

This bulletin is a quick inventory of recent social research information. Its purpose is to promptly disseminate the most current external and internal research relevant to social policy.

Bureau of Municipal Research Digitized Collection, 1914-1983, Urban Policy Lab, University of Toronto.

Established in 1914, the Toronto-based Bureau of Municipal Research was an independent, non-partisan citizen's organization dedicated to producing "Better Government through Research." The organization published nearly 800 research bulletins and reports on urban issues in Canada, covering nearly every area of public policy, from budgeting to housing, welfare to city planning, policing to parks.

The Bureau was forced to close in 1983, its files buried in the city archives — until now. Led by Prof. Gabriel Eidelman, a team of students at the University of Toronto has digitized and catalogued the Bureau's entire document library for the benefit of researchers and the general public. Learn more about the Bureau's history, explore some of its work, and search the complete catalogue below.

For Link to the catalogue:

<http://bomr.ca/>

Missed Opportunities: LGBTQ Youth Homelessness in America by Morton; M. H.; Samuels; G. M.; Dworsky; A.; & Patel; S, Chapin Hall at the University of Chicago, 2018.

This research highlights specific experiences of young people who identify as lesbian, gay, bisexual, transgender, and queer (LGBTQ) and face homelessness. Compared to heterosexual and non-transgender youth, LGBTQ youth are disproportionately represented among the nearly 4.2 million youth and young adults in America who experienced some form of homelessness during a 12-month period.

- LGBTQ youth had over twice the rate of early death among youth experiencing homelessness
- LGBTQ youth are at more than double the risk of homelessness compared to non-LGBTQ peers
- Youth who identified as both LGBTQ and black or multiracial had some of the highest rates of homelessness
- Among youth experiencing homelessness, LGBTQ young people reported higher rates of trauma and adversity

For link to the report:

<http://voicesofyouthcount.org/wp-content/uploads/2018/04/VoYC-LGBTQ-Brief-FINAL.pdf>

The Private Cost of Public Queues for Medically Necessary Care, 2018 by Bacchus Barua and Sazid Hasan, Fraser Institute, May 2018.

This report finds that Canada's long wait times for medically necessary treatments cost Canadians \$1.9 billion—or \$1,822 per patient—in lost wages and time last year. Including the value of lost time outside the traditional work week—evenings and weekends—the estimated cost of waiting jumps to \$5.8 billion. The national median waiting time from specialist appointment to treatment was 10.9 weeks in 2017, which is 0.3 weeks higher than in 2016.

- In 2017, an estimated 1,040,791 Canadians were waiting for care after an appointment with a specialist
- These Canadians were expected to wait, on average, for 10.9 weeks in order to receive medically necessary treatment
- Estimated 1,040,791 patients who waited for medically necessary treatment last year each lost \$1,822 (on average) due to work time lost

For link to the report:

<https://www.fraserinstitute.org/sites/default/files/private-cost-of-public-queues-2018.pdf>

Thriving in the City: What does it Cost to Live a Healthy Life? By Nishi Kumar, Kwame McKenzie, Seong-gee Um, Wellesley Institute, September 2017.

Recently released census data reveals that while incomes across Canada have increased in the past decade, progress in Ontario and in Toronto have lagged behind. This paper argues that connecting with ones' community and family, investing in education and employment, and building financial security are essential for achieving good health across the life course. It also provides an evidence-based framework that defines individuals' needs across physical, mental, social, and economic dimensions of health and well-being.

- Nutritious Food Basket on average would cost \$3,415 per year for women and men age 19-30
- Shelter component would cost around \$14,225 - \$21,926 per year depending on renting or a home owner
- Transportation would cost \$2,400 - \$6,414 a year depending on a transit user or a car owner

For link to the paper:

<http://www.wellesleyinstitute.com/wp-content/uploads/2017/09/Thriving-in-the-City-What-does-it-cost-1.pdf>

Policy Innovations for an Aging Society by Sherri Torjman, Maytree, May 2018.

Population aging is one of the most significant demographic trends affecting Canada and the world. The 2016 Census found that the population of people aged 65 and older in Canada is experiencing its fastest growth since Confederation, with seniors outnumbering children. And on a global scale, the number of seniors is expected to double in the next 25 years.

- Building age-friendly societies that anticipate and accommodate needs arising from functional limitations
- Restructuring health care to provide collaborative/interdisciplinary care for complex, ongoing health issues
- Exploring innovative models for the provision of ongoing care at home and in the community
- Increasing recognition and support for caregivers, including financial support, flexible working hours, and paid leave

For link to the report:

<https://maytree.com/wp-content/uploads/Policy-Innovations-for-an-Aging-Society.pdf>

Modernizing Canada's Healthcare System through the Virtualization of Services by Dr. R. Sacha Bhatia and William Falk, C.D. Howe Institute, May 2018.

According to this report virtual care is a natural next step in technological innovation for healthcare. Healthcare has continued to be defined by visits to hospitals and doctors' offices and now, increasingly, by time spent in hallways. Answering healthcare's challenges in the 21st century will not be achieved by having more 20th century buildings. It will come from modernizing our system through the use of new digital tools and integrating them into the day-to-day work of caring for patients.

- Having provincial regulatory colleges make it compulsory for every provider to have a secure email address
- Including virtual-care services as part of Hospital on-call responsibilities
- Making the provision of emailed administrative inquiries, electronic renewals of prescriptions, and on-line scheduling part of the accountability agreements for primary-care practices

For link to the report:

https://www.cdhowe.org/sites/default/files/attachments/research_papers/mixed/E-Brief%20277.pdf

Previous issues of the SPAR Monitor can be viewed online at: <http://bit.ly/2iltgRQ>

Social Policy, Analysis and Research Information Resources:

Wellbeing Toronto: www.toronto.ca/wellbeing

City of Toronto Data, Research & Maps: <https://web.toronto.ca/city-government/data-research-maps/>