



## STAFF REPORT INFORMATION ONLY

### Update on Tracking Deaths in the Homeless Population

<b>Date:</b>	June 10, 2010
<b>To:</b>	Board of Health
<b>From:</b>	Medical Officer of Health
<b>Wards:</b>	All
<b>Reference Number:</b>	

#### **SUMMARY**

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This report is the second biannual update on mortality trends in the homeless population in the City of Toronto. Data has previously been collected from three sources regarding deaths among homeless people. Recent years of data indicate a downward trend in number of deaths.

As two of the three sources of data are no longer available, this will be the last report of this type on tracking homeless deaths.

#### **Financial Impact**

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There are no financial implications arising from this report.

#### **DECISION HISTORY**

At its meeting of September 14, 2006 the Board of Health passed the following recommendation: "The Medical Officer of Health report to the Board of Health on aggregate findings and identified trends in deaths in the homeless population on a biannual basis, beginning with 2007 data". On May 5, 2008 the Board of Health received the first biennial update.

#### **ISSUE BACKGROUND**

Higher rates of illness and premature death among the homeless population have been widely recognized. However, the often isolated existence of people who are homeless, poses a challenge to efforts to accurately determine mortality levels and trends. In some

instances, homeless individuals are not identified, or may have no known next of kin. In these cases it rests with the shelter system or community agencies, in collaboration with other authorities such as those in law enforcement, social services and health care, to attempt to ensure that clients receive a proper burial and that efforts are made to identify and notify next of kin.

## **COMMENTS**

The Office of the Chief Coroner (“the Coroner”) generally investigates deaths that are of a sudden, suspicious nature, are accidental or unexpected, or are otherwise not natural. Such deaths are reported to the Coroner by law enforcement officials, health care practitioners and other community service providers, and subsequently investigated by the Coroner’s Office. Most natural deaths do not involve the Coroner. However, if an individual dies while living on the street, even if their death is deemed to be from natural causes, the Coroner will investigate.

The Toronto Indigent Deaths Enquiries (TIDE) Project was established in 1999 as a repository for information regarding deaths among homeless individuals defined as “any person who has no fixed address and dies in a public place (street or building), hostel, or in hospital having been admitted from any of the above”. TIDE data only included those deaths which were reported to, and investigated by, the Coroner. The TIDE system was discontinued in 2007 and the last year for which TIDE data is available is 2005.

The Hostel Services Unit of the Shelter, Support & Housing Administration Division shelters over 28,000 different individuals on an annual basis. In 2007, Hostel Services set up a system to collect information regarding deaths of homeless clients residing in shelters, or clients who had recently been discharged from a shelter to a medical institution or care facility.

Using prescribed forms, shelter operators are required to provide an initial submission on a death within 24 hours and provide further statistical detail within 30 days. Information reported on the form includes client identification, demographic data, time, date, place, manner and cause of death if available. Hostel Services collects and releases the data in accordance with the Municipal Freedom of Information and Protection of Privacy Act and policies which ensure the protection of client confidentiality and privacy even after death.

In 2009, 16 deaths met the criteria for inclusion. This is lower than the two previous years with 24 and 26 deaths respectively. Summary information on these deaths is contained in Tables 1 and 2.

The Toronto Disaster Relief Committee (TDRC) is an organization that is involved in research, advocacy and public education on issues affecting homeless people in Toronto.

This group records deaths for their homeless memorial, which names over 600 homeless or formerly homeless people who have died since the mid-1980s. TDRC uses a broader

definition of homeless deaths than TIDE. TDRC’s definition is “individuals who died while living on the street, staying in a shelter, in custody with no fixed address, in hospital or long-term care with no fixed address in the community, in transitory and short-term accommodations, living in unsafe and/or inadequate accommodation (i.e. squats, rooming houses) and Aboriginals on their home reserve if they went there with the knowledge they were ill”.

TDRC gathers information from frontline agencies, homeless individuals and, in some cases, the Coroner’s office. Individual deaths have been tracked, confirmed and documented by the TDRC. However, a significant number remain listed as John or Jane Doe.

In 2009, TDRC recorded 33 deaths, which was higher than in 2008 (23 deaths) and slightly lower than in 2007 (36 deaths). Summary information on these deaths is contained in Tables 1 and 2. TDRC has advised Toronto Public Health that due to insufficient resources they will no longer formally track homeless death data.

Table 1 shows the total number of deaths reported by the three sources for the period 2000 to 2009, for years when data is available. In reviewing the data it should be remembered that deceased persons may appear on more than one list or that there may be individuals who are homeless whose names may not appear on any of the lists. Privacy legislation prevents the disclosure of names in both the TIDE data from the Coroner’s office and the list from Shelter, Support and Housing Administration. The purpose of using three sources of deaths data is not for cross validation of the data but rather for corroboration of trends in mortality among the homeless population.

**Table 1: Number of Homeless Deaths Reported by Coroner’s Office, Hostel Services and Toronto Disaster Relief Committee, 2000 to 2009**

Year	TIDE Reports from Coroner’s Office	Hostel Services <sup>1</sup>	TDRC
2000	36	-	44
2001	34	-	46
2002	46	-	43
2003	39	-	29
2004	38	-	55
2005	45	-	73
2006	n.a. <sup>2</sup>	-	60
2007	n.a.	24	37
2008	n.a.	26	23
2009	n.a.	16	33

Hostel Services began their data collection system in 2007. The Coroner’s Office discontinued project TIDE in 2007. Given a time lag of approximately 2 years for deaths from project TIDE, 2005 is the last year reported.

Table 2, below, notes any trends in the aggregate data reported for the period or years when data was available. Recent years of data from both Hostel Services and TDRC are consistent with a downward trend in number of deaths.

**Table 2: Summary of Findings from the Three Sources of Data**

	<b>TIDE Coroner's Office 2003 - 2005</b>	<b>Hostel Services 2006- 2009</b>	<b>TDRC 2000 - 2009</b>
Time trends	No apparent increase	Possible downward trend	Downward trend over the last 5 years
Sex of deceased	Predominately (90%) male	Predominately (83%) male	Predominately male
Age of deceased	Approximately 6% over 61 years of age	Average age at death 52, age range 19-89	No information on age
Cause of death	15% due to natural causes (based on all deaths)	Mostly unknown cause of death as data not released by coroner (unknown for 47 of the 66 deaths)	No information

## **CONCLUSIONS**

The significance of premature death in the homeless population, combined with the often-isolated existence of this group, prompted Toronto Public Health to adopt a unique approach involving collaborative efforts to review mortality trends in homeless people.

However, the Office of the Chief Coroner has discontinued the TIDE project and the Toronto Disaster Relief Committee no longer has sufficient resources to continue to formally track homeless deaths. In view of this loss of data sources, Toronto Public Health will discontinue the biannual reporting to the Board of Health of aggregate findings and identified trends in deaths in the homeless population.

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## **SIGNATURE**

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