

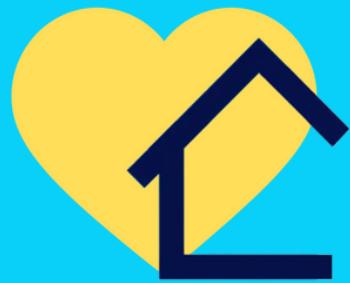


SAFE N SOUND

NEIGHBOURHOOD RESPONSE TEAM REPORT

NEIGHBOURS HELPING
NEIGHBOURS

DEC
2025



PURPOSE OF STATISTICS

Strengths-Based Approach to Care

Safe n Sound provides monthly health and service-use statistics to strengthen coordinated community responses—not to label, rank, or reduce people to diagnoses. Collective beliefs that our Participants are personally to blame for their own outcomes, rather than comprehending systemic structural conditions and inequities which shape peoples lives, overlooks social realities.

We reject deficit-based narratives. Our Community Members (“Participants”) who use Safe n Sound are whole human beings, not stereotypes. They are navigating layered challenges created by colonialism, poverty, trauma, discrimination, colonialism, gender-based violence, and barriers to care – not a lack of effort or worth. They are more than any diagnosis, behaviour, or moment in crisis.

Truth in The Open so Solutions Can Grow

Identify Inequities and Service Gaps

Inform Coordinated Responses

Support Community Education of Localized Complexities

Support Evidence-Based Advocacy for Better Systems

Track Emerging Health Signals/Trends

Accessible Information so All are Part of Solution

Positive Impacts of Low-Barrier Individualized Care

Community Compassion Shaped Responses

Data is used to transform awareness into action—not to reinforce stigma. Our reporting centres dignity, context, and equity, and reflects our core belief: people experiencing homelessness and health inequities deserve the same quality of care, respect, and opportunity as any other community member. We hope to replace stigma with understanding by sharing data rooted in real human lives.



UNDERSTANDING HEALTH & HOUSING INEQUITIES

Safe n Sound recognizes that Canada is experiencing a deep and ongoing health crisis. People experiencing homelessness are disproportionately impacted, often living with multiple, interconnected health conditions while facing significant barriers to accessing comprehensive care. These inequities directly undermine their ability to secure and maintain stable housing.

BARRIERS TO ACCESSING INTEGRATED, HOLISTIC CARE INCLUDE:

- Financial barriers
- Logistical challenges (transportation, appointments, ID)
- Systemic inequities
- Siloed services
- Competing survival priorities

THE IMPACT OF HEALTH BARRIERS ON HOUSING STABILITY INCLUDES:

- Worsening or untreated health conditions
- Increased instability and displacement
- Greater reliance on crisis and emergency services
- Policy and service gaps that prevent continuity of care
- Competing survival priorities

Safe n Sound's data shows that ongoing failures in equitable health care access are a major driver of chronic homelessness. **These are not individual failings, but structural ones** — and they represent a public health crisis that **requires re-imagining existing underfunded fractured systems into integrated, coordinated solutions**.

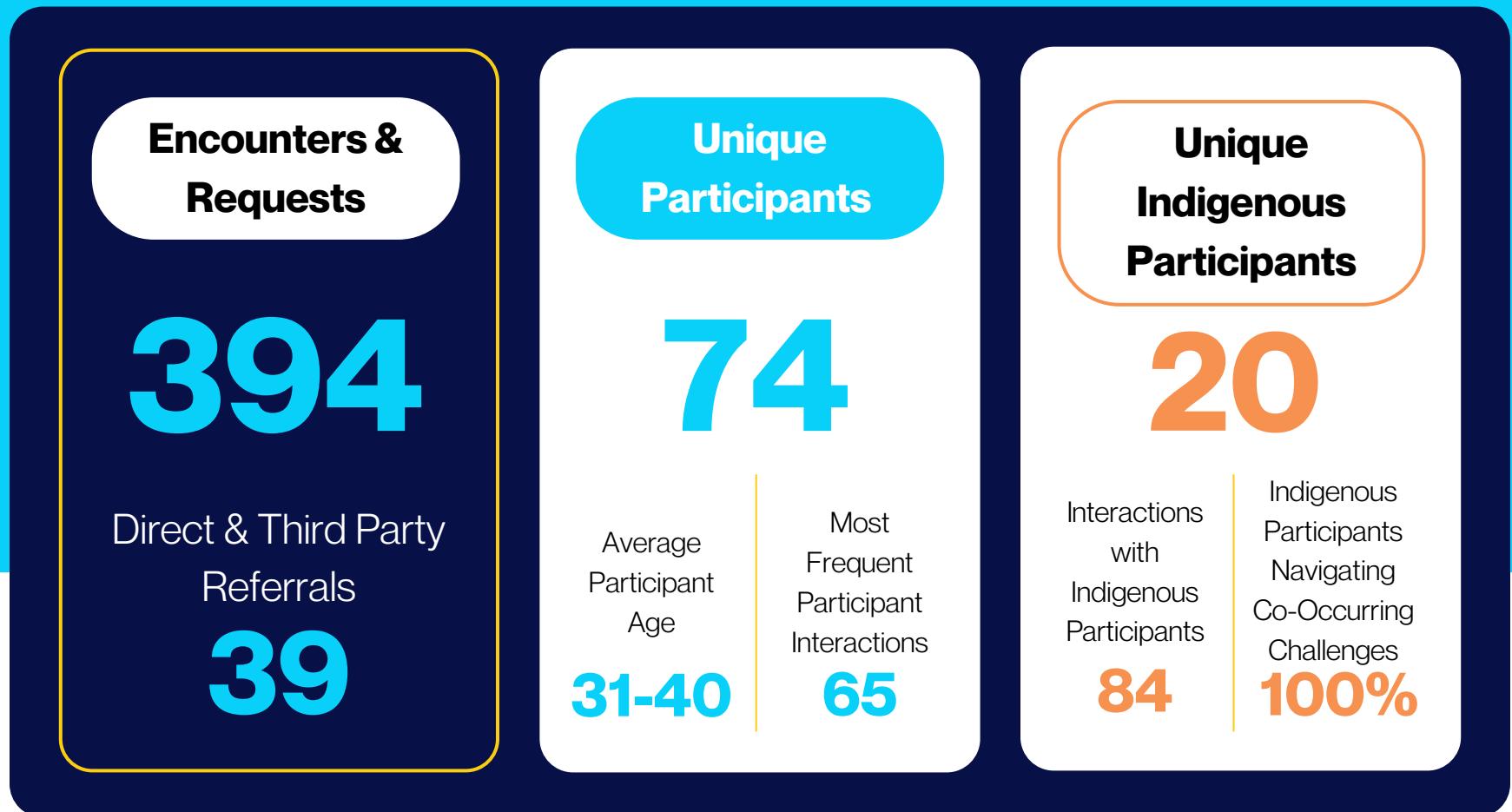
As Safe n Sound provides on-site access to primary care, mental health supports, harm-reduction services, and system navigation, people are not forced to choose between survival and health. Bringing care directly to where people are reduces crisis, prevents avoidable hospitalizations, and supports longer-term stability. Our statistics therefore reflect both unmet system-wide needs and the positive impact of low-barrier, relationship-based care.

Our community is working at combatting these inequities through various projects and community partnerships, - including SOS Markets, the SOS Team, and Improving Equity in Access to Palliative Care (IEAPC)— Safe n Sound and its partners work to ensure culturally competent, responsive health services reach people where they are. These approaches reduce the need for survival needs like food and shelter to compete with essential health care, strengthening both individual wellbeing and community stability.



NRT TEAM STATISTICS

Month
DECEMBER 2025



Notes for Understanding

Unique Participants - means **counting each distinct (unique) individual only once**, regardless of how many times they attend, engage, or receive services. It reviews a total headcount, not individualized interactions.

Direct & Third Party Referrals - **Direct** from businesses or community members, **Third Party** is 211 or police

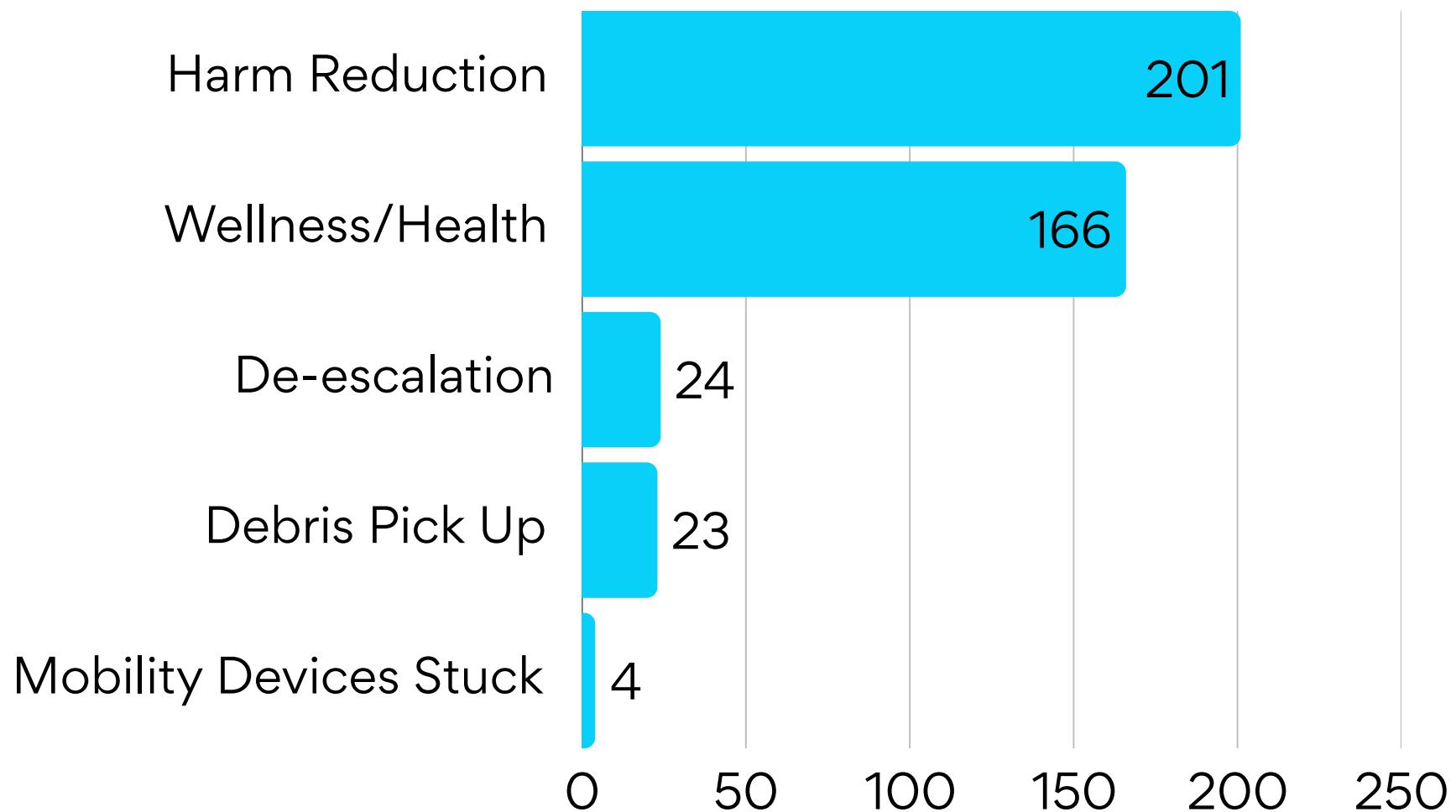
Co-Occurring Challenges - individuals experiencing multiple health disorders. Symptoms of one condition exacerbate the other, requiring integrated treatment addressing all conditions simultaneously for best outcome

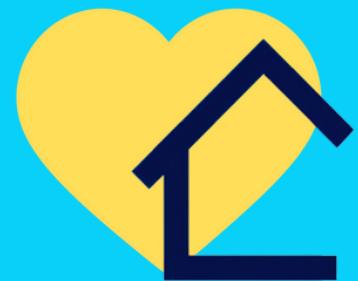


NRT TEAM STATISTICS

Month
DECEMBER 2025

PRIMARY SUPPORTS PROVIDED





NRT TEAM STATISTICS

Month
DECEMBER 2025



- Dual Diagnosis
- Concurrent Disorders
- Trimorbidity
- Mental Health
- Physical Health
- Mobility Device
- Dementia
- Unknown Health

Notes for Understanding

Highlighting Co-Occurring Health Inequities - Our Participants are facing barriers to accessing integrated holistic care which directly impacts their housing accessibility and stability; often, leading to chronic homelessness

Complex/Co-Occurring Health - individuals experiencing multiple health disorders requiring integrated treatment

Concurrent Disorder - co-occurring complexities as a person is experiencing mental health and substance misuse disorder

Dual Diagnosis - co-occurring complexities as a person is experiencing a developmental and mental health disorder



NRT TEAM STATISTICS

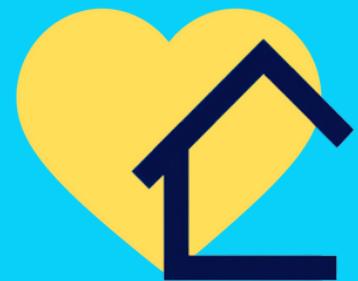
Month
DECEMBER 2025



Male
53%

Female
47%

Trans/Non-Binary
0%



NRT TEAM STATISTICS

Month
DECEMBER 2025

PROVISIONS PROVIDED





**Check our
Website for
Monthly
Reports
Overview**

**HOMELESSNESS
CAN AFFECT ANYONE**