

To: Economic and Community Development Committee

Date: December 6th 2020

Re: Central Intake Shelter Access Data Indicators and Trends EC18.6

Dear Economic and Community Development Committee:

Thank you for the opportunity to discuss this urgent issue today.

We are a group of palliative care social workers, nurses and physicians caring for people experiencing homelessness across the city of Toronto. We have seen the barriers to health and social services our clients face as they navigate life-limiting illness only further exacerbated during a global pandemic. Many of our clients have moved throughout the spectrum of homelessness - some having living shelters, encampments, many vulnerably housed and at risk of eviction, and others who have accessed the shelter-hotel system. From the few that have been able to access the shelter-hotel rooms we have been told that this safer space has saved their lives. In our work we have seen the profound effect that housing has on life and death. We hope our perspective will illustrate the grave need for action surrounding the availability of safe shelter and support for people experiencing homelessness.

In the report before you, Shelter, Support and Housing Administration has admitted, for the first time, that people cannot access shelter when they need it. We support the demands for an encampment eviction moratorium, 2000 more shelter-motel beds and survival supplies and call on the Committee to pass motions to ensure these demands are met immediately. The forcible eviction of people from encampments puts people's health at risk; this is why it is against the [recommendations of the CDC](#). Forced decampment is also a [violation of international human rights law](#).

Imagine living with end stage liver disease in a downtown shelter. After multiple hospitalizations, you are told you are too medically unwell to keep your bed at the shelter. You are luckily connected to a service provider that secures you a shelter-hotel room. You accept, despite having to relocate 35 kilometers from your community. Imagine the fear of where you might've ended up if this option was not offered to you. You are met by a palliative care outreach team who is able to arrange a nurse and personal support worker to visit you at the hotel on a regular basis to help with activities of daily living. With this support and being able to safely store your medications for your pain and symptoms, after a few months you begin to improve. You feel safe. You eat three meals a day. But you've become so isolated being moved away from your community of support in order to secure this hotel room. Does the trade off for safety and medical stability have to be social isolation? Would you have fared better if you had instead been given a unit downtown close to your community and service providers? These are the questions that our clients are asking us on a daily basis.

We are calling on you to pass motions today for/to:

1. -An immediate moratorium on forced evictions of encampment residents and temporary shelters from public spaces.
2. -Open at least 2,000 new shelter-hotel rooms in the next 4 months. This is the only way people will have a safe alternative to living outside in encampments, given that shelters are currently full. For these sites to be successful and truly safe for people:

-All sites must have overdose prevention services and support on-site that is provided by experienced harm-reduction staff.

-Half of the sites must be located in the downtown core, to ensure people aren't disconnected from critical services and their communities.

3. Provide services to people in encampments.

-Provide \$1 million to community agencies to distribute survival supplies and fire safety equipment to encamped individuals.

-Ensure people have access to indoor facilities twenty-four hours a day, seven days a week – including access to winterized bathrooms and showers for encampments adjacent to City sites.

As palliative care providers we do want to see more unsafe conditions cause unnecessary suffering and death. This Committee, and City Council later this month, through these three provisions can save and improve the lives of people living in encampments. Thank you.

Sincerely,

Leeann Trevors, MSW, Patient Navigator

Sasha Hill, RPN, Nurse Coordinator

Alissa Tedesco, MD, CCFP (PC), Physician

Donna Spaner, MD, CCFP (PC), Physician

Trevor Morey, MD, CCFP (PC), Physician

Naheed Dosani, MD, CCFP (PC), Physician

Cc: Mayor John Tory