
2. Pro-bono legal services
3. Affordable legal services
4. Housing services that provide legal information

### Legal Clinics

Independent community legal clinics (CLCs), including **student legal services organizations** (SLOs) and **specialty legal clinics**, are funded by **Legal Aid Ontario** (LAO) (Legal Aid Ontario, n.d.-c). CLCs and SLOs practise in various areas of law, including residential tenancy law, and provide their services to eligible individuals who live in a specific geographic area.

Specialty legal clinics specialize in a specific area of law, which may or may not include residential tenancy matters, and offer services to residents across Ontario. All clinics provide free services to eligible low-income residents of Ontario and can provide survivors with legal advice and representation (Legal Aid Services Act, 2020, s. 8). To be eligible for legal clinic services, service users must meet income-threshold rules (Legal Aid Services Act, 2020, s. 7).

LAO also funds the Tenant Duty Counsel Program (TDCP), which is housed in 30 regional CLCs. Unrepresented tenants, including survivors of GBV, can receive free confidential summary legal advice prior to an LTB hearing or on the day of their LTB hearing through the TDCP (Advocacy Centre for Tenants Ontario, 2025).

Income Eligibility

CLCs are often used by low-income survivors who required intensive legal help, as they offer free legal advice and representation. While community legal clinics were often an excellent resource for survivors who qualified, not all survivors met the legal clinics’ strict income eligibility requirement (see Table 4).

Interviewees reported that the income-eligibility rules did not consider the reality of survivors’ financial circumstances. For example, a legal-professional interviewee stated that she could not represent a survivor at an eviction hearing because their income was too high to qualify for services, even though she made barely over minimum wage (SP24). The legal professional tried to refer the survivor to an affordable housing lawyer, but when that proved unsuccessful, it led the survivor to voluntarily give up her rental unit.

TABLE 4: INCOME LIMITS TO QUALIFY FOR CLCS

Family unit size for CLC services	Maximum gross annual income
1	\$22,720
2	\$32,131
3	\$39,352
4	\$45,440
5 or more	\$50,803

SOURCE: LEGAL AID ONTARIO (2021).

Catchment Area

In addition, some lived-experience interviewees became ineligible for legal clinic services because they no longer fell within the geographic catchment area of their CLC after fleeing violence. As one lived-experience interviewee stated, “If you moved, then they basically tell you that you are not in our catchment area, go to another person, and then you call another person. And then again, if you move, you are referred to a third person” (LE17). This left many survivors fighting their housing legal issues on their own or disengaging and abandoning their units altogether.

## Capacity

Lived-experience interviewees reported being turned away from their CLC because it was operating at capacity:

*I called the legal aid clinic to fight at the Landlord and Tenant Board. They say, “Well I’m sorry, we can’t do that. We don’t have enough staff, we’re just going to give you the information and you do it yourself.” Hello, like I know what I’m doing? Still, I can be a good advocate when I have to, when I have no choice. So I went to the Landlord and Tenant Board. I took the information myself, filled out the paperwork. Started the process. (LE19)*

Legal-professional interviewees from CLCs described being overwhelmed by a dramatic increase in housing cases after the pandemic, as many legal clinics were forced to limit their housing legal services to eviction-prevention cases. As a result, survivors could not find legal help for tenant-rights applications.

A lived-experience interviewee who was being harassed by her landlord explained that her CLC was unable to assist her because “they did not file T2s [tenant rights applications]. Yeah, [they] don’t have the resources. So, they don’t even have that. Nobody has the resources to even fight these landlords” (LE01). Capacity issues left survivors having to fight serious tenant rights applications related to abuse on their own.

Capacity issues also meant that CLCs would defer client intakes to as close to the hearing date as possible. This compromised survivors’ sense of agency and safety, as they believed that they had retained legal help. As one lived-experience interviewee stated, “I waited two months [for a callback]. Honestly, things didn’t happen. You know? I respect someone who can tell me straight up whether they can help you” (LE14). Lost time had consequences, as survivors were left scrambling to find alternative legal representation, sometimes just days before their hearing.

## Inability to Review or Appeal Matters for RGI and SPP

Capacity issues particularly affected survivors who required legal help to review an RGI or SPP denial. If a service manager or housing provider denies an RGI or SPP application, and the **internal review** process upholds that decision, a **judicial review** (JR) can be sought as a last resort. In Ontario, the Divisional Court hears applications for JR of denial decisions made by administrative bodies. As a Northern legal-professional interviewee explained: “We’ve done it [a JR] lots of times but we don’t have the resources to do it every time. And so, there is no process for challenging those decisions by the RGI housing provider...[it’s] significantly a problem, I think” (SP41).

Interviewees also reported that CLCs would represent tenants on appeals for loss of RGI, as losing social assistance could later lead to the loss of their housing. However, CLCs rarely took on reviews of SPP denials, as it was considered a housing-access issue rather than an eviction-prevention issue.

While survivors can appeal an SPP denial, some had decided not to, as an administrative appeal felt like another hurdle and survivors could not face being denied help again. One service-provider interviewee noted that:

*They don't know that there's this criteria. So, you know, we apply, they get denied, and then we have to form our appeal. So, it's just another lengthy process when women just want to move forward in their lives and find safe, affordable housing. (SP59)*

Even when legal clinics were able to take on the reviews of SPP denials, legal-professional interviewees found that it was difficult to push service managers to overturn their decision or use their discretion. A Northern legal-professional interviewee noted that:

*The decisions that they're making are often not rooted in what the legislation says, it's basically, here's what I feel, here's what I think. And so, when we push back on that, we have no way of explaining to our clients what has happened when they get denied....So, we do an internal review and you can guarantee that 99% of the time, it's going to be upheld, they're not going to provide any further information and that is it. (SP22)*

This kind of situation was especially challenging when there was limited capacity to pursue JRs of decisions that upheld appealed denials.

## Pro-Bono Legal Services

The second type of legal services, LAO certificates, can be used to get help through private bar lawyers or pro-bono legal services. Survivors can access **certificates for domestic violence** issued by LAO if they meet household income-eligibility rules (Legal Aid Ontario, 2025). LAO certificates are subsidies paid to private bar lawyers for a set number of hours of legal work. Although LAO certificates for domestic violence are issued for family and immigration legal issues, LAO does not provide a certificate for domestic violence for housing legal issues.

When survivors could not access legal clinic services and were unable to afford private bar services, they sometimes sought help through the LAO certificate program. However, as with clinic services, the certificate program had strict income-eligibility requirements. A service-provider interviewee commented that survivors “have to pretty much be making hardly any money” to access the certificate program, which left many low-income survivors without any legal help. As well, although lawyers could request additional certificate hours, the limited time was still not enough for the kind of intensive legal help survivors needed. Interviewees were not aware of any survivor who successfully advocated for access to the LAO certificate program for domestic violence over a housing legal issue.

In addition, few private bar lawyers accept legal certificates, as they cannot earn a comparable rate for service that they do with their non-legal certificate clients. This led to a lack of available and affordable legal professionals. A service-provider interviewee explained that:

*It’s very hard to find legal aid lawyers, especially at this point in the year, the beginning of the year is when kind of the funds are opened up. And lawyers have open spaces...and then you get toward the end of the year. And I have one client who has been calling legal aid lawyers for approximately two months trying to get a consultation, and she hasn’t been able to find one that’s open. (SP38)*

**Pro Bono Ontario** is a non-profit legal advice phone service through which unrepresented individuals with housing law issues can speak to a lawyer regarding their civil matter during a free 30-minute consultation. While this service had provided some help to survivors, interviewees reported that 30 minutes was not enough time to receive meaningful legal advice. A lived-experience interviewee stated that “it literally takes 30 minutes to explain your case to them, and then the lawyers are in such a hurry, because that 30-minute time slot is ending...and then they don’t even give you the right advice” (LE16). Although legal advice was welcome, it was challenging to explain the experience of violence as it related to the legal issue in the short timeframe, especially due to the impact of trauma.

## Affordable Legal Services

Survivors can also access residential tenancy help through affordable legal services. These are private bar lawyers or paralegals who may offer a reduced rate for legal advice or representation. However, low-cost legal services were extremely difficult to find and often had long waitlists. Low-income survivors were also more likely to self-represent at the LTB than take on an additional legal cost.

When a survivor opted to pay for legal services, it could drastically deplete their funds, particularly in situations of **litigation abuse**, which were especially common in family law matters. Litigation abuse refers to when the person causing harm continues to exert coercive control on the survivor by using the legal system as a tool to continue the abuse after the survivor has left — e.g., intentionally dragging out the legal process to drive up legal costs or ensure there is no resolution. Survivors were known to miss rental payments to pay for legal services for fear they would lose custody of their children. In this way, the lack of affordable legal support left survivors with impossible choices, often at the expense of their housing. A lived-experience interviewee stated that:

*I've done everything, right, I've paid for lawyers, I have, and...when that didn't work out, because...[he] had more money, and the perpetrator [was] just jacking the system...it's not because of not engaging in the system is what I'm saying. It's because of how that system is gamed around bias to justify heavy-handed, violent behavior as the norm. (LE12)*

Another lived-experience interviewee who had been fighting a 12-year family law matter was told by her family lawyer that “‘You need to pay me upfront, now, \$5,000, then \$30,000 just to look at your paperwork.’ So, it’s insane. Just to look at my paperwork, \$35,000” (LE11). The cost of retaining a family lawyer resulted in her being unable to afford her rent. Instead, she found herself stuck in the shelter system, waiting for a social housing offer. This was not an uncommon situation, as many of the lived-experience interviewees shared that a significant portion of their income was going toward paying for legal services, leaving very little left over to pay for housing.

## Non-Legal Housing Help

Because of the lack of available legal services, survivors often relied on non-legal supports to deal with any housing legal issues they experienced. The reliance on quasi-legal advice from supports who lacked legal training and knowledge led survivors to rely on incorrect legal information or assume there were no legal options available to them. As one lived-experience interviewee noted:

*Everything’s really, really confusing. You really need somebody to guide you. And I’m not technical at all, or any of those things. Like, I was just having a panic [attack]. And then I looked on the...there’s an Ontario Tenant Rights [page] on Facebook... that really [does] that. But you get a lot of landlords on there. (LE01)*

This also occurred in housing-help services or shelters where survivors receive ongoing housing help. For example, a lived-experience interviewee reported that she did not apply for SPP based on incorrect advice. “They have a housing worker there. That was really good. But the only thing is that the waiting list was...she said, because I didn’t have kids, I wasn’t considered [a] priority” (LE07). When the survivor later found out that family size is not a requirement for SPP, she had already missed the three-month deadline to apply.

Lived-experience interviewees who were asked about their knowledge of the SPP process and social housing applications commented that because they were unaware of the HSA, they put all their trust in service providers. As one lived-experience interviewee stated, “I left it in their hands because I didn’t know...so I didn’t know that if it wasn’t completed or was complete or not, because I had zero understanding” (LE13). She went on to note that her SPP application was initially denied because of mistakes that were made on applications submitted on her behalf. Once the interviewee became informed about the correct process, she had to fix her applications by herself. If it were not for her obtaining legal knowledge on the HSA, she would have missed the three-month deadline to apply for SPP.

Survivors were also discouraged from applying for social housing because they were told it would affect their immigration status or immigration applications. A legal-professional interviewee noted that “A lot of our clients who are permanent residents and who are eligible, they’re actually told by people in their community and their partners, ‘If you go on subsidized housing or welfare, you’re going to get deported.’ And they believe these things to be true” (SP03).

## Intersecting Legal Issues

*It’s funny how you kind of talk about family, criminal, housing. It’s kind of the pillars that you’re working with. People come to us with all of those problems at the same time. I honestly don’t think there’s one client that I have that doesn’t have all three of those going on in [their] lives. (SP02)*

Concurrent legal issues and litigation abuse from the person causing harm were raised as key reasons preventing survivors from pursuing housing legal help. Interviewees also noted that family, criminal, immigration, and social benefits law matters could affect their housing stability. Survivors had lost their homes due to their legal challenges or had been evicted while they were overwhelmed with navigating multiple serious legal issues.

## Family Law

Survivors often prioritized family law matters because those cases involved urgent issues of spousal support or child custody. Interviewees reported that survivors depended on winning support cases to gain funds to put toward rent or to find new housing.

A lived-experience interviewee shared that:

*It is one of my biggest fears of not being able to afford....I don't have child support yet...I already sent my papers to the judge who decided about it. She said it takes six months for me to get the application form for him to start paying child support. So ever since I left, he has helped me with nothing and I don't have anybody. (LE20)*

Custody cases were common for survivors because they were torn between fighting for their children and keeping their housing. Interviewees emphasized that a survivor's priority was their children. A lived-experience interviewee stated that "without my kids, I would like physically not have been able to get through any of this" (LE20). However, a service-provider interviewee stated that survivors may lose their child custody case because they may have been evicted or lost the permanent housing they had after leaving the person causing harm. They noted that "the only way for them to get access or have the children placed in their care again is coming into our shelter" (SP01).

Litigation abuse was also prevalent in family law cases, when the person causing harm purposely stretched out litigation. A service-provider interviewee provided an example of a client in which:

*Her partner was very wealthy, very wealthy. And she finally had the courage to leave, she had gone back a couple times, because obviously, financially, it's really challenging. But she called to talk to me. And she'd exhausted her hours at Legal Aid because of the abuser's tactics. And her lawyer, they've gotten extensions, they've got other hours, the lawyer was able to successfully get that. But now, hours have been exhausted again...because of his tactics. And so...it's THSP [Transitional and Housing Support] workers that are supporting her in court, and we can't. She's really representing herself because of this guy. (SP39)*

Tenancy law does not always align with family law, creating gaps that leave survivors of GBV at risk of homelessness or coercion. The **Family Law Act** (FLA) recognizes that a matrimonial home can include a rental unit if both spouses resided there at the time of separation, meaning that exclusive-possession orders may be granted for rental units (FLA, s. 18). The FLA also prohibits one spouse from unilaterally terminating an interest in a matrimonial home without the other's consent (FLA, s. 21(1)). However, in situations in which the person causing harm leaves the unit first and later provides formal notice to terminate the lease, the survivor could be left in a vulnerable position, especially if they are not listed as a tenant, even if they are the spouse of the person causing harm (Ontario Regulation 516/06: General, s. 3(3)).<sup>1</sup>

<sup>1</sup> See Ontario Regulation 516/06: General, s.3(4) for exemptions.

Despite the legal protections provided under the FLA, landlords or the person causing harm may “weaponize” (that is, exploit the law as a way of attacking the survivor) tenancy law to undermine family law protections, forcing survivors into unsafe or unstable living conditions and compounding the harm they experience. When a person causing harm vacates a rental unit without first giving proper notice to the landlord, their actions should not be interpreted in a way that strips the remaining partner of their right to exclusive possession. As well, landlords should not be permitted to terminate a tenancy in a way that undermines the rights of the remaining partner under the FLA.

Law enforcement officials also demonstrated a lack of understanding about the intersection between housing and family law, leaving survivors feeling unprotected and unsupported during critical housing transitions. A service provider explained that:

*When the police come, they say, “Well...they have a two-year-old daughter.” She says the police say, “Who’s paying because somebody has to leave, right? Who’s paying the rent?” And he pays the rent. So, they asked her to leave and leave the daughter with him. The two-year-old daughter that she’s already been, like, the primary caregiver [for], for two years. They asked her because he’s paying rent. They asked her to leave, and they say, “Leave the daughter with him because you don’t have a place.” (SP10)*

Protracted family law proceedings also led to high levels of stress for survivors. This was exacerbated by the difficulty survivors encountered when obtaining a family law lawyer through LAO because few lawyers accepted domestic violence certificates for family law matters and the certificates covered too few hours. Survivors often received substandard legal services. It took two to three months for one lived-experience interviewee to even receive a call back from an LAO lawyer. Another stated that “all legal aid lawyers, like 99% of lawyers in legal aid, don’t care about the case. I’m calling my new lawyer a hundred times” (LE22).

The substandard family law services survivors dealt with greatly affected their ability to deal with their support and custody matters. This further prolonged their inability to afford stable housing. A lived-experience interviewee stated that “Since July 2017 until now [January 2023], I never get any child support from him. Still have the court order. I have everything but I never get money because of the lawyer, she’s not done her job” (LE03).

Some survivors struggled because their cases were considered too difficult. A lived-experience interviewee noted that “If you can find somebody who can provide the services for legal aid because mine was so complicated...no one could take me. Sixty-one lawyers I spoke [to], and found one” (LE12).

## Criminal Law

Survivors also prioritized criminal matters over housing legal issues. Interviewees explained that when survivors called the police for help, they could instead face charges themselves. This was due to **dual charging**, in which both parties in a domestic violence incident are charged with an offence. Dual charging can negatively affect GBV survivors in family court, place their immigration status at risk, discourage them from seeking help in the future, and make it more difficult to access a restraining order through family court. A service-provider interviewee explained how dual charges also had negative consequences for her client's housing:

*I'm thinking about an outreach client that I like to think of right now, who, based on her story, was charged with assault in what seemed like a very bad decision to be charged...because she was trying to get her abuser to leave her house to close the door on him. And she was also charged with assault because his hand was in the doorway. Meanwhile, he wouldn't leave her house. She's the only tenant. So then when she was charged and arrested, she was displaced. And he was allowed to stay. (SP47)*

Research indicates that Indigenous, Black, and racialized survivors face dual charging disproportionately (Luke's Place, 2024). Survivors who are dual charged have limited legal options. They can access duty counsel on the day of the court date if they do not have representation, seek legal help from a GBV specialty legal clinic, or apply for a criminal certificate through LAO in situations where charges could result in a jail term if found guilty. However, interviewees noted that it was extremely hard for survivors to secure a criminal lawyer using an LAO certificate. A service-provider interviewee noted a distinct pattern when helping clients: "Forget criminal lawyers. That's, like, not even an option right now. I'm trying to find a criminal lawyer for my clients, and it's...not happening" (SP08).

Survivors sometimes lost their housing due to criminal law issues. This occurred when the person causing harm was the sole leaseholder and was removed from the unit. As a result, the survivor was viewed as an unauthorized occupant without any right to the apartment. For example, a lived-experience interviewee shared that "the police came to my place, so he arrested my husband and... he actually put the restraining [no contact] order on him....For the last rent, I can stay there for a month (LE06)."

Survivors may also struggle to access rental housing following a criminal charge. A service provider explained that "if landlords ask for a background check, or whatever, all that stuff comes up, and then they don't want to rent to that woman" (SP30). This means that survivors are re-victimized across multiple systems following criminalization.

Survivors may also be overwhelmed with having to deal with criminal matters at the same time as they are facing housing challenges, including possible eviction. An Indigenous-led service provider explained the situation from the perspective of her clients:

*“I also have to get water, and the hydro has been cut off. And, you know, now that courts are involved, my mother-in-law is telling me I can’t live in this house anymore, because it’s not my house, and it’s not my space.” So, they all intersect. And going through the colonial justice system, and pleasing the Crown, so to speak, is very low on their list. (SP02)*

## Immigration Law

Interviewees reported that survivors’ immigration cases affected their housing legal needs, especially in sponsorship scenarios. A lived-experience interviewee who ended the relationship after moving to Canada stated that:

*He cancelled my status. He said, he don’t want to be a [sponsor] for me. And after I struggled for a long time, I don’t have any status. I can’t go, I can’t work, I can’t rent, I can’t apply [for] housing. (LE03)*

Survivors could have their sponsorship withdrawn due to a relationship breakdown, which jeopardized their immigration status. Loss of immigration status has severe consequences. It can result in survivors facing housing instability, chronic homelessness, issues with custody of children, and a loss of vital financial supports. Exacerbating these cascading issues are language barriers, cultural differences, and discrimination.

To apply for subsidized housing, individuals must demonstrate eligibility as a Canadian citizen, permanent resident, refugee claimant, or someone applying for permanent residency, along with other requirements. Survivors without status therefore cannot access social housing. If they do not have an active immigration application (e.g., no permanent residency application in process) or some sort of status in Canada, they are not eligible for SPP, even if they are fleeing abuse.

As one legal-professional interviewee explained:

*But the second piece that we have probably the most difficulty with is the priority housing applications, particularly because...a lot of the populations we work with don't have the prerequisite immigration status to be eligible. And so that piece is, that's a structural piece, right? Like, I mean, there's not much you can do on the legal side, I've tried to challenge it and failed several times. (SP03)*

Survivors without status are also ineligible for the Canada child benefit, which often then goes to the person causing harm if the children are still living with them. Survivors may also become ineligible for regular social assistance; in some cases, they can access emergency social assistance, but this is very limited. A service-provider interviewee explained that until a survivor's immigration status is resolved, everything else can fall apart:

*If they don't have a status, like, if they're on visitor status, or if they're on a temporary status, they're very limited in options, or if they were on a visitor status and that's expired. At that point, their main priority is sorting out their immigration and getting an extended stay...sorting that out before they can really apply for anything. (SP58)*

Immigration status was also used against survivors by the person causing harm, threatening their ability to remain in Canada. A lived-experience interviewee stated that “because my ex is trying... because he has status and my kids have status, he's trying to take my kids and kick me out to deport me to my country and to take my kids” (LE03).

Although survivors can seek other immigration pathways to remain in Canada on their own, the process is lengthy, expensive, and difficult to navigate without adequate legal support.

## Social Benefits Law

Social benefits legislation determines how much financial assistance a household will receive. Under the **Ontario Works Act, 1997** and the **Ontario Disability Support Program Act, 1997**, social assistance recipients must disclose whether they live in the same household as their partner. Couples who have co-resided for more than three months receive less income than couples who live in separate units. A legal-professional interviewee noted that the definition of a common-law relationship “doesn't align with family law, doesn't rely on...any other definition of spouse in Canada,” and as such caused social assistance recipients to lose their income due to overpayment (SP54).

This often occurred when survivors attempted to leave abusive relationships and applied for SPP. A service-provider interviewee explained that:

*One of the barriers we face is if the woman was on OW, or they both were, and they didn't disclose it to their workers, then no matter what [you have] for proof of cohabitation, you have you have to have a letter from OW, stating that you were living together, right? And so at this point, when you left, if you go to OW and say, like, "Hey, by the way, I need this, I was living with this person," they can deduct the pay, because they've been overpaying you for that amount of time. (SP38)*

These legal parameters also did not consider the realities of GBV. Often, the person causing harm forced themselves into a rental unit and survivors would allow them to stay to minimize violent occurrences. Similarly, in situations of financial abuse, the survivor was not permitted to be on any legal documents. This meant that survivors could jeopardize their financial assistance when trying to leave an abusive situation through SPP.

In addition, survivors had lost their social benefits when they returned to the person causing harm after failing to find housing. A service-provider interviewee shared an example:

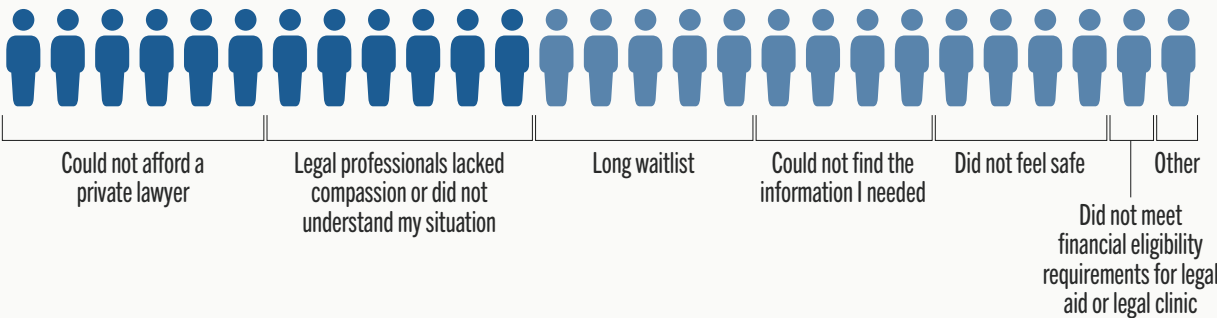
*I just [had] someone that last week was...had to return to living with her abuser and the father of her children, because there's no housing availability. And so that means now she's lost her ODSP because the partner has an income. And she's considered his spouse, even though she absolutely is not his spouse. And so that means then she also has now no income, she's not going to be able to save first and last to go somewhere else. She's not...she has no independence or no ability to gain independence. And to get housing, how is she going to go to a landlord and say, "I don't have income, but if you accept me, then I can apply for income." Right? (SP54)*

These situations left survivors feeling that they were damned if they reported a change in their household, and damned if they refrained from disclosing the makeup of their household. Losing access to social assistance pushed survivors deep into poverty and homelessness.

# Trauma-Informed Practice

Survivors often reported negative experiences when interacting with legal professionals. Lived-experience interviewees felt that their lawyers lacked training on GBV, failed to adequately explain the legal process, and dismissed their desired legal outcomes. Lived-experience survey respondents indicated that one of the main challenges they faced when trying to access legal services was that legal professionals lacked compassion for and understanding about their situation (see Figure 13).

FIGURE 13: MAIN CHALLENGES FACED BY SURVIVORS OF GBV WHEN ACCESSING LEGAL SERVICES



Interviewees explained that lawyers had a reputation for being overly clinical, focused on deliverables, and even adversarial with their clients. Survivors often felt dissuaded from seeking legal help because they worried about talking about their vulnerable experiences of violence with a professional whom they perceived as uncaring. A service provider noted about survivors that “they really struggle with disclosing, right, because there’s so much shame and embarrassment. So, it can become really difficult to disclose that really personal and private information (SP10).” Pursuing help was more often considered as a last resort for their legal challenges. A lived-experience interviewee stated that:

*I was scared to talk to lawyers because the lawyers I have talked to, even the ones in my community that I should have been able to trust, I had a kind of weird experience with. They weren’t kind or understanding or as trauma informed as I needed them to be for how sensitive my situation was. (LE15)*

Lawyers often spoke to clients using complicated legal jargon that also left them confused and unsure about what had been decided when they left appointments. This was especially stressful for survivors with disabilities and language barriers. A lived-experience interviewee shared that:

*It made me feel like I should have knowledge before speaking to her about legal stuff...I understand, we feel we want something if we're looking for a lawyer for that specific part. Maybe we should look into things. But this is just that...I don't understand how law works or how lawyers work. (LE13)*

This view was mirrored by non-legal professionals who struggled in their role as intermediaries between lawyers and their mutual clients. A service-provider interviewee from a shelter highlighted that:

*They do not work from a trauma-informed lens, oftentimes; they are stoic, they are to the point, they are stern. They're not gentle with their words. And they're also not helpful, I find that a lot of the lawyers that we are forced to work with, and I use the word "force" because it's really hard to find lawyers who are taking legal aid right now. And who are willing to navigate the family law system with us. They just they use these big legal terms and legal jargon that, like, sometimes even as staff [we] need to Google to figure out what that is, and if you ask clarifying questions, they become irritated with you. (SP08)*

As well, survivors from marginalized groups worried about possible assumptions and harmful stereotypes, and that their lawyers lacked cultural knowledge regarding the ways their experiences of violence were connected to wider systemic oppression. While survivors preferred to speak to a lawyer from their community, these were difficult to secure through affordable legal services, as providers are not permitted to recommend specific LAO lawyers. A lived-experience interviewee stated that:

*I have always asked...is there someone from Pakistan I could talk to? To be very honest, you will not understand my situation as much as a Pakistani would because they've grown up in the same culture and we've all got the same parents. It's like I tell them my mom said that [and] she's like, "Yeah, my mom said that too." They know your situation. They know the way you want to raise your kids. (LE16)*

Survivors felt worn down when their lawyers did not attempt to understand the cultural nuances of their situation or when they conveyed that their legal challenges were separate from the experiences of violence or systemic oppression.

An Indigenous service-provider interviewee stressed that:

*It's just so exhausting to have to not only...try to be teaching people these things, and it's not their job to have to teach these people things and teach them about intergenerational trauma and residential schools, things like that. And yeah, it's just too...especially when you're facing all these other hurdles and legal battles. It's almost too exhausting to try and also have to explain this to someone. (SP50)*

Although from a legal perspective some details of abuse may not be considered relevant in the tribunal setting, when lawyers dismissed survivors' experiences it inadvertently suggested that what happened to them did not matter or that they lacked credibility. For example, a lived-experience interviewee stated that “the most frustrating thing is that a lot of things that happen, they have an emotional and psychological effect. And in the legal aspect, it has absolutely no value” (LE16).

Legal professionals may lack the training to adequately spot issues when survivors were sharing their perspective, and thus were unsure how to relay GBV concerns in hearings at the LTB (see Figure 14). A legal-professional interviewee shared an example:

*They had gotten significantly [behind] in arrears, and she was facing eviction, and I should have queried more about financial abuse in that situation. But also, with not having done a ton of housing law, I didn't know exactly how to raise a DV [domestic violence] issue, potential DV issues, especially when it comes to financial abuse in those situations. (SP31)*

This fact was echoed by legal-professional survey respondents:

**FIGURE 14: PERCENTAGE OF LEGAL PROFESSIONALS WHO HAD NOT RECEIVED TRAINING ON ISSUES RELATING TO GBV**



When a lawyer did not take all of a survivor's circumstances into consideration, the survivor felt as though they were left without any agency to resolve their legal challenges. A lived-experience interviewee who wanted to prioritize an amicable separation to remain in contact with her extended family stated that:

*[My lawyer] got upset, which made me a little bit uncomfortable because I wanted him [person causing harm] to sign the paper. Because I wanted to get the custody for the kids. I was willing to not ask for much for child support. So...she pressured me to take money from him, for shelter, as much as I could, to make him pay. But I am not the type of person...I didn't want to ruin his life so my life would be better. It's not how I am; I don't believe in that. So, to me, I wanted to do full costs, 50–50 parenting, but I wanted full decision-making, and I just want to [get] enough child support to help me out. I don't want to have to take it from him...everything. So, she got...she showed upset. Like anger. Like when I told him to sign the paper before this. She was, like, "You shouldn't have done that. Now he won't pay you this." (LE13)*

This survivor felt as though she had to change direction in her family law case to suit her lawyer's needs, rather than stick to what felt right for her.

Similarly, another lived-experience interviewee lost her LAO lawyer after the lawyer refused to help her fight her complex legal case any further:

*We had a bit of a blowout, and it was bad. She basically told me that I should just give up and give him what he wants. And I said, "I'm not doing that." And she said, "Well, I can't help, you need to see somebody else." So, she pushed through for it to be somebody else. She just kind of gave up. She didn't want to do it anymore. (LE10)*

After her first lawyer applied to LAO to cease representation, the next lawyer she secured went on to successfully support her through her legal challenges. When the interviewers asked what made the difference, she explained that:

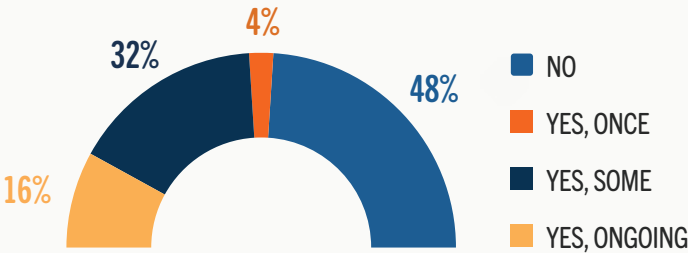
*The big difference I noticed...was just believing me. Yeah, that I wasn't coming into this, trying to work the system. I was here because I was in a situation I didn't want to be in. You know, I wasn't doing this because, hey, I'm bored — the lawyer was like, "Yeah, that's not okay. We're really going to fight for you." And just having that somebody in my corner, I wasn't as exhausted and I was able to push myself further that way. It made a huge difference of just not necessarily being validated, just knowing that I had that support. (LE10)*

In contrast, when survivors tried to contextualize their lives and experiences of violence with their lawyers, it had felt tiring to re-explain their stories and it ate into their allotted hours. Survivors of physical violence sometimes also suffer from traumatic brain injuries, which can create problems with communication, memory recall issues, and attention span (Haag et al., 2022, p. 1270). Survivors therefore often required more time to convey information in their legal appointments. However, lived-experience interviewees more often described being rushed through their legal appointments, which in turn led them to feel that they had not been listened to and that their lawyers had not given their legal matter sufficient care or attention. One lived-experience interviewee noted that:

*The only thing that I've seen with Legal Aid lawyers is that you are the last thing on their agenda. Even if you are in a hurry, even if there's a deadline, you are still the last thing on their calendar. (LE06)*

However, 48% of legal-professional survey respondents indicated that they have never received any training on the ways survivors may act, including non-memory recall patterns (see Figure 15). This suggests that lawyers may not know how to accommodate survivors' needs, which can lead to misunderstandings and client-relationship breakdowns.

FIGURE 15: PERCENTAGE OF LAWYERS TRAINED ON REACTIONS OF SURVIVORS OF GBV



As well, if lawyers rush through their legal work or appointments, they may miss important details, putting survivors' safety at risk. For example, a lived-experience interviewee shared that her lawyer served the person causing harm papers that listed her current address at a GBV shelter. She noted that while "I didn't specifically tell her 'Don't do it,' I just assumed that she would know not to put in that address, but he found out where I am at this moment" (LE13). Typically, in this scenario, GBV shelters will transfer their residents due to the risk of further harm. Although this lived-experience interviewee was able to negotiate with her workers using extensive safety planning, this error could have led to losing her spot in the shelter or put her life in danger.

It was extremely difficult for survivors to switch lawyers even in situations in which the lawyer had made significant errors in their paperwork or seemed uncomfortable with the details of their case. This is because survivors must obtain permission from LAO to change lawyers through the certificate program.

Requesting a change through LAO was also difficult for survivors from marginalized groups who had secured a lawyer who displayed prejudicial attitudes. A service-provider interviewee highlighted that “when people are dealing with lawyers who are really not treating them with respect or dignity, or even just doing their work, clients are fearful of switching” (SP20).

In contrast, the legal process did not feel as daunting when survivors were assisted by a trauma-informed lawyer. If survivors felt comfortable with their lawyer, they had more capacity to learn about the legal process and left appointments feeling encouraged by their lawyer’s expertise, tenacity, and sense of compassion. A lived-experience interviewee noted that “the lawyer that I had in the very beginning was absolutely fantastic—like, she went to bat for me, like she really pushed for the legal side of things” (LE01).

Lawyers who frequently worked with survivors described adjusting their practice to be more client centred. Despite having high caseloads, trauma-informed lawyers would allot more time for appointments and adapt their approach to survivors’ typical non-linear memory recall. A legal-professional interviewee explained that:

*Trauma-informed lawyering is very different from how people typically lawyer, you know...it means usually a lot of struggling to find the words, but like, a lot of flexibility on the part of a lawyer to make the process comfortable and good for their client, right. It could be changing how they do appointments, it could be changing...how they approach session situations. (SP31)*

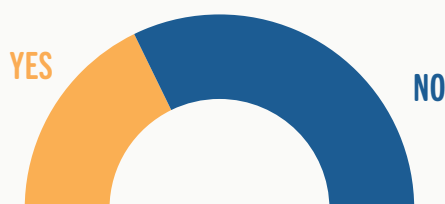
Because survivors who accessed services often faced a multitude of challenges, legal-professional interviewees reported that they had greater outcomes if they had internal access to social workers, nurses, or harm reduction workers. Helping professionals are skilled at crisis de-escalation, system navigation, and supportive counselling. Multi-disciplinary service environments were thus described as better equipped to support survivors’ multi-faceted needs and could even bolster their legal case.

A legal-professional interviewee noted that:

*I find it really, really helpful if...I'm functioning as the lawyer, and then there's a person who's, like, a social worker, or a caseworker who can...kind of be available to support the case; [it's] so hugely helpful....And this...pro-bono volunteer...the client...could not get her paperwork organized. It was like very stressful for her. And...it was just incredible....This caseworker was able to go in and, like, send us...photos of paperwork. And...it sounds so minor, but it's a really big deal. (SP24)*

Because legal services struggle with capacity issues, interviewees frequently discussed introducing social work support to help manage caseloads as well as to ensure that survivors had a detailed back-up safety plan in the event of an eviction. While legal-professional interviewees shared that working directly with a social worker was beneficial, only nine legal-professional survey respondents indicated that they had access to a social worker in their practice (see Figure 16).

FIGURE 16: PROPORTION OF LAWYERS WHOSE PRACTICE HAS A SOCIAL WORKER ON STAFF



## The Landlord and Tenant Board

The LTB is the adjudicative tribunal that resolves disputes between residential landlords and tenants. Since the onset of the pandemic, the tribunal system has operated almost exclusively online. Multiple housing matters from applicants across the province are scheduled into the same hearing block and heard by an appointed adjudicator. Hearings are attended by all parties involved in a tenancy dispute and by their representatives, as well as anonymous “observers” from the public.

The well-documented backlog at the LTB worsened after the three-month eviction moratorium at the onset of the pandemic and continued as the LTB refused to return to in-person services.

Interviewees shared that survivors faced heightened risk because of LTB delays, had difficulties with the LTB virtual hearing format, and felt that there was a clear lack of understanding from the LTB adjudicators.

## Backlog

Interviewees identified that the ongoing backlog of cases at the LTB meant that survivors had lengthy wait times to have their rental disputes heard. A lived-experience interviewee shared that when she was facing an eviction, she was given legal advice to file a tenant application at the LTB. However, she opted against pursuing a complaint due to the backlog:

*I called and they said something about six months, it takes about six months. They're still on 2020, cases from 2020, and this was September 2022. So, I didn't want to have to wait six months and be in the middle of, like, bad energy between both of us because he really wanted everybody out....So it was time to move on, I was tired. (LE07)*

This backlog becomes even more problematic when it is used to intentionally drag out the legal process or when adjudicators cannot get through all the hearings scheduled in a block. These frequent occurrences lead to an **adjournment**, in which the hearing is postponed to a later date. A service-provider interviewee explained the impact of drawn-out legal proceedings:

*I know one client who has been facing eviction for probably up to two years now that just keeps getting adjourned for either Landlord [and] Tenant Board delays, or [the] landlord asking for adjournments. So...it's just causing so much undue stress and hardship on her that she just doesn't know when it's going to be that she might just be out on the street at the next hearing, and just ongoing like that. (SP50)*

In addition to the uncertainty of whether they can remain housed, survivors may be at greater risk of further violence when rental issues related to GBV are left unresolved. A lived-experience interviewee remarked that “there’s been backlogs in the Landlord and Tenant Board—type of complaints. So, landlords get away with murder and vice versa...to a tenant, we can also be abused” (LE14).

A social housing—provider interviewee explained that it was also a problem for landlords who were aware of serious violence occurring between their tenants:

*Those people that we know we do need to evict who are victimizing other tenants, our tenants wonder what we're doing to keep them safe. It's been, you know, a year and we still haven't been able to do anything to make them safe again. (SP05)*

This caused legal-service providers to adapt their strategy to ensure survivors were not stuck in dangerous situations. A legal-professional interviewee noted that:

*I find usually kind of trying for mediation and reaching agreement before it gets through [to the LTB]...is usually our best bet just because of how harmful it can be, not to mention—I'm sure you're familiar with—the different wait times, like waiting months and months and months for hearings, and you get the hearing and you log on at nine, and you wait till one and you don't get heard and then you get adjourned to a new day. (SP51)*

If a resolution could not be reached through mediation or an agreement, survivors could give up their housing to protect their safety, as the extended and unpredictable wait times for a final order from the LTB made staying untenable.

## Virtual Hearing Format

Tribunals Ontario's *2022–23 Annual Report* noted that the move to a digital-first model had led to a “more efficient and effective operating model” and improved access to justice for service users (Weir & Gousopoulos, 2023). In contrast, interviewees overwhelmingly felt strongly that the online format excluded the most vulnerable renters from being able to participate in their hearing due to the digital divide, regional scheduling issues, and privacy concerns.

### Digital Divide

Many renters did not have access to a cell phone or computer, which is needed for participation in their hearing. This led many tenants with complex needs or who were experiencing poverty to give up on their hearing rather than try to secure a device or figure out the confusing accommodation process to request an in-person hearing.

A service provider highlighted that:

*The majority of our clients don't have access to do court proceedings online. And sure, they can come and sit in front of our computer. But that can't be guaranteed, when something is [decided] six months ago, that on this day in October that we're gonna be available to let you sit in front of our computer, and have the privacy required to do things, right. So, lot of the things that should have been proceeding through those legal matters and systems just didn't happen. Because people just couldn't do it. They didn't have the resources available to them. (SP16)*

Even if renters had access to a device, they also often faced connectivity issues or struggled while waiting long hours to be heard. For example, in Northern and rural Ontario, there were problems with consistent Wi-Fi and telephone signals. This meant that despite calling into the hearing, tenants sometimes became disconnected and missed their hearings entirely.

As well, because hearings are not allotted scheduled appointment times, attendees are required to sign on for 9 a.m. or 1 p.m. and wait for further instructions. One lived-experience interviewee noted that there were not many public spaces in her town that would allow you to spend all day using their services:

*You go to a library, you got 15 minutes on your computer, or you got, like, 10 minutes on the phone, if you're using someone's phone. I don't know where that public phone...I used to use is. Now that the [community centre] is gone. There's a place across from the library....Just where do you go? How do you do this? How do you do that? You got to find a worker. (LE05)*

Renters who relied on phones or public services to access their hearings were therefore at a disadvantage if their hearing was heard later in the day. A **tenant duty counsel** (TDC) interviewee explained that renters had to forgo their opportunity to receive legal advice from TDC and had to leave for work or child-care reasons. She shared that she often advocated unsuccessfully for adjudicators to make accommodations for renters struggling with accessibility issues:

*You ask multiple times, “Please wait another hour for the tenant to show,” or you get a tenant on there who’s offered TDC services and says, “I only have 30 minutes left on my phone, I don’t have time to get advice. Can my matter be heard next?” Or people who [say], “My child care ends in an hour, I have to leave, I didn’t know this was going to take all day,” you know, or people who just can’t.... So you’re sitting here seeing people’s literally their lives, you know, being completely upended. Much of it having to do with the improper and, and I would say, just disgusting use of technology. (SP21)*

Legal-professional interviewees also stressed that it is extremely challenging for attendees calling in by phone to participate meaningfully in their hearing, especially if they cannot hear what is going on, follow the format of the hearing, or access their evidence packages. This was even more challenging for elderly people or those who had disabilities or language barriers. For example, a legal-professional interviewee from a specialty legal clinic stated that:

*Virtual accessibility when you have interpretation is even harder, right? The challenge of interpretation for people who don’t speak the languages is... we’ve had so many hearings go awry and be adjourned and what’s interesting for us is we [lawyers] speak those languages. So, we know, real time, whether they’re not getting things or not getting interpreted properly or not. It happens more often than not. So that whole piece around this digitization, particularly in housing, our clients do not know how to use these systems. (SP03)*

The LTB is required to conduct hearings in either of Canada’s official languages—English and French. Most often, hearings are conducted in English, although tenants do have the right to request a hearing in French at any time. The LTB provides a Request for French Language Services form for this purpose.

If tenants require interpretation in other languages, the burden falls on them to arrange for their own interpreter. This may involve relying on a friend or family member—who likely lacks formal training in legal interpretation—or paying out of pocket for a professional interpreter, potentially for an entire day. Although a party can request interpretation services for other languages from the LTB, the request form is not accessible or advertised on its website and is subject to income-eligibility requirements. As well, submitting the form does not guarantee that interpretation services will be approved.

## Regional Divide

In addition to shifting to a virtual format, the LTB fundamentally transformed from a regional-based service model to a provincial one. This means that matters from across Ontario are heard in a single hearing block. Interviewees highlighted that this change led to adjudicators missing the nuances of housing challenges in different regions. A legal-professional interviewee explained:

*I do not think that an adjudicator who has only ever heard cases in Toronto can understand that, would have understood that, case in the same way. It was a Northern-specific situation. And maybe that's different in other regions...maybe other regions, there's more similarities between the southwest and the east or whatever, I don't know, but the North is a unique place. And it's a real loss to our clients....And, I don't believe...not to, you know, disparage any of the current adjudicators of the Landlord and Tenant Board, but I just don't think that they understand in the same way as the adjudicators did, who used to come here, and be in this place, and look people in the face, and hear those kinds of cases over and over again. So, I think that's a huge loss. (SP41)*

Interviewees explained that adjudicators may not understand the lack of services or severe housing infrastructure challenges in the North, where an eviction can have even more drastic consequences.

## Privacy

The virtual format of the LTB was a unique barrier for renters experiencing GBV. As multiple hearings were combined into one docket, survivors had the burden of raising what happened to them in front of a room of strangers. In addition, members of the public can log on to tribunal hearings to observe. These observers are only named by their initials and do not turn on their camera, which was unnerving for survivors. Interviewees noted that this format could be especially daunting for trafficking survivors. A legal-professional interviewee explained that “it’s not like you’re in your own separate, like, breakout room or anything. Everyone who’s on the docket for that afternoon is listening...and also you don’t really know who’s watching” (SP51). Survivors were therefore hesitant to raise identifying details or sensitive parts of their story related to GBV in a public setting and could at times disengage from the process partway through.

Although tenants can request a private hearing, legal-professional interviewees noted that these were rarely granted. One interviewee provided an example in which her accommodation request to the LTB was denied:

*Once where a tenant was alleging sexual harassment by her landlord, she didn't want to talk about that in front of a whole room full of strangers...for someone [who] just had significant anxiety and didn't want to have to speak in front of a lot of people. And the solution was just that the matter was called last. And it wasn't... private. It wasn't like on a publication ban or something. (SP41)*

As well, home was often not a safe place for survivors to access their eviction hearing. While they may have access to a device or have an accommodation request for a private hearing, “they are controlled by the partner, [who] can see what they do” (SP10). This could put survivors at further risk of violence.

## **Decision-Making**

**Adjudicators** at the LTB are “neutral” decision-makers who review and analyze evidence and make decisions on a case. Adjudicators are recommended based on identified merit, skills, and expertise related to rental housing by the executive chair of Tribunals Ontario and are appointed by the **Attorney General** (Tribunals Ontario, 2024). Adjudicators are also not required to have a legal background to be appointed.

Interviewees stressed that the lack of legal training had caused procedural issues during hearings and that the politics around who is appointed to the LTB could lead to situations of non-neutrality. One legal-professional interviewee noted that:

*That can be the hardest part of trying to give clients legal advice is, like, you have to explain that these people have no legal training, and it can be very dependent on who you get. And...that's such a hard conversation to have, especially when someone's going through, like, a DV situation, because they're...“What do you mean, it depends who I get?” And it's...it really does depend who you get, because, like, some adjudicators may be very sympathetic to these arguments. And other adjudicators may not listen to any of them, and it might not go our way. And we might have to review it so that you can get someone who's sympathetic. The next time, not even sympathetic, someone who knows the law...you might have to wait till the next time to get someone that...understands. It can be very hard to have those conversations with people because...it's so fundamentally broken. (SP04)*

Legal professionals and self-represented tenants raised human rights violations, contextual factors leading to rental issues, and the dire consequences of eviction frequently in their **section 83** arguments when seeking relief from eviction (RTA, 2006, s.83). However, they also highlighted that, in their experience, any extenuating circumstances they raised were not “properly or empathetically considered (SP31).” Another legal-professional interviewee stated that:

*I don't think it's even, like, vaguely understood by half the members...I raised human rights issues all the time. And...they're like, that's not relevant. It's **always** relevant. I have a pessimistic view on big changes there, because I think there's strategic hiring in place. And I don't think that those people that they've hired [as adjudicators], especially recently, are really interested in helping victims of domestic violence or poor people or anyone that is in the myriad categories that could be discriminated against, like, I just don't think that's any of these folks' priorities. (SP54)*

The refusal to consider “all the circumstances” (RTA, 2006, s. 83) when considering relief from eviction, specifically in the context of GBV, harmed survivors. For example, adjudicators could grant relief from eviction through a repayment plan when survivors had unknowingly accumulated arrears due to financial abuse. However, it was rare for issues such as arrears to be considered with compassion, and interviewees reported that survivors were more likely to be evicted into homelessness due to the actions of the person causing harm. Similarly, a legal-professional interviewee from an Indigenous-led organization explained that the lack of awareness around the consequences of eviction on Indigenous renters reinforced colonial violence:

*When...I have my closing...submissions, I've seen people roll their eyes, but I raise missing and murdered Indigenous women. So that adjudicator fucking knows that if he evicts my client, he is relegating her to a population that is at high risk and could very well lose her life, because she is houseless now....There's a National Inquiry that backs me up on this, the Calls for Justice, there's recommendations that have looked at this. This is real. Then you have these [landlord] paralegals who...are accusing me of playing the race card or something ridiculous like that. That's just appalling. (SP37)*

Because arguments seeking relief from eviction are heard at the end of a hearing, survivors had to listen to all the details of their case before being able to explain what impact an eviction would have on their lives. This was overwhelming and triggering for survivors, especially when considering what was at stake. It is expected that all parties participating in a hearing follow the LTB's Rules of Procedure "in a manner that is courteous and respectful of the tribunal and other participants in the proceeding" (Tribunals Ontario, 2021). However, if survivors were triggered by what was raised, they could be perceived by the adjudicator as disrupting the proceeding. A legal-professional interviewee explained that, from a trauma-informed perspective, this was problematic:

*Trauma limits your ability to engage. And so being treated respectfully at the Landlord and Tenant Board, when you might not be able to control your emotions or your reactions—like if you have PTSD, and you have high reactivity, because of what you've experienced—then you're going to experience a lot of impatience from Board members. So...being able to behave, the way you're expected to behave in a courtroom, or a hearing room is a huge barrier, like, just the expectations of behaviour. (SP54)*

Adjudicators were not kind or gentle when attendees outwardly reacted to what was being raised in hearings. Recounting details in a linear fashion was also very challenging for survivors, as trauma affects memory-recall patterns. However, because adjudicators were not known to take such circumstances into consideration, they could respond poorly when survivors struggled to be concise when sharing vulnerable parts of their story. A legal-professional interviewee stressed that "LTB members or adjudicators...have absolutely no patience for meandering. I mean, as you both know, extra meandering stories that start in the middle...perhaps they need some...trauma-informed adjudicating training" (SP24).

Not only was the impact of GBV frequently disregarded during LTB hearings, legal-professional interviewees highlighted that it was also rarely acknowledged in the LTB's written decisions. Even when adjudicators decided in favour of a tenant experiencing GBV, they would not explicitly mention that the extenuating circumstances included GBV. This contributes to a wider problem, as the law is based and built on precedents.

# DISCUSSION



The connection between gender-based violence (GBV), housing instability, and a lack of access to justice is significant, yet it is largely unexamined in Ontario. This mixed-methods feminist-action research action project therefore sought to fill this knowledge gap by asking the following question: How do survivors of GBV experience the process of securing and maintaining permanent housing in Ontario? That is, how well do the legal context and housing services meet survivors' needs?

The research findings emerged through a rigorous analysis of data gathered through interviews with lived-experience experts and service professionals as well as through jurisdictional and service scans. Qualitative data was further corroborated by surveys and the recommendations outlined by attendees of a policy roundtable.

## Survivors' Housing Journey

### Cycles of Insecurity and Homelessness

Prior to experiencing violence, the project's lived-experience interviewees and survey respondents most often lived in rental housing. However, the experience of violence had forced them out of their homes and into prolonged cycles of housing insecurity and homelessness lasting years, not just months.

This reality mirrors previous homelessness research, which showed that low-income families, newcomers, and racialized women in urban centres in Ontario faced continual movement on the housing continuum as they struggled to maintain permanent housing (Paradis, 2017, p. 182). This is known as “**structural violence**,” which occurs when policy and legislation barriers “perpetuate further oppression of those already at the margins” through our social systems (Mantler et al., 2020, p. 1208). The findings demonstrate that existing social safeguards fall short in protecting renters facing GBV and even push survivors into precarious and dangerous living situations.

In Ontario, the Residential Tenancies Act, 2006 (RTA) does not adequately account for the unique housing challenges created by GBV, leaving survivors legally and financially responsible for damage or arrears caused by the person causing harm. In addition, the RTA offers limited pathways for survivors to remain safely in their homes, especially within joint tenancies, where terminating the lease often requires survivors to leave entirely, while the person causing harm remains. As a result, survivors are more likely to be pushed out of their homes than supported to stay, which leads to long and unstable housing journeys. Consistent with research conducted in Alberta, the act enables the legal facilitation of homelessness through eviction, thereby undermining survivors' security of tenure (Gander & Johansson, 2014).

As the National Right to Housing Network (2023) states, “while the home can unquestionably be a site of extreme violence for many women and gender diverse people, the loss of housing can remove an important buffer from other forms of harm, exploitation, and marginalization” (p. 2). Survivors fell into cycles of both visible and hidden homelessness, ranging from unsheltered living to temporary stays in hotels or with acquaintances.

The experience of homelessness was violent, isolating, and traumatizing, and was disproportionately faced by racialized survivors, those with complex needs, and survivors living in rural areas. Because of an under-resourced, increasingly unaffordable housing system, it was extremely challenging for survivors to escape homelessness. Survivors therefore reluctantly sought help from formal services, yet when they did, they were likely to be turned away due to ongoing capacity constraints. It could take survivors at risk of homelessness several weeks to find an available shelter bed, which only put them at more risk of severe violence.

Often, the only available space was inaccessible for survivors with disabilities, who were then forced to choose between their dignity or staying in situations of violence. A lack of accessibility may also account for the overrepresentation of women, women-led families, and gender-diverse people with disabilities who experience homelessness (WNHHN, 2022, pp. 24–26).

## The Role of Shelters, Transitional Housing, and Supportive Housing

When survivors did manage to access a space in a shelter, they faced an overwhelmed system in which staff were stretched thin and faced significant burnout. This led to inconsistent help and, sometimes, consequential mistakes filling out required paperwork, which caused survivors to lose housing opportunities. Survivors also faced bullying and discrimination, and had witnessed violence and suicide while living in the shelter. For survivors facing chronic homelessness, such experiences discouraged them from seeking help from formal homelessness services again.

Experienced shelter workers explained that, although they had once housed shelter residents within two weeks, in the context of an affordability crisis, those days were long gone. The key barriers to shelter exit identified by the interviewees were consistent with existing literature: a lack of affordable units in the private rental market, an excessive number of rental application requirements, and discrimination from prospective landlords. This meant that survivors could not leave the shelter system within their allotted length of stay or leave unsafe situations when they needed to (Burnett et al., 2015, p. 12; Maki, 2020, p. 23; O'Campo et al., 2015, p. 15; Ponice et al., 2012; Schwan et al., 2020).

These ongoing barriers to leaving unsafe situations were described by experienced workers as having drastically worsened since the coronavirus pandemic. Service providers also noted that Indigenous survivors disproportionately faced discrimination from landlords, making them more vulnerable to exploitation and prolonging their experiences of homelessness.

One of the emerging issues raised by the interviewees was how difficult it was for survivors to meet the strict eligibility requirements of the Special Priority Program (SPP), which permits survivors fleeing IPV or trafficking to be put to the top of the social housing waitlist. This indicates that the Housing Services Act (HSA) does not adequately reflect the realities of GBV or of the housing crisis, including the challenges low-income survivors have when attempting to secure a lease, the unique issues caused by financial abuse, or the prevalence of landlord/roommate abuse in a housing landscape that features a reported 50% increase in shared accommodations (Kassam, 2024).

As well, even if a survivor was deemed eligible for SPP, the length of time it took to receive an “urgent” social housing offer through the program had significantly lengthened after the pandemic due to long social housing waitlists. This backup had forced shelters to further adjust their role as emergency providers to become default housing providers simply because there was nowhere else for their clients to go. As noted in other research, shelters are “routinely the only place where women can get support for a range of needs,” and, as such, now occupy a space on the housing continuum that they were never meant to (Burnett et al., 2016, p. 522).

Survivors who managed to secure specialized transitional housing had better long-term outcomes, including being more likely to achieve housing stability. This was because they had more time to work through their trauma with trained workers and regain their sense of independence. However, without adequate core funding, there is a severe lack of transitional housing, especially in Northern and rural communities. Specialized transitional housing for survivors could often only be accessed through a shelter referral, which restricted access for survivors who were unable to access shelters.

As with transitional housing, supportive housing was described by interviewees as improving survivors with disabilities or complex needs’ chance at achieving long-term housing stability. This was consistent with research which states that “permanent supportive housing significantly improved housing stability for residents with little to no negative effects” (Aubry et al., 2020, p. 356). However, because there is a severe lack of supportive housing in Ontario, demand for space is high and there are extensive waitlists, some lasting several years.

Service providers reported an increase in the number of survivors with complex mental health needs and substance dependencies accessing their services. Yet as services struggled to keep up due to chronic underfunding, service providers acknowledged that they could not provide the time and intensive care their clients with complex needs required. This reality only further overwhelmed shelters, hospitals, and community services. A lack of supportive housing and outreach services forced clients with complex needs into social housing or private market rentals, where they encountered landlords who were not equipped to provide supportive care. While the housing system is often described as a “revolving door,” the research findings suggest that when it comes to the most vulnerable survivors, it actually is a locked door.

## Few Other Options

The affordable housing crisis, which is driven in part by the financialization of housing, worsened these challenges. As a result of soaring market rents that far outpace income levels, many survivors were left with few viable options, as there were long waitlists for social housing and unsustainable private rentals. Survivors were therefore forced to abandon their housing priorities and were relieved if they could secure anywhere to live.

A service-provider interviewee highlighted that survivors would ignore their sense of safety and well-being to secure an affordable unit: “They’re kind of forced to do it, because it’s the cheapest thing available. And it’s available” (SP34). Stigma, rigid eligibility criteria, and substandard living conditions deepened survivors’ housing insecurity and the likelihood of experiencing homelessness.

Even if a survivor managed to secure a rental unit following their experience of violence, it did not mean they had achieved housing stability, as they lived with the constant fear that they could lose their housing at any moment. Lived-experience interviewees worried about keeping up with unaffordable rent while managing their bills, and about the possibility of facing new rental housing issues.

Safety was identified as a top housing priority for survivors, yet they frequently faced eviction threats and unsafe living conditions. As also noted in *The Pan-Canadian Women's Housing & Homelessness Survey*, survivors were increasingly subjected to landlord and roommate abuse after being forced into shared rental accommodations, as these were often the only units they could afford (Schwan et al., 2021, p. 26). Tutty and colleagues (2014) write that “homelessness is not only rooflessness”: when a home feels unsafe, unlivable or precarious, it is an extension of homelessness (p. 1499).

Ontario's affordability crisis had also trapped survivors in poor living conditions. Yet survivors were unlikely to voluntarily leave rental units, even when living in dreadful conditions, because market rent was significantly higher than what they were currently paying. A lack of affordable units disproportionately affected lone-parent survivors and households that rely on social assistance. Lived-experience interviewees described feeling that they had no choice but to bear the consequences of inadequate or dangerous living conditions — if they didn't, they risked facing homelessness or returning to the person causing harm. As noted by MacDonald and Tranjan (2022), in most Canadian cities, minimum-wage earners and social assistance recipients are extremely unlikely to escape situations of **core housing need** (p. 15).

Many lived-experience interviewees reported experiencing several of the same rental issues faced by the wider renter community, including bad-faith evictions, above-guideline rent increases, and maintenance issues that rendered their tenancies unsustainable. However, survivors found that their access to justice was severely limited. As similarly described by the National Right to Housing Network & Women's National Housing and Homelessness Network (2023), women, girls, and gender-diverse people are “unable to access legal supports, advice, or representation that would assist them to prevent eviction, navigate the process, or seek redress for illegal acts by landlords and others” (p. 24). Survivors of GBV were unlikely to seek housing legal assistance because they had too much on their plate, feared judgement from legal professionals, or felt that losing their home was inevitable.

## The Landlord and Tenant Board

Lived-experience interviewees explained that the Landlord and Tenant Board (LTB) backlog meant that their matters were not heard as urgently as their situation required. Survivors could not afford to wait months or years to address their severe or unsafe rental issues. As a result, they more frequently chose to leave their homes when facing eviction or landlord/roommate abuse.

Survivors also lacked knowledge of their rights as tenants, faced limited access to affordable legal help, and were forced to self-advocate or rely on non-legal supports for rental housing challenges. These challenges had, at times led to survivors relying on inaccurate legal information, further putting their tenancies at risk.

Survivors also encountered procedural challenges at the LTB, including long delays, inaccessible hearing formats, and a lack of trauma-informed and GBV-aware adjudication. Landlords and LTB adjudicators frequently failed to recognize the impacts of GBV, which meant that survivors rarely escaped eviction for GBV-related rental issues. While there is limited data directly linking LTB hearings to GBV, ACTO's internal Tenant Duty Counsel Program data indicates that female-led households with children and renters with disabilities faced higher rates of eviction due to increasingly large amounts of rental arrears—that is, they faced the most severe repercussions of the housing crisis.

Intersecting legal issues across family, criminal, and immigration law, and income-support systems, created additional obstacles, usually due to litigation abuse, complications arising from mandatory dual charging, or sponsorship breakdown. Law enforcement, courts, and tribunals were not adequately trained on how intersecting legal issues can be used as forms of abuse. This caused survivors to be doubly victimized and lose faith in the legal system entirely.

## Lacking the Anchor of Home

Ongoing housing instability prevented survivors from fully experiencing a sense of connection to their new homes. Instead of finding security or beginning to heal, many survivors remained trapped in a heightened state of hyper-vigilance, fearing another forced move, eviction, or repeat experience of violence. Survivors described being stuck in survival mode, unable to rest or feel grounded.

Service providers echoed this reality, noting that housing instability was often compounded by the continued threat of reinvolverment from the person causing harm. Survivors sometimes let the person causing harm move back in, were sometimes found by the person causing harm, or had to reconnect with this person due to pressure from children. These situations often escalated, leading to police involvement, emergency services, and, ultimately, another eviction.

Housing instability put every other aspect of a survivor's life on hold. Without stable housing, survivors had no capacity to focus on other circumstances such as employment, education, parenting, or recovery. One survivor explained that, without housing, there's no mobility and no way to move forward, because stable housing is the very foundation of stability and self-actualization (LE12).

Service providers pointed to a deeper systemic problem: historically, renters might have moved from social housing into the private rental market or, eventually, into home ownership. However, the current lack of rent regulation in the private market has pushed the entire housing continuum (see Figure 3 in the "Findings" section) to the point of stagnation. The severe lack of affordable housing options and an overwhelmed shelter system led survivors of GBV back into precarious and dangerous situations, including returning to the violent situation they had left. A service-provider interviewee summarized the overlap between the housing crisis and the cycles of violence:

*It's really a housing crisis, it really is. Because if you don't get housing, and you have to go to market rent...and market rent, nobody could afford market rent! Never mind people who are, you know, receiving social assistance—landlords really look down on that. There's a lot of discrimination and aggressiveness as soon as they realize that that's your income. And many of the clients don't have, you know, good credit scores and so that kind of takes them out of the running as well. And then what happens... "So I don't have any more time in shelter, and I don't have subsidized housing, and I can't get into market rent, so where do I go? Back to my abuser." And that's how the cycle of violence perpetuates itself. (SP08)*

## Themes Emerging From the Research

### External and Internal Pressures on Survivors' Housing Journeys

Across the housing system, survivors of GBV encounter pervasive pressure and force that shape their housing journeys. Survivors described being routinely pushed, coerced, or cornered into making housing decisions that did not align with their safety, healing, or other needs. This pressure emerged across all levels of support, including from shelters, transitional housing programs, support workers, lawyers, and landlords. Even institutions and service providers meant to support survivors were themselves constrained by systemic pressure, resulting in compromised service delivery.

Shelter service providers, burdened by overwhelming demand and limited resources, often experienced external and internal pressures that interfered with their ability to provide appropriate support. Shelter workers deal with emotionally taxing work, leading to burnout, compassion fatigue, and vicarious trauma. As well, low wages often mean that workers are forced to manage their own survival by taking on second jobs, which further erodes the quality and sustainability of care they can give. As one worker noted:

*When you think about the work that we do, and the emphasis on self-care and avoiding burnout, and I could go on about that, but now we have to take on a second job, probably within this field too, because what else are you going to do with this education? Now we have doubled the vicarious trauma, and we have no time for that self-care piece, you're just supposed to keep soldiering on. (SP38)*

Survivors felt pressured into accepting any housing unit regardless of it being unsafe, unsuitable, or unaffordable because of the threat of losing their shelter bed. Survivors had received ultimatums that left little room for negotiation or agency: accept this unit—regardless of condition, safety, or affordability—or face homelessness. Some survivors were told to feel grateful for any offer, even if the housing posed risks to their values or mental health, endangered their children, or placed them back in proximity to the person who caused them harm. As one survivor put it:

*So, when I went for my meeting with at the shelter, they said, “Well, the only thing we can do is put you in this motel.” And I was like, so you’re gonna put me in a room that’s in really close proximity to my ex who abused me? “Well, that’s the only choice.” And I’m like, how does that make any sense? (LE22)*

This pressure is compounded by rigid rules and eligibility requirements within social housing programs. Stringent social policies often forced survivors to choose between safety and stability or to accept housing options that failed to meet their needs. These impossible choices, while not intentionally harmful, mirror the dynamics of coercion and control that define abusive relationships.

For example, interviewees noted that in rural and Northern regions, survivors are often forced to move away from their communities to access housing, separating them from cultural supports and intensifying their trauma. As stated in the rights claim raised by the National Indigenous Feminist Housing Working Group (2022), separation from community is especially harmful for Indigenous women and Two-Spirit and gender-diverse people:

*Given that safe and adequate housing is the cornerstone of cultural restitution, community, and kinship building within Indigenous communities, protection of the right to housing is critical to realizing the right to culture for Indigenous women, Two-Spirit, and gender-diverse people. We, as advocates from the Working Group, reiterate that these rights are indivisible, and that colonial practices that violate these rights are ongoing despite decades of inquiry by international and national human rights bodies. (p. 17)*

A lack of Indigenous-led, culturally safe, and accessible services means that Indigenous survivors may be forced to leave their communities and lands despite the increased risk of isolation and violence.

The cumulative effect of these pressures is a system that pushes, rather than supports, survivors. Survivors need time to heal, real options to choose from, and compassionate, culturally safe support from workers who themselves are also supported and resourced. Without foundational shifts, housing systems will continue to replicate the very dynamics of abuse they aim to interrupt, pressuring both those fleeing violence and those working to support them.

Choice and Agency

The power and control wheel is a model developed by survivors who were asked what material they wanted covered in mandated education groups for abusers or those who caused harm. Survivors shared their experiences of navigating abuse tactics and the result it had on their daily lives. The eight behaviors positioned around the power and control wheel were those that facilitated an ongoing pattern of violence, coercion, and abuse. Power and control are the universal motivators that link the abusive behaviors together (Domestic Abuse Intervention Project, 1984). Those causing harm may use one or a variety of tactics to control the survivor (see Figure 17).

FIGURE 17: POWER AND CONTROL WHEEL



SOURCE - DOMESTIC ABUSE INTERVENTION PROGRAMS (DAIP), 1984

Interviewees shared many examples of the direct ways in which these GBV tactics had led them down a path of homelessness and housing instability, causing significant trauma and emotional turmoil. The housing crisis was described as adding fuel to the central themes of abuse—power and control—as the person(s) who caused harm was emboldened by the knowledge that survivors could not afford to leave.

Rental housing was weaponized against survivors in many ways. Before the survivor left home, the person causing harm threatened to, or had intentionally stopped, paying rent to force the survivor from their home. Or, they damaged the unit beyond recognition and left the survivor accountable for the costs incurred, or used astronomical rental rates and the risk of homelessness as threats, instilling so much fear in survivors that they would not leave. When this happened, survivors experienced escalating and more severe abuse, further contributing to epidemic rates of GBV.

After being forced out of their home, survivors experienced frequent setbacks as they tried to move out of homelessness and make their way along the housing continuum. Survivors experienced a lack of agency and choice in what happened to them, frequently relinquishing their needs and sense of dignity to secure a rental unit. This was seen most egregiously in the exploitation, discrimination, and landlord abuse survivors endured.

Buhler & Tang (2019) noted that there is an inherent power imbalance between landlords and tenants, with landlords having exploited their power over survivors through sexual harassment, threatened evictions, and illegally locking tenants out of rental units (p. 213). The carousel of issues survivors faced when securing and maintaining their rental housing led interviewees to discuss their rental housing experience using the same language in which they discussed GBV.

If a survivor tried to assert their housing legal rights at the LTB, they again faced an intimidating system in which they experienced stigma, prejudice, and victim blaming. The housing legal system had become another site of oppression, especially for marginalized low-income survivors. It was more likely that survivors would voluntarily give up their rental unit than participate in a tribunal system that was unlikely to treat their experiences of GBV with compassion or understanding. If they had been evicted due to the actions of the person causing harm, or because of landlord abuse, survivors had internalized the message that what had happened to them was their fault.

Without meaningful access to justice, the cycle of violence was inextricably linked to the cycle of homelessness. The housing journey of survivors can therefore be characterized as an infinite loop of insecurity (see Figure 18).

FIGURE 18: THE INFINITE LOOP OF INSECURITY FACED BY SURVIVORS OF GBV



## The Role of Luck

The research showed that successfully escaping GBV into safe housing could not be attributed to help-seeking patterns, individual resiliency, or choice. Survivors were met with constant capacity issues, program denials, and legal challenges with no solution, which meant they often exhausted all their options before being forced into homelessness. When survivors secured housing, they often described their success as a matter of luck or providence (i.e., divine guidance or care). As one lived-experience interviewee noted:

*Sometimes I think it's better to stay with the abuser. Because if you're not strong enough like me... I mean, I don't even take the credit that I'm strong enough, it's by God's grace. I wasn't different from my other colleagues. When we became homeless and using drugs. No, I wasn't better than them. No, I wasn't better and I was never better than them. I wasn't better than the ones that turned into alcoholics. No, I wasn't better than them. Neither was I better than the ones that prostitute just to take care of [themselves]. I wasn't better than them either. I just had the grace of God, not that they didn't have the grace of God. But I guess everybody's journey is different. And I was lucky. (LE19)*

However, structural violence is not random, nor does it occur by chance. Current systems are built to support survivors in mostly reactive, temporary ways. Despite laws intended to support survivors of GBV, access to housing and related resources is inconsistent and largely dependent on available capacity or discretionary decisions made by individuals within those systems. Many survivors emphasize the importance of being in the right place at the right time, highlighting how critical it is to encounter specialized, well-funded services during a survivor's housing journey. Unpredictability creates dysfunctional systems in which support feels arbitrary and housing is perceived not as a right, but as something secured only by chance.

## The Right to Housing

Despite the Canadian government recognizing housing as a human right, access to justice for those facing housing insecurity, especially survivors of GBV, remains deeply flawed. While security of tenure is considered the cornerstone of the right to housing, it cannot be achieved without access to justice. As stated by the National Indigenous Feminist Housing Working Group (2022), the “right to justice upholds human rights commitments Canada is bound to and ensures pathways to justice for rights holder, in case of violations” (p. 20).

Each province has constitutional authority over housing legislation, including rental housing policies, programs, and directives. Following the passing of the **National Housing Strategy Act**, advocates expected provinces to take a human rights-based approach to housing, including considering the housing needs of systematically dispossessed, discriminated against, and marginalized individuals or groups, including survivors of GBV.

However, in 2021, when Bill 252, the Housing is a Human Right Act, 2021, was introduced to detail what that right meant for Ontario, it failed to pass and become legislation. Substantive progress will therefore be challenging without the province's formal recognition of the right to housing.

In Ontario, although legal aid is available, it is limited or unavailable for housing-related cases. Even when survivors attempt to assert their rights, the lengthy delays in having cases heard and decided can render legal remedies meaningless, especially for survivors in urgent need. This gap between the recognition of the right to adequate housing as a human right and the practical ability to claim and enforce that right leaves many survivors without protection.

## Conclusion

Without immediate attention and intervention, low-income renters experiencing GBV will continue to face heightened risks of chronic homelessness, exploitation, further violence, and femicide. Ultimately, the lack of trauma-informed protections within Ontario's housing and legal systems means that survivors experience housing not as a refuge, but as an extension of harm.

Housing services are often reactive, rather than proactive, responding only after a crisis has occurred. While a shift toward trauma-informed practices is important, simply applying these approaches within an already reactive system is not enough to address the ongoing crisis of GBV. Meaningful change requires a proactive, systemic response that prioritizes prevention, stability, and long-term support. Access to stable, affordable housing not only protects against further harm, but is crucial for survivors' recovery and the restoration of their autonomy.

# POLICY RECOMMENDATIONS



Survivors face many of the same housing challenges as low-income renters across Ontario: they struggle with a lack of affordable rental units, low vacancy rates, and stagnant income. These challenges disproportionately affect survivors by increasing their vulnerability to violence and making it more difficult to leave unsafe living situations. In addition, survivors face unique challenges navigating the housing and legal systems, and when securing and maintaining stable housing.

The following 17 multi-system, multi-pronged policy recommendations were created in consultation with key service provider stakeholders and lived-experience experts during the research process and policy roundtable event. The recommendations aim to tackle the housing crisis faced by survivors through improving their long-term housing stability and breaking down significant barriers to housing stability in the justice system.

## 1. Declare Intimate-Partner and Gender-Based Violence an Epidemic

The rate and severity of intimate-partner violence (IPV) and gender-based violence (GBV) continue to rise across Canada, with overall rates of police-reported family violence increasing by 17% and IPV by 12% between 2018 and 2023 (Statistics Canada, 2024c). As well, the Canadian Femicide Observatory for Justice and Accountability indicated that the rate of femicide increased by 27% between 2019 and 2022 (Dawson et al., 2023, p. 5).

In response to this growing crisis, and as recommended by the Renfrew County inquest (Office of the Chief Coroner, 2022) into the 2015 murders of Carol Culleton, Anastasia Kuzyk, and Nathalie Warmerdam, and the Mass Casualty Commission (Joint Federal/Provincial Commission into the April 2020 Nova Scotia Mass Casualty, 2023) into the April 2020 Nova Scotia mass casualty, all levels of government must formally declare IPV an epidemic.

A public declaration acknowledging the prevalence of GBV would compel all levels of government to increase funding to end GBV in a way that is “commensurate with the scale of the problem” (Joint Federal/Provincial Commission into the April 2020 Nova Scotia Mass Casualty, 2023, p. 8). As well, “it should prioritize prevention and provide women survivors with paths to safety,” which must include adequate funding for the housing and homelessness sector. Because survivors face unique rental housing challenges because of GBV, the provincial government must also increase funding for housing legal services to support survivors’ right to security of tenure. In addition, a declaration of IPV as an epidemic could be used immediately in courts, tribunals, and administrative bodies as evidence that adjudicators must consider the severity of a survivor’s situation when making their decisions. This has the potential to enhance survivors’ access to justice.

To date, Nova Scotia, British Columbia, and 100 Ontario municipalities have declared IPV an epidemic.

## 2. Re-establish the Ontario Roundtable on Violence Against Women

As a first step in addressing the GBV epidemic, the provincial government should reconstitute the Ontario Roundtable on Violence Against Women as the Ontario Roundtable on Gender-Based Violence. The government must meaningfully engage with experts who have specialized knowledge on GBV for strategic advice on legislative reform and service improvements, and to best tackle emerging issues for survivors.

## 3. Increase Funding for Indigenous-led Solutions to the Housing Crisis, Including the Expansion of Indigenous Housing and Supportive Services

The province must allocate targeted, multi-year funding to Indigenous communities and organizations to develop and sustain culturally appropriate housing and supports. Funding mechanisms must be flexible and grounded in Indigenous governance and accountability structures. Increased Indigenous-led supportive services and Indigenous housing, including shelters and transitional housing, would provide a response that understands the needs of Indigenous survivors and the depth of systemic trauma Indigenous communities have experienced as a result of colonial violence.

Indigenous-led services provide trust, cultural safety, and continuity to Indigenous survivors, who often avoid accessing mainstream supports due to widespread experiences of racism and discrimination. Indigenous housing services also tend to have a broader understanding of GBV that is not limited to IPV. They provide wraparound services rooted in Indigenous values, philosophies, and knowledge systems.

Investing in Indigenous-led housing and services is not only a matter of equity—it is a direct response to the National Inquiry into Missing and Murdered Indigenous Women and Girls and the legal imperatives listed in the Calls for Justice (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019). Embedding these Calls into Ontario's housing and GBV strategies is essential to ensuring the safety, dignity, and rights of Indigenous women, girls, and 2SLGBTQ+ people affected by GBV. It is an essential step toward reconciliation, justice, and safety for Indigenous survivors.

## 4. Increase the Supply of Transitional Housing, Including in Rural and Northern Locations

Shelters and transitional housing serve critical needs for survivors; interviewees shared numerous accounts of the challenges of chronic underfunding and the lack of sufficient spaces to meet demand. Service providers also raised concerns that a narrow focus on expanding permanent housing stock may be detracting from the concurrent pressing need for the expansion of emergency housing and transitional housing.

Transitional housing was highlighted as being particularly important for survivors' long-term housing stability. GBV survivors greatly benefit from the ability to access transitional housing as a pathway out of shelters and toward independent housing. Transitional housing allows for a longer length of stay, helping survivors to access supportive services, develop a sense of community with residents in similar circumstances, and heal from their trauma.

Despite its importance, transitional housing receives very limited government funding and must often rely on fundraising to operate. The shortage of transitional housing is particularly acute in rural and Northern locations. Increasing the number of transitional housing options, and providing core stable and predictable funding, will be critical in enabling survivors to move toward permanent housing. As well, it will relieve the pressure on the shelter system, where residents are increasingly forced to stay for longer periods of time due to the affordability crisis.

## 5. Increase the Supply of Specialized Supportive Housing for Survivors

The lack of supportive housing has led to survivors with disabilities and complex needs struggling to remain housed. Social housing providers and market landlords have neither the training nor the resources to support people with complex needs, resulting in poor outcomes for tenants and housing providers.

Survivors with complex needs are best served by specialized supportive housing services, as these can better respond to their needs and address trauma-related mental health concerns. Increasing the provision of supportive housing would also ensure that survivors with complex needs are protected from a heightened risk of experiencing further violence, discrimination, and homelessness. Access to supportive housing should include a priority designation for survivors with complex needs who have faced chronic homelessness, including the experience of hidden homelessness.

The expansion of supportive housing units must also occur alongside the expansion of supportive housing outreach services to serve survivors with complex needs who are unsheltered or live in social or market housing. An expansion of accessible services would improve housing stability and prevent further harm.

## 6. Reform the Housing Services Act and Special Priority Program to Reduce Barriers for Survivors

Social housing is an essential housing option for survivors who have a difficult time finding affordable housing in the private rental market. Social housing may be the best permanent, affordable housing option for survivors in particularly vulnerable situations, such as lone parents, those who rely on social assistance, or people with disabilities. However, housing legislation that determines access to social housing units and inclusion in the Special Priority Program (SPP) is exclusionary and overwhelming for survivors who are in vulnerable situations. These barriers in the social housing system run counter to its intended goal of prioritizing the housing needs of people in crisis.

The following reforms to the Housing Services Act and the SPP would better reflect the realities of GBV and the housing crisis:

- Broaden the permissible forms of abuse under the SPP to ensure that survivors of harassment, stalking, roommate violence, and landlord abuse can escape unsafe living situations.
- Eliminate proof of cohabitation from the list of required documents. This change would reduce administrative burdens, lessen safety risks to survivors in acquiring proof of cohabitation, and ensure that those who fled their homes without documents or who have faced financial abuse are included in the program. As well, the current requirements exclude some of the most vulnerable survivors, such as those living in encampments or in hidden homelessness, because they do not have an address.
- Because survivors often postpone seeking help from formal services, expand the timeline for SPP eligibility from three months to one year to allow survivors more time to apply for the program.
- Provide an exemption for outstanding arrears or damages owed to a social housing provider if these were accumulated as a result of abuse.
- Include GBV as a permissible reason for absence from social housing unit for 60 consecutive days or 90 cumulative days within a calendar year, using the same language as that used for an absence for medical reasons.
- Establish a specialized regional Ombudsman's unit to respond to social housing issues, including crisis transfers or lack of accommodation for survivors experiencing GBV in their homes.

## 7. Restore Rent Control

Lived-experience interviewees considered affordability to be the greatest barrier when it came to leaving violent situations and securing new rental housing. A lack of rent control on units constructed after 2018 directly contributes to rising rents and discourages renters from seeking new accommodation. It also means that survivors cannot afford to leave home when experiencing violence, and that, if they attempt to leave, they find themselves vulnerable to exploitation and further harm.

Rising rents have also created immense pressure on the homelessness sector, with shelters housing residents for longer stretches of time. This has, in turn, led to shelters increasingly turning away survivors needing help.

The provincial government must restore full rent control to ensure that survivors can leave situations of violence and move quickly into safe, affordable units.

## 8. Increase Social Assistance Rates

Current shelter allowances under Ontario Works (OW) and the Ontario Disability Support Program (ODSP) are not enough to cover rent in the private market. For example, the maximum shelter allowance for a family of two is \$642 per month under OW and \$915 per month under the ODSP (Ministry of Children, Community and Social Services, 2024). This is well below market-rent rates in almost all Ontario urban centres.

This means that survivors are forced to use other sources of income, including the child tax benefit, to pay their rent. Survivors who rely on OW or the ODSP are therefore unable to secure private market units and are forced to return to abusive homes or move into homelessness. This greatly affects survivors with disabilities, lone parents, precarious-status survivors, and those with complex needs, as they are more often forced to rely on OW or the ODSP as their only source of income.

To address the extreme experiences of poverty and homelessness that survivors face after being forced from their homes, current social assistance rates must be at least doubled to account for inflation.

## 9. Build Credit Scores and Rental History for GBV Survivors

In addition to the financial constraints of high rents in the private market, many survivors lack a credit history and rental history. Survivors who were full-time parents or caregivers, or who experienced financial abuse, may be unable to provide credit scores or references and will therefore be unable to secure housing in the private rental market.

An implementation of specialized programs that provide guarantor services in rental applications or that explore mechanisms to build credit scores would be crucial in ensuring that survivors can reach housing independence.

## 10. Expand and Extend the Canada-Ontario Housing Benefit program

Housing constraints are one of the main reasons survivors stay in abusive relationships. Portable housing benefits have proven successful in helping survivors escape homelessness and maintain housing in the private market. However, the Canada-Ontario Housing Benefit (COHB) program is a closed housing subsidy, which means it is only available to applicants who are identified as part of a priority group by their service manager. Survivors must be approved for the SPP for housing and be currently on a waitlist to receive an offer from the COHB.

The COHB should be expanded to include applicants who have been deemed ineligible for SPP. Without also adjusting the SPP eligibility rules, many survivors facing violence will continue to be excluded from any sort of housing help. The Canadian and provincial governments must also commit to extending the COHB beyond March 2029 to ensure that current recipients can maintain stable housing.

## 11. Rebuild Financial Pathways for Survivors of Violence

Survivors require access to meaningful financial resources to re-establish their safety and help them heal after an experience of violence. The 2019 dismantling of the Criminal Injuries Compensation Board and the limited capacity of its successor, the Victim Quick Response Program Plus (VQRP+), have left critical gaps in emergency financial support for survivors of GBV in Ontario. The VQRP+ offers only narrowly defined assistance with strict eligibility criteria, in terms of eligible expenses and limitation periods that is tied to the nature of the offence and engagement with the criminal legal system.

While some survivors can access local housing stabilization funds or rent banks, these are not universally available. The result is a fragmented and inadequate system that fails to meet the diverse financial needs of survivors.

Ontario must establish a survivor-centred, trauma-informed financial assistance program. This program must be capable of addressing urgent needs such as relocation, medical care, counseling, and basic living expenses, but also longer-term and more nuanced needs such as the loss of wages, and pain and suffering. To be effective and efficient, this program must have a simple application process, increased funding thresholds and periods of eligibility, and timely delivery. Survivor-serving community agencies are well equipped to support the administration of such a program.

Without this reform, survivors will continue to bear the economic consequences of violence, including disrupted employment, housing instability, legal costs, and intergenerational impacts.

## 12. Address the Limitations of the Residential Tenancies Act, 2006

Interviewees raised concerns that the Residential Tenancies Act, 2006 (RTA) fails to provide adequate protection for survivors experiencing violence in their rental housing, thereby increasing the likelihood of eviction. Survivors faced financial and legal challenges when attempting to sever a joint tenancy. When LTB adjudicators considered relief from eviction under section 83 of the RTA, there was limited consideration of the impact of eviction on a survivor or how their experiences of violence may have resulted in a housing legal situation.

In addition, the RTA does not always align with the Family Law Act (FLA), creating gaps that left survivors of GBV at risk of homelessness or coercion.

### **Introduce a Mechanism to Legally Sever Joint Tenancies**

The N15: Tenant's Notice to End my Tenancy Because of Fear of Sexual or Domestic Violence and Abuse has proven highly effective in allowing survivors to exit a lease. Landlords generally do not oppose the use of the N15 notice because there is a financial incentive to having tenants leave a unit.

There is no equivalent mechanism for survivors who want to stay in their housing unit and remove the person causing harm from the lease, however. A forced move often leads to economic precarity, homelessness, and challenges accessing housing in the context of high rents and low vacancy rates. The ability to legally sever joint tenancies would therefore be an important step toward allowing survivors to safely stay in their homes, as well as ensuring that they could maintain housing stability and their community ties.

### **Use Section 83 of the RTA for GBV**

Section 83 of the RTA gives the LTB the discretion to delay or deny an eviction after considering all relevant circumstances (RTA, 2006, s. 83). GBV must be recognized as one of these circumstances.

Adjudicators should receive ongoing, in-depth training focused on identifying trauma indicators and accommodation needs even when survivors do not, or cannot, explicitly disclose abuse. This training should cover how to apply section 83 through a trauma-informed, GBV-aware lens, including clear criteria for when further inquiry into abuse-related circumstances is warranted based on observable indicators.

Adjudicators must consider the severity of the survivor's situation when completing a section 83 analysis. This includes assessing how abuse may have affected the survivor's behavior, their ability to comply with tenancy obligations, and their overall housing stability. To support fair and equitable decision-making, LTB adjudicators would benefit from training that covers the physical, social, cultural, and structural barriers survivors face, as this would provide a fuller, more accurate understanding of survivors' circumstances.

Adjudicators should also take judicial notice of the well-documented systemic realities GBV survivors face, including the destabilizing effects of trauma on memory, focus, and self-advocacy; survivors' strained or mistrustful relationships with law enforcement, landlords, and legal authorities; and the heightened risks experienced by Indigenous, racialized, disabled, and precariously situated survivors, including those with precarious immigration status.

If the province declared IPV and GBV an epidemic, this declaration could be applied by adjudicators (similar to the application of **Gladue Principles** in criminal legal proceedings), as they would have to consider this under a section 83 analysis when deciding whether to delay or refuse eviction on behalf of a survivor.

### **Consider Family Law Principles in LTB Decisions**

The intersection of family law and tenancy law is crucial when adjudicating housing disputes involving separated spouses, particularly in cases where GBV is a factor. To ensure a fair and legally sound approach, the LTB must consider family law principles when adjudicating eviction and tenancy disputes.

To prevent tenancy law from being used as a tool of economic abuse or coercive control, the LTB should:

- Interpret the RTA in a way that aligns with the FLA. A spouse's right to exclusive possession under the FLA should take precedence over a unilateral attempt to terminate a lease.
- Require landlords to demonstrate that eviction is not being used to circumvent FLA protections. In cases involving separation and IPV, landlords should be required to show why eviction is necessary and proportionate. The LTB should require evidence that an attempt to terminate a tenancy complies with both the RTA and the FLA.
- Ensure that survivors of GBV are not displaced due to lease technicalities. If a spouse remains in the home following separation, they should not be treated as an unauthorized occupant or forced out simply because their name is not on the lease. The LTB should facilitate the transfer of tenancy rights to the remaining spouse, in accordance with family law principles.

### 13. Improve Access to Justice for Renters Experiencing GBV

Survivors frequently have negative experiences at the LTB, as they feel unprepared and overwhelmed by the process and often have multiple legal issues to deal with in addition to housing, including family, immigration, and social benefits matters.

The following recommendations would contribute to a system that better addresses the legal challenges faced by GBV survivors and underscores the importance of having their voices heard throughout the legal process.

To improve access to justice for renters experiencing GBV, the provincial government should:

- Increase the financial eligibility criteria for legal clinics. Current income requirements leave many low-income or middle-class survivors without legal help and therefore more likely to leave stable housing and move into lengthy periods of homelessness and housing instability.
- Expand Legal Aid Ontario's Domestic Violence Certificate Program to include a housing certificate for renters experiencing housing legal challenges as a result of GBV.
- Appoint specialized adjudicators with legal and social work backgrounds who can be assigned to hearings when GBV is raised.
- Reintroduce LTB regional scheduling with assigned adjudicators who have local knowledge of the unique housing challenges in their region.
- Integrate legal proceedings to allow survivors to seek adjournments from the LTB if there is

a family court case that will affect their tenancy. This would also help prevent litigation abuse, in which the person causing harm seeks to evict their partner from a matrimonial home.

- Establish a clear, accessible mechanism at the LTB for survivors of GBV to request procedural accommodations—such as in-person or closed hearings—to support their safety and meaningful participation in the legal process.
- Introduce wraparound social work services for renters who must attend a hearing at the LTB. This would be an important service for those who are likely to be evicted from their unit and would function as a renters' assistance program in the same way the Victim/Witness Assistance Program operates in criminal court. This service would provide direct support to renters experiencing GBV by providing information about the LTB process ahead of their hearing, processing accommodation requests, helping manage expectations, and providing relevant referrals for the outset of the hearing. In addition, survivors would have access to emotional support for the duration of a stressful, often traumatizing experience.

## 14. Improve Safety for Renters through Landlord Training and Accreditation

In addition to the financial challenges noted above, survivors often experience discrimination in the rental housing market. To better protect renters from violence, the provincial government must implement training programs and a landlord accreditation registry:

1. Successful training programs have worked with private market landlords to provide education about GBV and reduce prejudices against survivors. Given the extent of discrimination in the rental housing market, expanding landlord engagement programs would be an important tool to facilitate housing access. As well, the development of a housing liaison team could act as an intermediary between survivors and landlords to address common concerns, help negotiate with landlords, and provide support to survivors through the housing access process.
2. The provincial government must establish a landlord registry that stipulates that landlords must undergo mandatory human rights training to address existing prejudices. Landlords should also be required to learn about the unique rental housing challenges faced by survivors.

## 15. Provide Trauma-informed Legal and Housing Services

Numerous survivors reported experiencing a lack of understanding from legal professionals and housing-system workers. In turn, these professionals reported not receiving the type of training that would allow them to communicate effectively with survivors. Addressing these gaps in training would help workers better communicate with survivors and avoid inadvertently retraumatizing their clients. As well, increased funding for homelessness services, organizations that support survivors, and legal clinics would not only allow the development of robust training programs but ensure that services are adequately staffed.

Government-funded services must therefore:

- Provide trauma-informed housing services and supports that include training on the unique rental housing issues survivors face.
- Ensure training development and implementation are survivor-led and run by trauma-informed advocates for improved outcomes.
- Offer professionals who support survivors access to counselling to reduce vicarious trauma and compassion fatigue.
- Prioritize anti-oppressive and culturally safe services, including the expansion of specialized services for marginalized communities.
- Provide free language services at the LTB to ensure that renters with language barriers can meaningfully participate in their hearings.

## 16. Invest in Specialized Wraparound Services for Survivors Facing Rental Housing Challenges

Multi-disciplinary wraparound services and programs offered in community hubs, hospitals, and legal clinics have provided invaluable support to survivors for decades and have demonstrated success in helping survivors navigate housing precarity and access justice.

The provincial government should fund the expansion of multi-disciplinary, trauma-informed housing legal service hubs across Ontario. It should ensure that these hubs are staffed with professionals who have specialized knowledge about the unique challenges faced by renters experiencing GBV. As well, services must be accessible to low- and moderate-income survivors, support survivors regardless of immigration status, and extend into all regions across Ontario (including rural and remote areas) Investing in these services would fill a much-needed gap in the existing legal and housing support landscape and increase survivors' access to justice and housing stability.

## 17. Build Opportunities for Learning and Collaboration

While there are undeniably numerous challenges to addressing the needs of GBV survivors, the research also identified innovative programs and effective practices that offer promising pathways forward. These initiatives should be evaluated and, where successful, expanded or replicated across the province. These programs and practices should also be integrated into the broader framework of service delivery, informing policy development, staff training, funding priorities, and the design of frontline interventions:

1. Establish provincial communities of practice. To support ongoing learning, Ontario should introduce a provincial communities of practice focused on proven approaches to improving housing stability for GBV survivors. These communities would bring together frontline workers, housing providers, legal professionals, shelter staff, Indigenous service organizations, public health workers, and municipal actors to compare experiences, share lessons and successes across regions, identify systemic barriers, and coordinate advocacy and service responses using a survivor-centred approach. As one service-provider interviewee outlined during the research process:

*“I sit on this, this weekly table, that is the most useful thing I’ve done. Maybe in my whole career. It’s made up of city staff. It’s made up of shelter staff. There’s people from community service organizations like Indigenous service organizations, other sorts of housing organizations in Ottawa. There’s a public health nurse on the table. It’s just...all kinds of different community services that serve people who are low income and vulnerable and don’t have a lot of options. And you know, have a lot going on in their lives. And it’s amazing how little we know about what the other one does, but how much we can accomplish when we sit down and talk (SP46).”*

2. Facilitate interdisciplinary collaboration through a circle-of-care model. Survivors often leave violent situations with a myriad of interconnected legal, housing, and financial issues, and so they require access to many different services to achieve housing stability. A circle-of-care approach, in which professionals and service providers from across sectors work together to support a mutual client/community member, can improve housing outcomes by reducing fragmentation in service delivery.
3. Incorporate meaningful engagement and increase participation from survivors. Survivors must be involved in shaping the policies and services that affect them. This includes establishing or supporting peer advisory committees, embedding survivors in decision-making and program evaluation, and ensuring that survivor feedback is used to shape funding, policy, and service priorities.

# CONCLUSION



This mixed-methods feminist-action research project set out to better understand how survivors of gender-based violence (GBV) navigate the complex and often cruel process of securing and keeping their permanent housing in Ontario. The insight of lived-experience experts and the perspective of service professionals helped establish that there is a significant service gap preventing survivors from asserting their housing rights in the face of abuse. In response to the need for accessible housing legal help, this research culminated in the design and implementation of a specialized legal service for renters experiencing GBV.

## The Importance of Specialized Housing Legal Services

### Legal Representation

The research affirmed not only the need for specialized legal services for survivors of GBV but also outlined what those services must look like to be effective. They must offer legal representation in tenant applications to ensure that survivors can address landlord abuse or harassment and fight evictions caused by the actions of the person causing harm. They must also actively support survivors in securing safe housing when their tenancy is unsustainable.

### Wraparound Support

Central to this model of specialized legal services is the notion of “**wraparound support**,” in which lawyers and social workers collaborate, drawing on their distinct yet complementary professional expertise. This kind of partnership strengthens the quality and impact of services provided, offering a holistic approach to respond to both legal and non-legal needs. Because survivors may still be living with the person causing harm or are at significant risk of homelessness, the addition of a social worker to their support team allows for safety planning, crisis counselling, and contingency planning if an eviction occurs.

### Trauma and Violence-Informed Practices

Trauma and violence-informed practices are foundational to this model. Intakes are jointly conducted by lawyers and social workers to minimize retraumatization and reduce the burden on survivors of GBV of having to repeatedly share painful experiences. It also enables the provision of immediate crisis and emotional support.

Intakes are scheduled as longer appointments to give survivors an opportunity to share relevant parts of their story in a way that makes sense to them. Survivors are invited to bring a support person to assist them and to take breaks throughout meetings as needed.

## Low-Barrier Services

Services must be low barrier—that is, they must waive strict income eligibility rules and relax rigid timelines—to ensure that more survivors can access justice when they need it most. Service providers need to accommodate survivors’ preferences for meeting, when possible, and offer free interpretation services if needed.

## Collaborative Relationships

Building collaborative relationships within the GBV and legal sectors is important for mutual learning and growth. As part of a provincial community of practice, services should be informed and evaluated by key stakeholders and people with lived experience of GBV. Ongoing partnerships and guidance from lived-experience experts will ensure that the model remains responsive, relevant, and capable of being replicated across community legal clinics and housing help services.

## Best Practices for Service Providers

The research and policy roundtable identified five key best practices that shaped ACTO’s service design: consistency, trauma and violence-informed care, taking action, survivor self-determination, and believing survivors. Relying on these key principles leads to better outcomes for survivors of GBV.

### Consistency

Consistency is imperative at every level, from individual service providers showing reliability and follow-through, to organizations offering wraparound, multidisciplinary care that reduces **referral loops** and improves service quality.

At the individual level, the importance of service-provider reliability was raised by both lived-experience participants and service providers. Consistency resulted from responsiveness, engagement, and the ability to follow through on stated actions. At an organization level, integrated wraparound and multidisciplinary services help minimize the need for repeated referrals and increase the overall quality of support.

Survivors often felt like they were shuffled around between organizations (the referral loop) and that they had to start from the beginning with each new referral. Wraparound services reduce the number of services that needed to be accessed and improve the quality of care in each organization. At a systems level, a need was identified for more communication and systemic collaboration. Service providers noted that collaboration and streamlining between organizations strengthened various overlapping sectors, enhancing outcomes for survivors.

## **Trauma- and Violence-Informed Practice**

Trauma- and violence-informed practice must be embedded across service protocols, training, and daily interactions. Effective service providers practise self-reflection and empathy, and tailor their communication to convey care and ongoing transparency.

Trauma-informed training and evaluations should be mandatory for all service providers, including decision-makers. Trauma and violence-informed practice requires that service providers intentionally incorporate reflexive practice and cultural safety measures, and that they respect survivors' choices.

Flexibility was described by lived-experience interviewees as the most important part of trauma-informed practice. For example, survivors often need extra time to recount their stories and may struggle to get through intimate details of their trauma experiences in only one appointment. This means that service providers need to accommodate scheduling changes and lengthier appointment times.

As well, services must reflect that survivors are often multiply marginalized and have many differing needs. When communicating with survivors, it is therefore critical that service providers carefully consider their tone and word choices, and that they are non-judgmental. Survivors often do not neatly fit into service and program parameters and thus require flexibility and applied discretion in terms of service and program eligibility requirements. Service providers must understand the diverse needs of their clients and take time to build the trust and rapport that clients need to feel safe expressing their needs.

## **Taking Action**

Advocacy emerged as a central theme of the research project. Participants consistently emphasized that, even in the face of difficult or unjust outcomes, the active presence of service providers advocating on their behalf provided a crucial sense of dignity, validation, and emotional safety. Knowing that someone was “fighting for me,” “pushing for me,” or “not giving up on me” helped reduce the isolation and powerlessness often felt by survivors when accessing systems and services. Advocacy—whether through legal representation, housing support, or interpersonal accompaniment—was not only about achieving a particular outcome: it was about survivors feeling seen, believed, and backed by someone willing to challenge barriers alongside them.

## **Survivor Self-Determination**

Self-determination empowers survivors to make informed decisions about their housing pathways. Interviewees explained that when service providers engaged in knowledge sharing, took time to explain complex systems, and reviewed documents with them, it allowed them to regain a sense of control and better understand the processes they were navigating. This approach contributed to centring survivors as the experts on their own lives.

Choice is integral to self-determination. Survivors should be supported in determining their own goals, timelines, and strategies, including how and when (or whether) to disclose experiences of GBV. Respecting a survivor's autonomy in these decisions not only reinforces their dignity but also builds trust, which is essential to supporting housing stability after trauma.

## **Believing Survivors**

Above all, survivors want—and need—to be believed. Being met with belief, rather than doubt or scrutiny, lays the foundation for trust, healing, and safety. This means using affirming language, listening actively, and validating survivors' experiences. As one lived-experience interviewee put it, “it's just like kindness and understanding and people believing you” (LE20).

## **Summary**

This research action project responded to calls to move beyond the study of homelessness and critically engage with the forces that produce it (Ilyniak, 2022, pp. 141–152). By rooting the findings in an analysis of the systems and structures that have exacerbated survivors' experiences of housing instability, it was clear that renters experiencing GBV lacked access to justice. This research process was not just a theoretical or academic exercise—it has informed the design of a specialized housing legal service tailored to survivors.

Survivors have told us, time and again, what they need: to be believed, to be treated with fairness and dignity, and to have real, equitable access to safe, stable housing. Survivors cannot achieve security of tenure without access to justice. The systems meant to support them too often mirror the dynamics of power and control they are trying to escape. Addressing these failures is not optional—it is essential.

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# GLOSSARY OF TERMS

**2SLGBTQ+:** an acronym for Two-Spirit, lesbian, gay, bisexual, transgender, and queer/questioning. The “+” acknowledges additional identities such as intersex, asexual, pansexual, and non-binary. The term is inclusive of a diverse range of sexual orientations, gender identities, and expressions (Government of Canada, 2023).

**Above-guideline rent increase (AGI):** a rent increase that exceeds the annual rent increase guideline set by a provincial or territorial government. In Ontario, landlords must apply to the Landlord and Tenant Board (LTB) for approval to raise the rent above the guideline. AGIs are usually granted for specific reasons, such as major repairs, increased municipal taxes, or security service costs (Tribunals Ontario, 2018).

**Absolute homelessness:** instances of homelessness in which individuals are unsheltered or living on the streets or in places not fit for human habitation (Gaetz et al., 2012).

**Access to justice:** the ability of individuals to receive legal support that is fair, understand the legal processes they are going through, and make informed decisions about those processes. Access to justice should allow people to end their legal proceedings in a just and fair way (Mathews & Wiseman, 2020).

**Adjournment:** a decision made by a judge to postpone court proceedings due to emerging information or emergency situations (Ontario Court of Justice, n.d.).

**Adjudicators:** individuals responsible for holding hearings at Tribunals Ontario (including the LTB). Adjudicators ask questions, analyze evidence, and make decisions. They are expected to be neutral parties, are appointed to their positions, and must complete six months of training before holding hearings (Tribunals Ontario, n.d.-a).

**Affordable housing:** any type of housing that is affordable for a specific household. The typical measure of affordable housing is that it costs less than 30% of a household’s before-tax income (CMHC, 2022).

**Anti-oppressive practice:** an approach that recognizes, challenges, and reduces the power imbalances and systemic inequalities experienced by marginalized individuals and communities. Anti-oppressive practice seeks to actively resist forms of oppression including racism, sexism, colonialism, ableism, and classism in both individual and institutional settings (Baines, 2017).

**Arrears:** rent that the tenant owes the landlord that has not been paid by the scheduled date (Residential Tenancies Act, 2006).

**Attorney General:** a member of provincial parliament who is responsible for the services of the Ministry of the Attorney General, providing legal advice to the provincial government as their Chief Law Officer, overseeing criminal prosecutions, and having other legislative responsibilities (Government of Ontario, 2023a).

**Average asking rent:** the average rent listed for vacant rental units. Average asking rent represents what a renter can expect to pay when securing a new rental unit in a specific region (CMHC, 2024).

**Bad-faith eviction:** an eviction in which the landlord issues a legal notice to a tenant to end their tenancy but does not intend to use the unit for the reasons stated in the notice, such as needing the unit for personal use or completing major renovations. Landlords can be fined if the LTB determines that an eviction notice or order was given in bad faith (City of Toronto, 2024).

**By-name list:** a real-time, up-to-date record of all individuals experiencing homelessness within a specific community. The by-name list includes detailed information such as a person's housing history, health status, and specific needs. This assessment tool helps to enumerate homelessness and captures pathways-of-service use (Government of Ontario, 2024e).

**Canada Mortgage and Housing Corporation (CMHC):** Canada's national housing agency. The CMHC was established in 1946 as a Crown corporation to address post-war housing shortages when war veterans returned home. Over time, its mandate has expanded to improving housing conditions and accessibility nationwide. The CMHC is also responsible for implementing the goals outlined in the National Housing Strategy (CMHC, n.d.).

**Canada-Ontario Housing Benefit (COHB):** a portable housing benefit that works to enhance rental housing affordability for eligible low-income households. The COHB provides a direct monthly payment to assist renters with housing costs. It is calculated based on household income and local market rent (Government of Ontario, 2024c).

**Centralized access:** a systems-level approach to addressing homelessness. In Ontario, it streamlines services and ensures that people experiencing homelessness are connected to the appropriate services. Service users access a single centralized service point, in which their needs are determined using standardized assessment tools. (Ecker et al., 2020).

**Certificates for domestic violence:** a service provided by Legal Aid Ontario that offers all domestic violence survivors a certificate for two free hours of legal advice related to family law and immigration matters. These certificates can be used at community legal clinics or with any private bar lawyer who has domestic violence experience. They may be used once per legal issue and up to five times per year (LAO, n.d.-b).

**Chronic homelessness:** a state of homelessness experienced by a person who is currently homeless and who has been homeless for at least six months out of the past year, or who has recurring experiences of homelessness over the past three years totalling at least 18 months. These periods of homelessness can include stays at shelters or with others, or being unsheltered (Toronto Alliance to End Homelessness, n.d.).

**Children's Aid Societies (CASs):** organizations responsible for leading investigations into reports of abuse or neglect of children under the age of 18. CASs must intervene when necessary to protect children, including removing children from their families and facilitating foster or adoption proceedings. CASs are also responsible for looking after the children within their care and supporting their families (Government of Ontario, 2025a).

**Cisgender:** an individual whose gender identity corresponds to their sex assigned at birth (Statistics Canada, 2021).

**Civil matter:** a legal dispute between individuals or organizations that can include personal injury claims, bankruptcy, estates, or commercial matters. Which kind of court hears a civil matter depends on the matter's monetary value and nature of the case; claims of up to \$35,000 are heard in Small Claims Court and claims over \$35,000 and up to \$50,000 are heard in the Superior Court of Justice (Ontario Courts, n.d.).

**Coercive control:** a pattern of behaviors used by an abuser to dominate, manipulate, and isolate a victim, creating an ongoing environment of fear and dependency. Coercive control includes psychological, emotional, financial, and technological control, not simply physical violence (Ha, 2024).

**Community legal clinics (CLCs):** provide free legal services to individuals who cannot afford legal representation. CLCs specialize in areas such as family law, housing, employment, and social security, tailoring their services to meet the specific needs of their local communities (Warner, 2021).

**Compassion fatigue:** the emotional and physical exhaustion experienced by helping professionals after prolonged exposure to the suffering of others. Compassion fatigue often results in a reduced capacity for empathy, emotional numbing, and a decline in job satisfaction. It can affect both personal well-being and professional effectiveness (Figley, 1995).

**Cooperative:** a non-profit housing option in which residents collectively own and manage their own housing community. Members purchase a share in the cooperative, which gives them the right to occupy a specific unit and participate in the decision-making processes that govern the property (City of Toronto, n.d.-a).

**Core housing need:** living in housing one cannot afford, in housing needing major repairs or without enough space, or being unable to afford other housing in one's community. The number of people in core housing need is influenced by factors such as the cost of living and rental rates, and is on the rise in Canada (CMHC, 2019).

**Cottage country:** a colloquial term for rural locations in Ontario that are popular summer-vacation spots for urban residents (CottageLink Rental Management, n.d.).

**Couch surfing:** an informal and unstable form of temporary housing arrangement in which individuals, often those experiencing homelessness, stay with friends, family, or acquaintances on their couches or spare beds for short periods of time (Homeless Hub, n.d.).

**Crisis/urgent transfer:** a social housing relocation process for tenants facing immediate threats to their health or safety. The process of obtaining a crisis transfer may differ across regions in Ontario, but typically it requires that a member of the household has been subjected to or witnessed traumatic violence within social housing units (TCHC, n.d.).

**Cultural safety:** an environment or practice in which individuals, particularly those from marginalized groups, feel respected, understood, and free from discrimination or harm due to their cultural identity. Cultural safety involves recognizing and addressing power imbalances, promoting inclusive practices, and creating spaces in which clients can express their cultural values and beliefs without fear of judgment (Richardson, 2012).

**Cycle of violence:** a pattern found in abusive relationships. The cycle involves three distinct phases: the tension-building phase, in which stress escalates, leading to anger, control, and emotional abuse from the person causing harm; the explosive phase, in which the person causing harm subjects the victim to physical, emotional, or sexual harm; and the honeymoon phase, in which the person causing harm apologizes or makes promises to change to regain control (Walker, 1979).

**Digital divide:** a technology gap between those who have access to modern information and communication technologies, such as the internet, computers, and smartphones, and those who do not. The digital divide is often shaped by factors such as income, geographic location, education, age, and systemic inequities related to race, disability, or colonialism (Sanders & Scanlon, 2021).

**Dual charging:** a practice connected to the requirement of mandatory charging, in which police must lay charges in any situation in which they believe that violence has occurred. If there is confusion about who the aggressor is, both parties may be charged. Dual charging results in the victim of domestic violence being charged for harm they were subjected to (Ontario Women's Justice Network, n.d.).

**Encampment:** places where shelters and tents are used by unhoused individuals due to the limited options for affordable, safe, and dignified housing. Although encampments have existed in Canada for many years, the number of encampments has significantly increased since the COVID-19 pandemic (National Right to Housing Network, n.d.).

**Emergency shelter:** a temporary housing facility designed to provide immediate refuge and safety for individuals experiencing homelessness, including those fleeing violence. In addition to providing housing, emergency shelters also provide basic needs support (Statistics Canada, 2019).

**Eviction order:** an order issued by the LTB when a landlord has given their tenant a notice to end the tenancy and the tenant has not agreed to vacate the rental unit. The landlord must apply to the LTB for an eviction order, and the LTB will hold a hearing on the matter. An eviction order can only be enforced by the Sheriff's Office; a landlord is not legally allowed to remove a tenant from their unit (Tribunals Ontario, 2021).

**Family Law Act (FLA):** Ontario legislation that governs family-related legal matters, including the division of property, spousal and child support, and domestic contracts. The act establishes the rights and responsibilities of spouses and dependents in the areas of marriage, separation, and inheritance. It aims to promote fairness and equality within family relationships (Family Law Act).

**Financial abuse:** a type of abuse that commonly occurs within situations of intimate partner violence and involves withholding, extracting, manipulating, or coercing a person for capital gain. Financial abuse can involve persistent questions about how a person spends their money, preventing them from accessing their money, or coercing them into taking on debt in the abuser's name (Docherty, 2021).

**Financialization of housing:** the belief that housing is more than a home, but rather a wealth-generating financial asset. The financialization of housing has greatly contributed to the loss of affordable rental housing (ACTO, n.d.-a).

**Form T6: Tenant Application about Maintenance:** an LTB form that tenants can use to file a formal complaint when their landlord fails to meet maintenance or repair obligations under the Residential Tenancies Act, 2006. Form T6 allows tenants to seek remedies such as an abatement of rent, compensation for damages or expenses, or orders requiring the landlord to carry out necessary repairs. A tenant must file the T6 with the LTB within one year of the issue occurring (Tribunals Ontario, n.d.-c).

**GBV shelter:** emergency shelters designed for survivors of gender-based violence (GBV). These shelters often offer a variety of services in addition to crisis housing, including safety planning, counselling, and other referrals (Toronto Central Healthline, n.d.).

**Gender-based violence:** the violence that women, girls, and gender-diverse individuals face disproportionately because of their gender, perceived gender, sexual identity, or gender expression. GBV includes a wide range of behaviors, from unwanted sexual attention to serious criminal offences such as physical or sexual assault (Cotter & Savage, 2019).

**Gender identity abuse:** any form of harm, mistreatment, or discrimination directed at an individual because of their actual or perceived gender identity. This abuse can include verbal harassment, emotional manipulation, threats, physical violence, or efforts to deny or suppress someone's self-identified gender (Woulfe & Goodman, 2018).

**Gladue Principles:** a set of legal principles requiring criminal courts in Canada to consider the systemic factors that may have contributed to an Indigenous person's involvement in the criminal justice system (such as colonization, the legacy of residential schools, intergenerational trauma, substance abuse, discrimination, and poverty). Judges must also consider culturally appropriate sentencing options that focus on rehabilitation, restorative justice, and community-based alternatives, where appropriate (LAO, n.d.-c).

**Heteropatriarchy:** a social system in which heterosexuality and male dominance are privileged and maintained as the norm. Heteropatriarchy is rooted in the interlocking structures of patriarchy (the dominance of men over women and gender-diverse people) and heteronormativity (the assumption that heterosexual relationships are the default or "normal" types of relationships) (Smith, 2008).

**Hidden homelessness:** refers to the experiences of individuals or families who lack stable, permanent housing but do not appear in official homelessness statistics. They may live in temporary accommodations such as with family or friends, couch surf, live in overcrowded or unsafe conditions, or in places not intended for habitation. Women, 2SGLBTQ+ individuals, and youth are more likely to experience hidden homelessness (Homeless Hub, n.d.).

**Houseless:** terms used to emphasize the difference between a house and a home and to highlight the fact that although someone may be houseless, they may still have a home. From an Indigenous perspective, homelessness encompasses the outcomes of colonial displacement, land dispossession, systemic oppression and marginalization (Thistle, 2017).

**Housing continuum:** refers to the range of housing options available to individuals along a sequential continuum, from homelessness to homeownership. It includes emergency shelters, transitional housing, supportive housing, and social housing, as well as private market rental units and homeownership (CMHC, 2022).

**Housing First:** an approach to housing individuals facing chronic homelessness that involves the immediate provision of permanent housing aligned with an individual's choice and without eligibility requirements or expectations (for example, maintaining sobriety). This approach includes wraparound care that pairs independent housing with access to mental health and addictions support, case management, employment support, and education access (Gaetz, 2012).

**Housing Services Act, 2011 (HSA):** Ontario legislation that governs the administration of social and affordable housing in the province. The HSA outlines the roles and responsibilities of municipal service managers and housing providers, aiming to ensure efficient delivery and management of housing services. The HSA led to the establishment of the Housing Services Corporation, which provides support and resources to housing providers in the province (Housing Services Act, 2011).

**Housing Stabilization Fund (HSF):** a provincial financial assistance program designed to help individuals and families at risk of homelessness or in housing crisis to access or maintain stable housing. The HSF is administered regionally and provides short-term support for costs such as rental arrears, moving expenses, and utility bills (City of Toronto, n.d.-b).

**Housing-unit takeover:** a situation in which individuals coercively gain access to housing spaces without legal authorization, usually through using violence, sex, or drugs. Takeovers are an urgent issue in supportive and social housing because of the vulnerability of these tenants (Weissman, 2016).

**Human trafficking:** criminal activity that involves the coercive or forceful recruitment and control of an individual, often involving labour abuses and sexual exploitation. Those most at risk of being sex trafficked include Indigenous and racialized women and girls, those experiencing homelessness, and those facing poverty, isolation, and abuse. Those most at risk of being labour trafficked include people with precarious immigration status, those experiencing homelessness, and migrant workers (Government of Ontario, 2023b).

**Identification clinic:** services that help unhoused individuals access identification and store it securely. These services help with application processes and with keeping identification on file for people who are unsheltered or in the shelter system (Street Health, n.d.).

**Inadequate housing:** housing that fails to meet the basic standards of safety, stability, and suitability or that lacks access to essential services such as clean water, electricity, and waste disposal. Inadequate housing can also involve overcrowding, structural hazards, or unsafe conditions that pose health risks to the occupants (United Nations, n.d.-a).

**Institutional investors:** organizations that purchase large amounts of real estate to use as rental units. Institutional investors are key drivers of the financialization of housing and contribute to skyrocketing rent prices (Dsouza, 2024).

**Internal review:** the process by which applicants or tenants of rent-geared-to-income housing can request that a service manager's decision be reviewed. Reviews can be requested for a variety of reasons, including a denied application, a transfer denial, or a denied request to adjust the rent payable by the tenants (O. Reg. 298/01).

**Intersectionality:** a framework that examines how multiple social identities, such as race, gender, ethnicity, class, and immigration status, intersect to create unique structural experiences of oppression and privilege. Within this framework, inequalities cannot be understood through the analysis of a single identity; rather, they require the overlapping analyses of all aspects of identity that shape an individual's reality (Crenshaw, 1991).

**Intimate-partner violence (IPV):** a form of violence that can include physical, sexual, psychological, emotional, and financial abuse by a current or former spouse. IPV is a pervasive human rights violation, affecting individuals based on their sex, gender identity, or expression. It is also a major public health issue, with severe and long-term physical, psychological, and financial impacts on survivors (Government of Canada, 2025).

**Joint tenancy:** when multiple tenants enter into a single tenancy agreement, making them jointly and individually responsible for rent and property damage. In a joint tenancy, all tenants can be evicted or otherwise held responsible for any breach of the lease agreement (ACTO, 2021).

**Judicial review:** the legal process by which a court examines the actions or decisions of legislative, executive, or administrative bodies to ensure that their decisions comply with the Constitution, laws, and established legal principles. A judicial review may result in the invalidation of laws or policies that are found to be unconstitutional or illegal (LAO, n.d.-d).

**Landlord:** a person or entity who leases a living area to another in exchange for money (Tribunals Ontario, 2022a).

**Landlord and Tenant Board:** an adjudicative tribunal in Ontario established under the Residential Tenancies Act, 2006. The LTB is responsible for resolving disputes between residential landlords and tenants, offering mediation and adjudication services, and providing information on rights and responsibilities under the act (Tribunals Ontario, n.d.-b).

**Lease or tenancy agreement:** a contract between a landlord and a tenant regarding the terms of the tenancy, including length of stay, amount to be paid for rent, and when rent must be paid. Ontario has a standard lease agreement that should be used by most landlords (some exceptions include care homes, mobile park homes, and cooperative housing); it includes the rights and responsibilities of each party (ACTO, 2018).

**Legal Aid Ontario (LAO):** a provincially funded non-profit organization responsible for administering the legal aid program in Ontario. LAO provides legal assistance to low-income people in areas such as criminal, family, and immigration law, aiming to ensure equitable access to justice. Services include legal advice, legal representation, and public legal education (LAO, n.d.-a).

**Legal facilitation of homelessness:** the process by which laws, legal decisions, and government policies contribute to the creation or continuation of homelessness, including legislation that criminalizes sleeping, loitering, or panhandling in public spaces; restrictive zoning and housing regulations; or inadequate legal protections for tenants and people in poverty (Gander & Johansson, 2014).

**Litigation abuse:** a form of IPV and family violence that uses litigation as a tool of abuse in the family court process. Litigation abuse causes financial and psychological harm and can involve various tactics including delaying proceedings, introducing false evidence, or making false claims (Western University, 2022).

**Missing and murdered Indigenous women and girls (MMIWG):** a movement advocating for an end to the disproportionate violence that Indigenous women, girls, and Two-Spirit people are subjected to because of a legacy of colonial violence. The movement successfully advocated for the MMIWG National Inquiry, which created 231 Calls for Justice and a formalized National Action Plan to End Violence Against Women, Girls and 2SLGBTQQIA+ People (Assembly of First Nations, n.d.).

**N5: Notice to End Your Tenancy for Interfering with Others, Damage or Overcrowding:** a legal notice a landlord can serve to a tenant for serious breaches under the Residential Tenancies Act, 2006, including substantial interference with others' reasonable enjoyment of the property, causing willful or negligent damage to the rental unit, or exceeding legal occupancy limits (Tribunals Ontario, 2022c).

**N7: Notice to End your Tenancy for Causing Serious Problems in the Rental Unit or**

**Residential Complex:** a legal notice a landlord can serve to a tenant who has engaged in serious misconduct, such as endangering the safety of others, willfully damaging the rental unit or building, or substantially interfering with the landlord's or other tenants' reasonable enjoyment of the premises (Tribunals Ontario, 2022b).

**N15: Tenant's Notice to End my Tenancy Because of Fear of Sexual or Domestic Violence and**

**Abuse:** a legal notice a tenant can serve to their landlord to end their tenancy early if they or a child living with them has been subjected to sexual or domestic violence and abuse and the tenant believes that they or the child may be harmed if they stay in the unit (Tribunals Ontario, 2022d).

**National Housing Strategy Act (NHSa):** a 2019 act that recognizes housing as a human right and stipulates that the federal government is responsible for implementing a national housing strategy to realize this right across Canada. The act identifies vulnerable populations for whom the government must focus on improving housing outcomes, including survivors of GBV, Indigenous people, racialized people, and women and gender-diverse people (CHRC, n.d.).

**Non-profit housing:** housing providers that offer affordable housing, often with attached support services. These providers may be independent, public, or private landlords (ONPHA, n.d.).

**Ontario Disability Support Program Act, 1997:** an act that established the ODSP program, a social assistance program offering income support to people with disabilities in Ontario (Ontario Disability Support Program Act, 1997).

**Ontario Works Act, 1997:** an act that established the OW program, a social assistance program offering financial assistance on a temporary basis to Ontarians requiring financial support while they meet eligibility requirements to access and maintain employment (Ontario Works Act, 1997).

**Over-payments:** incorrect calculations by the service manager of the subsidy provided to a household in rent-geared-to-income housing. Over-payments can result in a household being required to repay this amount to the service manager (Peel Region, 2021).

**Person causing harm/perpetrator:** terms used to describe a person who subjects another person to any form of GBV. It can include partners, ex-partners, family members, caregivers, landlords, roommates, and strangers (YWCA Canada, n.d.).

**Portable benefit:** a type of benefit or social security program that is tied to an individual, not a specific housing unit or employer. The benefit moves with the individual or household receiving it to pay for their housing expenses and is not exclusive to where they live, as is the case with social housing (ACTO, 2017).

**Private bar:** private-practice lawyers who offer legal services to individuals and organizations. They typically charge fees for these services, although many also accept legal aid certificates. These lawyers operate independently or within private law firms, not in public or non-profit legal aid organizations (Government of Canada, 2024).

**Private market:** residential rental units that are owned and operated by private landlords, not public landlords, as is the case for social housing (ACTO, 2021).

**Pro Bono Ontario:** an organization connecting volunteer lawyers to Ontarians who need legal services but cannot afford private bar services (Pro Bono Ontario, n.d.).

**Protection order:** umbrella term that includes both restraining orders and peace bonds (LAO, n.d.-e).

**Referral loop:** a frustrating cycle in which an individual is referred from organization to organization to receive social services, and in which no organization accepts them to receive service (Savoy et al., 2023).

**Rent Bank:** a regional program that provides financial support with rental arrears or rent deposits, supporting low-income renters to maintain or access new housing (City of Toronto, n.d.-d).

**Rent control:** government regulations that limit the amount that landlords can charge to rent out a property and/or restrict by how much rent can be increased over time (CCHR, 2025).

**Rent geared to income (RGI):** a subsidized housing program in Ontario that aims to make rent affordable for eligible low-income households. RGI programs are administered regionally and typically calculate rent at 30% of a household's income, or base the rent on their social assistance housing amount. Although wait times for RGI programs vary, they can reach up to 15 years in some communities (City of Toronto, n.d.-c).

**Rent increase guidelines:** a form of rent control that mandates the maximum percentage by which landlords in Ontario can raise residential rents annually without seeking approval from the LTB. The guidelines are determined by the Ontario government and reflect inflation rates and economic conditions over the previous year. They apply to most rental units except for care homes and any buildings occupied by residential tenants for the first time after November 15, 2018 (Government of Ontario, 2024a).

**Residential Tenancies Act, 2006 (RTA):** legislation governing the rights and responsibilities of landlords and tenants in residential rental housing in Ontario. The RTA sets out rules for rent, maintenance, evictions, and other aspects of residential tenancies. It also established the LTB to oversee disputes and enforce the act's provisions and regulations (Residential Tenancies Act, 2006).

**Restraining order:** a legal order issued by a court to help protect individuals from abuse, harassment, stalking, or threats, usually in situations involving domestic violence or IPV. It places restrictions on the alleged perpetrator's behavior, such as prohibiting contact with the person seeking protection or requiring them to stay away from certain places, such as the victim's home or workplace (LAO, n.d.-e).

**Section 83:** a section of the RTA that gives LTB adjudicators the discretion to refuse or delay an eviction when considering all of the circumstances of the parties at an LTB hearing. Section 83 allows the LTB to dismiss an application outright, postpone or stay the eviction, or issue an order with conditions (Residential Tenancies Act, 2006).

**Security of tenure:** the right to a tenancy that is protected from the risk of forced eviction or harassment. Security of tenure is a fundamental part of housing human rights law. It involves the right to live with dignity and without fear of harm within housing, without the fear of losing housing (United Nations, n.d.-b).

**Service manager:** a municipal government or district social services administration board responsible for administering social and affordable housing, as well as related services, within a designated area (Government of Ontario, 2024d).

**Shelter allowance:** a financial benefit provided by government programs to help individuals or families with low income cover the cost of housing, including rent and essential utilities. Shelter allowance is part of broader social assistance or income support programs such as OW or ODSP (Government of Ontario, 2024b).

**Sheriff:** a court enforcement officer who works for the Sheriff's Office in Ontario. They are responsible for enforcing orders by Ontario courts, including eviction orders (Government of Ontario, n.d.).

**Sixties Scoop:** the systemic removal of Indigenous children from their families by the Government of Canada during the 1960s, leading to forced adoptions within non-Indigenous families. This traumatic loss of land, family, and culture caused ongoing impacts for the children taken and the communities left behind (Sinclair & Dainard, 2024).

**Social determinants of health:** the non-medical factors that influence physical and mental health outcomes, including a person's environment, resources, communities, education, housing, and finances. Social determinants are shaped by broader social factors such as politics, economics, and social policies (WHO, 2013).

**Social housing:** rental housing provided by non-profit organizations, housing co-operatives, and municipal governments, aimed at offering affordable accommodation to individuals and families with low-to-moderate incomes. Social housing often receives government subsidies to maintain below-market rental rates, ensuring accessibility for those in need (Government of Ontario, 2025b).

**Specialty legal clinic:** a specialized community legal clinic funded by Legal Aid Ontario that focuses on specific areas of law or serve specific communities. Specialty legal clinics provide targeted legal services, education, and advocacy to address unique legal challenges (LAO, n.d.-g).

**Special Priority Program (SPP):** a program within Ontario's housing system designed to provide priority-access RGI housing for individuals and families escaping abuse or human trafficking. The program requires an application which, if approved, moves the applicant to the top of the wait list for RGI housing. The SPP is implemented regionally by social housing service managers (Government of Ontario, 2024f).

**Student legal services organizations (SLOs):** programs typically affiliated with law schools in which law students provide legal services under the supervision of licensed attorneys. SLOs offer students practical legal experience while delivering pro-bono assistance to those who may not have access to legal representation (LAO, n.d.-f).

**Structural violence:** a form of violence perpetrated by institutional systems that act to cause harm or implement barriers to accessing support or justice. Structural violence is a historical and ongoing process, due to the historical creation of systems and institutions within colonial, racist, and heterosexist frameworks (Wager et al., 2022).

**Supportive housing:** housing programs that integrate RGI housing with tailored support services to assist individuals facing challenges such as mental health issues, disabilities, or chronic homelessness. Supportive housing aims to promote housing stability, improve health outcomes, and foster community integration (AMHO, n.d.).

**Tenant:** an individual who pays a landlord rent in return for the right to reside in the landlord's rental unit (Tribunals Ontario, 2022a).

**Tenant application:** Form T6: Tenant Application about Maintenance, which tenants can submit to file a complaint about maintenance issues the landlord has failed to address (Tribunals Ontario, n.d.-c).

**Tenant Duty Counsel:** a program in which legal professionals provide free legal advice and assistance to tenants without representation at LTB hearings. Tenants facing eviction are prioritized. These services are virtual and available across the province (ACTO, n.d.-b).

**Transitional housing/second-stage shelter:** provides temporary accommodation and support services to individuals and families transitioning from crisis situations, such as homelessness or domestic violence, to stable, permanent housing (Peel Region, n.d.).

**Trauma-informed practice:** an approach that recognizes the prevalence and impacts of trauma and strives to emphasize a strengths-based framework to work effectively with traumatized people. Foundational components of trauma-informed practice include holistic safety, empowerment, agency, and flexibility (YWCA Toronto, n.d.).

**Vacancy rate:** the percentage of all available rental units in a housing market that are unoccupied at a given time. The vacancy rate is a key indicator of housing supply and demand: a low vacancy rate typically signals high demand and limited availability, while a high vacancy rate suggests more available units and potentially lower rental costs (CMHC, 2024).

**VI-SPDAT:** a standardized assessment tool used by housing and homelessness service providers to evaluate the health and social needs of people experiencing homelessness. VI-SPDAT is a detailed questionnaire that helps determine the acuity of individuals or families and prioritize them for housing and support services based on their vulnerability (City of Hamilton, 2023; De Jong, 2021).

**Vicarious trauma:** the emotional and psychological impact experienced by individuals—often helping professionals including social workers, therapists, or healthcare workers—who are exposed to the traumatic experiences of others through empathetic engagement. This indirect exposure can lead to changes in one's worldview, emotional well-being, and sense of safety, resembling symptoms of post-traumatic stress (McCann & Pearlman, 1990).

**Victim blaming:** the act of holding the victim of a crime or harmful event partially or entirely responsible for the harm they been subjected to. This behavior often occurs in cases of sexual assault, IPV, and other forms of GBV, reinforcing harmful stereotypes and discouraging victims from seeking help or justice (CWF, 2022).

**Victim Quick Response Program+ (VQRP+):** an Ontario program that provides immediate, short-term financial assistance to victims of violent crimes and their families. VQRP+ helps cover essential expenses related to the incident of violence, such as counselling, funerals, and other necessary expenses (Government of Ontario, 2019).

**Victim-survivor:** term used for individuals who have been subjected to violence. Although the term “survivor” is often preferred, as it is more empowering, “victim” is more often used in the legal context. Increasingly, “victim/survivor” is used to capture the complex and vast experiences of those holding this identity (SAKI, n.d.).

**Welfare queen:** a derogatory and racialized stereotype that emerged in U.S. political discourse in the late 20th century. It refers to a mythologized figure—often portrayed as a Black, single mother—who is accused of exploiting social assistance programs through fraud, laziness, or excessive dependency (Hancock, 2004).

**Wraparound support:** an approach to human services that strives to take a holistic view of an individual’s situation, rather than looking at issues in isolation (AFS, n.d.).

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