OUT IN THE COLD

The Crisis in Toronto's Shelter System





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OUT IN THE COLD: THE CRISIS IN TORONTO'S SHELTER SYSTEM

Homelessness has continued to increase in Toronto. Between 2011 and 2015, shelter use went up by 11% and there is no reason to expect this trend to reverse¹. Some key factors driving this worsening situation are the intensifying austerity measures taken by all levels of government; the decline in income, especially social assistance in Ontario since 1995; and unfettered upscale redevelopment at the expense of building or even maintaining affordable housing, especially in the downtown core of Toronto. The high cost of market rent, coupled with discrimination based on income and health status, has placed private market housing out of reach for the vast majority of those relying on social assistance or CPP. Obtaining affordable housing appears even more hopeless. There are 95,381 households on the waitlist for subsidized housing in Toronto². The wait is estimated to be 10 years long and for those that are homeless and coping with mental health issues and/or addictions the wait for supportive housing is reported to be 5 years.

For years, the City's response to the growing problem of destitution has been as inadequate as it has been politically possible to get away with. City Council has made only minor concessions to community demands and despite decades of criticism and numerous freezing deaths shelters remain overcrowded and inaccessible and the conditions within them intolerable.

1.) Detailing the Results of the Crisis

During the week of January 18, 2016, Ontario Coalition Against Poverty (OCAP) members and supporters visited 8 of the interfaith Out of the Cold facilities and 2 Warming Centres. Conditions were observed and a total of 105 service users were surveyed. As we had much expected, what we found were dedicated people struggling to meet the needs of the homeless with facilities and resources that were simply inadequate under the circumstances.

1.1) OVERCROWDING

The City's Daily Shelter Census confirms that the policy of keeping shelters at a maximum occupancy level of 90% is being disregarded. Nearly every night occupancy levels exceed 90% in every shelter sector with the exception of family motels which skew the overall average³. For instance, from January 1 to January 14, 2016 the average shelter occupancy rate according to the City census was 93.3% and Women, Youth and Family sectors were consistently between 96 - 100%⁴. In 2013 flex beds were incorporated into

the permanent shelter system leaving no space to accommodate increasing need⁵. This means that the city is depending entirely on two Warming Centres, two 24-Hour Drop-Ins for women and trans people and the charity based, volunteer run Out of the Cold Program as a backup for the overcrowded and failing shelter system. It should also be noted that this is a limited reprieve, as Warming Centres only run in January and February and Out of the Colds similarly only run in winter months and close every year after Easter.

Highlighting the extent of overcrowding, an alarming 81% of people surveyed at Out of the Cold locations and Warming Centres stated that they had been denied a shelter bed because shelters were full. Reasons for being at an Out of the Cold or Warming Centre instead of a shelter included: 1) shelters were full, 2) barriers to access, 3) having been barred from a shelter, 4) unfriendly experience, 5) past experience of theft and/or bugs.

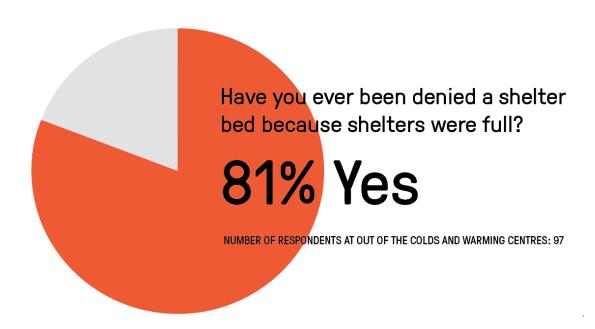


Fig. 1.1: Denial of shelter services, by respondent

The need for shelter much exceeds what the City is providing. Every night hundreds of people stay on the street, in unsafe relationships or accommodations, and in emergency facilities that are unable to provide a bed. According to the City of Toronto an average of 139 people were at a Warning Centre or 24-Hour Drop-In at 4 AM during the period of January 1st to 28th, 2016⁵ and an average of 100 people stayed overnight at an Out of the Cold between January 1st and 14th, 2016⁶. Occupancy rates vary. For example, 282 people stayed overnight at an Out of the Cold, Warming Centre or 24 Hour Drop-In on January 11, 2016.^{5,6}

24 Hour Drop-In Service Statistics between January 1 and January 28, 2016

Measure	Margaret's	St. Felix Centre	Fred Victor Centre	Sistering	Total
Total o/night (4 a.m. count)	1,488	1,416	417	351	3,672
Avg. total (4 a.m. count)	55	52	15	17	139
Avg. women (4 a.m. count)	36	15	15	17	83
Avg. couples (4 a.m. count)	3	4	Women only	Women only	7
Avg. total (24 hrs)	214	86	72	185	557

^{*}From Shelter Support and Housing, City of Toronto

Fig. 1.2: 24 Hour Drop-in Services Statistics b/w Jan. 1-28, 2016

Out of the Cold Program and Warming Centres are struggling to meet the need. 55% of respondents reported being denied overnight access to an Out of the Cold Program because they were full, and 5 out of 6 of the Out of the Cold staff and volunteers surveyed reported turning people away due to exceeded capacity. Numerous people reported that Warming Centres and Out of the Cold locations sometimes run out of mats and blankets, forcing people to sleep on the bare floor or in chairs.

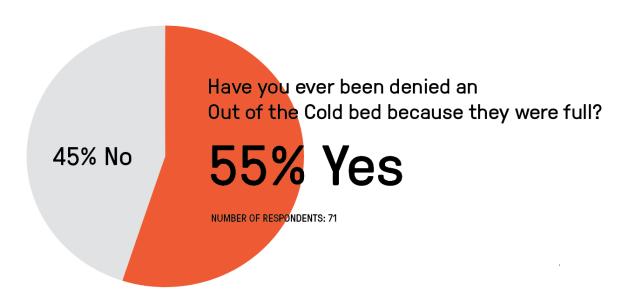


Fig. 1.3: Denial of Out of the Cold beds, by respondent

Overcrowding leads to a high stress environment, a poor night's rest and exacerbated health issues. Out of the Cold locations have mats scattered in hallways and set-up in basements and large rooms. In several locations mats were only inches apart from one another. Privacy and personal space were non-existent and tensions were high.

Of survey respondents at
Out of the Cold locations
and Warming Centres, 55%
had witnessed physical or
sexual violence, and 19%
had directly experienced
violence themselves.

At the **Out of the Colds** or **Warming Centres** have you witnessed or experienced physical or sexual violence?



NUMBER OF RESPONDENTS: 98

Fig. 1.4: Witnesses of physical or sexual violence at Out of the Cold/ Warming Centres, by respondent

2.) Conditions

Those who access an Out of Cold or a Warming Centre must make do with conditions that are lacking in a range of ways. None of the locations visited fully complied with Toronto Shelter Standards⁷. Several locations did not meet the standard of having one toilet for every 15 people. At all locations, a mat on the floor was the best sleeping option available. All locations only offered one blanket and only 2 locations offered a pillow. While Toronto Shelter Standards highlight the importance of allowing 2.5 feet between sleeping surfaces approximate space between mats ranged from inches (3 locations) to 2 feet (1 location) placing people at risk of infectious disease and posing safety issues if evacuation became necessary.

Overcrowded conditions and poor food quality expose shelter users to the risk of illness and disease. From 2010 to 2015 Toronto Public Health confirmed 18 outbreaks of foodborne illness and infectious disease within City shelters. In total, 660 people became ill during these outbreaks. Confirmed infectious disease outbreaks ranged from gastroenteritis to influenza and streptococcal pneumonia with the largest outbreak causing illness in 77 people^{8.}

Institution Name	Outbreak Number	Outbreak Classification	Reported Date	Onset Date Time of Index Case	Date Outbreak Declared Over	Disease Group	Etiological agent	Etiological agent 2	Total ill	Total at risk in affected area	Total ir facility a risk
JOHN GIBSON HOUSE	3895-2014-402	CONFIRMED	29/12/2014	22/12/2014	07/01/2015	RESPIRATORY / DIRECT CONTACT	INFLUENZA A (H3)		8	55	55
MAXWELL MEIGHEN CENTRE	3895-2010-025	CONFIRMED	11/01/2010	04/01/2010	25/01/2010	FB/WB/ENTERIC	GASTROENTERITIS UNSPECIFIED		27	360	360
ROBERTSON HOUSE	3895-2012-154	CONFIRMED	30/07/2012	28/07/2012	09/08/2012	FB/WB/ENTERIC	GASTROENTERITIS UNSPECIFIED		21	133	133
	3895-2013-180	CONFIRMED	25/04/2013	22/04/2013	08/05/2013	FB/WB/ENTERIC	GASTROENTERITIS UNSPECIFIED		21	171	171
	3895-2013-301	CONFIRMED	12/12/2013	24/11/2013	23/12/2013	FB/WB/ENTERIC	NOROVIRUS		30	148	148
SALVATION ARMY GATEWAY MEN'S SHELTER	3895-2012-004	CONFIRMED	03/01/2012	31/12/2011	24/01/2012	FB/WB/ENTERIC	FOOD POISONING UNSPECIFIED		29	138	138
SEATON HOUSE	3895-2010-071	CONFIRMED	27/01/2010	13/01/2010	17/02/2010	FB / WB / ENTERIC	FOOD POISONING UNSPECIFIED		77	930	930
	3895-2010-164	CONFIRMED	26/03/2010	21/03/2010	20/04/2010	FB / WB / ENTERIC	GASTROENTERITIS UNSPECIFIED		25	220	220
	3895-2010-277	CONFIRMED	13/11/2010	25/10/2010	29/11/2010	FB / WB / ENTERIC	FOOD POISONING UNSPECIFIED		26	280	280
	3895-2011-079	CONFIRMED	10/03/2011	07/03/2011	12/04/2011	FB / WB / ENTERIC	NOROVIRUS		69	300	700
	3895-2013-306	CONFIRMED	17/12/2013	15/12/2013	06/01/2014	FB/WB/ENTERIC	NOROVIRUS		41	292	620
	3895-2015-156	CONFIRMED	25/02/2015	20/02/2015	01/04/2015	FB / WB / ENTERIC	NOROVIRUS		70	750	750
	3895-2015-215	CONFIRMED	25/03/2015	10/03/2015	02/04/2015	RESPIRATORY / DIRECT CONTACT	STREPTOCOCCUS PNEUMONIAE	CORONAVIRUS	13	300	750
STREET HAVEN WOMEN'S SHELTER	3895-2010-096	CONFIRMED	07/02/2010	03/02/2010	24/02/2010	FB/WB/ENTERIC	GASTROENTERITIS UNSPECIFIED		30	61	61
WOMEN'S RESIDENCE	3895-2010-093	CONFIRMED	05/02/2010	01/02/2010	15/03/2010	FB / WB / ENTERIC	NOROVIRUS		67	149	149
	3895-2013-213	CONFIRMED	23/06/2013	22/06/2013	02/07/2013	FB / WB / ENTERIC	NOROVIRUS		26	133	133
	3895-2014-313	CONFIRMED	01/12/2014	30/11/2014	23/12/2014	FB / WB / ENTERIC	NOROVIRUS		40	156	156
	3895-2015-178	CONFIRMED	06/03/2015	04/03/2015	18/03/2015	FB / WB / ENTERIC	GASTROENTERITIS UNSPECIFIED		40	159	159

Fig. 2.1: Acknowledged outbreaks of infectious agents in the Toronto Shelter System, 2010-2015

2.1) BARRIERS TO ACCESS

Curfews and barring practices often prevent the most marginalized from accessing a shelter bed. Barring is a symptom of overcrowding and a lack of resources. Meeting the needs of every shelter user is challenging when facilities are managing a bed shortage and crowded conditions. Barring appears to be a common practice within shelters and people surveyed identified drug and/or alcohol use and/or intoxication as the most common reason for barring. Of those surveyed at Out of the Cold locations and Warming Centres, 61% said they had been kicked out of and/or barred from a shelter because of substance use or intoxication.

Warming Centres appear to have the lowest barriers to access. 88% of Warming Centre respondents said they had never been turned away from a Warning Centre because of exceeded capacity. Similarly, Warming Centres appear to practice barring less often, with 88% saying they had never been kicked out of and/or barred from a Warming Centre.

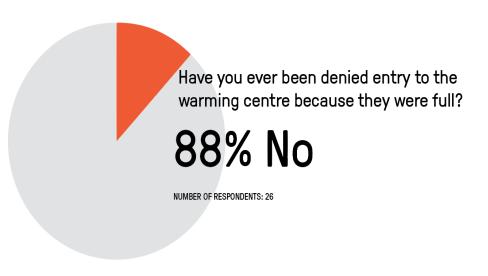


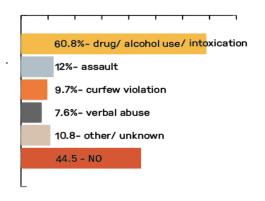
Fig. 2.2: Respondents denied access to Warming Centres due to capacity issues

For many, securing a safe place to stay at night becomes a task that fills a large part of the day and creates much anxiety. Different Out of the Cold locations operate on different nights, leading to a situation where people travel across large parts of the City hoping to secure shelter.

The demand for shelter is greater than can be met, so many show up hours before it is time for them to sleep. Several people reported showing up 4-6 hours before doors open to secure a bed ticket. There were volunteer and staff reports of people at Out of the Cold locations who, late in the evening in the dead of winter, still did not know if they would get a mat for the night. Those who do not secure a spot must try the Peter Street Referral Centre, where they may sit for several hours waiting for a bed or a 24-Hour Drop-In, where no mat is guaranteed. It is no surprise that many take their chances sleeping outside on the street.

Perhaps the most disturbing part of what we discovered, given the glaringly inadequate conditions of facilities, was the extent to which people expressed a preference for the Out of the Cold Program over City shelters. People told us they found the Out of the Cold program to be less rule

Have you ever been kicked out and/or barred from a **shelter**?



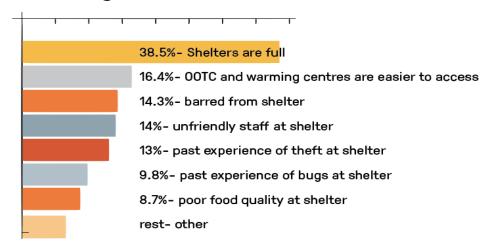
NUMBER OF RESPONDENTS: 91

Fig. 2.3: Shelter barring statistics, by respondent

bound, more welcoming and generally less tense and violent. These facilities appear to resort to removal and barring less frequently. Couples and friends were less likely to be separated and there was a sense of community. Police presence can be a deterring factor for many people, including those who use substances or have experienced police brutality. Many people reported that in comparison to shelters, the police are called less frequently to Warming Centres and the Out of the Cold Program.

Accessing a shelter bed can be a time consuming and confusing process that often does not yield results. People reported that calling central access to obtain a bed often resulted in a long wait on hold (up to one hour long) only to find out that no bed was available. Calling shelters directly is also challenging. A 2013 study conducted by Ipsos Reid found that only 12% of calls answered by shelters resulted in being offered a bed⁹. The rest of the time people were referred to other shelters, denied a bed outright or referred to Central Access to begin the process all over. 25% of the time the call was not even answered.

Why are you here at an Out of the Cold/ warming centre instead of a shelter?



NUMBER OF RESPONDENTS: 91

Fig. 2.4: Reasons for using Out of the Cold/Warming Centre spaces over shelter bed, by respondent. Values exceed 100% due to several respondents citing multiple reasons

2.2) CONCLUSIONS

The provision of shelter beds to people who are homeless is the last act of state intervention before outright social abandonment. After a commitment to living wages has been jettisoned, decent income withdrawn and even the right to housing compromised, all that is left before the authorities wash their hands of any and all responsibility for well being and survival is the provision of shelter from the elements. If this meagre test is applied to the municipal government of the City of Toronto, then the state of the shelter system shows a City that has crossed the line and abandoned people who are homeless.

Fundamentally, the Toronto shelter system and its backup component, are not ensuring that everyone who needs it will have shelter on any given night. The conditions being imposed on those who do access the system are utterly failing to meet basic needs, provide health sustaining facilities and offer conditions that respect basic human dignity. In such a wealthy city as Toronto, this is both unjustified and outrageous and must be addressed by those responsible.

3.) Demands

What emerges is a picture of a shelter system in crisis that is lurching towards break down. We demand of the City the following measures to address this situation:

- **1.) Enforce the 90% Maximum Occupancy Policy:** The ongoing refusal to enforce the 90% Maximum Occupancy Policy by opening additional space must come to an end. It is the key to a meaningful improvement in a deplorable and deteriorating situation. Unless there are enough shelter beds to meet the need that exists, people will be forced onto the streets or continue to endure conditions that no one should have to face.
- **2.) Open new spaces to shelter people, including the Federal Armouries:** The City must secure and open shelter space and continue to do so in order to ensure the 90% policy is complied with. As an interim measure to reduce the present pressure on the system, we call for the Federal Armouries to be used for shelter. Such a move would have an immediate beneficial effect and would provide access to beds, cots, pillows, showers and improved personal space and safety.
- **3.) End discriminatory practices within the shelter system:** A low barrier access approach must be taken to ensure that people are not removed or barred from shelters. A harm reduction approach is necessary to ensure that everyone can access a shelter bed free from discrimination based on substance use. This vital approach requires adequate spaces be provided or the tensions created by overcrowding will continue to stand in the way of a system that can meet people's needs and be truly inclusive. Warming Centres and 24-Hour Drop-Ins should not act as the only accessible space for some populations because these facilities are not equipped for people to actually sleep and are meant as an emergency measure. Additionally, points of access such as central intake and the referral centre have become cumbersome and prohibitive and must be made more accessible.
- **4.) No further loss of shelter beds:** The crisis in the system is such that no existing space can be put in jeopardy. This is especially true in the central part of the City where shelters are needed the most. Securing locations for shelter beds has proven difficult in the past. For example, after the closure of the Hope Shelter it took months to find a space to partially replace the beds lost. The George Street redevelopment must not proceed until downtown sites to permanently house all beds currently at Seaton House are secured. It must be agreed that the removal of shelter beds from the central part of the City is simply not feasible.
- **5.) Respect the right to housing:** In this report, we address the deplorable state of Toronto's emergency shelters. Obviously, it is the lack of truly affordable and accessible housing that drives the homeless crisis that has overwhelmed this system. There remains an acute need for all levels of Government to put real resources into social housing and, in addition, it is vital that the City of Toronto not compound the problem by putting existing housing at risk. Public housing and rent geared to income stock must be preserved and 'reform' measures that intensify gentrification rejected. Additionally, shelters and housing should not be pitted against each other the reality in the current moment is that we desperately need both.

The most extreme expression of the present austerity agenda we are facing is the refusal to provide basic shelter to people who are homeless. The means exist with all three levels of government to address the present shelter crisis. We call on Mayor John Tory and the City Council to take the basic steps necessary to ensure that this City respects the human right to shelter from the elements under conditions that preserve health, respect and dignity.

4.) Definitions

Out of the Cold Program - A charity based program run by volunteers during the winter months. Host sites are churches, synagogues and faith based communities that offer a meal and place to sleep one night a week.

Warming Centres - A program that came into existence in 2014 after a long and hard fight for emergency space during cold weather amidst overcrowding in the shelter system. There are currently 2 warming centres in Toronto that are open 24 hours a day during January and February. After February warming centres will only open when an Extreme Cold Weather Alert is called. This occurs when a temperature of -15 degrees Celsius or a wind chill of -20 degrees Celsius or colder is forecasted¹⁰.

Shelters - A mixture of City run or City funded and agency run spaces that provide beds for people who are homeless.

24 Hour Drop-Ins - A new program beginning in 2015 that was also a long and hard fought win. These drop-ins are meant to provide a 24 hour safer space for women and trans people ALL YEAR. There are two 24 hour women and trans drop-ins in Toronto.

Harm Reduction - Reducing the harms associated with drug use without requiring cessation of use. Includes programs, policies and care philosophies that promote self-determination and self-empowerment and work to reduce stigma, discrimination, criminalization and harms related to drug use.

Barred from shelter - The person is/has been barred from one or more shelters.

Shelters are full - Today and/or in the past the person found that shelters were full and/or shelters are often full so they have stopped trying to access them.

Easier to Access - The person finds the Out of the Cold Program and/or Warming Centres easier to access and/or has been referred to the Assessment and Referral Centre on Peter Street and does not want to and/or is unable to wait there.

Bugs - The person has seen and/or been infested by bed bugs, lice, cockroaches and/or scabies at a shelter(s).

Unfriendly Staff -The person has had a negative experience(s) with shelter staff.

Theft - The person has had a personal item(s) stolen while at a shelter.

Poor Food Quality - The person is unhappy with the food quality at a shelter(s) and/or prefers the quality of food at the Out of the Cold Program.

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