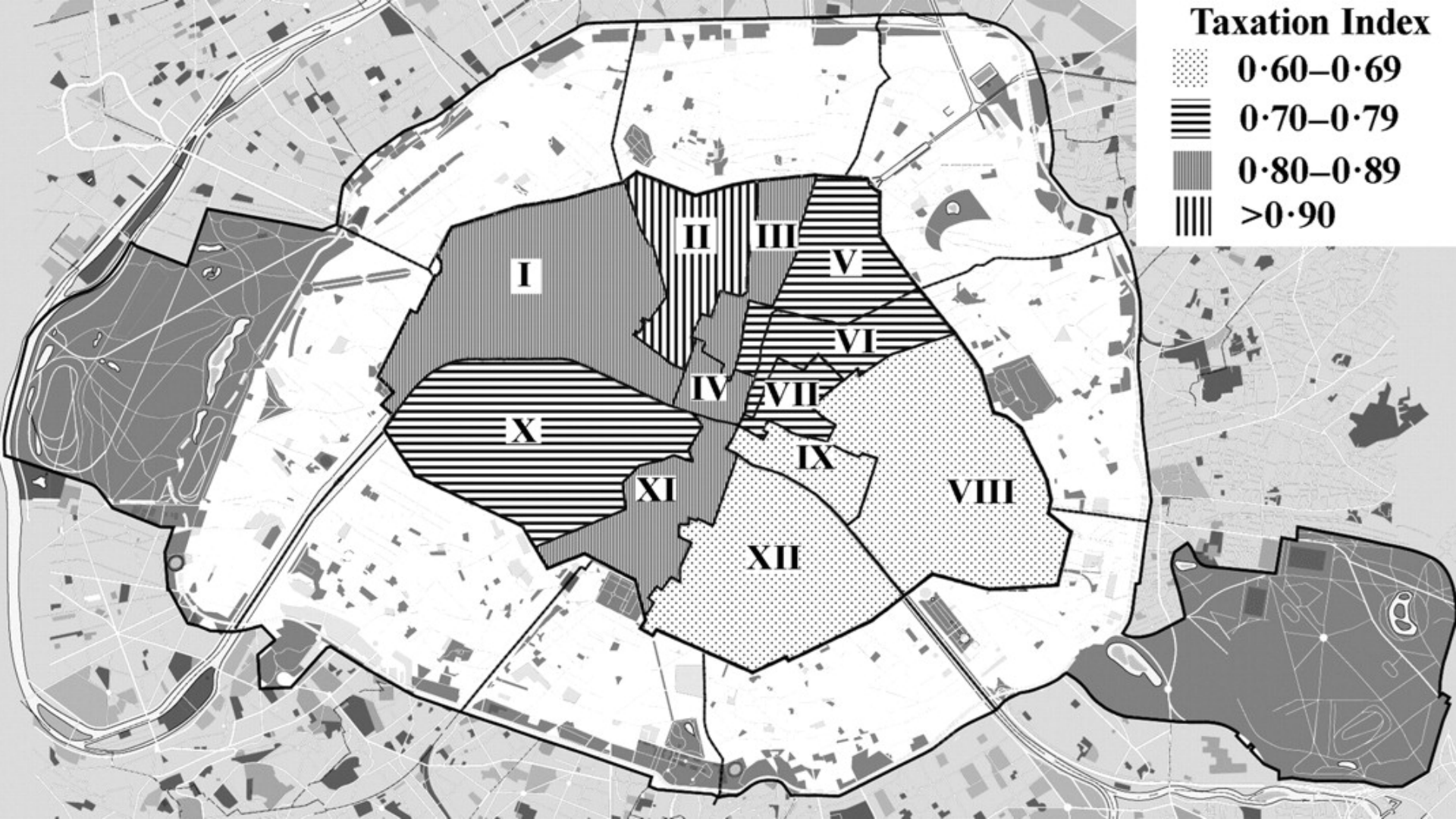
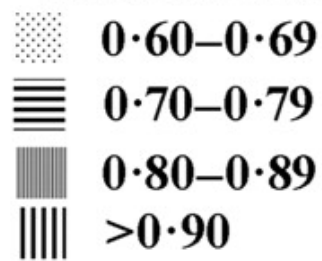

The Mirage of Universality: COVID-19, homelessness, and the pathologies of poverty.

DR. ANDREW BOOZARY MD MPP SM CCFP

Executive Director, Population Health and Gattuso Centre for Social Medicine, UHN
Assistant Professor, Dalla Lana School of Public Health

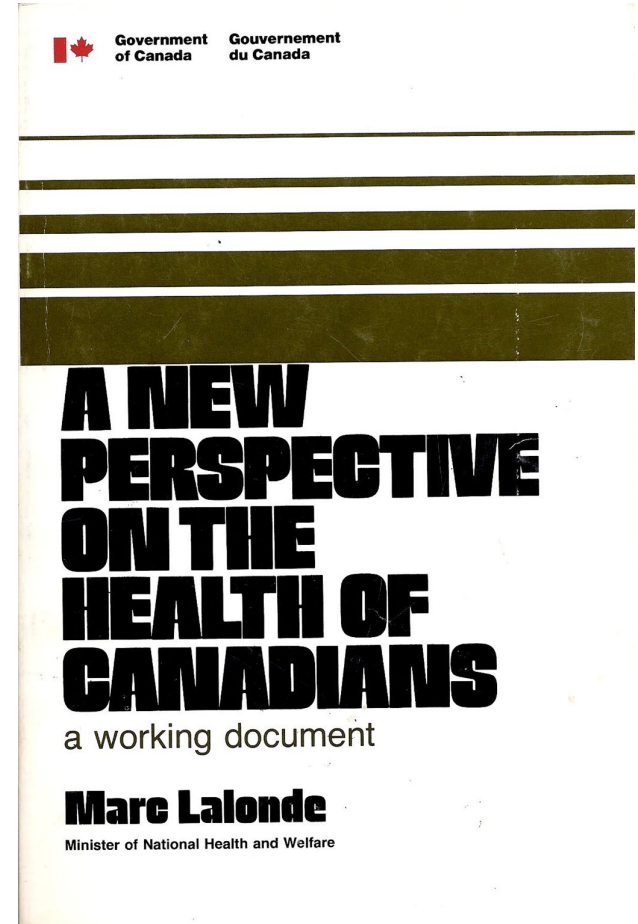
Taxation Index

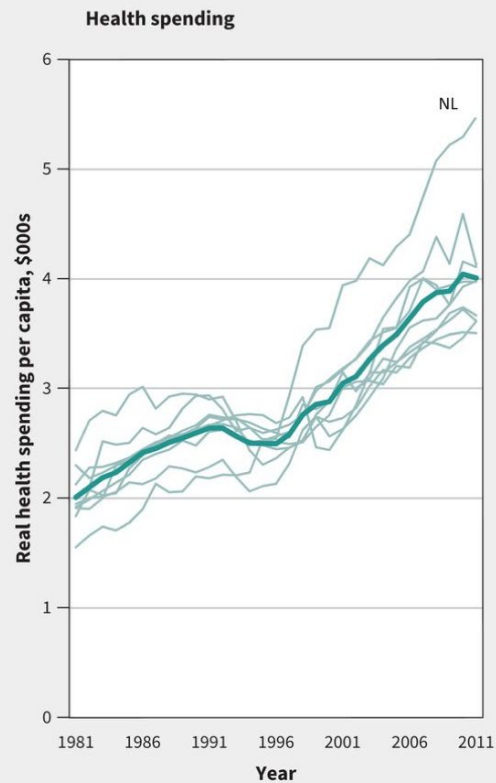
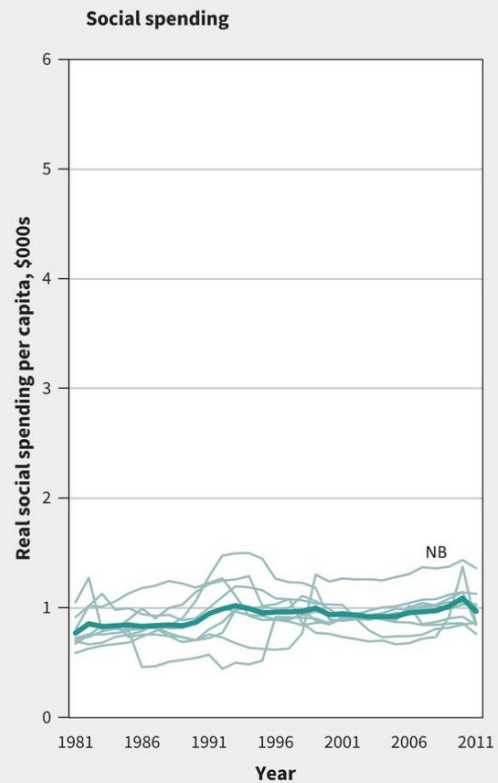


In 2023, a postal code is
a better predictor of
health outcomes than a
genetic code.

“finally, on the subject
of the environment, the
number of economically
deprived Canadians is
still high, resulting in a
lack of adequate
housing”

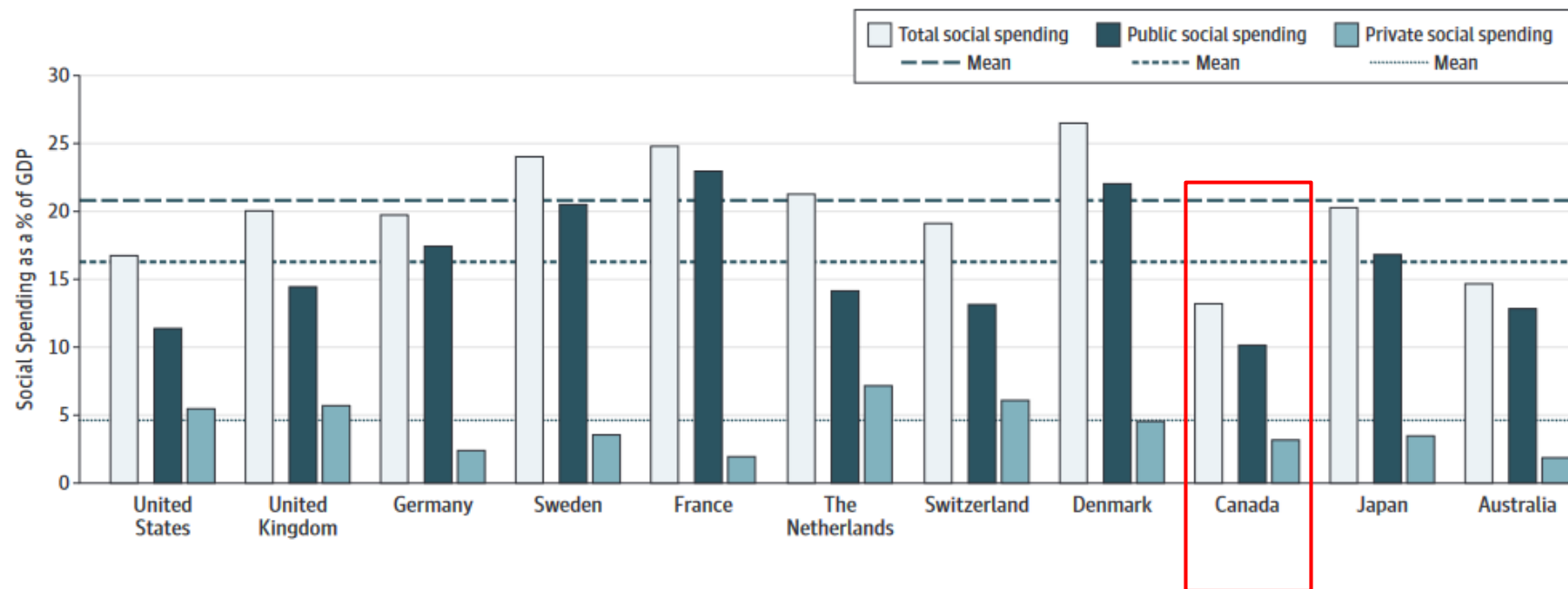
MARC LALONDE, 1974





SOURCE: DUTTON ET AL. CMAJ 2018

Figure 3. Social Spending as a Percentage of Gross Domestic Product



Private Social Spending: Social benefits delivered through the private sector (not transfers between individuals) that involves an element of compulsion and/or interpersonal redistribution. For example, through the pooling of contributions and risk sharing (pensions, survivor benefits, family support, etc.)

SOURCE: PAPANICOLAS ET AL., JAMA 2018

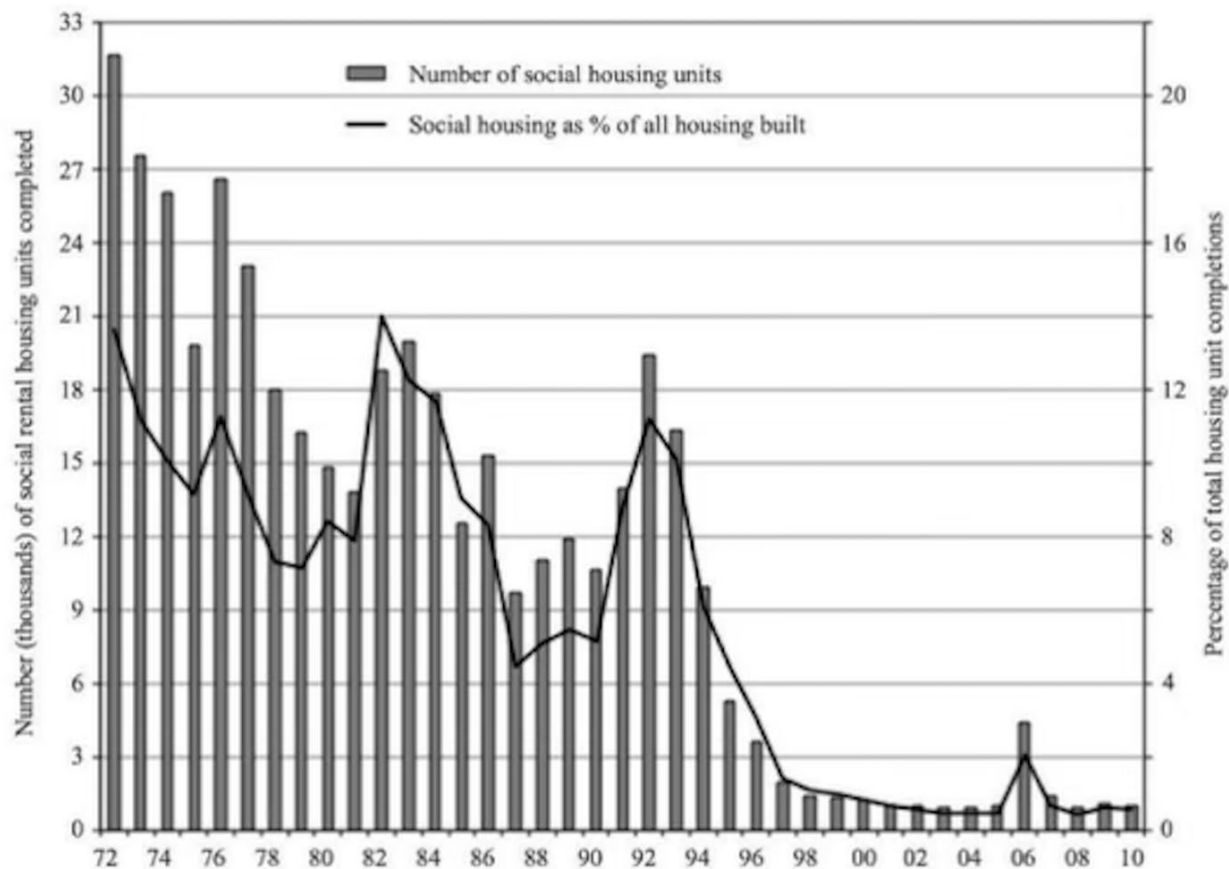
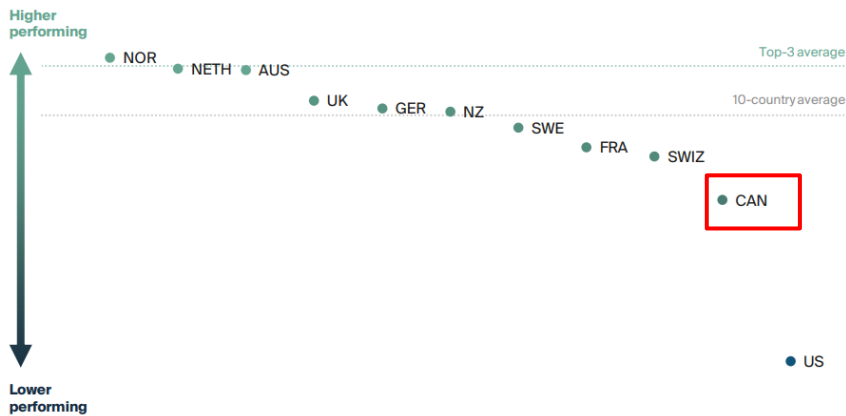


Figure 2. Social housing units built, by year, Canada 1972–2010 (source: calculated by the first author from CMHC *Canadian Housing Observer*, various years).

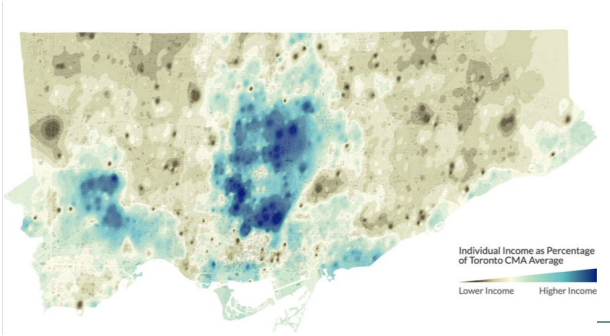
Comparative Health Care System Performance Scores



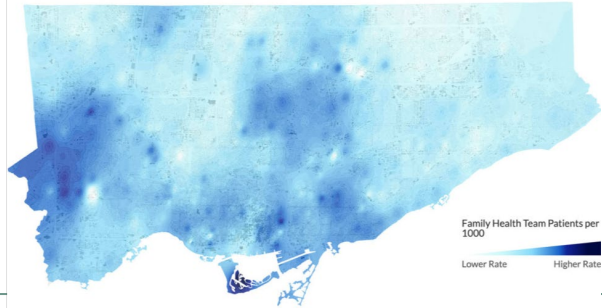
Health Care System Performance Scores: Equity



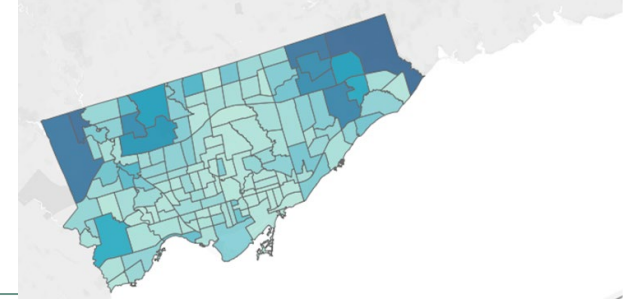
There is no universal
health care without the
human right to housing.



Income



Primary Care



COVID-19

Covid-19 & homelessness

20x more likely to be admitted to hospital

10x more likely to be in ICU

5x more likely to die

The pandemic has had a disproportionate impact on people experiencing homelessness.

2X

Increase in the number of deaths among those unhoused.

1 in 6

Deaths during pandemic occurred among those unhoused.

1 in 4

Had a healthcare encounter 7 days prior to death.

93%

Had a mental health related healthcare encounter in the past 5 years



SOURCE: MARC O'CONNELL BY CARLOS OSORIO, GLOBE & MAIL 2020

GTA

Why the homelessness crisis could get even worse

Emergency funding has dried up, and the head of Toronto's shelter department says without \$317 million, the city will have to shut more shelters



By **Victoria Gibson** Affordable Housing Reporter

Mon., April 10, 2023 | 5 min. read

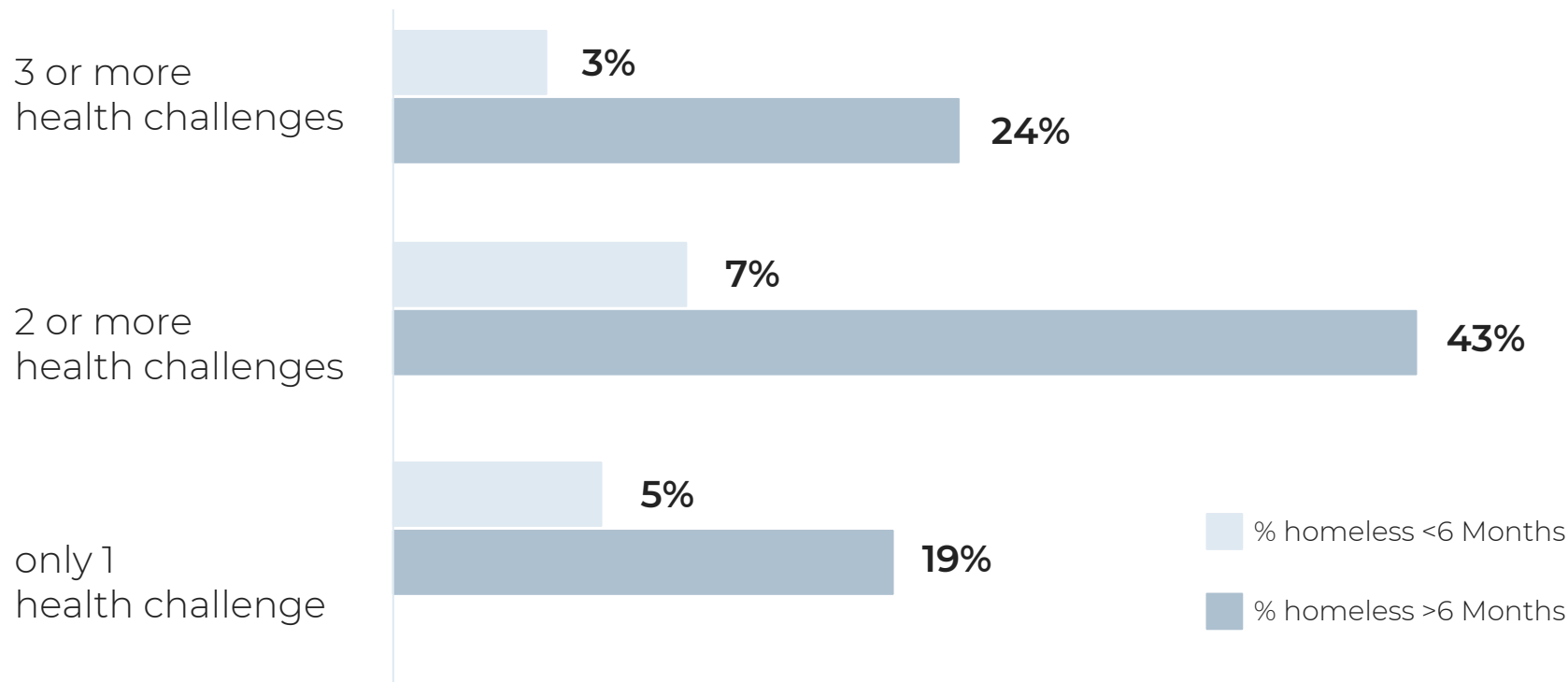
Article was updated Apr. 11, 2023



READ THE CONVERSATION (128)



Homelessness & Health



SOURCE: 2021 TORONTO STREET NEEDS ASSESSMENT SURVEY RESULTS

Homelessness and Emergency Department Utilization



31%

have been to an ED
in last year



80%

more likely to use
ED service



4.5x

more likely to be a
frequent ED user
(5+ visits per year)

Currently 99%
occupancy rate
in Toronto
shelter system

GTA

Number of people turned away from homeless shelters has soared this year, data shows

The new figures follow months of heightened concerns about the city's shelters spurred by the homeless encampments in public parks during the pandemic.

By **Ben Spurr** City Hall Bureau

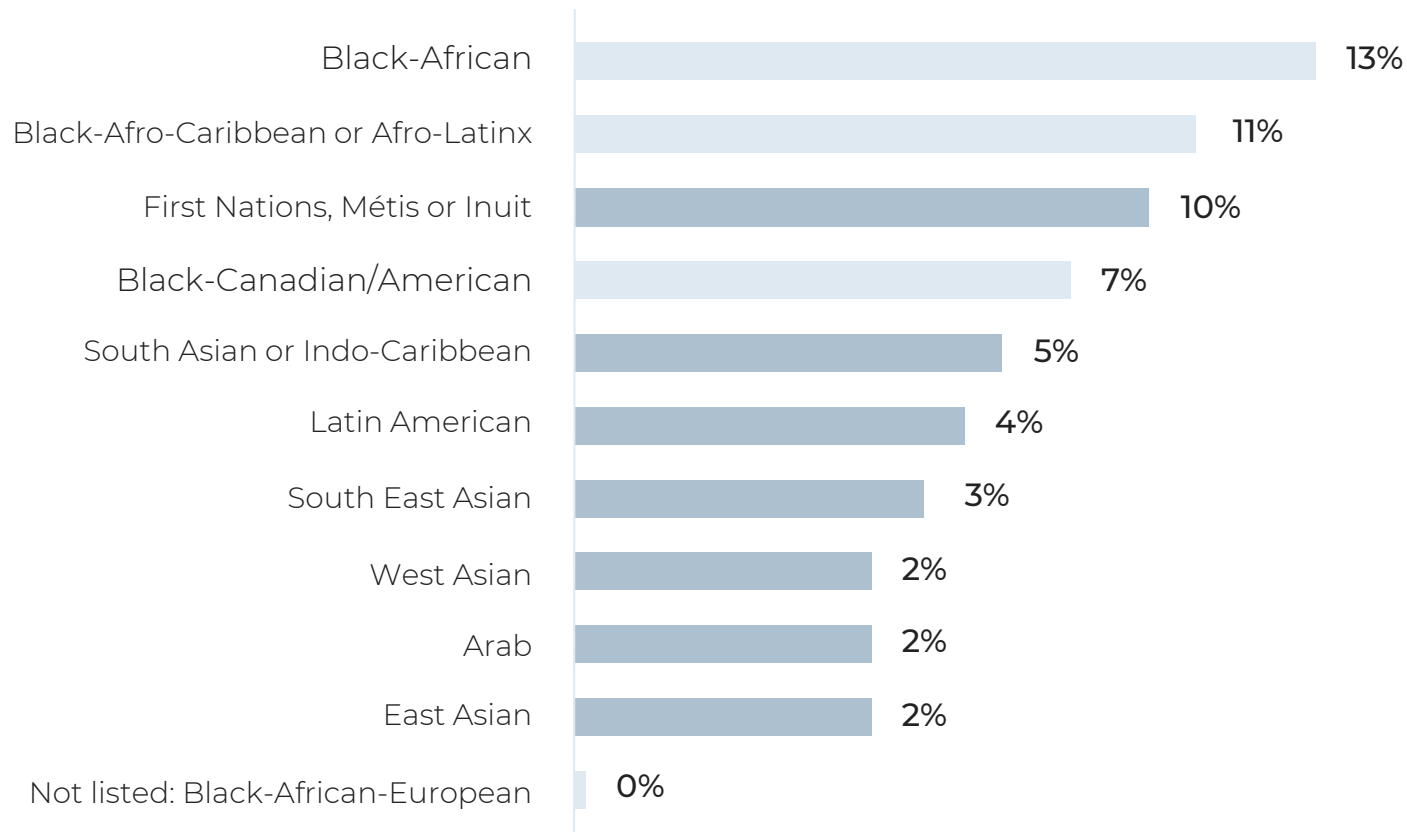
Victoria Gibson Affordable Housing Reporter

Wed., Aug. 10, 2022 | 5 min. read

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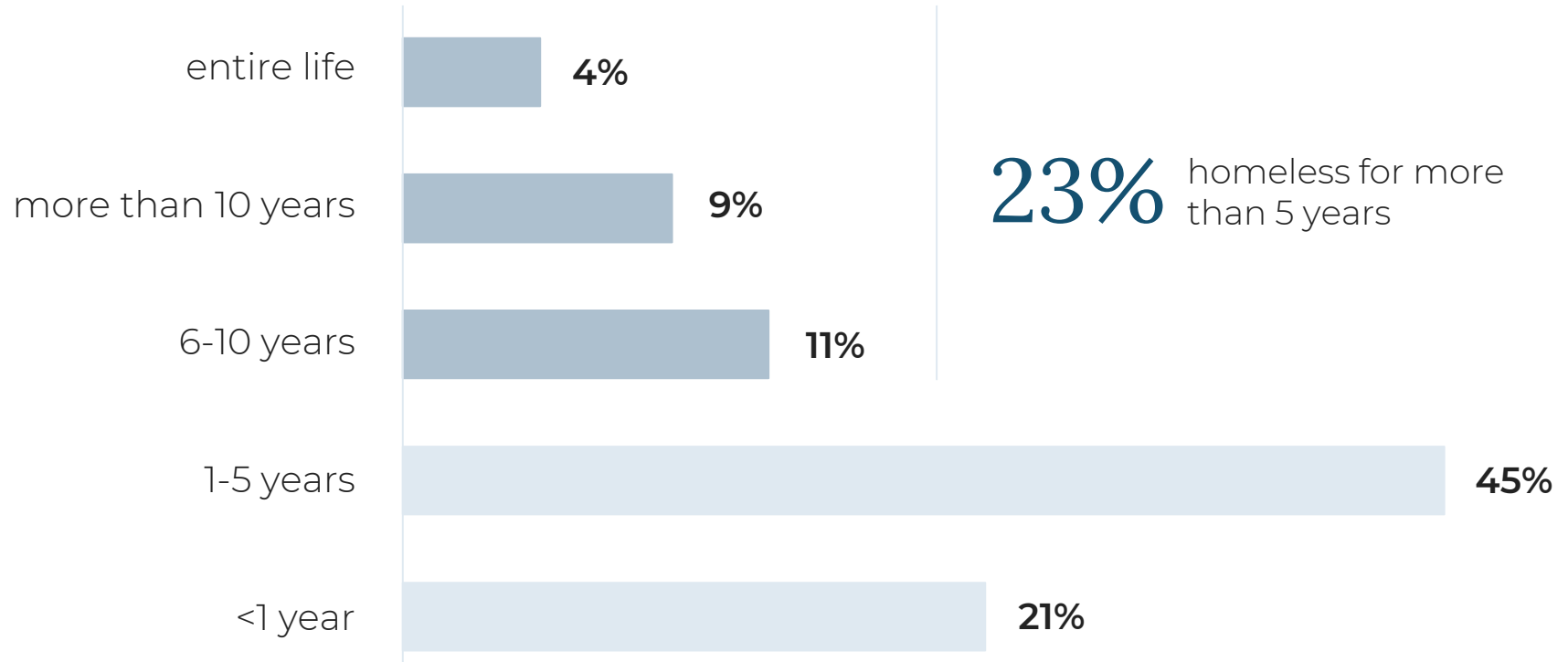


Systemic racism of homelessness



SOURCE: 2021 TORONTO STREET NEEDS ASSESSMENT SURVEY RESULTS

the state of chronic homelessness



SOURCE: 2021 TORONTO STREET NEEDS ASSESSMENT SURVEY RESULTS

Failing on
human dignity is
very expensive.

82 average
life expectancy



50% life expectancy of
underhoused is half

**Effect of Scattered-Site Housing Using
Rent Supplements and Intensive Case
Management on Housing Stability Among
Homeless Adults With Mental Illness
A Randomized Trial**

Vicky Stergiopoulos, MD^{1,2}; Stephen W. Hwang, MD^{1,3}; Agnes Gozdzik, PhD¹; [et al](#)

[» Author Affiliations](#) | [Article Information](#)

JAMA. 2015;313(9):905-915. doi:10.1001/jama.2015.1163

Housing is a matter of social justice and sound health economics

HOSPITAL WARD

\$30,200

per month

PROVINCIAL JAIL COSTS

\$9,900

per month

SHELTER

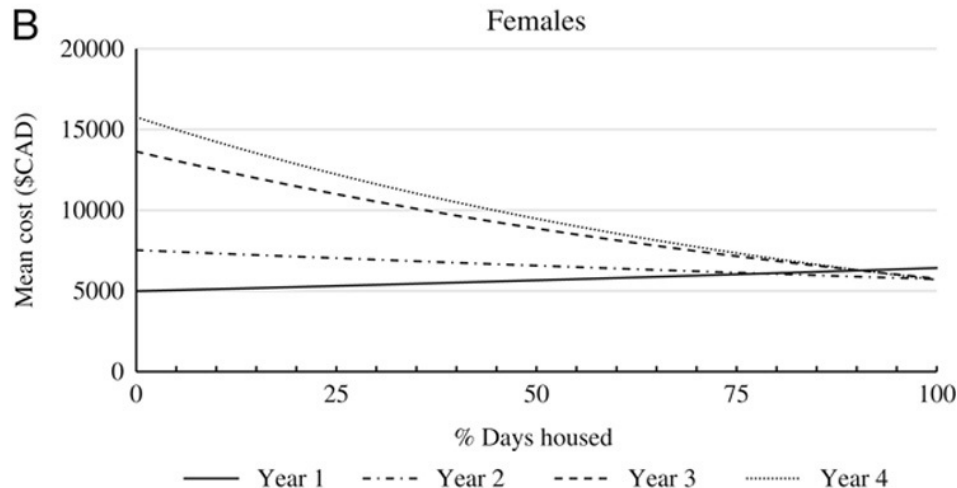
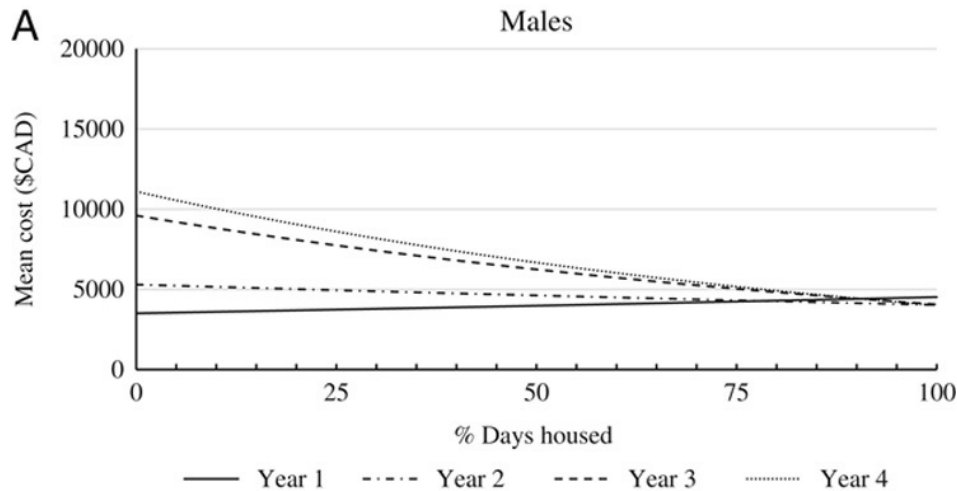
\$6,667

per month

SUPPORTIVE HOUSING

\$2,800

per month



Healthcare utilization and cost impacts of housing

For **every 10% increase** in percentage of days housed, **3% decrease** in ED visits.

Integrating health and social care

System learnings indicate needing to better integrate lived experience into health care delivery

UHN Social Medicine team has partnered with Emergency Department and Liver Clinic to integrate Peer and Community Health Workers as part of care team at UHN

Delivered in partnership with The Neighbourhood Group – with a focus on substance use, mental health challenges, homelessness into care teams

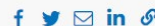
Peers have been part of UHN EDs since September, 2020

How the University Health Network's new social medicine innovation centre is opening eyes to other ways to help vulnerable patients

The Gattuso Centre is the first of its kind in Canada, according to UHN, and aims to transform how the hospital delivers and thinks about health care.



By **Jennifer Yang** Health Reporter
▲ Sun., Dec. 20, 2020 | 9 min. read



First community Health Worker at UHN Toronto Centre for Liver Disease

UHN Social Medicine developed and introduced a Community Health Worker in 2022.

"Being that point person, we can find things that are happening and find things that are alternative ways of resolving things before people end up in an emergency situation"-
Tracy Warne, Community Health Worker

The team will be working to address unmet social needs, including mental health, addictions, housing and food insecurity.

THE
GLOBE
AND
MAIL

Community workers pitch in to help Toronto's most vulnerable navigate the health care system

CARLY WEEKS > HEALTH REPORTER

PUBLISHED 3 HOURS AGO

UPDATED 1 HOUR AGO



The Centre
provides
preferential care
for patients with
alcohol and opioid
intoxication.

320+

Total Admissions

11 Hours

Average length of stay

7 Minutes

EMS Average drop-off time

UHN Stabilization & Connection Centre



Approximately 1500+ hours back to EMS, 290+ patients diverted from ED



All patients are provided with food, water/juice, taxi chits, and laundered/new clothing as needed



15% referred to shelter bed, community, or health services upon discharge

“But housing...it’s so simple. Until you have stabilization, somewhere, it’s almost impossible to do anything. Like how do you get healthy or a job if you have nowhere to stay other than the streets?”

-INTERVIEW PARTICIPANT WITH HISTORY OF HOMELESSNESS

Social Medicine housing initiative

\$40M investment from Government of Canada and City of Toronto to build supportive housing by Spring 2023 in partnership with United Way Greater Toronto.

Gattuso Centre for Social Medicine actively engaged with Ontario Health Ministry of Health for enhanced Social Medicine model supports.

Social Medicine Housing doors to open Fall, 2023.



(L to R: Arif Virani, Parkdale-High Park MP, Hon. Ahmed Hussen, Minister of Housing and Diversity and Inclusion, Daniele Zanotti, President and CEO, United Way Greater Toronto, Dr. Kevin Smith, President and CEO, University Health Network, Deputy Toronto Mayor Ana Bailão, Toronto Mayor John Tory, and Gord Perks, City Councillor for Parkdale-High Park. Credit: UHN)



The New York Times

New York City Will Finally Turn a Hotel Into Housing

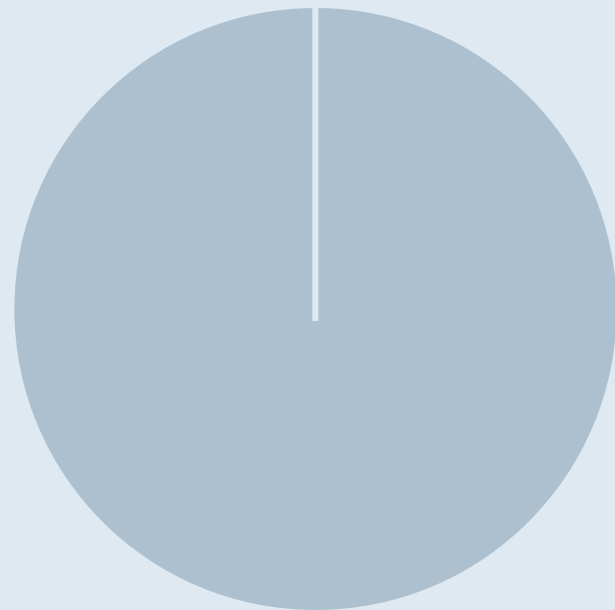
Developers announced a plan to transform a Hilton hotel near Kennedy International Airport into affordable housing — the first conversion to take place through a pandemic-era state program.



A hotel room that will eventually be converted to housing in the Hilton hotel near Kennedy International Airport in Queens. Janice Chung for The New York Times

We are
underinvesting
in better
understanding
what works.

0.03%



ONTARIO MINISTRY OF HEALTH 2019/20
TOTAL EXPENDITURES: \$63.5B

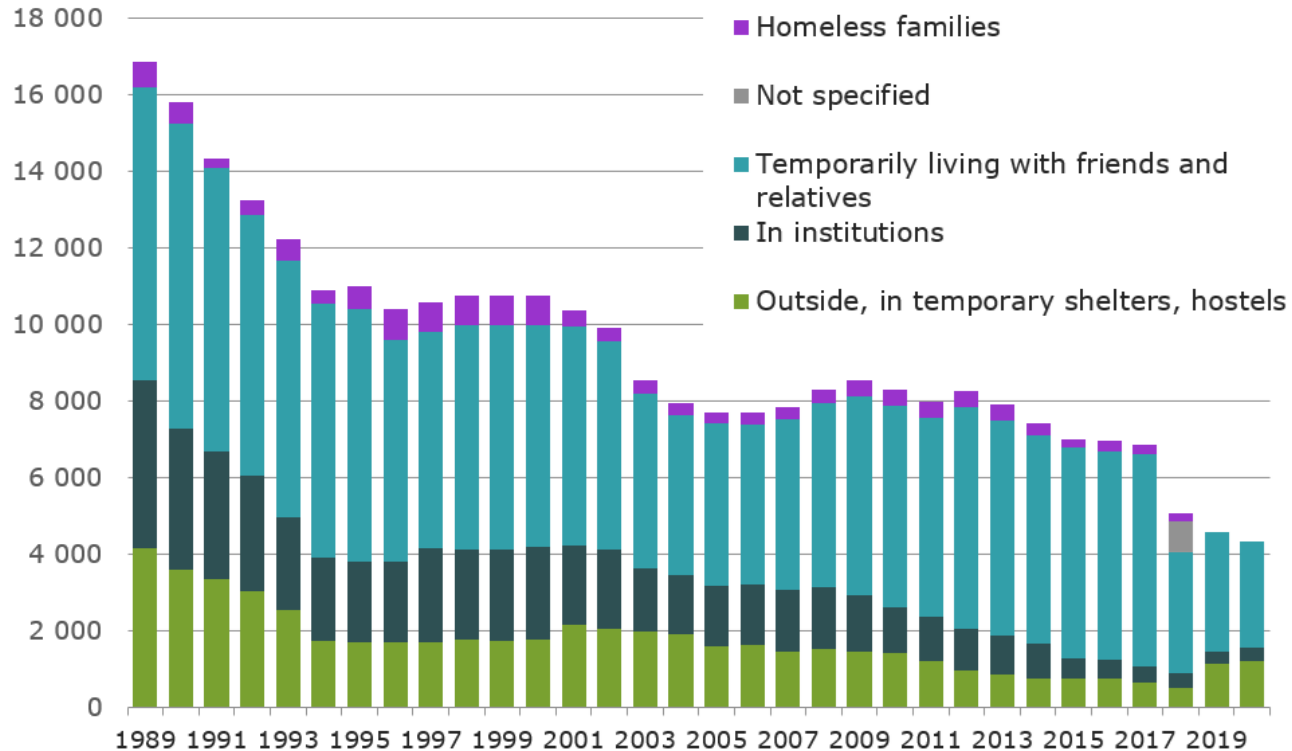
Housing is a human right: How Finland is eradicating homelessness

Tahiat Mahboob · Posted: Jan 24, 2020 5:21 PM EST | Last Updated: August 19, 2020



One of the apartment complexes built as part of Finland's national homelessness strategy. (Submitted by Y-Foundation)

Homelessness in Finland, 2020



SOURCE: HOUSING FINANCE AND DEVELOPMENT CENTRE OF FINLAND, 2021

The impact of minimum income on homelessness: Evidence from France ☆

Gedeão Locks^a  , Josselin Thuilliez^b 

Abstract

In France, childless adults younger than 25 face hard-to-meet eligibility conditions to enroll in the minimum income program. The restrictive requirements generate a “jump” in the number of recipients at ages around 25. We use a Regression Discontinuity (RD) design to assess the impact of the French minimum income program (RSA) on users of accommodation and meal distribution services. We find that the RSA benefit reduces the homelessness rate by 20% among young adults aged 22 to 27. This result is driven by new RSA recipients who have started paying partial rent to third parties, and the probability of becoming a regular tenant increases after age 26. We simulate the effects of lowering the program’s minimum age eligibility on the probability of being homeless. Our findings suggest that in programs directed at homeless individuals, around 60% of expenditures are offset by savings in social assistance costs to the homeless.

“in the end – by
individuals, by society and
by governments – choices
must be made.”

MARC LALONDE, 1974

