

Toronto Drop-in Network Deputation to City of Toronto Board of Health Meeting of March 25, 2013
Re: Item 20.3 – Staff Report: “Next Stop Health: Transit Access and Health Inequities in Toronto”

Good afternoon. My name is Linsey MacPhee and I am Manager of the Toronto Drop-in Network (TDIN) a member-led coalition of drop-ins located throughout Toronto. I am here to speak to you today about the *Next Stop Health* staff report regarding transit access and health inequities in Toronto.

At TDIN, we are encouraged that the Board of Health understands the problem of lack of access to transit well and your recent decisions regarding the availability of transit have demonstrated that. This report, before you today, is important because it extends the conversation about the problem of lack of access into the area of affordability and it directs its’ recommendations both to the Province and to the TTC demonstrating an understanding that the problem of the high cost of transit is not one for income security programs alone to deal with.

TDIN endorses the Medical Officer of Health’s recommendations arising from this report. It is a robust report that characterizes the impact of the lack of access to transit for people with low incomes well in terms of health and social outcomes and we particularly welcome the work done to understand the impact for people receiving their incomes from social assistance. We would however like to suggest the inclusion of a recommendation or an amendment to an existing recommendation to the effect that, in the short term, in order to address the differential impact of high fares on people receiving their incomes from social assistance, a discount for single fare media be implemented for community-based organizations distributing TTC support to their participants. We appreciate that this is a strategy identified in the report for further investigation; however, we would like to see it implemented to address the problem of affordability sooner, rather than later.

Drop-ins work almost exclusively with people who receive their incomes from social assistance and witness every day the problems caused or exacerbated by lack of access to transit. After paying rent most people cannot afford healthy food to last the month, and as essential as transit is, it has become a boon and a favour, an unaffordable luxury for Toronto’s poorest residents.

Drop-ins are place-based, local responses to poverty and social isolation that have been shown to be highly cost-effective in helping people achieve positive outcomes like stabilizing health and finding and maintaining

housing. In part drop-ins do this by operating safe spaces where people can connect with their friends and neighbours and with friendly community workers and peers. Drop-ins also provide people with support to link to medical, legal and social services and where it is within the resources of the organization this support includes providing TTC tokens. People travel to drop-ins for basic needs like food and people travel from drop-ins to other parts of the service delivery system and each part of that journey is important in achieving and maintaining social, physical and mental health.

Drop-ins are however, less and less able to provide TTC tokens and many have been forced to withdraw this support. As the *Next Stop Health* report notes community agencies are bearing the cost of subsidizing transit for people with low incomes. Our members spend as much as \$30,000 / year on TTC support, much of it from private fundraising, with drop-ins in the outer core typically spending the most. A discount would mean that scarce community resources could go further in providing transportation support and of equal importance free up resources to provide other effective community-based services.

I would like to close with a direct quote from one of our members that I hope leaves you with an impression of the sense of urgency for action on transit affordability. It is a particularly troubling statement because we know that more people are increasingly relying on drop-ins for food. Our member writes:

“We are . . . seeing a greater number of our isolated seniors staying home. They have called in to let us know that they are home and without access to TTC (tokens) to get to the program for support and/or to participate in program activities.”

I don't know about you, but I wouldn't want to be on either end of that phone call.

Thank you for your time this afternoon.

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