REPORT ON THE STREET COUNT OF ROUGH SLEEPERS 2022

Ministry of Social and Family Development

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Contents

Executive Summary

- Homeless persons and rough sleepers often grapple with multiple interrelated issues that hinder them from securing or maintaining stable housing arrangements.

- The Ministry of Social and Family Development (MSF) has been working closely with community partners, social service agencies, and other government organisations in the Partners Engaging and Empowering Rough Sleepers (PEERS) Network to provide coordinated assistance to rough sleepers.

- Understanding the numbers, geographical spread, profiles, and needs of homeless persons and rough sleepers in our local context can help in the PEERS Network's outreach efforts and MSF's planning of services such as shelters.

- The 2022 single-night street count and survey of rough sleepers was undertaken in collaboration with the PEERS Network to track the number of rough sleepers in Singapore, and to identify ways to further strengthen our work. It was conducted on the night of 11 November 2022, involving 860 volunteers from the PEERS Network, community partners, academics, and members of the public.

- The single-night street count found 530 rough sleepers — a decrease from the 921 rough sleepers found in the last single-night street count by the Lee Kuan Yew School of Public Policy (LKYSPP) in 2019.[1]

- 57 rough sleepers participated in the accompanying survey. It found that:
    a. The majority of survey respondents were not first-time rough sleepers. About half started sleeping rough less than a year ago. Most respondents also slept outside frequently.
    b. 40% of respondents moved around different rough sleeping locations, with varying extents of mobility.
    c. Around half of the respondents cited multiple reasons for sleeping rough, beyond issues with securing or maintaining housing. This included disagreements with family, friends, or co-habitants, and reasons relating to employment and finances.
    d. 61% of respondents had not sought help from personal sources of support, while 53% of respondents had sought community and government assistance.

- These findings affirm the need for MSF and the PEERS Network's continuing work with community partners, social service agencies, and other government organisations to enhance outreach and accessibility of shelter services, as well as upstream interventions to minimise rough sleeping and homelessness.

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[1] LKYSPP also conducted cumulative counts over several months in 2019 and 2021, which found 1,050 and 616 rough sleepers respectively (Ng, 2019; Ng & Sekhon Atac, 2022). However, the figures obtained via cumulative counts are not directly comparable to those obtained via single-night counts due to methodological differences. Refer to Section 4.1 for details.

1.   Introduction

Key Points
- Homeless persons and rough sleepers often grapple with multiple interrelated issues that hinder them from securing or maintaining stable housing arrangements.
- MSF defines "homeless persons" as those who do not have access to adequate housing, and the term "rough sleepers" refers to all persons sleeping in public spaces regardless of their housing circumstances.
- This report presents the number and geographical spread of rough sleepers after safe management measures and border closures arising from COVID-19 had ceased. It also provides insight into the profiles of rough sleepers and their reasons for sleeping rough.

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1   Homeless persons and rough sleepers in Singapore often grapple with multiple interrelated issues that hinder them from securing or maintaining stable housing arrangements. Difficult family relationships, or difficulties with keeping a stable job due to poor health, are just some of the reasons resulting in challenges in purchasing a flat without assistance. Others sleep in public spaces due to estranged relations with family members or co-tenants, or even just to be closer to their workplaces. There is also a small proportion who may be destitute, as they are unable to care for themselves and have no family support.

2   MSF has been working with community partners, social service agencies, and other government organisations to provide coordinated and customised assistance to support every homeless person and rough sleeper in obtaining stable long-term housing. **MSF defines "homeless persons" as those who do not have access to adequate housing.**[2] This includes persons who have no homes and are staying in temporary accommodation (e.g., shelters), or face difficulty in returning home and end up sleeping on the streets. **MSF uses the term "rough sleepers" to refer to all persons sleeping in public spaces, regardless of their housing circumstances**. Not all homeless persons may have slept rough, as they may have had alternative accommodation (e.g., shelters funded by MSF and community partners) while seeking long-term stable housing.

3   International research has also documented the challenges that homeless persons and rough sleepers may face. For example, they may struggle with maintaining stable employment, social isolation, risk of assault, and barriers to healthcare and other services (Fleury et al., 2021). Internationally, homeless persons also reported worse physical and emotional health than the general population, including those from less well-to-do neighbourhoods (Onapa et al., 2022). Gutwinski et al. (2021) also found that among homeless persons surveyed in multiple high-income countries, 75% suffered from some form of mental disorder.[3] In Singapore, previous street counts have also suggested that some rough sleepers may experience

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[2] International research often includes rough sleepers in the definition of "homeless persons", as well as those living in temporary shelters for the homeless (i.e., sheltered homelessness).

[3] The researchers conducted a meta-regression analysis of 39 publications involving 8,049 homeless participants in high-income countries and noted the high prevalence of mental disorders.

adverse effects while sleeping rough. Almost half of 88 rough sleepers surveyed in a 2019 single-night count reported health issues (Ng, 2019). Poor physical and mental health may also have caused homeless persons to be unable to maintain their jobs, particularly in physically demanding occupations (Ng & Sekhon Atac, 2022).

4   To ensure the safety and well-being of all homeless persons and rough sleepers, MSF has been working closely with community partners, social service agencies, and other government organisations in the PEERS Network to provide coordinated assistance since 2019. Understanding the number, geographical spread, profiles, and needs of homeless persons and rough sleepers in our local context can help in the PEERS Network's outreach efforts and MSF's planning of services such as shelters, so better support can be rendered to rough sleepers.

5   To date, MSF has collaborated with various community and academic partners to understand the profiles and needs of homeless persons and rough sleepers, by collecting and analysing shelter and outreach data. However, despite regular outreach efforts by the PEERS Network, some rough sleepers have yet to interact with community partners, social service agencies, or government organisations. Therefore, this street count was undertaken in collaboration with the PEERS Network to: (i) ascertain the number and geographical spread of **all rough sleepers** in Singapore, including those who may not have been engaged; (ii) supplement existing data on known homeless persons and rough sleepers; and (iii) inform future outreach and service delivery.

6   Building on previous local street counts conducted by the LKYSPP in 2019 and 2021, MSF collaborated with the PEERS Network, community partners, academics, and members of the public to refine the count methodology and mobilise volunteers for the 2022 street count. MSF will continue to conduct regular street counts to track the number and geographical spread of rough sleepers in Singapore over time.

7   This report shares findings from the single-night street count and survey of rough sleepers conducted on the night of 11 November 2022. This count involved 860 trained volunteers, who comprehensively covered 400 areas of Singapore in a single night.[4] This report presents the number and geographical spread of rough sleepers after safe management measures and border closures arising from COVID-19 had ceased. It also provides insight into the profiles of rough sleepers and their reasons for sleeping rough.

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[4] The 2022 street count involved more volunteers than previous street counts in Singapore. The 2019 and 2021 street counts by LKYSPP involved 480 and more than 200 volunteers respectively.

2.   Progress in Whole-of-Society Efforts to Support Rough Sleepers

Key Points
- There has been steady collective progress in our whole-of-society efforts to reach out to and support rough sleepers.
- Between July 2019 and March 2023, the PEERS Network supported over 1,600 rough sleepers through befriending and outreach, coordinated and holistic assistance, and provision of shelter.
- Beyond the provision of temporary shelters, MSF also works closely with the Housing & Development Board (HDB) to assist rough sleepers in working towards their long-term housing options.

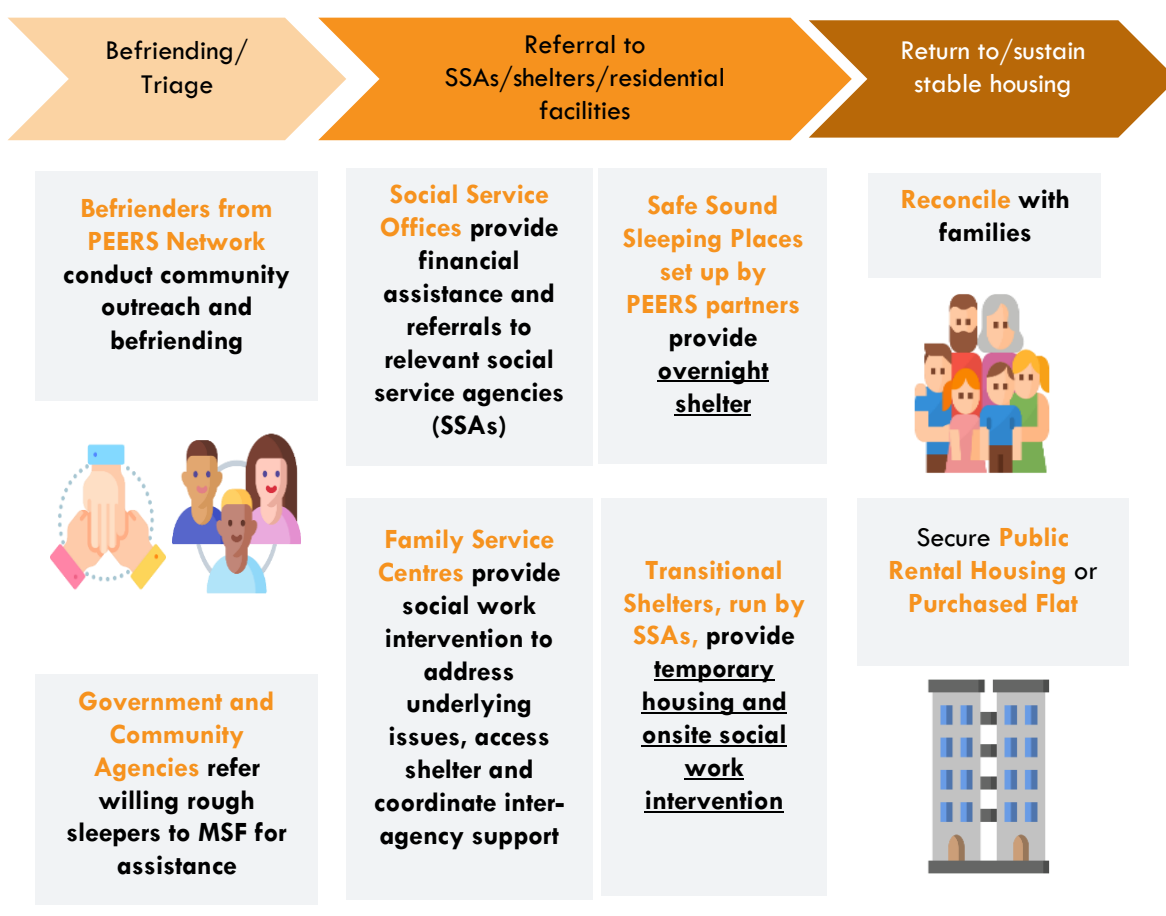**Box 1: Overall housing landscape in Singapore**

Singapore has one of the highest homeownership rates in the world, including among lower-income households. Around 90% of Singaporeans own their homes. This reflects the Government's commitment, since the earliest days of nation-building, to ensure that public housing remains affordable and accessible to all Singaporeans.

To do so, the Government provides significant housing grants and subsidies to help Singaporeans own a home, which are progressively tiered so that lower-income households receive more support when purchasing a home. First-timer families can receive housing grants of up to $80,000 when buying new flats from HDB, and up to $190,000 when buying resale flats. The Government also provides highly subsidised public rental housing under the Public Rental Scheme (PRS), to ensure that those who do not have other housing options can still have a safe and stable home.

For residents living in public rental flats, there are concerted government efforts to provide them with holistic social support. For example, families with young children in public rental flats are enrolled in Community Link (ComLink), where MSF and community partners work with them towards achieving the 3'S' — stability, self-reliance, and social mobility. Once individuals or families are ready to buy a flat, HDB provides them with additional support, including grants, priority schemes, and one-to-one guidance on purchasing a flat. Over the past decade, 7,800 rental households have benefited from HDB's various housing schemes and grants, and moved into their own homes.

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8   There has been steady collective progress in our whole-of-society efforts to provide coordinated and customised support for rough sleepers. MSF works closely with various partners to support rough sleepers through the PEERS Network, a collaboration between community groups, social service agencies, and other government organisations to journey with rough sleepers in addressing their issues and securing stable housing (see **Box 2**). These efforts have helped more rough sleepers move into shelters, which is a significant step in ensuring their safety and well-being. The PEERS Network continues to engage those living in shelters to support them in achieving stable housing.

Box 2: Coordinated assistance to support rough sleepers in achieving stable housing

Befriending/ Triage	Referral to SSAs/shelters/residential facilities		Return to/sustain stable housing

| **Befrienders from PEERS Network** conduct community outreach and befriending | **Social Service Offices** provide financial assistance and referrals to relevant social service agencies (SSAs) | **Safe Sound Sleeping Places set up by PEERS partners** provide <u>overnight shelter</u> | **Reconcile** with families |
| **Government and Community Agencies** refer willing rough sleepers to MSF for assistance | **Family Service Centres** provide social work intervention to address underlying issues, access shelter and coordinate inter-agency support | **Transitional Shelters, run by SSAs,** provide <u>temporary housing and onsite social work intervention</u> | Secure **Public Rental Housing** or **Purchased Flat** |

9   Between July 2019 and March 2023, the PEERS Network supported over 1,600 rough sleepers through:

a) **Befriending and outreach:** Befriender groups conduct regular night walks to engage rough sleepers. Befrienders take time to build rapport with and take opening steps to meet the needs of rough sleepers, especially those who are initially reluctant to receive assistance from community groups or government agencies. When rough sleepers are ready to accept assistance, befriender groups may refer them to support services (e.g., shelter and/or financial assistance). Befrienders may continue to support rough sleepers after they move into housing by helping them settle down in their rental units, providing furnishing, assisting in house cleaning, and continuing visits and engagements.

b) **Coordinated assistance:** Public and social services have referral protocols to provide coordinated assistance to rough sleepers. Together, these touchpoints provide holistic and customised support for rough sleepers who experience multiple issues that may be interrelated. This includes helping clients access Government assistance, such as ComCare financial assistance for daily living expenses provided by the Social Service Offices (SSOs), renting a flat with HDB under the PRS, and employment support from Workforce Singapore (WSG). Family Service Centres (FSCs) also provide social work intervention to address rough sleepers' underlying social issues (e.g., facilitate reconciliation with family), help them access shelter, and coordinate inter-agency support.

c) **Shelter:** PEERS partners have set up Safe Sound Sleeping Places (S3Ps) within their community premises to provide rough sleepers with a safe environment to rest for the night. S3Ps also enable social workers and agencies providing help to contact rough sleepers more easily. As of March 2023, there were 22 S3Ps. These S3Ps complement the six Transitional Shelters (TSes) funded by MSF, which provide onsite social work intervention to support clients towards stable housing. There is no cap on the length of stay at TSes, although TS social workers work with residents to resolve any challenges impeding their access to stable long-term housing as soon as practicable. Between April 2020 and March 2023, 340 individuals from TSes progressed to longer-term housing. For the small proportion of rough sleepers who are destitute, MSF has encouraged them to be voluntarily admitted to MSF-funded Welfare Homes. Welfare Homes provide long-term residential care and rehabilitation programmes to improve their physical and emotional well-being and reintegrate them with the community where possible.[5]

d) **Continually seeking ways to improve coordinated outreach and support:** MSF has been working with PEERS partners and academics to study long-term homelessness and the experiences of homeless individuals and families living in shelters, with the aim of better supporting homeless individuals and families and rough sleepers.

10   These existing partnerships enabled MSF to work quickly with community partners to increase shelter spaces during the COVID-19 pandemic, when there was a significant increase in the number of people seeking shelter. Various organisations offered their premises as S3Ps, and HDB provided vacant rental flats on an emergency/exceptional basis to community partners to operate S3Ps. At its peak in May 2020, there were 45 S3Ps that could accommodate up to 920 rough sleepers. To meet the increased demand during the pandemic, MSF also increased the capacity of TSes from about 100 to 500 spaces for homeless individuals in January 2021, and from 130 to 180 spaces for homeless families in January 2022.

11   Beyond the provision of temporary shelters, MSF also works closely with HDB to assist rough sleepers in working towards long-term housing options, which include moving back with their families, buying a flat of their own, or renting a flat under the PRS for those who do not have other housing options and suitable family support.

12   Over the years, HDB provided more options for lower-income singles (including rough sleepers) under the PRS:

a) **Joint Singles Scheme (JSS):** Public rental flats under the JSS are provided on a flat-sharing basis to ensure prudent use of rental flats to help those in need and prevent tenants (especially the elderly) from falling into isolation. In recent years, HDB has been improving the JSS, such as by facilitating single applicants who are unable to find a flatmate to meet each other, and by providing partitions in flats to offer tenants more privacy.

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[5] Statutory powers to admit destitute persons in Welfare Homes, provided by the Destitute Persons Act, have only been exercised as a last resort. These are instances where MSF assesses that the individual's safety is at risk, or that the individual lacks the mental capacity to make informed decisions for his/her welfare. MSF does not admit every person who meets the legal definition of a destitute person to Welfare Homes, and instead works with FSCs, SSOs, and community partners to explore alternative options if they can continue living within the community with support.

b) **Joint Singles Scheme Operator-Run (JSS-OR) Pilot:** This model was introduced to allow lower-income singles to apply for a public rental flat individually, without having to find a flatmate before application. Flats under the JSS-OR model have partitions installed, and applicants' eligibility and rental rates are assessed individually. A social service agency is appointed as the operator for each site to manage the flats and flat-sharing arrangements, including pairing tenants, mediating conflicts if any, and ensuring that tenants are supported by national and local social services. Currently, there are three JSS-OR sites that can accommodate around 400 tenants in total.

13   Through the single-night street count that was conducted on 11 November 2022, MSF aims to understand the impact of these efforts, alongside the lifting of COVID-19 safe management measures and border closures, on the number, geographical spread, and profiles of rough sleepers in Singapore. MSF also seeks to continually identify ways to support rough sleepers with future regular street counts.

3.   Methodology for the Street Count

Key Points
- The MSF research team adopted a single-night count method with a comprehensive coverage of all areas in Singapore that are safe and accessible on foot at night.
- 860 trained volunteers from the PEERS Network, community partners, academics, and members of the public were mobilised to cover 400 counting areas in a single night.
- Volunteers were given clear guidelines and undertook detailed training on how to count and engage rough sleepers.

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14   The single-night street count aimed to understand the scale and geographical distribution of rough sleepers in Singapore, as of November 2022, to inform further outreach efforts and service planning, which will better support the needs of rough sleepers. Through a short survey administered to awake and willing rough sleepers, the count also sought to gain a deeper understanding of rough sleepers in the following areas:

    a. Demographic profiles;
    b. Duration of sleeping rough;
    c. Choice of rough sleeping locations;
    d. Reasons for sleeping rough;
    e. Future accommodation plans; and
    f. Experiences with seeking assistance.

3.1   Adoption of single-night count method

15   The MSF research team adopted **a single-night count method with a comprehensive coverage of all areas in Singapore that are safe and accessible on foot at night**.[6] Despite the demanding manpower requirement, the team chose this method based on our objectives for the street count. Firstly, a point-in-time count is more likely to count rough sleepers who are less willing to engage with services, and therefore not likely to be reflected in existing shelter and outreach data. This would supplement existing administrative data on known rough sleepers. Next, in considering how to conduct the point-in-time count, the research team adopted the single-night approach as it minimises duplicate counting and ensures that all observations are unique. This would allow MSF to have a more accurate nationwide snapshot of the number and geographical spread of rough sleepers, and the resourcing required to support them.[7] A summary of methods to measure rough sleeper populations can be found in **Box 3**.

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[6] The street count excluded areas which were restricted, unsafe, and/or poorly lit, such as islands outside of mainland Singapore, cemeteries, military zones, water catchment areas, private housing estates with no public pavilions, gated residential areas, and industrial areas, although there could be a small number of rough sleepers in these areas. See Section 3.2 for detailed considerations on the inclusion/exclusion of areas.

[7] The single-night count method may potentially undercount those who sleep rough sporadically (e.g., one day a week) as they may not have been present on the night of the count. However, the PEERS Network's regular outreaches would help to cover this group, in terms of engaging and supporting them.

Box 3: Methods to measure rough sleeper populations

Methods to measure rough sleeper populations include: (i) point-in-time counts; (ii) named-list approach; and (iii) using administrative data.

Point-in-time counts

Point-in-time counts, such as single-night counts and period prevalence counts conducted over several weeks (also known as cumulative counts), provide a snapshot of people who sleep rough during a short period of time. Point-in-time counts are conducted by government agencies in countries such as the United States of America (USA), the United Kingdom (UK), and Australia to monitor the rough sleeping situation. This method is most likely to count rough sleepers who are less willing to engage with services, a group that may not be reflected in existing shelter and outreach data (Preval & Barr, 2018).

Point-in-time counts are resource-intensive. This is especially so for single-night counts, for which a larger number of trained volunteers is required to cover the assigned areas in a single night, compared to cumulative counts where areas may be covered over a longer period of time with fewer volunteers. However, cumulative counts increase the possibility of overcounting, as rough sleepers may move to different locations during the count period and be counted more than once if unique identifiers are not created. On the other hand, single-night counts may undercount those who sleep rough sporadically/temporarily (Kauppi, 2017).

Previous local street counts conducted by LKYSPP adopted both approaches — a three-month cumulative count with a comprehensive coverage of Singapore in 2019 and 2021, and a single-night count in 2019 of hotspots identified in that year's cumulative count.

Named-list approach

This approach involves the maintenance of a real-time register (typically at a city/area level) that is used to monitor the flow of individuals in and out of homelessness. However, this approach may undercount those that do not engage with government or community social services (Preval & Barr, 2018).

Using administrative data

Administrative data is often collected by social service providers in the course of their service provision to rough sleepers and homeless persons. However, this approach may also undercount those that do not engage with social services, and its accuracy is dependent on the availability of data that is of sufficient quality (i.e., employing the same definition of rough sleepers/homeless persons, collecting at the same time of the year, etc.) (Berry, 2007).

16   To develop and conduct a robust single-night count, the research team worked with two academic advisors[8] on the methodology, survey questionnaire, operationalisation of the street count, and analysis of findings.

17   The research team also obtained research ethics approval for the street count from the National Council of Social Service (NCSS) Ethics Review Committee (ERC) (Reference number: NERC-006-2022). The review panel comprises 11 members drawn from Institutes of Higher Learning (IHLs), social service agencies, and the health and legal professions. It operates independently on a blind review basis to maintain a fair and impartial review process, and ensures that fieldwork is conducted fairly and justly for research participants.

3.2   Comprehensive coverage of Singapore

18   To determine the most efficient way to achieve a comprehensive coverage of Singapore in a single night, the MSF research team referred to past local and overseas street counts, and worked with social service agencies, community partners, and volunteers.

19   New York's biennial count is often cited as an example of a high-quality single-night count. Particularly crucial for the efficient operationalisation of this count was the city's division into "high-density" and "low-density" areas, based on past counts, expert views, and institutional knowledge from organisations working with homeless persons. All high-density areas and a sample of low-density areas were then surveyed by volunteers between midnight and 4am (Schneider et al., 2016). Similarly, Toronto's street count, last conducted in 2021, studied all high-density areas and a sample of low-density areas identified from existing data (City of Toronto, 2021). In Singapore, the 2019 LKYSPP street count also identified high- and low-density areas through a cumulative count. However, the single-night count was conducted only in selected zones — those that had returned higher count numbers in the cumulative count were prioritised. This was due to the heavy demands on fieldwork resources (Ng, 2019).

20   The research team referenced the above studies to inform manpower planning for ensuring a comprehensive coverage for the single-night count. First, the team categorised Singapore's 332 Urban Redevelopment Authority (URA) Subzones[9] into those with high or low probabilities of finding rough sleepers, based on: (i) administrative data; (ii) data collated by community partners; and (iii) data collected through groundwork by volunteers in areas where there was little/no existing information on rough sleepers. The cumulative findings were then used to generate a preliminary heatmap of rough sleeper sightings.

21   Next, the team identified exclusion areas that would not be covered during the count, partly informed by volunteers' and community partners' feedback. While there may be a small number of rough sleepers in these exclusion areas, it was not possible to cover these areas as

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[8] Associate Professor Ho Kong Chong (Yale-NUS Urban Studies Programme and Department of Sociology and Anthropology, National University of Singapore (NUS)) is a mixed methods researcher and an urban sociologist focusing on neighbourhood and community development in cities; and Dr Harry Tan (Policy Lab, Institute of Policy Studies (IPS)) is a qualitative researcher deeply involved in homelessness research in Singapore.

[9] See **Box 7** in **Annex B** for a comparison of different geographic subdivisional units in Singapore.

they were restricted, unsafe, and/or poorly lit. Exclusion areas include islands outside of mainland Singapore, cemeteries, military zones, water catchment areas, private housing estates with no public pavilions, gated residential areas, and industrial areas. This led to a total of 190 URA Subzones being covered for the single-night count, with 90 high-probability and 100 low-probability Subzones respectively.

22   The 190 URA Subzones were further split into 400 counting areas. MSF worked with volunteers between July and August 2022 to determine the feasibility of covering the allocated counting areas within a stipulated period of around 2.5 hours. To ensure that volunteers in high-probability Subzones had sufficient time to engage and survey more rough sleepers, these were cut into more counting areas of smaller sizes, compared to low-probability Subzones which had fewer counting areas of larger sizes.

3.3   860 trained volunteers were mobilised to cover 400 counting areas in a single night

23   For the street count, MSF recruited volunteers through SSOs, FSCs, the PEERS Network, NCSS, and other platforms. In all, MSF mobilised **860** volunteers to cover all 400 counting areas in a single night in pairs or trios. All volunteers were aged 18 and above.

24   Volunteers came from varied backgrounds, and included social work practitioners, PEERS partners experienced in engaging rough sleepers, and members of the public who might not have had experience interacting with rough sleepers. As far as possible, the assignment of volunteers into pairs/trios took their background (e.g., social work training) and experience in engaging rough sleepers into consideration. More experienced volunteers were assigned to high-probability counting areas, and typically paired with less experienced ones even in low-probability counting areas.

25   Having well-trained volunteers is crucial for the success of a street count, as they would need to know where to find and how to identify rough sleepers, as well as how to report observations and survey data appropriately for analysis (Preval & Barr, 2018). Thus, all volunteers were required to attend a 1.5-hour training session conducted by the research team to ensure standardised practices for identifying rough sleepers (details in **Section 3.4**), filling in observation and survey forms, and engaging rough sleepers respectfully (details in **Section 3.5**). Volunteers were also provided with a detailed instructional brief, training slides, and a document containing responses to commonly asked questions.

26   The research team also collaborated with over 100 SSO officers ("SSO I/Cs") to coordinate the deployment of volunteers for the count. Each SSO I/C worked with four to five pairs/trios of volunteers. The SSO I/Cs played a crucial role in preparing for the count, as they were familiar with their service boundaries and provided ground advice on potential hotspots and walking routes. The SSO I/Cs were also involved in the actual street count to respond to volunteers' queries and guide volunteers in navigating unexpected situations.

3.4   Guidelines on counting rough sleepers

27   Based on the preliminary heatmap generated for manpower planning (see **Para 20**), the research team identified the five most common types of places where rough sleepers might be found:

1) Parks/Benches;
2) Food Centres & Markets;
3) HDB Buildings (includes void decks, stairwells, pavilions, and playgrounds near HDB blocks);
4) Carparks (includes multi-storey or open-air); and
5) Near MRT stations and bus interchanges.

28   The types of places were communicated to volunteers to increase their chances of finding rough sleepers. Volunteers were also instructed to cover their areas on foot on a best-effort basis within 2.5 hours. This meant, for example, that while rough sleepers might rest in HDB stairwells, volunteers were not required to climb entire stairwells of HDB blocks.

29   The research team also referenced previous local street counts by LKYSPP (Ng, 2019; Ng & Sekhon Atac, 2022), and consulted community partners and academic advisors to develop guidelines on who to count as rough sleepers (see **Box 4**).

Box 4: Guidelines on who to count as a rough sleeper

Volunteers should count:
a.   **All** persons who are asleep in public locations.
b.   All persons who are awake **but look like they are going to sleep** in a public location. If they are doing any of the actions below, do count them:
- Lying down;
- Setting up or sitting next to some bedding (e.g., ground covering, pillow, blanket, loose furniture arranged for sleeping, hammock, large cardboard pieces);
- Carrying many possessions (e.g., a very large bag, many bags/plastic bags/ trolley).

Volunteers should not count:
a.   People who are using a public place for socialising or work (e.g., those chatting at void decks, a couple in a park, security/cleaning staff on night shift, cardboard collectors, recyclers rummaging through bins); and
b.   People in camping tents (at designated campsites on beaches).

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30   Volunteers reported their sightings in an online observation form. For rough sleepers who were asleep, volunteers were given firm instructions not to wake or disturb them, but to only fill in the observation form quietly to report a sighting. For rough sleepers who were awake, volunteers were instructed to follow the protocol detailed in **Section 3.5**.

31   To protect the privacy and confidentiality of rough sleepers, the research team instructed volunteers to report only the general street name or location description. The observation form also explicitly reminded volunteers **not to indicate** postal codes, block numbers, building names, or any other specific location details. In addition, all volunteers signed non-disclosure agreements to ensure that they would not publish or communicate any information collected during the count to unauthorised persons. They were also prohibited from taking or disseminating photographs during the street count to avoid inadvertently revealing

any rough sleeper's location. The above approach meant that no personal identifiers which could have infringed on the privacy and confidentiality of rough sleepers were collected.

3.5 Engaging rough sleepers who were awake

32   Rough sleepers who were awake were invited to take part in a survey. The survey aimed to understand their rough sleeping duration, choice of sleeping location, reasons for sleeping rough, health and employment status, and their experiences in seeking assistance. The research team consulted the Homeless Hearts of Singapore, a befriender group in the PEERS Network, on how volunteers could respectfully engage rough sleepers who were awake. The team also consulted our academic advisors and The Lighthouse, another befriender group in the PEERS Network, to ensure that survey questions were appropriate for rough sleepers to answer.

33   Volunteers only invited rough sleepers to participate in the survey if they were willing and eligible (i.e., 21 years and above, and sleeping in a public space that night). Volunteers described the purpose of the survey using a Participant Information Sheet, and assured participants of the anonymity and confidentiality of their responses. Volunteers also reminded participants that they could stop the survey at any time or skip any questions they did not feel comfortable answering. All participants were given a $15 physical voucher after agreeing to participate, regardless of the extent of completion of the survey.

34   Volunteers were also trained not to collect any identifiable personal information (e.g., name, phone number, and address) from the survey participants, and not to offer any form of assistance, except in the event of emergencies (e.g., medical emergencies). Instead, all rough sleepers were handed a contact card containing hotlines for seeking assistance (see **Box 5**). For rough sleepers who were asleep, the card was placed beside them without disturbing them.

Box 5: Contact card provided to rough sleepers

If you require any assistance (e.g., financial assistance or shelter support), you may:
- Call the ComCare Hotline at 1800-222-0000
- Email the PEERS Office (msf_peersoffice@msf.gov.sg)
- Visit a Social Service Office (SSO) or Family Service Centre (FSC)
  - Scan the QR code to locate the nearest SSO or FSC

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4.   Findings from the Street Count

Key Points
- The single-night count found 530 rough sleepers — a decrease from the 921 rough sleepers found in the 2019 LKYSPP single-night count.
- Rough sleepers were sighted in all URA Planning Areas covered in the single-night count.
- Most rough sleepers were males, middle to older-aged, and Chinese.
- A large share of rough sleepers was sighted near HDB blocks, and in sheltered environments.

35   The single-night count was successfully conducted over four hours, from 11pm on 11 November 2022 to 3am on 12 November 2022. During the period, no rainfall was reported across Singapore which could otherwise have affected the count results.

4.1   530 rough sleepers were observed

36   The single-night count found 530 rough sleepers — a decrease from 921 rough sleepers found in the 2019 LKYSPP single-night count.[10] Volunteers had initially recorded 581 observations of individuals who were likely rough sleepers. However, data verification by the research team discounted 51 observations that did not fulfil the criteria of a rough sleeper.[11]

37   For comparison, LKYSPP also conducted cumulative counts over several months in 2019 and 2021, which found 1,050 and 616 rough sleepers respectively (Ng, 2019; Ng & Sekhon Atac, 2022). As figures obtained via cumulative counts are not directly comparable to those obtained via single-night counts due to methodological differences, the 2022 (single-night count, 530) and 2021 (cumulative count, 616) figures are also not directly comparable.[12]

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[10] Based on the 2022 street count, **for every 100,000 persons in Singapore, about 9 are sleeping rough**. The incidence is lower than the numbers for other global cities like New York and Hong Kong at about 40 and 21 respectively.

[11] For example, the research team discounted observations of persons with no/few possessions (e.g., only a handphone or a drink) who were lying down on benches and exercise stations with no form of bedding. Bedding could refer to newspapers, cardboard boxes, and the use of various materials (e.g., tarpaulin sheets, clothing) as blankets.

[12] This is because a cumulative count (e.g., that in 2021) may count rough sleepers who move across locations frequently multiple times (i.e., yields a figure that is higher than the actual population), while a single-night count (e.g., that in 2022) may not fully capture rough sleepers who do not sleep outside every day (i.e., yields a figure that is lower than the actual population). Refer to **Box 3** for a summary of methods to measure rough sleeper populations. MSF's considerations for adopting a single-night count method rather than a cumulative count method, despite intensive manpower requirements, are also discussed in **Para 15**.

4.2   Rough sleepers were sighted in all URA Planning Areas covered in the single-night street count

38   **Figure 1** shows the geographical distribution of rough sleepers observed by URA Planning Areas.[13] Kallang, Geylang, Bukit Merah, Southern Islands, and Tampines saw the highest number of rough sleeper sightings (see **Annex A** for a full list of rough sleeper sightings by URA Planning Areas).

39   While previous local street counts (Ng, 2019; Ng & Sekhon Atac, 2022) have suggested that rough sleepers were more likely to be found in larger and older neighbourhoods, the 2022 street count did not find similar trends, i.e., rough sleepers were not more likely to be found in larger and older areas (see **Annex B**).

Figure 1. Distribution of rough sleepers by URA Planning Areas
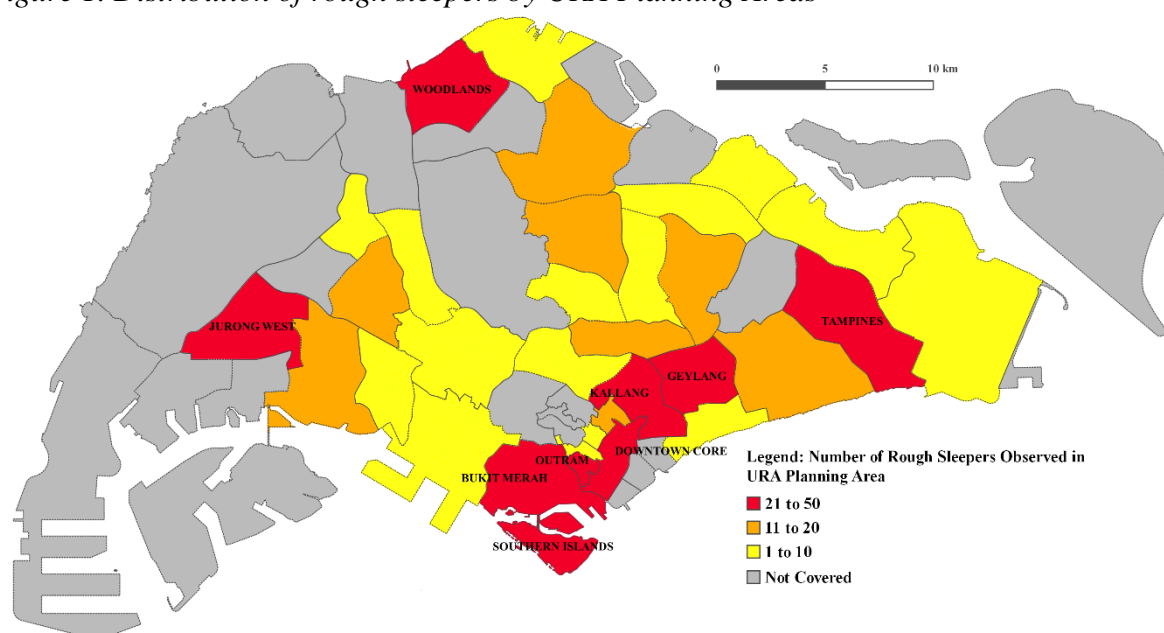
4.3   Most rough sleepers were males, middle to older-aged, and Chinese

40   In terms of demographic profile, 80% of rough sleepers were observed to be males, and 11% were females. Almost half (48%) of the rough sleepers were older (aged above 50), 39% were middle-aged (aged 31 to 50), and a small proportion (3%) were young (aged 30 & below). 47% of rough sleepers were observed to be Chinese, 21% Malay, and 18% Indian (**Table 1**). The profile of rough sleepers observed was generally similar to the profiles found in previous local street counts (Ng, 2019; Ng & Sekhon Atac, 2022).

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[13] Each URA Planning Area consists of multiple URA Subzones. See **Box 7** in **Annex B** for more information.

*Table 1. Key demographic characteristics of rough sleepers observed*

Demographic Characteristic		2022 Street Count (%)	2021 Street Count (%) (Ng & Sekhon Atac, 2022)	2019 Street Count (%) (Ng, 2019)
Sex	Male	80	83	87
	Female	11	12	10
	Could not be determined	9	5	3
Age	Young (30 & below)	3	0.5	0.7 (Below 20)
	Middle-aged (31 to 50)	39	38	33 (20s to 40s)
	Older (above 50)	48	45	51
	Could not be determined	10	16.5	12.3
Race	Chinese	47	49	46
	Malay	21	14	16
	Indian	18	16	11
	Others	1	-	-
	Could not be determined	14	-	-

Note: Shares may not exactly add up to 100% due to rounding.

4.4 Rough sleepers were largely sighted near HDB blocks, and in sheltered environments

41   Almost half (45%) of the rough sleepers were sighted near HDB blocks, which included void decks, stairwells, pavilions, playgrounds, and exercise stations. 23% were sighted around parks and benches, 12% in commercial areas, and 11% in food centres and markets (**Figure 2**). These findings are similar to those for previous local street counts (Ng, 2019; Ng & Sekhon Atac, 2022).

Figure 2. Types of locations for rough sleeper sightings (%)
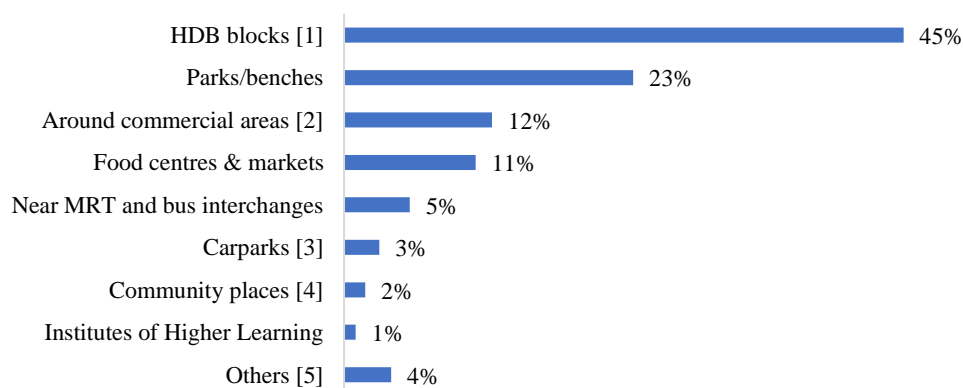

Notes: [1] Includes void decks, stairwells, pavilions, playgrounds near HDB blocks, and exercise stations. [2] Includes malls, offices, shophouses, restaurants, and theme parks. [3] Includes multi-storey and open-air carparks. [4] Includes places of worship, neighbourhood police posts, community centres, and polyclinics. [5] Includes substations, overhead bridges, and pavements.

Shares do not add up to 100% as volunteers could tick more than one location type in the observation form.

42   The majority of sighting locations were sheltered and well-lit (**Figure 3**). Rough sleepers who participated in the survey indicated that they intentionally chose such locations, with shelter and availability of facilities featured as top considerations for the choice of sleeping location (**Figure 4**). Such findings suggest that safety, shelter from natural elements, and access to facilities are key concerns for rough sleepers.

Figure 3. Characteristics of rough sleeper sighting locations (%)
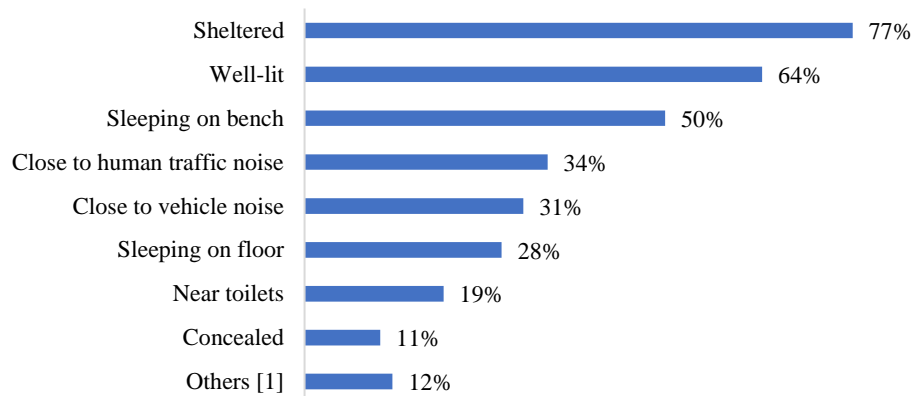
Notes: [1] Includes the presence of litter, debris, and pests, as well as other sleeping surfaces.

Shares do not add up to 100% as volunteers could choose more than one location characteristic in the observation form.

Figure 4. Location characteristics considered for the choice of sleeping location based on survey responses (N=57) (%)
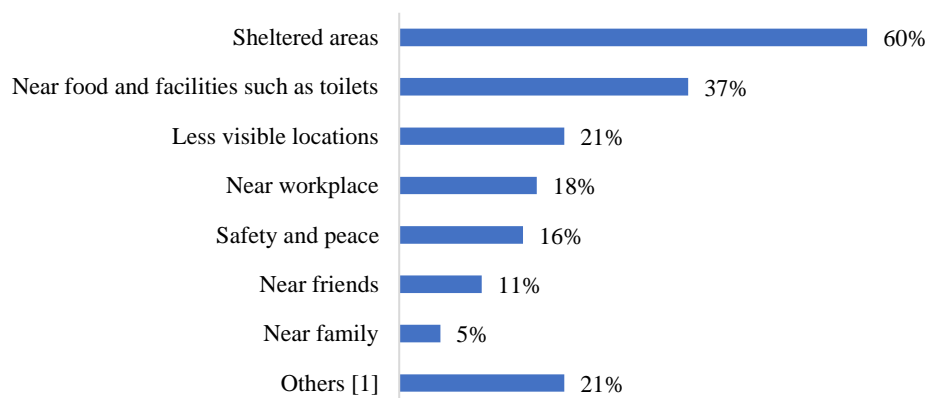
Notes: [1] Includes reasons such as being near an electrical outlet, familiarity, proximity to mosque/place of worship, convenience, cleanliness, comfort, etc.

Shares do not add up to 100% as survey respondents could choose more than one location characteristic.

# 5.   Findings from the Survey

Key Points
- Of the 530 rough sleepers sighted, 57 were awake and willing to take part in the survey.
- The majority of survey respondents were not first-time rough sleepers. About half started sleeping rough less than a year ago. Most respondents also slept outside frequently.
- 40% of respondents moved around different rough sleeping locations, with varying extents of mobility.
- Around half of the respondents indicated multiple reasons for sleeping rough, beyond issues with securing or maintaining housing. This included disagreements with family, friends, or co-habitants, and reasons relating to employment and finances.
- More than half of the respondents had not relied on personal sources of support, and nearly half had not sought help proactively. Nonetheless, about half of the respondents had sought community and government assistance.

5.1   The majority of survey respondents were not first-time rough sleepers. About half started sleeping rough less than a year ago. Most respondents slept outside frequently.

43   Of the 530 rough sleepers sighted, 57 consented to take part in the survey (11% of sightings). This was comparable to LKYSPP's 2019 single-night count, which had 88 survey participants out of 921 rough sleepers sighted (~10% of sightings).

44   45 survey respondents (79%) indicated that it was not their first time sleeping rough. When asked about the total length of time sleeping rough (calculated from when they had first started sleeping rough), 26 respondents (46%) had been doing so for less than a year (short-term), while 25 respondents (44%) had been doing so for a year or more (long-term) (**Figure 5**). On the frequency of rough sleeping, most survey respondents (47, or 82%) reported that they slept outside frequently (at least a few times per week), while only 9 respondents (15%) slept outside sporadically (at most once or a few times a month).

Figure 5. When respondents first started sleeping rough (N, %)

| Category	N, %
Less than a year [1]	26, 46%
More than a year [2]	25, 44%
Declined to answer	6, 11%
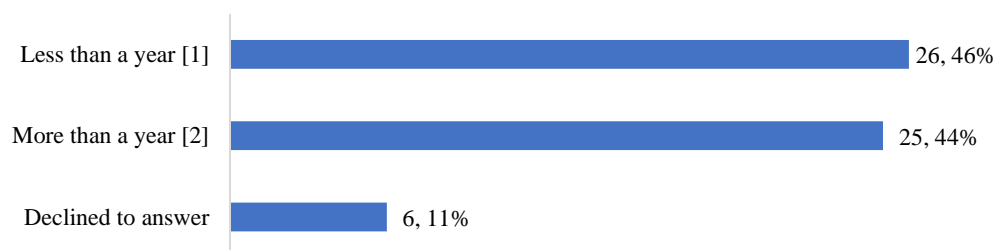
Notes: [1] This could range from less than 1 week to more than 6 months. [2] This could be up to 10 years or more.

5.2   40% of respondents moved around different rough sleeping locations, with varying extents of mobility

45   33 respondents (58%) indicated that they regularly slept rough in the location they were sighted in on the night of the street count. The remaining 23 respondents (40%) indicated that they did not regularly sleep rough in the location they were sighted in on the night of the street count.[14] Among this group, 15 out of 23 respondents were sighted in HDB Towns that they typically slept in, while the remaining 8 respondents were not sighted in HDB Towns that they typically slept in (**Figure 6**). This suggests that there was a sizeable segment of the rough sleeper population that was mobile, with varying extents of mobility.

Figure 6. Mobility of survey respondents as proxied by whether they regularly slept in the location they were sighted in, and their corresponding usual HDB Towns for rough sleeping (N, %)
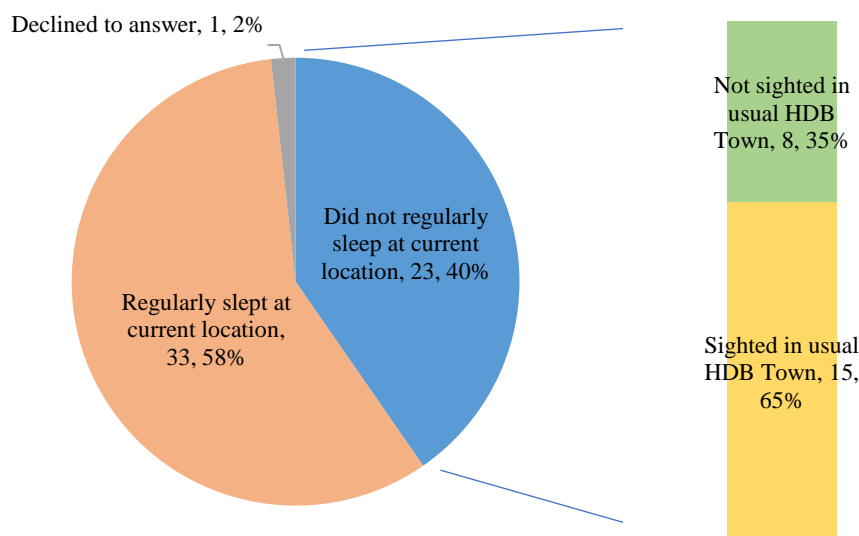

5.3   Around half of the respondents cited multiple reasons for sleeping rough

46   Around half of the respondents (30, or 53%) indicated multiple reasons for sleeping rough. Beyond securing and maintaining housing, respondents also faced other challenges such as disagreements with family, friends or co-habitants, and irregular income or debt. The three most cited reasons in the survey were:

      1) Disagreement with family, friends, or co-habitants (28, or 49%);
      2) Issues with securing or maintaining housing (22, or 39%); and
      3) Reasons relating to employment and finances (19, or 33%) (**Figure 7**).

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[14] 1 respondent declined to answer this question.

Figure 7. Reasons for sleeping rough indicated by survey respondents (N, %)
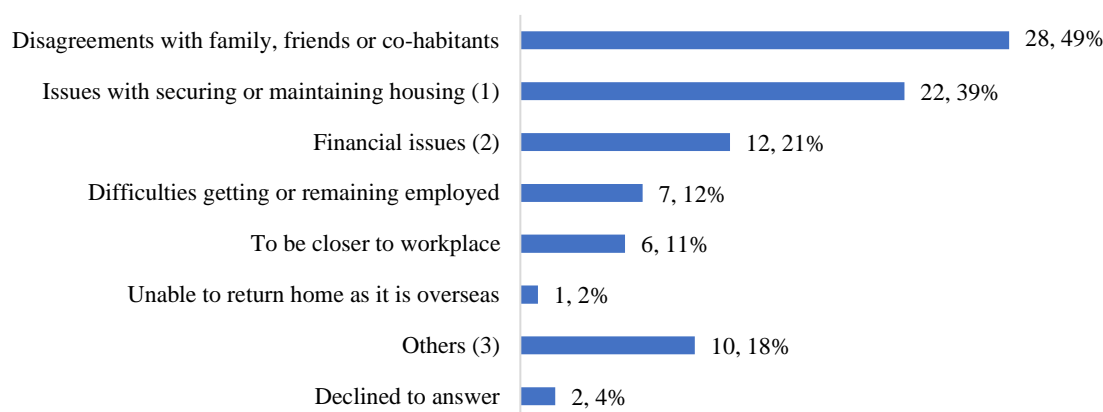
Notes:
(1) Includes reasons such as difficulty with public housing applications, selling their matrimonial property due to divorce, and not being keen on the location of the public rental flat offered. (2) Includes reasons such as irregular income, debt, and arrears. (3) Includes reasons such as health issues, uncomfortable home, and no family support.

Shares do not add up to 100% as survey respondents could choose more than one reason.

47   LKYSPP's 2021 street count had previously highlighted a group of transnational homeless persons and rough sleepers during COVID-19 (Ng & Sekhon Atac, 2022). These were persons who lived overseas and frequently travelled to Singapore for work, but were unable to return to their overseas residence due to border closures. By the time of the street count in November 2022, this group seemed to have largely dissipated with the reopening of international borders, as only one survey respondent (2%) indicated that he was unable to return home as it was overseas.

48   These findings suggest that there are multiple factors that can lead to rough sleeping. While the survey did not explore the interactions between these factors, a study on long-term homelessness commissioned by MSF to IPS suggests two possible pathways[15] that may shed light on the reasons indicated by survey respondents: (a) financial shock; and (b) divorce/separation (Tan, in press). These are elaborated in **Box 6**. Due to the multiple and likely interrelated reasons that can lead to rough sleeping, **rough sleepers may thus require customised interventions that cater to their individual needs**.


Box 6: Common pathways to homelessness

a) Financial shock pathway

        In this pathway, financial shock during the pandemic was the trigger to homelessness. While many such individuals previously owned a HDB flat, they had typically lost or sold off the flat due to divorce and/or financial difficulties (e.g., inability to repay mortgage loans). Before the COVID-19 pandemic, these individuals still had the means to secure long-term accommodation by renting (mostly from the open market, with a few

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[15] These archetypal pathways were derived from in-depth interviews with 50 individuals who were admitted into TSes and/or S3Ps in 2020 and 2021 (Tan, in press).

renting from HDB under the PRS), but a major loss of income during the COVID-19 pandemic led to evictions and entry into homelessness.
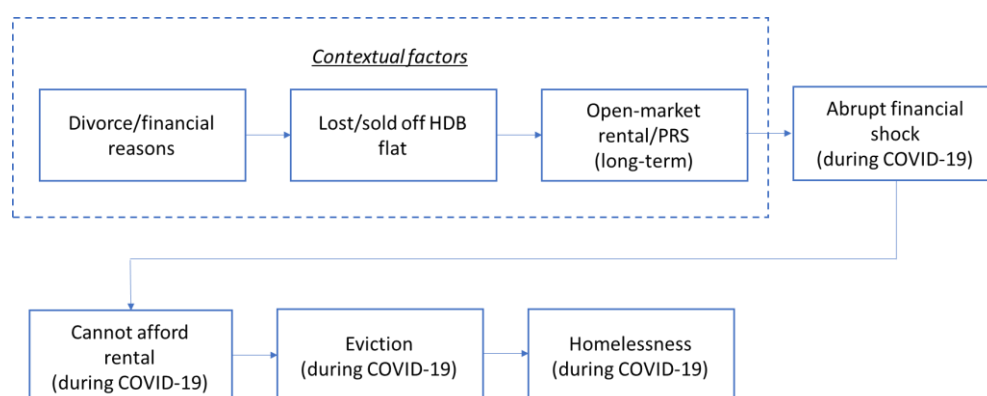
b) Breakdown of spousal relationships (divorce/separation) pathway

This pathway involved divorce/separation from spouses. These individuals reported entering homelessness upon divorce/separation as they lacked the resources to find alternative housing arrangements after losing/selling their marital homes. They had also tried in vain to exit homelessness, as they were unable to sustain paying open market rental prices and/or living overseas beyond the short term.
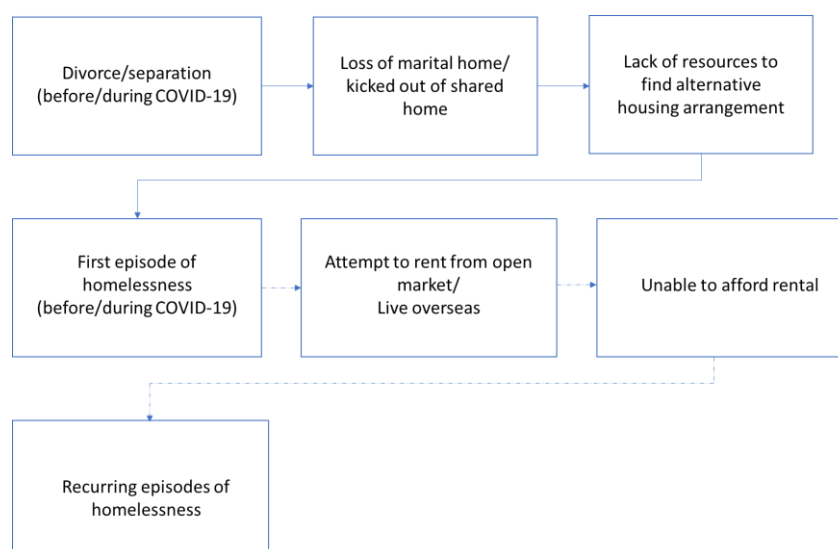

5.4   Almost half of the respondents reported having health conditions

49   28 respondents (49%) reported having some kind of health condition, while 25 (44%) reported no health conditions.[16] The most frequently reported health conditions include physical issues/pain (7 out of 28 respondents, or 25%), issues with blood pressure (6 out of 28 respondents, or 21%), and other chronic conditions such as asthma and stroke (5 out of 28 respondents, or 18%) (**Figure 8**).

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[16] The remaining 4 respondents (7%) declined to answer.

*Figure 8. Types of health conditions reported by survey respondents (N, %)*
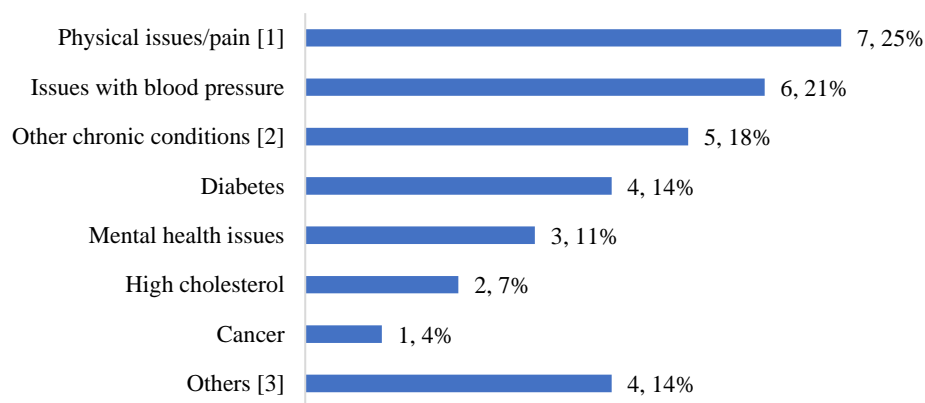
Notes: [1] Includes arthritic pain, neck, and back issues, swollen limbs, and knee issues. [2] Refers to asthma and stroke. [3] Includes irritable bowel syndrome, skin conditions, and incontinence.

Shares do not add up to 100% as respondents may report more than one health condition.

5.5 Almost half were in some form of employment; 43% earned more than $300 per week

50   28 respondents (49%) reported that they were in some form of employment, with a roughly even split between full-time (10 respondents, 18%), part-time (9 respondents, 16%), and casual ad-hoc[17] (8 respondents, 14%) positions (**Figure 9**). Among the 24 respondents (42%) who were unemployed, 11 (46% of unemployed respondents) indicated that they were actively looking for work.

Figure 9. Employment status of survey respondents (N, %)
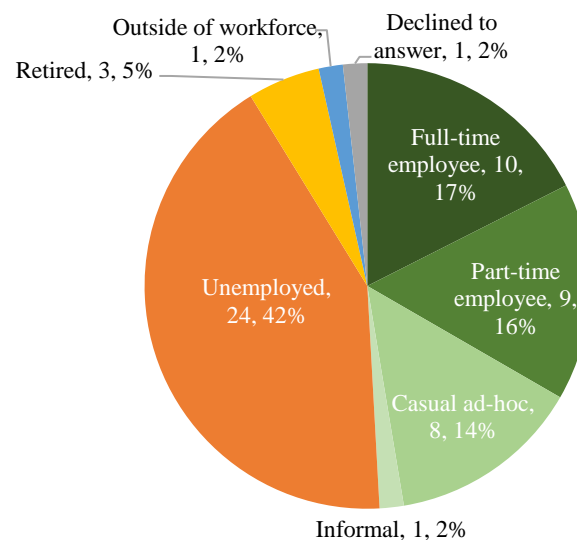
51   Among the 28 respondents who were employed, 17 (61%) worked five to seven days a week, while 10 (36%) worked less than five days a week or were in ad-hoc or flexible

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[17] Casual ad-hoc positions refer to those that have irregular working hours, and provide no medical and leave benefits.

employment.[18] In terms of income, 12 (43%) earned more than $300 per week, while 9 (32%) earned less than that amount.[19]

5.6   More than half of respondents had not sought help from their personal social support networks. Among the 53% of respondents who had sought government and community assistance, a significant share had approached SSOs and FSCs. Successful applicants mostly received housing, financial, and health assistance

52   35 (61%) respondents indicated that they had not sought help from personal sources of support in the past year. A small proportion of rough sleepers had sought help from family (5 respondents, or 9%), friends (5 respondents, or 9%), and other rough sleepers (5 respondents, or 9%) (**Figure 10**). This could indicate either the absence of such support networks or an unwillingness to tap on them.

Figure 10. Personal sources of help approached by survey respondents (N, %)
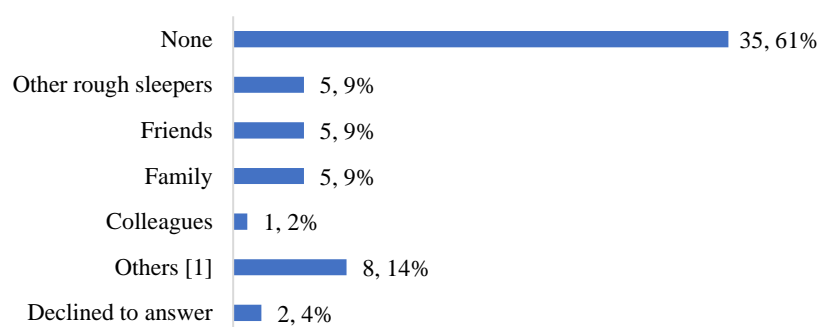
Notes: [1] Includes SSO/HDB/Singapore Police Force (SPF)/healthcare officers, temple staff, volunteers/workers, MRT commuters, etc.
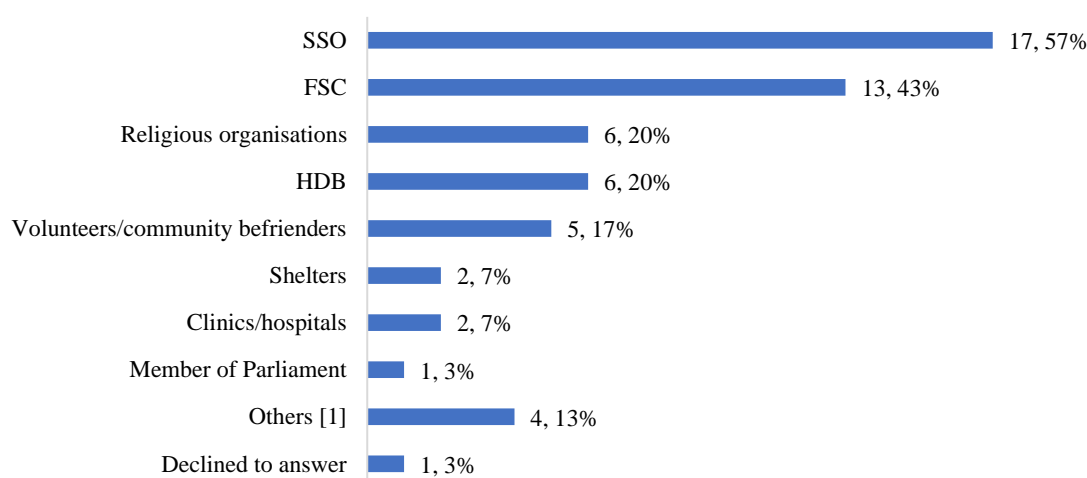
Shares do not add up to 100% as survey respondents could choose more than one source.

53   30 respondents (53%) had sought help from government and community organisations in the past year. Among this segment, 17 (57% of those who had sought help) had approached SSOs, and 13 (43% of those who had sought help) had approached FSCs. Other sources of help included: HDB (6 respondents, or 20% of those who had sought help); religious organisations (6 respondents, or 20% of those who had sought help); and volunteers/community befrienders (5 respondents, or 17% of those who had sought help) (**Figure 11**).

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[18] 1 (3%) employed rough sleeper declined to indicate their working hours.
[19] 7 (25%) employed rough sleepers declined to indicate their income amounts. The benchmark of $300 per week is similar to starting salaries in the Progressive Wage Model for the cleaning sector, i.e., $1,300 per month or $325 per week.

Figure 11. Government and community sources of help approached by survey respondents who had sought help (N, %)

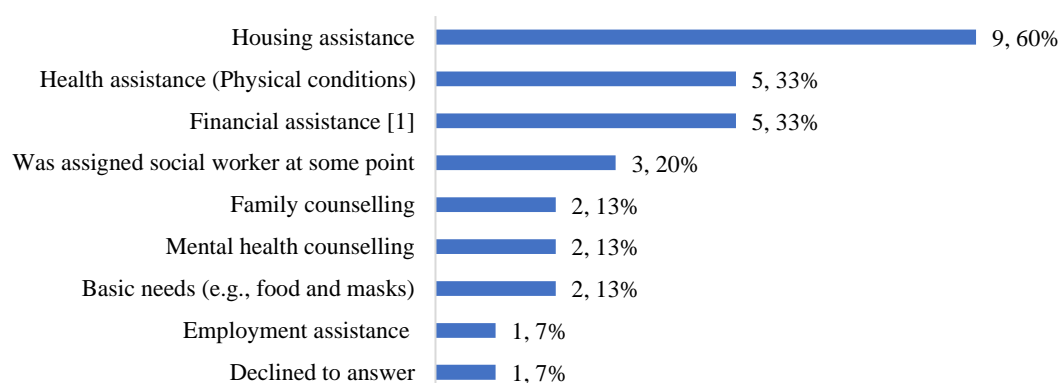| Source	N, %
SSO	17, 57%
FSC	13, 43%
Religious organisations	6, 20%
HDB	6, 20%
Volunteers/community befrienders	5, 17%
Shelters	2, 7%
Clinics/hospitals	2, 7%
Member of Parliament	1, 3%
Others [1]	4, 13%
Declined to answer	1, 3%

Notes: [1] Includes organisations such as Rotary Club, Asian Women's Welfare Association (AWWA), etc.

Shares do not add up to 100% as survey respondents could choose more than one source.

54   These findings suggest that help from government and community organisations is important for rough sleepers. In addition, 21 respondents (37% of all respondents) reported that they had been approached by volunteers offering help. However, 25 respondents (44% of all respondents) reported that they had not sought help from any organisations or persons in the past year. For this segment, outreach efforts are being enhanced to better support them.

55   Among those who have sought help, 15 respondents (50%) reported that they had successfully received assistance, sometimes from multiple sources. Among these 15 respondents, 9 (60%) received housing assistance, 5 (33%) received financial assistance, and 5 (33%) received health assistance for physical health conditions. Also, 2 respondents (13%) received counselling for mental health conditions and family issues (**Figure 12**).

Figure 12. Types of assistance received by survey respondents who were successful in obtaining help (N, %)

Type	N, %
Housing assistance	9, 60%
Health assistance (Physical conditions)	5, 33%
Financial assistance [1]	5, 33%
Was assigned social worker at some point	3, 20%
Family counselling	2, 13%
Mental health counselling	2, 13%
Basic needs (e.g., food and masks)	2, 13%
Employment assistance	1, 7%
Declined to answer	1, 7%

Notes: [1] Includes ComCare and medical subsidies.

Shares do not add up to 100% as survey respondents could choose more than one type of assistance.

5.7   Most respondents planned to continue sleeping rough at least for the immediate future; some planned to rent from HDB or the open market

56   While 32 respondents (56%) indicated their intention to continue sleeping rough, 25 respondents (44%) reported longer-term plans of renting, either from HDB (17, or 30%) or the open market (8, or 14%). Moving in with friends (5, or 9%) or family (3, or 5%) were less reported options, reinforcing the inference that survey respondents generally had little to no personal social support network (**Figure 13**).

Figure 13. Future accommodation plans for survey respondents (N, %)
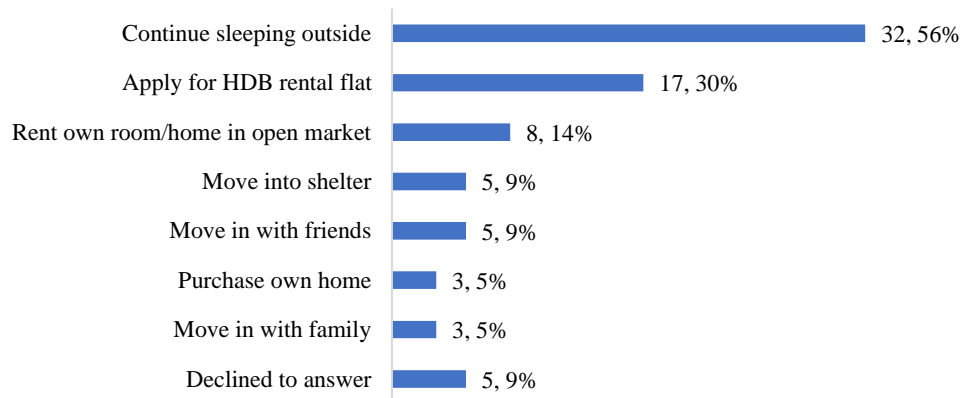
Note: Shares do not add up to 100% as survey respondents could choose more than one option.

6 Future Efforts to Support Rough Sleepers

> **Key Points**
> - The street count findings affirm the need for MSF and the PEERS Network's continuing work with community partners, social service agencies, and other government organisations to enhance outreach, accessibility of shelter services, and upstream interventions to support rough sleepers.

57   MSF has been working with community partners, social service agencies, and other government organisations to improve support services to address the multiple and interrelated challenges rough sleepers face. We will continue to do so. The findings from this street count help to give an updated picture of rough sleeping in Singapore post-COVID-19, and usefully inform our ongoing efforts to engage and support rough sleepers.

6.1   Enhancing outreach and accessibility of shelter services

58   For rough sleepers who plan to continue sleeping in public areas while working towards stable long-term housing, MSF and the PEERS Network will continue to reach out to and encourage them to seek shelter and address the multiple issues they may face. Befrienders help to proactively reach out to rough sleepers and link them with appropriate agencies for assistance, including referring them to shelter options. For rough sleepers who may be initially hesitant to accept assistance, befrienders will continue to engage them regularly, build trust with them over time, and journey with them to help them address their issues.

59   Other than proactive and regular outreaches, touchpoints which offer assistance and support are also situated all over Singapore. These provide convenient access for rough sleepers seeking assistance, as indicated in **Figure 14**, which overlays the touchpoints with the distribution of rough sleepers first presented in **Figure 1**.

Figure 14. Touchpoints for rough sleepers
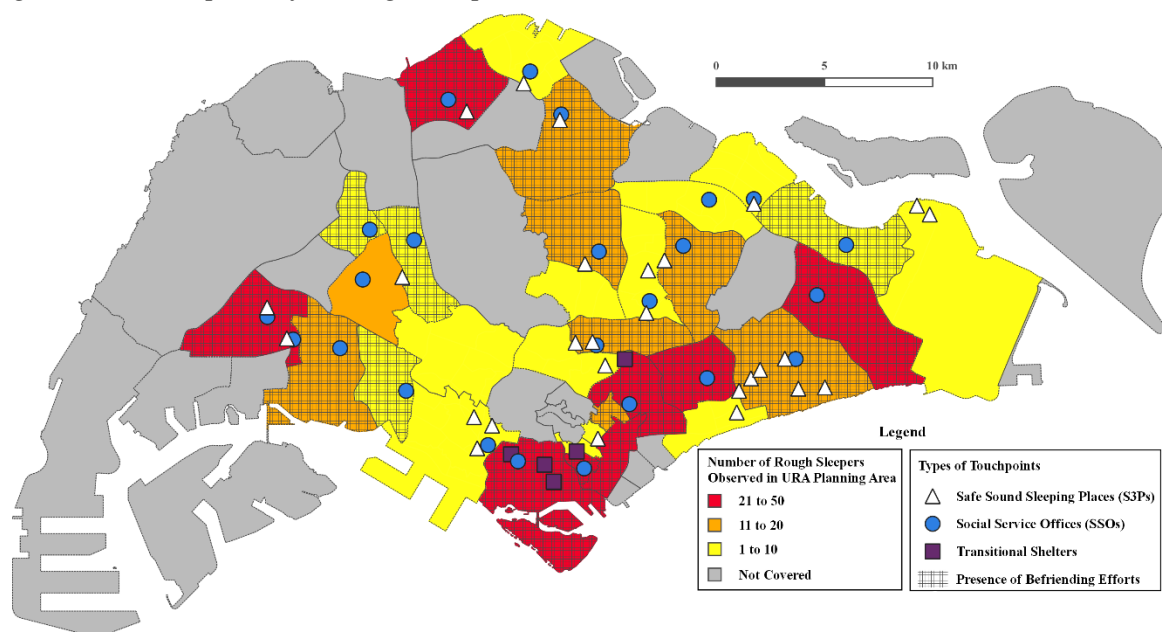
60   The street count provided a sense of the areas with a greater concentration of rough sleepers. MSF will work with the PEERS Network to ramp up befriending and outreach efforts and improve accessibility to shelter services in these areas.

61   Findings from the survey will also guide the PEERS Network's future outreach efforts. The findings suggest there are three key considerations that rough sleepers look for when finding a place to sleep: safety, shelter, and access to facilities. Outreach efforts should focus on the common types of locations where rough sleepers were sighted (e.g., near HDB blocks, around parks and benches, commercial areas, and at food centres and markets) for more targeted reach.

6.2   Continue enhancing upstream interventions to support rough sleepers

62   Findings from this street count and IPS's ongoing study on long-term homelessness commissioned by MSF suggest that the pathways to rough sleeping are multiple and complex. Therefore, besides providing holistic assistance for rough sleepers, upstream interventions from various angles are also important to prevent individuals from resorting to sleeping rough.

63   Some available channels of help addressing the more common reasons for sleeping rough are described below:

a) For homeowners undergoing divorce: The Family Justice Court, Syariah Court, Strengthening Families Programme @ Family Service Centre (FAM@FSCs), or the Divorce Support Specialist Agencies (DSSAs) will refer divorced parties (including those undergoing divorce proceedings) to HDB for housing counselling if they need advice on post-divorce housing options. Those who have obtained the Interim Judgment of divorce and resolved ancillary matters relating to the matrimonial flat and child custody can apply to buy or rent a flat from HDB. For lower-income individuals undergoing divorce proceedings, HDB is prepared to assist them with a rental flat if

they have no other housing options and sources of family support. Those who urgently need housing can also seek help from MSF's shelters while applying for an HDB rental flat.

b) <u>To manage and reduce disagreements between co-tenants</u>: Under the JSS-OR model (see **Para 12(b)**), most differences between co-tenants are resolved through early intervention by the operator, which can help prevent disagreements from escalating. Operators also conduct regular check-ins with the tenants and provide social support as needed. HDB will expand the JSS-OR pilot to three new sites that can accommodate 600 tenants in total. As part of HDB's ongoing efforts to provide more options for lower-income singles under the PRS, HDB will also pilot a new Single Room Shared Facilities (SRSF) model, which aims to provide single tenants with more privacy while making use of limited space, and enable social interaction to reduce the risk of social isolation. In this new model, each tenant will have a private bedroom that comes with basic furnishings such as a bed frame and wardrobe, and access to shared facilities such as toilets, showers, dining areas, and kitchens. Similar to the JSS-OR model, an operator will be appointed to manage the site, including providing social support to tenants, furnishing, and maintaining the premises. HDB is now preparing the site for the SRSF pilot, and applications will open once the site is ready.

64   To support rough sleepers who may be unable to secure housing due to financial difficulties:

a) <u>For those who have mortgage arrears</u>, HDB provides one-to-one financial counselling for those on HDB loans with mortgage arrears, and will offer assistance based on the household's circumstances (such case-by-case assistance could include allowing them to temporarily reduce or defer their mortgage payments, or extending their loan tenure to reduce monthly instalment amounts). For flat owners with mortgage loans from financial institutions (FIs), government agencies have worked with FIs to establish standardised interventions for HDB homeowners, including loan restructuring solutions and early referrals to social service agencies.

b) <u>Unemployed rough sleepers</u> who are work-capable can seek career advice from WSG's Careers Connect Centres, NTUC's Employment and Employability Institute (e2i), SSOs, SGUnited Jobs and Skills Centres, and Careers Connect On-the-Go deployments across Singapore. Under WSG's career-matching services and programmes, jobseekers can try out jobs through a short-term Career Trial programme. For mature jobseekers aged 40 and above who face difficulty in finding employment, they can also consider applying for attachments under the SGUnited Mid-Career Pathways Programme to widen their professional networks and gain industry-relevant experience.

c) <u>For rough sleepers who are looking to reskill and secure better job opportunities</u>, they may tap on around 100 Career Conversion Programmes offered by WSG. Social Service Agencies and the PEERS Network may also encourage rough sleepers to tap

on their SkillsFuture Credit to attend a wide range of approved courses.[20] Many rough sleepers who may be lower-wage workers would also benefit from the expansion of the Progressive Wage Model (PWM) to more sectors and occupations, and the introduction of the new Local Qualifying Salary requirement. The PWM provides clear progression pathways for lower-wage rough sleepers to earn higher wages as they become more skilled, more productive, and take on higher job responsibilities.

6.3   Future street counts of rough sleepers

65   Regular street counts are useful to track the number and geographical spread of rough sleepers in Singapore over time. In collaboration with the PEERS Network, community partners, and academics, MSF will draw lessons from this iteration to refine how we plan for and conduct future street counts.

66   This street count encountered two limitations. Firstly, as there was a limited number of rough sleepers who were awake and willing to participate in the survey (57, or 11% of sightings), the research team was unable to conduct more robust analysis using the survey findings. Secondly, given that this iteration of the street count focused on attaining a comprehensive geographical coverage in counting rough sleepers across Singapore in a single night, volunteers did not have time to deeply engage with and understand each rough sleeper's circumstances (e.g., detailed reasons for rough sleeping and choices of sleeping location). Such issues could potentially be explored further in future street counts and qualitative studies that incorporate anecdotal narratives gathered by PEERS Network partners during their ongoing regular engagements with rough sleepers.

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[20] The Government has awarded an initial $500 of SkillsFuture Credit to all Singaporeans aged 25 and above since 2015, with a one-off top-up of $500 provided in 2020 to those who were aged 25 and above as of 31 December 2020. For those aged 40 to 60 (inclusive) as of 31 December 2020, the Government has further provided an Additional SkillsFuture Credit (Mid-Career Support) top-up of $500, on top of the amounts listed above. Singaporeans can use their SkillsFuture Credit on top of existing Government course subsidies to pay for a wide range of approved courses.

7   Conclusion

> **Key Points**
> - The rough sleeping situation has improved since the peak of COVID-19, due to a combination of improved circumstances (e.g., re-opening of borders) and concerted efforts by the PEERS Network to reach out to rough sleepers and help them secure shelter and other forms of assistance.
> - Although collective efforts have supported many rough sleepers and contributed to a decline in rough sleeping over the years, more can be done to reach out to those who have not been engaged and support those in need.
> - MSF appreciates the efforts of our PEERS partners, who have made a huge difference in helping to support rough sleepers over the years.
> - We invite Singaporeans to join us in our efforts to better support rough sleepers as PEERS Network volunteers, who are part of the MSFCare Network.

67   This comprehensive nationwide single-night street count and survey of rough sleepers involved 860 trained volunteers from the PEERS Network, community partners, academics, and members of the public, as well as over 100 SSO I/Cs who supported the planning and implementation work. We thank everyone who has participated and contributed to the success of the count.

68   This street count has provided MSF with a better sense of the number and geographical spread of rough sleepers after safe management measures due to COVID-19 were eased and borders re-opened. It has also shown a decline in rough sleeping over the years, underscoring the efforts of partnerships between community partners, social service agencies, and government organisations in supporting rough sleepers. MSF will continue to work with our community partners and other government agencies to conduct regular street counts to monitor trends in rough sleeping numbers and patterns, and enhance support for rough sleepers.

69   If anybody encounters a rough sleeper who requires support or shelter, they can:
- Contact the PEERS Office at MSF_PEERSOffice@msf.gov.sg;
- Call the ComCare hotline at 1800-222-0000; or
- Submit a request via the Help Neighbour feature on the OneService App.

70   Working with rough sleepers to achieve stable long-term housing is a challenging task. It takes time for befrienders to build trust, understand the unique needs of each rough sleeper, and take steps to meet these needs throughout their journey. It also requires the expertise of various stakeholders and strong community partnerships to address the complex circumstances of each rough sleeper. MSF appreciates the efforts of our PEERS partners, who have made a huge difference in helping to support rough sleepers over the years. We invite Singaporeans to join us in our efforts to better support rough sleepers as PEERS Network volunteers, who are part of our MSFCare Network. Such efforts may include befriending rough sleepers during regular outreach sessions, or helping out at S3Ps. Interested individuals and/or groups can email MSF_PEERSOffice@msf.gov.sg to register as volunteers, and visit the MSFCare Network

website at https://www.msf.gov.sg/what-we-do/volunteer/find-causes to find out more about other volunteering opportunities.

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9 Annexes

Annex A. Number of rough sleepers by URA Planning Areas

URA Planning Area	Number of Rough Sleepers	Share (%)
Kallang	50	9.4%
Geylang	43	8.1%
Bukit Merah	36	6.8%
Southern Islands	33	6.2%
Tampines	33	6.2%
Downtown Core	32	6.0%
Outram	27	5.1%
Jurong West	25	4.7%
Woodlands	24	4.5%
Bedok	20	3.8%
Hougang	20	3.8%
Rochor	20	3.8%
Ang Mo Kio	19	3.6%
Jurong East	18	3.4%
Bukit Batok	15	2.8%
Toa Payoh	14	2.6%
Yishun	13	2.5%
Choa Chu Kang	10	1.9%
Museum	10	1.9%
Clementi	9	1.7%
Bukit Panjang	8	1.5%
Marine Parade	8	1.5%
Queenstown	7	1.3%
Sengkang	7	1.3%
Pasir Ris	6	1.1%
Serangoon	6	1.1%
Punggol	5	0.9%
Novena	3	0.6%
Bishan	2	0.4%
Bukit Timah	2	0.4%
Sembawang	2	0.4%
Singapore River	2	0.4%
Changi	1	0.2%

END OF ANNEX A

Annex B. Correlations between the number of rough sleeper sightings and the size and maturity of HDB Towns

1   Previous local street counts conducted by LKYSPP (Ng, 2019; Ng & Sekhon Atac, 2022) found that rough sleepers were more likely to be found in larger and older neighbourhoods. This annex details the MSF research team's approach to assess if there was a similar correlation in the 2022 street count data, in the absence of more information on the approach adopted in earlier street counts.

2   The team used publicly available data on (i) the total number of HDB dwellings in HDB Towns, as a proxy for the size of HDB Towns; and (ii) the year of completion of HDB flats, to generate the average age of HDB flats within a HDB Town, as a proxy for the maturity of HDB Towns.

Box 7. Differences between URA Planning Areas, URA Subzones, and HDB Towns and Estates

It is important to differentiate between URA Planning Areas, URA Subzones, and HDB Towns and Estates ("HDB Towns" henceforth), as manpower planning and the areas assigned to volunteers were based on URA Subzones, but data on the total number of HDB dwellings and the year of completion of HDB flats are only available for HDB Towns.

There are 55 URA Planning Areas that cover Singapore in entirety, and these can be further split into 332 URA Subzones. Each URA Subzone can be mapped directly to a URA Planning Area (see **Figure 15** for an example).

Figure 15. URA Subzones in URA Planning Area Toa Payoh
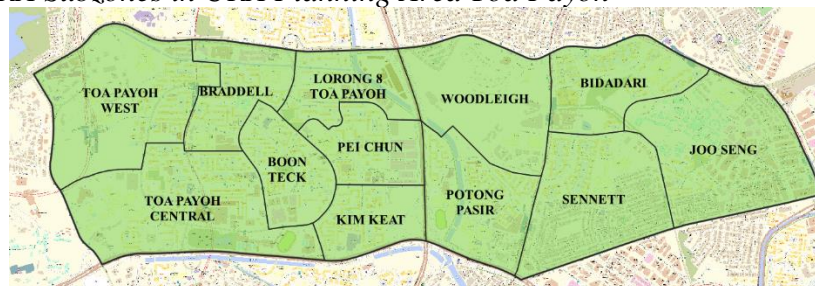
There are 27 HDB Towns, and these do not cover Singapore in entirety (**Figure 16**).

Figure 16. HDB Town boundaries relative to mainland Singapore
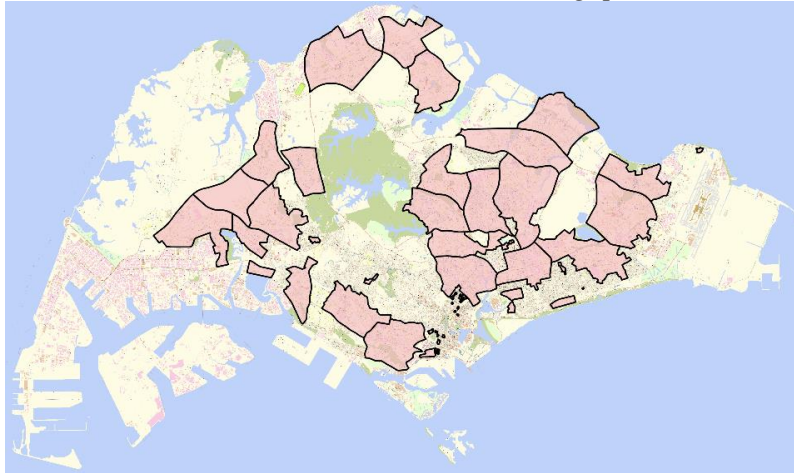
The boundaries of HDB Towns also do not correspond directly to the boundaries of URA Planning Areas and Subzones. For example:

1. The Central Area, as defined by HDB, comprises many smaller residential areas within URA Subzones that are largely commercial (i.e., Pearl's Hill, Chinatown, China Square, Bugis, Victoria, Bencoolen, Sungei Road, Little India, and Farrer Park) (**Figure 17**).

Figure 17. Map of HDB Town Central Area within multiple URA Subzones
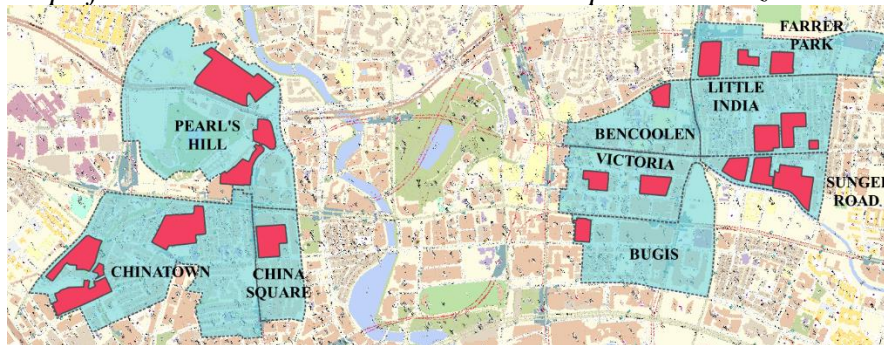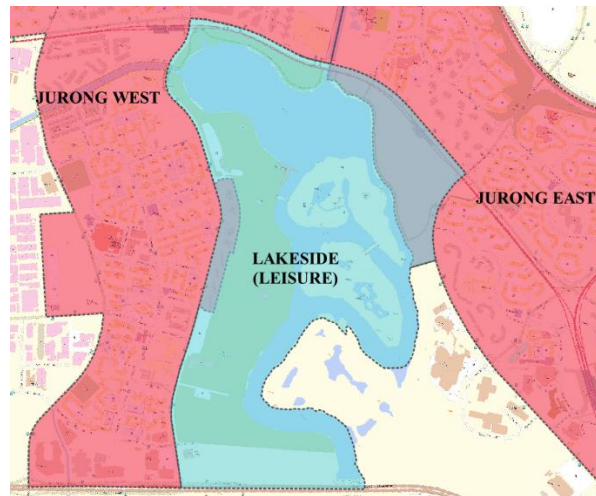

Notes: The HDB Town Central Area is demarcated by the areas highlighted in red. Areas demarcated in blue are the corresponding URA Subzones.

2. URA Subzone Lakeside (Leisure) straddles the boundaries of HDB Towns Jurong East and Jurong West (**Figure 18**).

Figure 18. Map of the URA Subzone Lakeside (Leisure) relative to HDB Towns Jurong East and Jurong West

3. There are also URA Subzones where only a portion of the area falls within HDB Town boundaries. For example, in the HDB Town, Geylang, only segments of URA Subzones Aljunied and Geylang East fall within the HDB Town boundary (**Figure 19**).

Figure 19. Map of HDB Town Geylang and its corresponding URA Subzones
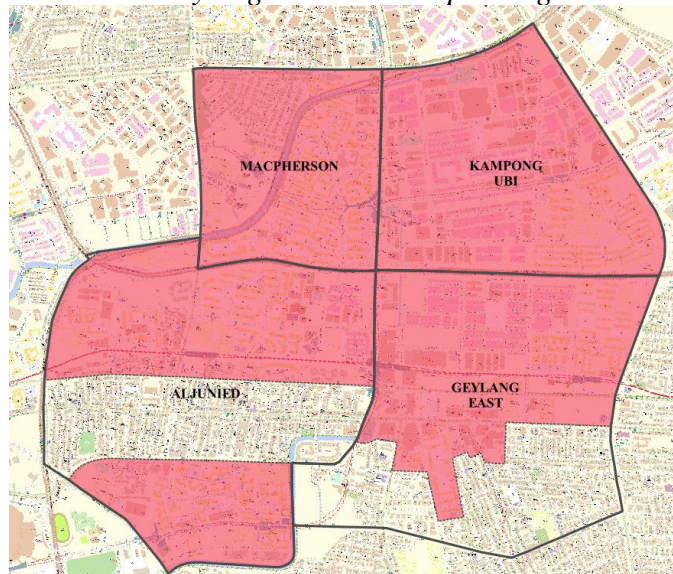
3   As data on (i) the total number of HDB dwellings, and (ii) the year of HDB flat completion is only available for HDB Towns, the analysis on correlations between the number of rough sleeper sightings and size and maturity of HDB Towns focused on 397 rough sleeper sightings that fall within HDB Towns. This excludes:

   a) 88 sightings in URA Subzones outside of HDB Town boundaries, as there is no corresponding HDB data for these areas; and
   b) 45 sightings in URA Subzones containing HDB Towns tagged to the Central Area, as defined by HDB. As the street count did not collect exact location data, the research team was unable to determine if the rough sleeper was observed in

commercial areas, or in residential areas that make up a much smaller segment of these URA Subzones (see **Box 7**).

4 The 2022 street count did not find a significant correlation between the number of rough sleeper sightings and the size of HDB Towns, as proxied by the total number of HDB dwellings. It also did not find a significant correlation between the number of rough sleeper sightings and the maturity of HDB Towns, as proxied by the average age of HDB flats within the HDB Town.

5 MSF acknowledges that rough sleepers may have varying extents of mobility, and seeks to understand changes in these mobility patterns through future street counts.

END OF ANNEX B