



Making the Case for More Rent Geared to Income & Supportive Housing Planning & Housing Committee Deputation in support of "Creating New Supportive Housing Opportunities in Parkdale in Partnership with UHN and UWGT Angela Robertson, Executive Director – Parkdale Queen West Community Health Centre October 20, 2020

In this city half of Toronto renters are spending more than 30% of their incomes on housing. There are currently more than 106,000 people on the city's wait list for affordable housing but the recent report from Auditor General Beverly Romeo-Beehler revealed that 13 per cent of those applicants are either no longer seeking housing or ineligible – dare I suggest that because it takes 2-14 years to be placed in a subsidized unit. There are over 8,800 homeless/unsheltered folks based on the City's 2018, Street Needs Assessment - 38% self- identified as Indigenous, 30% identified as Black, 24% identified as LGBTQ youth and 3% identified as Trans. In 2019, 26,000 different people used Toronto's shelter system. In Toronto, the average cost of operating a supportive housing unit is \$24,000 annually, while the average cost of operating a single shelter bed is \$40,000—nearly doubling to \$80,000 during the pandemic.

On a nightly basis the front of our health centre location at Bathurst and Queen is where homeless men and women make bed for the night; throughout the year the parkette adjacent to our location at Queen and Dufferin is the bedroom and living room for many in Parkdale without housing or housing where they can welcome friends in to socialize; and during this pandemic the mini-parkette across the street is the site of an encampment occupied by folks feeling more safe practicing physical distancing outside than in a congregate shelters setting. These individuals have a right to housing.

These conditions are not news to this group, but I name them because it is an important context for why we need to urgently turn our gaze and actions to creating more rent-geared-to income and supportive housing that integrates harm reduction strategies, across this city and particularly in Parkdale. This is why I am here supporting the recommendations put forward in this report to begin a visioning and master plan exercise for redevelopment efforts that would create



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new rent-geared to income rental and supportive housing on the properties being donated by University Health Network.

It is not everyday that a major acute care hospital takes a bold decision to spend resources on an intervention strategy that is not immediately linked with the biology of health care. Hence, this move by UHN's Social Medicine Initiative to commit to housing for all is a welcome and tangible public policy action that affirms what we all know; that having safe and stable housing is a major determinant of good health and well-being

COVID-19 has magnified the issue of poverty and homelessness and many in the Parkdale community who have lost jobs or seen their income declined, and those who are currently unsheltered, will need the stability that housing from this initiative will bring. This means that the process of visioning what is needed, what models of housing must be considered, must take place involving community members in the Parkdale community. It means that the voices of folks who are being slowly pushed out of Parkdale due to gentrification must be centred, this includes newcomers, Black and Indigenous Peoples, community members who are homeless/unsheltered, current tenants of the occupied UHN properties and Parkdale People's Economy, whose advocacy work has been central in creating this opportunity.

It also means that the insights from other re-development efforts must be applied. Specifically, that the tenancy of all current tenants must be secured that in re-development efforts current residents must be supported to retain housing in the community and most importantly that there is a commitment to creating housing that is rent-geared to income as "affordability" as been a euphemism that often leaves working poor and homeless folks without.