QUANTIFYING HOMELESSNESS IN THE CITY OF TORONTO

Ayotunde Fatola

Ve'ahavta

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“A homelessness crisis is not like a forest fire or a tornado—a disaster with a clear starting point and a logical solution. It’s closer to climate change, a gradual accretion of conditions that becomes a catastrophe before anyone is willing to acknowledge it” (Hune-Brown, 2019).

Recently ranked among the Top 10 most livable cities in the world, Toronto is a city of over 200 languages, filled with multicultural energy infused with innovation and creativity. Known as the global destination for immigrants, over 2.8 million people inhabit the city of Toronto. Toronto is well-known for its diversity and culture, with a number of festivals and annual events from the Toronto Caribbean Carnival (Caribana) to the Toronto International Film Festival. Unlike other big cities that present themselves as melting pots, Toronto thrives in its embrace of diversity with over 51% of the locals being foreign born (Oliver, 2018). It is a modern, urban yet cosmopolitan city that continues to grow in a series of different industries. Essentially, multiculturalism is synonymous to Toronto's identity.

Recently, Grammy-nominated artist Pharrell Williams announced the development of a 750-unit, 2-tower condo in Midtown Toronto. This announcement was met with criticism primarily due to the lack of affordable housing already present in Toronto. According to Statistics Canada's 2016 Census, the median household income in Toronto was $65,829 (Income in Canada, 2016 Census of Population, 2017). However, according to the 2019 Toronto Housing Market Analysis, the typical person needs $69,520 in income to rent a one-bedroom apartment in the city. With a projected population increase of 2.6 million people by 2041, there is currently only roughly one "affordable" unit for every four low-income households (household incomes of less than $30,000) (Toronto Housing Market Analysis, 2019).

In a city where demand is much greater than supply, a vacancy rate of 1.1% with the average 1-bedroom rental price at $1,270 Toronto is in a housing crisis (Who's Hungry: Profile of Hunger in Toronto Region, 2019). (See Exhibit 1). According to the Canada Mortgage and Housing Corporation (MacDonald, 2019), if a tenant spends over 30% of their income on housing, housing is no longer deemed as affordable; currently, over 76% of renters fall in this category. To meet this criteria, the calculated rental wage is $27.74/hour with the resident working 40 hours a week, 52 weeks a year to afford the average one-bedroom apartment in Toronto (Who's Hungry: Profile of Hunger in Toronto Region, 2019). With one of the most vulnerable populations being the homeless, an individual making $733 a month on welfare, Toronto indeed has a "housing inequity" issue to address (Hune-Brown, 2019).

Among the major cities in Canada, Toronto has the second highest *total* homeless count per 10,000 residents at 30 (per 10,000) (Street Needs Assessment, 2018). In terms of the *outdoor* homeless count per 10,000 residents, Toronto comes in first at 1.8 (per 10,000) (Street Needs Assessment, 2018). See Exhibits 2 and 3.

CAUSES OF HOMELESSNESS

The Government of Canada defines homelessness as "the living situation of an individual or family who does not have stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it" (Reaching Home: Canada's Homelessness Strategy Directives, 2019). Several pathways to homelessness include: structural factors, poverty, housing, system failures, personal circumstances and domestic violence (Causes of Homelessness, 2016).

Structural factors describe the economic and societal aspects that enable homelessness. These include: insufficient income, changes in the economy that reduce access to affordable housing, changes in healthcare programs and policies, as well as discrimination hindering access to opportunities (Causes of Homelessness, 2016). Poverty can limit access to tools that enhance social mobility and can confine people to unsuitable living conditions. People living paycheque to paycheque may experience homelessness at the slightest turn of events. The lack of affordable housing in major cities across Canada obviously contribute to homelessness, as millions of Canadians are spending more than 30% of their income on living expenses. System failures pertain to the inadequacy of social services to provide support to at-risk populations. These populations include those leaving foster care, hospitals, corrections, mental health and addiction facilities, as well as new immigrants and refugees. Personal circumstances pertain to sudden unfortunate events, family issues and/or mental health and addiction challenges. Finally, domestic violence can be a catalyst for homelessness as vulnerable populations (women, youth and seniors) may be forced to leave their homes for personal safety.

In Toronto however, the main causes of homelessness are: migration, the inability to pay rent or a mortgage and eviction for a non-financial reason (i.e. the sale or redevelopment of property) (Street Needs Assessment, 2018). Among all the factors listed as reasons for homelessness, these three causes were cited most by respondents in the city of Toronto's 2018 SNA. The three causes accounted for 16%, 14% and 8% of respondents respectively (Street Needs Assessment, 2018). (See Exhibit 4).

Migration

The 2018 Streets Needs Assessment (SNA) report stated over 40% of people in shelters were refugee claimants or asylum seekers. In recent years, Toronto has seen an influx of asylum seekers, with a reported 18 to 20 individuals arriving in Toronto every day (Street Needs Assessment, 2018). The cost of housing refugees will reach $64.5 million for the year 2017/2018, exceeding the city's present resources (Armstrong, 2018). This includes the use of rented hotels and motels to house refugees and over-filled shelter systems with limited beds. With a present wage gap between immigrants and Canadian-born residents, Statistics Canada reported the median annual entry wages of admitted immigrants in 2016 to be $25,400, and for refugees, $8,200 (Income in Canada, 2016 Census of Population, 2017).

According to the Best Practices for Working with Homeless Immigrants and Refugees (2003), these individuals are at-risk for homelessness due to poverty, neglected employment or education credentials, social program cuts, and delayed work permits (Best Practices for Working with Homeless Immigrants and Refugees, 2003). These refugee claimants receive limited government assistance, and it often takes years to settle claims. They are also not entitled to full health benefits and are often subject to delayed work permits. During that time, they often live in poverty, overcrowded housing (known as hidden homelessness), and are at-risk of being homeless. Alongside needing shelter, and other housing services, migrants are also in a unique position as they have other obstacles to overcome, be it language or cultural barriers.

Despite the discussion in the aforementioned, it is important to note that homelessness is not confined to a specific set of people in Canadian society. In fact, those who experience homelessness may not have much in common asides a set of (often temporary) circumstances. In addition, experiences of homelessness differ from person to person.

Lack of Affordability

The 1990s saw a shift of housing development from apartment buildings (purpose built rentals) to condominiums to allow for home ownership. This was also in adjunct with cuts to public policy and social housing. MacDonald (2019) reports the average rental price of a one-bedroom apartment is $1,270, and for a two-bedroom apartment it is $1,492, whereas the hourly wage needed for a single person to afford these were $27.74 and $33.70, respectively. With the minimum wage recorded at $14.00 per hour, it would take a single person an extra 39 hours a week (on top of 40) to afford a one-bedroom apartment and an extra 56 hours to afford a two-bedroom apartment (MacDonald, 2019). There are no neighbourhoods recorded in Toronto that can be afforded on a minimum wage salary at 40 hours a week.

According to Toronto's Vital Signs Report 2019/2020 (2019), more than 543,000 people live in poverty in Toronto – poverty defined as spending more than 30% of one's income on rent. 4 in 10 newcomers live below the low-income standard. There is a projected growth of 30,000 low-income households by 2031, with over 120,000 of these households spending 30% or more of their income on housing and half of these households spending 50% or more (See Exhibit 5).

What is Being Done Currently?

Social housing is a necessity for the homeless community with 79,240 people in Toronto currently living in subsidized housing. With a 102,049-person waiting list, the current solution seems to be ineffective (2016 Waiting Lists Survey Report, 2016). The average wait time for families is reported as 9.3 years, and for childless couples and non-senior singles, 7.7 years. According to the 2018 SNA, when respondents were asked what services would assist them in finding housing, the most mentioned were: increased social assistance rates, increased availability of affordable housing, subsidized housing, assistance in finding affordable housing, and employment or job training (Street Needs Assessment, 2018). The combination of low vacancy rates and a lack of available housing (as evidenced by an extensive waiting list), indicate a need to review this housing problem.

TYPES OF HOMELESSNESS

a) Hidden homelessness: People who do not have a means to secure housing and stay temporarily with others as a result (i.e. couch surfing) (Street Needs Assessment, 2018).

b) Transitional homelessness: People experiencing homelessness in the short term, usually less than a month (Gaetz, Gulliver & Richter, 2014).

c) Episodic homelessness: People who have experienced three or more episodes of homelessness in the past year. According to the 2018 Street Needs Assessment (SNA) survey, 14% of the homeless population surveyed (~1,220 people), fit into this category. (See Exhibit 6). In addition, those staying in Violence Against Women shelters had a greater likelihood of reporting more instances of homelessness. This can be attributed to the recurrence of domestic violence incidents (Street Needs Assessment, 2018).

d) Chronic homelessness: People who have experienced homelessness for either: 6 months (180 days) in the past year or 18 months (546 days) in the past 3 years (Street Needs Assessment, 2018). The 2018 SNA found that 48% of all respondents (~4,183 people) experienced chronic homelessness – homelessness for 6 months or more in a year. While 36% (~3137 people) reported being homeless for more than one year. The average reported length of homelessness in the past year (2018) was determined to be approximately seven months (Street Needs Assessment, 2018). See Exhibit 7 for a further breakdown.

This report only focuses primarily on the episodic and chronic types mentioned above, due to the increased uncertainty associated with trying to account for transitional and hidden homelessness. With transitional homelessness, the person themselves may not know when they will come out of homelessness. This may be dependent on finding a new job for instance; the duration of which one cannot always predict. Likewise, the figures for hidden homelessness (as the name implies), are not exactly easy to extrapolate as this is not necessarily publicly known information.

Below is a summary of the estimated homeless figures:

Outdoors	533
In City-administered sites (total)	7,154
Shelters – non-refugee/asylum claimants	3,876
Shelters – refugee/asylum claimants	2,618
24-hour respite sites	497
24-hour women's drop-ins	118
Out of the Cold program	45
In Violence Against Women shelters	364
In Health & treatment facilities	279
In Correctional facilities	385
Total Homeless Population	**8,715**
Hidden and Transitionally Homeless	**Unknown, N/A**
Episodically Homeless	**~1,220**
Chronically Homeless	**~4,183**

The numbers above do not reflect the total number of homeless people in Toronto who fit into those categories. Most numbers in this document are extracted or deduced from a variety of commissioned reports. Each of these commissioned reports (all are referenced), has its own specific research methodology and can only provide an estimate for numbers. The exact number of homeless people in the city of Toronto is not known by anybody. Neither are the exact financial costs associated with inadequate provisioning for the homeless. Therefore, all numbers in this document aim to provide *some* quantitative context around the issue of homelessness. Current, publicly available data are aggregated to provide reference points. However, these figures are by no means exact population or dollar amounts.

Therefore, it can be expected that the numbers provided for the above categories of homelessness are probably greater than listed. The numbers above are deduced from a point-in-time city of Toronto homeless count of 8,715 as per the 2018 SNA. (See Exhibit 8). However, depending on the source, estimates of the city's homeless population may vary anywhere from 5,000 to over 9,200 people (About Homelessness, 2019) (Facts about Homelessness in Toronto, 2018). Also, it is important to keep in mind that the number of homeless people will constantly fluctuate as circumstances change and people move in and out of homelessness.

HOMELESSNESS COSTS

The costs of homelessness include direct (shelters and supportive housing), as well as indirect costs (increased demand for healthcare, police services and mortality). Over the years, studies have indicated that it would be less expensive for the Canadian government to put an end to homelessness, than to continue patching up the problem. Whether it is cheaper or not to solve the problem on a full scale is less important than the fact that in a wealthy nation like Canada, people should not be condemned to living in a cycle of poverty (Gaetz, 2012). It is important to understand the several costs associated with homelessness, as these costs place pressure on systems, thereby reducing government revenue that may be allocated elsewhere.

A study (Pomeroy, 2005) found the annual cost of homelessness across four cities – Toronto, Vancouver, Montreal and Halifax, to be as follows:

Institutional responses *(prison/detention and psychiatric hospitals)*	$66,000 to $120,000
Emergency shelters *(cross section of youth, men's women's, family and victims of violence)*	$13,000 to $42,000
Supportive and transitional housing	$13,000 to $18,000
Affordable housing without supports *(singles and family)*	$5,000 to $8,000

According to the study, institutional responses and emergency services were more expensive than housing solutions, even when the housing solutions were somewhat elaborate. Institutional responses would typically cost well over $200/day and could go as high $600/day depending on the facility (Pomeroy, 2005). Emergency services on the other end, which typically entailed providing a bed, three meals and minimal supports, could range anywhere from $25-$110/day in terms of cost to the government. The lower end of the cost range most likely involved facilities offering only overnight stays, while the higher end – 24/7 use and additional services. Supportive housing typically cost less than institutional responses and emergency shelters, going up to roughly $60/day at the higher end of the cost range (Pomeroy, 2005).

Similar research by The Blueprint to End Homelessness in Toronto (2007) estimated the average monthly costs of housing a homeless person through different means as follows:

- Shelter Bed: $1,932
- Provincial Jail: $4,333
- Hospital Bed: $10,900
- Rent Supplement: $701
- Social Housing: $199.92

In the most recent study found, research published by the Canadian Medical Association (CMA), estimated the average cost of supporting a homeless person with mental illness (excluding medications) to be $58,972 a year (Latimer, et al., 2017). Keep in mind the medication data was not included in the determination of this figure. The reason being due to the difficulty in obtaining reliable information and regulatory issues pertaining to sharing such administrative data (Latimer, et al., 2017). Otherwise this cost is expected to be higher, the degree of certainty is unknown, however.

The estimated weighted mean cost per person of $58,972 (in 2016 dollars) is broken down as follows:

COST ELEMENT	WEIGHTED MEAN COST (95% CONFIDENCE INTERVAL)
Shelters	$6,411 ($5,411 – $7,219)
Supportive housing	$1,628 ($1,077 – $2,308)
Substance use treatment	$1,012 ($577 – $1,629)
Ambulatory visits	$12,545 ($9,895 – $15,194)
Emergency department visits and ambulance	$1,699 ($1,118 – $2,392)
Hospital stay for physical cause	$1,104 ($502 – $1,821)

Hospital stay for psychiatric cause	$7,475 ($3,643 – $12,439)
Other (e.g., help lines, day centres)	$2,652 ($2,187 – $3,144)
Police, court appearances	$12,393 ($9,636 – $15,323)
Incarceration	$2,547 ($1,575 – $3,719)
Social assistance/disability benefits	$10,265 ($9,646 – $11,119)
Earned income	($759) ($487 – $987)
Total	**$58,972** **($52,237 – $66,085)**

Compare $58,972 to $21,089 – approximately how much it would cost to provide affordable housing for a year. That is a cost saving of at least $37,883! Keep in mind the $58,972 is in does not include the medication costs. From these three studies, among others, it is clear that proactive housing supports are more cost efficient (and humane) than institutional and emergency responses. Proof of the old adage, "Prevention is better than cure".

Another analysis worthwhile considering is the tax revenue lost as a result of homelessness. A single person earning minimum wage is in a less than ideal situation given the current rental market in Toronto. Nonetheless the minimum wage rate can be used as the starting point to ascertain this loss of tax revenue. According to a street health report conducted in 2007, the average time people spent in homelessness was 4.7 years (Hulchanski, et al., 2007). If someone is homeless for a year, the tax income lost on a minimum wage hourly rate of $14.00, 37.5 hours a week would be roughly $4,570.

$$Estimated\ Annual\ Gross\ Salary\text{: } \frac{\$14.00}{hour} \times \frac{37.5\ hours}{week} \times \frac{52\ weeks}{year} = \frac{\$27{,}300}{year}$$

Estimated Annual Net Salary, using the Ontario Income Tax Calculator provided by Neuvoo (Income Tax Calculator, Ontario, Canada, 2019):

Gross Salary	**$27,300**
Federal tax deduction	($1,853)
Provincial tax deduction	($1,061)
CPP deductions	($1,214)
EI deductions	($442)
Total tax	**-$4,570**
Net pay	**$22,730**
Marginal tax rate	25.42%
Average tax rate	16.74%

Keep in mind these are highly simplistic estimations to provide context. Assuming all inputs remain constant, $4,570 over 4.7 years equates to $21,479 in taxes lost to the four bodies from a person not working. Over the same period, if the government is spending $58,972 (as mentioned earlier) annually to accommodate the person, this would equate to a cost of $277,168.40. Including the foregone tax income brings this amount to $298,647.40. Clearly, housing the homeless makes financial sense. What about other implications?

Homelessness and Health

People homeless for longer periods (i.e. the chronically homeless), typically experience a rapid decline in health, require more frequent and/or intense services or interventions and typically have a greater utilization rate of health services (Gaetz, 2012).

According to the 2018 SNA, 57% (~4,967 people) of the homeless accounted for, reported having one or more health conditions (Street Needs Assessment, 2018). (See Exhibit 9). Health conditions are even more prevalent among the outdoor homeless and 24-hour respite site populations, compared with those staying in city-administered or violence against women shelters. The percentage figures for people with one or more health conditions among the outdoor, 24-hour, city-administered and violence against women populations were 80%, 76%, 52% and 41% respectively (Street Needs Assessment, 2018). (See Exhibit 9). Proof that the further away people are from having stable housing, the more likely they are to be disadvantaged health-wise. People who are homeless tend to be poorly nourished, often do not get sufficient rest and have difficulty maintaining proper hygiene.

Seeing as they do not have places to store or cook food, homeless people often utilize meal programs at shelters, drop-ins and other organizations. These options may not necessarily provide sufficient nutrition due to constraints such as the quality and quantity of meals served, as well as the days of the week on which these services operate (Hulchanski, et al., 2007). Furthermore, these services do not always cater to the special dietary needs of some people. However, with limited choice, these people may have to neglect their recommended diets in order to survive.

With regards to rest, a 2007 study found that 46% of homeless respondents got 6 hours of sleep or less a night (Hulchanski, et al., 2007). This was primarily due to being exposed to too much noise or light. Respondents also cited: being woken up by others, crowded conditions, the weather, unclean conditions, the anxiety of what was going to happen next, psychological and physical health problems. Sleep disturbances can contribute to or increase the severity of a number of conditions including heart attacks and depression (Hulchanski, et al., 2007).

In terms of hygiene, the same study found that 25% of respondents had difficulty finding a place to use the bathroom, while 41% had difficulty getting their clothes washed (Hulchanski, et al., 2007). In addition, homeless people often live in congregate settings and are exposed to communicable diseases as a result (Gaetz, 2012). Unhygienic living conditions increase the likelihood of illnesses.

Homeless people do not suffer different illnesses from those that are properly housed, but instead experience a higher rate of a wide range of physical and mental health issues, in addition to significant barriers to health and social services (Street Health Report 2007, 2007).

According to Khandor & Mason (2007), homeless people are:

- 20 times as likely to have epilepsy
- 5 times as likely to have heart disease
- 4 times as likely to have cancer
- 3 ½ times as likely to have asthma
- 3 times as likely to have arthritis or rheumatism
- Twice as likely to have diabetes

On average, the life expectancy of a chronically homeless person is less than that of the general population. For example, a typical 25-year-old man has a 64% chance of surviving to age 75, whereas a 25-year -old man living in a homeless shelter only has a 27% chance of living to age 75 (Hulchanski et al., 2009) (Gaetz, 2012). The most recent data collected by Toronto Public Health (and associated agencies) support this as:

- In 2019 (up to June 30) there have been 57 deaths of people experiencing homelessness in Toronto – an average of 1.8 per week
- From January 1, 2017 to June 30, 2019, drug toxicity has been the leading cause of death among Toronto's homeless population (See Exhibit 10)
- In each year over the same two-and-a-half-year period, nearly half (47%) of the homeless population that died were between 40 – 59 years of age (See Exhibit 11)
- The median age of the deceased for females and males were 35 and 55 respectively, with females accounting for 33% of the deaths and males 67%
- The median age of death for the general population in 2015 was 84 for females and 79 for males
- Since 2007, 71.8% of the deaths that occurred outside of Toronto shelters took place in a health care facility (e.g. hospital, palliative or hospice care)

Extensive research shows that homeless people have higher healthcare utilization rates, despite the barriers to services. Health problems can accumulate over time, causing them to seek care from emergency departments. In addition, homeless people are hospitalized more commonly on average in comparison to the general population.

A study by Hwang and Henderson (2010) compared the healthcare utilization of a sample of homeless people with that of housed people in the general population. The findings revealed the following:

Office-Based Visits: On average, single homeless men experienced 8.4 office-based visits annually, single homeless women 12.2, and homeless adults in families 11.3. These figures were 1.7, 1.9, and 1.8 times more than each respective demographic of the housed population.

Emergency Department Visits: On average, single homeless men had 2.2 emergency department visits annually, single homeless women 2.8 and homeless adults in families 1.1. These figures equate to 9.3, 12.0, and 3.4 times that of the housed population. Part of the reason for such a discrepancy between the two populations, is that homeless people may visit emergency departments for food, shelter and safety needs – not necessarily healthcare.

Hospitalizations: Hospitalization rates for the homeless were also higher by comparison in each of the aforementioned demographics. Homeless people were hospitalized 2.1 to 8.5 times more than those housed.

Further on hospitalization, another study by Huang et. al. (2011) assessed 93,426 admissions at an academic teaching hospital in Toronto. The costs of homeless patient admissions were compared with those of housed patients. After adjusting for age, gender, and resource intensity weight, it was determined that homeless patient admissions cost $2,559 more than housed patient admissions. In terms of psychiatric service, homeless patient admissions cost $1,058 more than those housed, even after adjusting for the length of stay.

Homelessness and the Law

According to the 2018 Correctional Service Canada, the average cost of keeping an inmate incarcerated in 2016-17 was $116,473 ($319 daily). For men the average was $191,843 ($308 daily), whereas for women it was $191,843 ($525 daily) (2018 Corrections and Conditional Release Statistical Overview, 2018). These figures factored in institutional operational costs such as salaries and employee benefit contribution plans (See Exhibit 12). It is worthwhile to consider that according to the same data, the cost of keeping an offender in the community ($30,639) is 74% less than keeping them locked up (2018 Corrections and Conditional Release Statistical Overview, 2018). This figure $30,639, is not too far off from the $21,089 mentioned earlier as the cost to provide housing for a year (in 2016 dollars).

Homeless people become involved with the law in a number of ways, these may include (but are certainly not limited to) panhandling and loitering for instance. The Ontario Safe Streets Act (SSA) is a law passed in 1999, that took effect in 2000, which seeks to tackle panhandling, squeegeeing and other types of solicitation in an aggressive manner (What is the Ontario Safe Streets Act?, 2018). Since what is deemed aggressive is at the discretion of law enforcement, there is always the possibility that bias may supersede what is reasonable. Obviously the law does not mention the homeless, however the issues it seeks to address are usually associated with them – as means of survival (What is the Ontario Safe Streets Act?, 2018).

Criminalizing homelessness has proven ineffective over the years and enables a cycle of poverty. O'Grady et al (2011) addresses the key mechanisms in which homelessness is criminalized. These include the development of laws that restrict the activities of the homeless, incarcerating the homeless, disproportionate enforcement of laws that would not likely apply to the average citizen, increased policing of public spheres via targeted "stop and searches", and lack of transition of prisoners into adequate support systems, hence continuing the cycle of

poverty (O'Grady et al, 2011). According to Hulchanski, et al., (2010) in a study surveying adult male prisoners in a Toronto area jail, within days of discharge, the rate of anticipated homelessness was 32.2%. Rent arrears and inadequate income were primary reasons why a number of these individuals were not returning to their former residence. In Novac, et al., (2007)'s article, a total of 400 adults were discharged from Ontario provincial jails between 2004 and 2005 with no fixed address.

From when the SSA took effect in 2000 to 2010, 67,388 tickets were issued – a value of $4,043,280 with only $8,086.56 tickets paid. The average fine is $60 per ticket and can range up to $500 (Exhibit 13; O'Grady et al, 2011). As a result of the SSA, over a period of 3 years from 2006-2009, panhandling and squeegeeing decreased from 17.4% to 9.7% as being reported as a source of income in homeless youth. However, notable in this time period is that only roughly 20% of the tickets issued were for aggressive solicitation while 80% were for non-aggressive acts of soliciting an audience, including waiting for public transportation.

The issuance of tickets and fines to the homeless leaves one in a tireless, never-ending circle. A financial burden is being placed on a community of individuals unable to pay due to poverty. Racking up fines also places a huge burden on these individuals when they attempt to redirect their lives and reintegrate themselves into society; they're hit with collection agency calls (CBC Radio's Ottawa Morning, 2017). This financial burden extends to cost of law enforcement. Geatz (2012) reports it cost $936,019 from 2000-2009 for Toronto Police Services to issue out SSA tickets, amounting to 16,847 hours of police time.

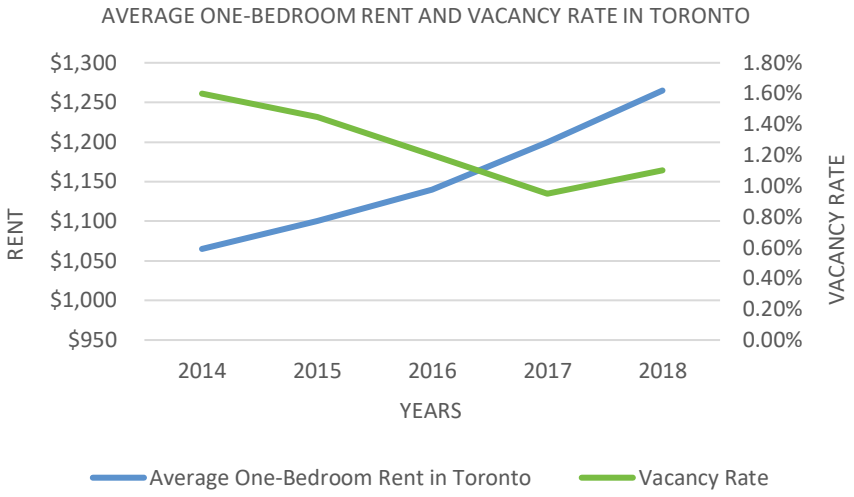
CONCLUSION

With a population of over 2.8 million people and an estimated growth of 2.6 million within the next 20 years, Toronto proves itself to be a city of vibrant diversity. However, this increased growth has proven to leave certain socioeconomic classes behind and disadvantaged. The most evident being low-income families and individuals. With the average 1-bedroom rental rate at $1,270, one available "affordable" unit for every four low-income households and vacancy rates at 1.1%, it comes as no surprise then that Toronto is in a housing crisis.

In comparison to other Canadian cities, Toronto has the second highest total homeless count per 10,000 residents. Homelessness is associated with migration, inability to afford (pay rent or mortgage), and eviction for non-financial reasons and puts these individuals as a number of risks. Homelessness has a role to play in the deteriorating health of residents and as evidenced by the tickets issued by the *SSA*, homelessness has become criminalized. As a society, we still have a long way to go in developing solutions to Toronto's prevalent "housing inequity" problem.

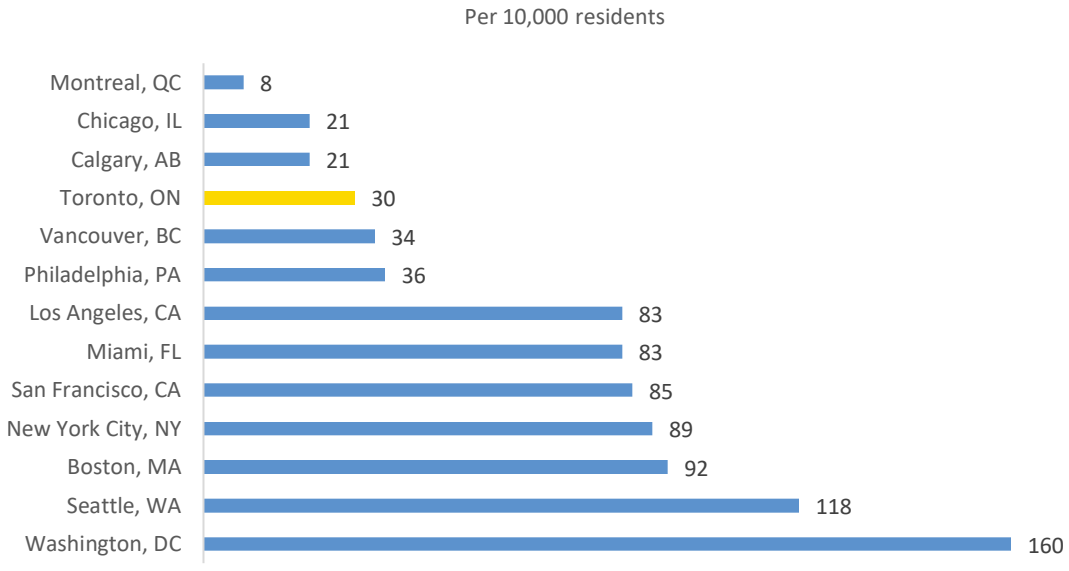
EXHIBITS

Exhibit 1: Average One-Bedroom Rent and Vacancy Rate in Toronto



Source: (Who's Hungry: Profile of Hunger in Toronto Region, 2019)

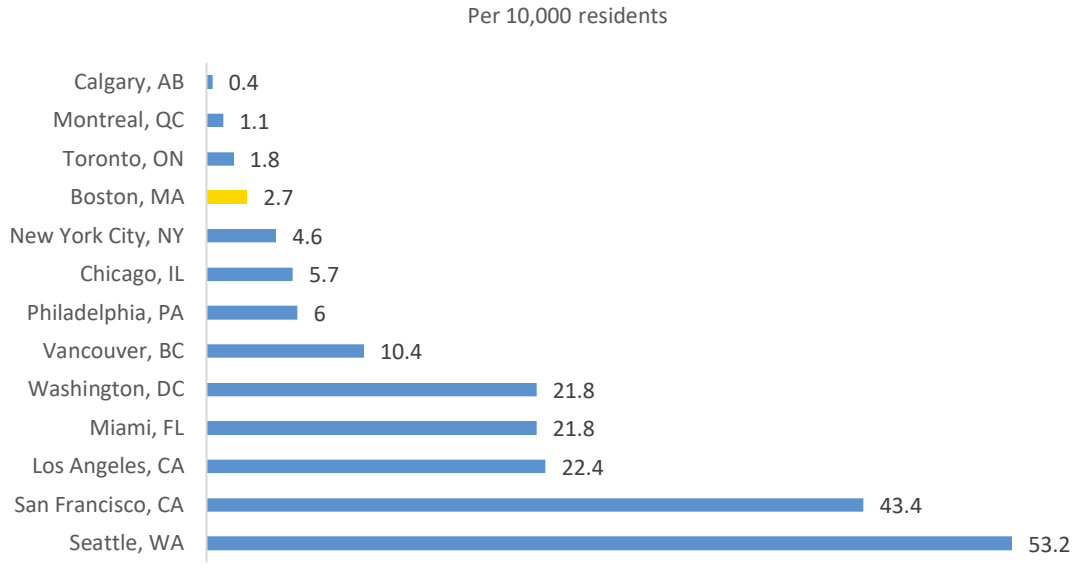
Exhibit 2: Comparison of Homeless Counts Among Other Major Urban Centres



Note: Numbers from Canadian cities are based on homeless enumerations conducted in 2018 with the exception of Montreal (2015). Numbers from US cities are based on enumerations conducted in 2017.

Source: (Street Needs Assessment, 2018)

Exhibit 3: Comparison of Outdoor Homeless Counts Among Other Major Urban Centres



Note: Numbers from Canadian cities are based on homeless enumerations conducted in 2018 with the exception of Montreal (2015). Numbers from US cities are based on enumerations conducted in 2017.

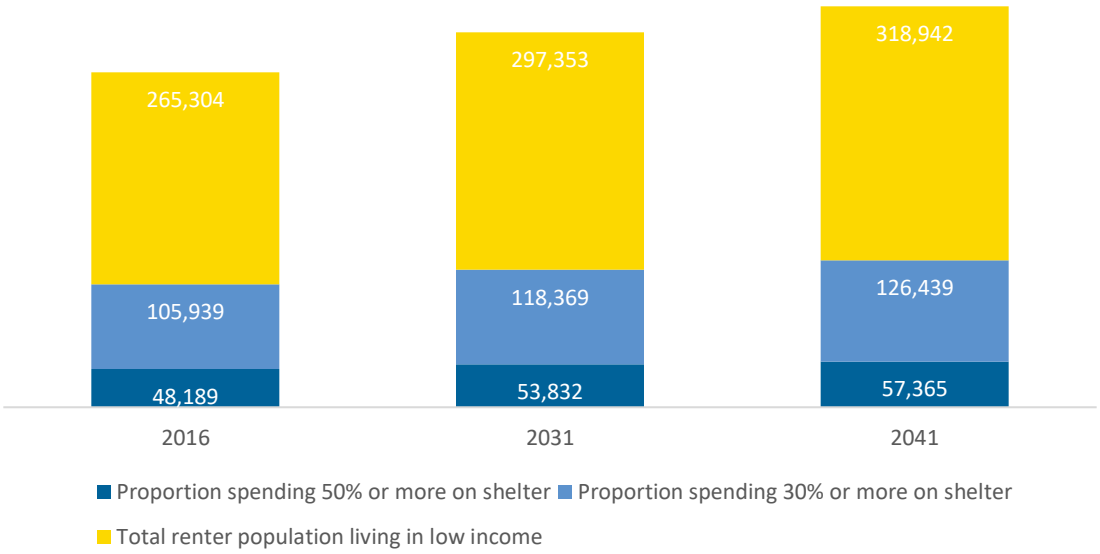
Source: (Street Needs Assessment, 2018)

Exhibit 4: Respondent Reasons for Homelessness

Reasons	Percentage
Migration	16%
Unable to pay rent or mortgage	14%
Evicted (non-financial reason e.g., sale or redevelopment of property)	8%
Conflict with spouse/partner	8%
Unsafe housing landlord	7%
Conflict with landlord	6%
Job loss	6%
Addiction or substance use	5%
Illness or medical condition	5%
Conflict with parent/guardian	4%
Conflict with roommates/neighbours	4%
Experienced abuse by spouse/partner	4%
Incarcerated (jail or prison)	3%
Conflict with other	2%
Loss of cohabitation (e.g., death, divorce, arrests of others)	2%
Hospitalization or treatment program	1%
Experienced abuse by parent/guardian	1%
Legal issues	1%
Evicted (landlord interests)	1%
Experienced abuse by other	1%
End of housing program	Less than .5%

Source: (Street Needs Assessment, 2018)

Exhibit 5: Projected Number of People In Renter Households Living In Low Income (LICO-AT) In Toronto and Proportion Spending 30% and 50% of Income on Shelter, 2016 to 2041



Source: (Toronto Housing Market Analysis, 2019)

Exhibit 6: Respondent Frequency of Homelessness

Surveyed Groups	Average Number of Episodes	One Episode	Two Episodes	Three or More Episodes (Episodic)
Outdoors	2.3	72%	6%	16%
City-administered shelters	1.6	70%	11%	13%
Single adults	1.6	74%	9%	12%
Families	1.7	61%	15%	16%
Youth	2.0	66%	13%	15%
24-hour respite sites	1.9	72%	6%	15%
VAW shelters	1.5	59%	20%	10%
All respondents	**1.7**	**70%**	**10%**	**14%**

Source: (Street Needs Assessment, 2018)

Exhibit 7: Length of Homelessness in the Past Year

Surveyed Groups	Average Duration (Days)	Less than six months	6 to 12 Months	More than 12 Months
Outdoors	275	27%	17%	53%
City-administered shelters	207	51%	11%	33%
Single adults	229	44%	11%	41%
Families	157	70%	12%	13%
Youth	201	52%	10%	33%
24-hour respite sites	249	39%	10%	47%
VAW shelters	150	61%	11%	17%
All respondents	**217**	**48%**	**11%**	**36%**

Source: (Street Needs Assessment, 2018)

Exhibit 8: Total Estimated Homeless Population in Toronto on April 26, 2018

Enumerated Groups	Number	Percent of Total
Outdoors	533	6%
City-administered shelters (total)	7,154	82%
Shelters – non-refugee/asylum claimants	3,876	44%
Shelters – refugee/asylum claimants	2,618	30%
24-hour respite sites	497	6%
24-hour women's drop-ins	118	1%
Out of the Cold program	45	1%
VAW shelters	364	4%
Health & treatment facilities	279	3%
Correctional facilities	385	4%
Total	**8,715**	**100%**

Source: (Street Needs Assessment, 2018)

Exhibit 9: Health Conditions Identified by Respondents

Surveyed Groups	One or More Type of Health Condition	Chronic/ Acute Medical Condition	Physical Disability	Addiction	Mental Health Issue
Outdoors	80%	38%	37%	57%	56%
City-administered shelters	52%	29%	20%	22%	26%
Single adults	64%	37%	29%	30%	32%
Families	20%	13%	4%	2%	6%
Youth	52%	18%	12%	18%	39%
24-hour respite sites	76%	42%	31%	42%	48%
VAW shelters	41%	21%	12%	7%	26%
All respondents	**57%**	**31%**	**23%**	**27%**	**32%**

* Percentages do not total 100% due to multiple responses.

Source: (Street Needs Assessment, 2018)

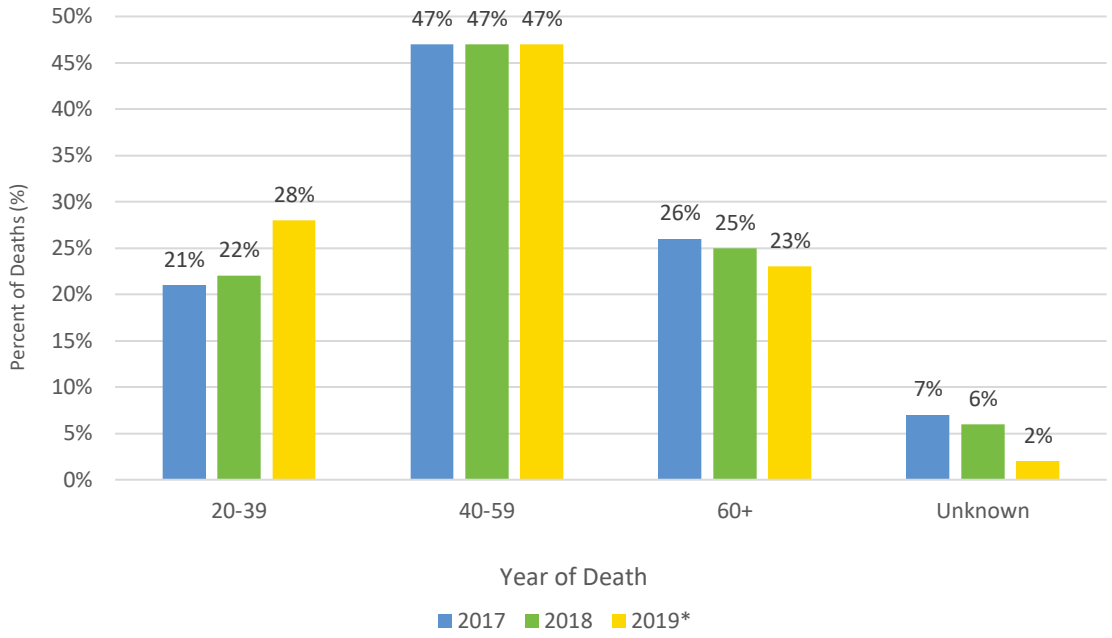
Exhibit 10: Deaths of People Experiencing Homelessness by Cause of Death, Toronto†:

	2017	2018	2019*	Grand Total
Cancer	9%	1%	5%	5%
Cardiovascular Disease	14%	14%	7%	12%
Drug Toxicity	32%	34%	33%	33%
Fall	2%	3%		2%
Infection	4%	2%	4%	3%
Pneumonia	3%	4%	5%	4%
Suicide	3%	4%	2%	3%
Other §	8%	16%	18%	13%
Unknown/ Pending	26%	20%	26%	24%

* Data for 2019 up to and including June 30, 2019.
† Total may not equal 100 percent due to rounding.
§ Other category for cause of death includes: complications from diabetes, accidents, homicide and additional causes.
Notes:
Results are derived from Toronto Public Health, Shelter Services and other data sources and are subject to adjustment as additional information or new reports are received.
Due to the general lag time in reporting, numbers are subject to change.

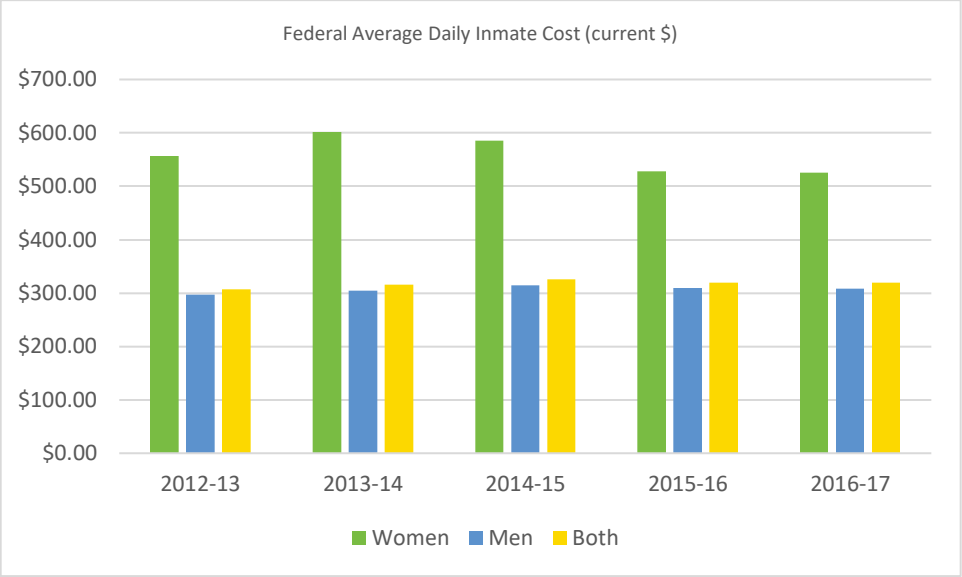
Source: (Deaths of People Experiencing Homelessness, 2019)

Exhibit 11: Deaths of People Experiencing Homelessness by Age Group, Toronto:



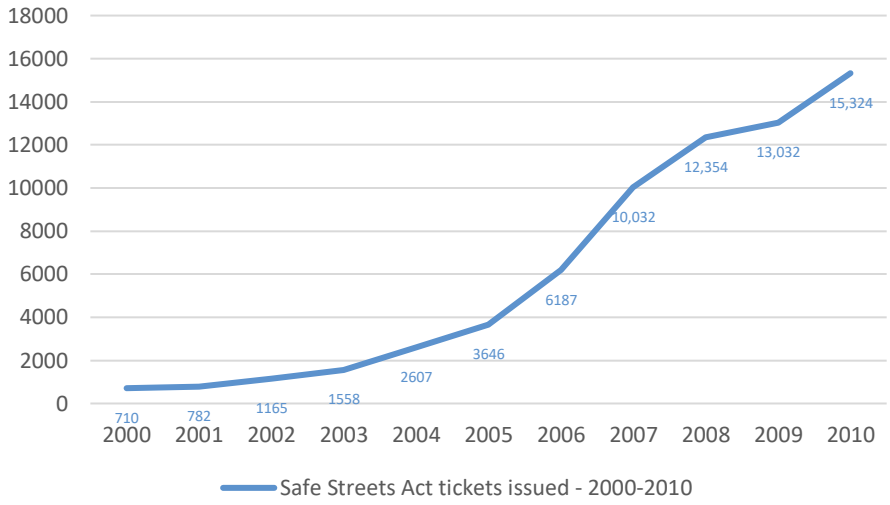
Source: (Deaths of People Experiencing Homelessness, 2019)

Exhibit 12: The cost of keeping an inmate incarcerated



Source: (2018 Corrections and Conditional Release Statistical Overview, 2018)

Exhibit 13: The number of SSA tickets issued by the Toronto Police Service has increased exponentially over the past decade.



Source: (O'Grady et al, 2011)

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