



	<b>REPORT No.: 2020-11</b>
<b>MEETING DATE: MARCH 19, 2020</b>	<b>DATE PREPARED: MARCH 4, 2020</b>
<b>SUBJECT: TBDSSAB RECOMMENDATIONS RE: ONTARIO'S NEW POVERTY REDUCTION STRATEGY</b>	

### **RECOMMENDATION**

THAT with respect to Report No. 2020-11 (Integrated Social Services Division), we approve the submission in relation to Ontario's renewed Poverty Reduction Strategy as presented;

AND THAT the Board authorizes The District of Thunder Bay Social Services Administration Board (TBDSSAB) Administration to submit the approved TBDSSAB recommendations to the Ministry of Children, Community and Social Services.

### **REPORT SUMMARY**

To provide The District of Thunder Bay Social Services Administration Board (TBDSSAB or Board) with information and Administration's recommendations with respect to Ontario's renewed Poverty Reduction Strategy.

### **BACKGROUND**

In December, 2019 the provincial government launched consultations on a new Poverty Reduction Strategy required as part of the *Poverty Reduction Strategy Act*.

Every five years, Ontario must consult on and develop a new Poverty Reduction Strategy to identify opportunities for action and collaboration with partners and to measure and report on progress. The goal of this consultation is to determine actions to reduce poverty and to set specific and realistic targets and prioritized actions to reduce the incidences of poverty in Ontario.

### **COMMENTS**

At this time, the Ministry of Children, Community and Social Services (MCCSS) has invited Ontario residents and organizations to provide written submissions. In response to this invitation, TBDSSAB administration has created a position paper with recommendations asking the Province of Ontario to consider the following in the Poverty Reduction Strategy:

- A focus on adults with addictions and mental health issues;
- Support for Expanded EarlyON Child and Family Programming;
- The adequacy of Ontario Works benefit rates;
- A new model for social assistance for clients with employment barriers;
- OW discretionary drug benefits.

Previous consultations with a diversity of stakeholders concluded a focus on addictions and mental health, an increase in Ontario Works shelter rates, a new model for social assistance and OW drug benefits are required to address the growing issues of poverty, homelessness and access to affordable housing in the District of Thunder Bay.

**FINANCIAL IMPLICATIONS**



There are no financial implication arising from this report.

**CONCLUSION**

It is concluded that this report provides the Board with information and Administration’s recommendations with respect to the TBDSSAB’s response to the MCCSS New Poverty Reduction Strategy.

**REFERENCE MATERIALS ATTACHED**

Attachment #1 [TBDSSAB Submission to Ontario's Poverty Reduction Strategy](#)

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**THE DISTRICT OF THUNDER BAY  
SOCIAL SERVICES ADMINISTRATION BOARD**

## **Submission to Ontario's Poverty Reduction Strategy**

The District of Thunder Bay Social Services Administration Board (TBDSSAB) applauds the Ontario Government for launching consultations to inform the development of a new five year strategy, in accordance with *Ontario's Poverty Reduction Strategy*, and we are pleased to have the opportunity to provide insight on how to improve the social assistance system.

It is the position of TBDSSAB that the following be considered in the future of the Poverty Reduction Strategy:

- A focus on adults with addictions and mental health;
- Support for Expanded EarlyON Child and Family Programming;
- The adequacy of Ontario Works (OW) benefit rates;
- A new model for social assistance for clients with employment barriers; and
- OW discretionary drug benefits.

### **A Focus on Adults with Addictions and Mental Health**

TBDSSAB believes that a focus of the Poverty Reduction Strategy should be adults with poor mental health and concurrent disorders, given that the incidence of mental illness and addiction in the District of Thunder Bay is higher than the provincial average, and the evidence that these unaddressed issues have created challenges for service delivery for TBDSSAB.

Substance use and anxiety disorders are responsible for most of the system utilization related to mental health for City of Thunder Bay residents, according to the North West Local Health Integration Network (NW LHIN).<sup>1</sup> The mental illness hospitalization rate per 100,000, both in the City of Thunder Bay (972) and the broader North West LHIN service area (933), is historically more than double the provincial rate (392).<sup>2</sup>

The City of Thunder Bay has the highest population-adjusted mortality rate for opioid deaths in Ontario at 22.7 deaths per 100,000,<sup>3</sup> and it is said that the City is on the front

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<sup>1</sup> North West Local Health Integration Network. "City of Thunder Bay Sub Region – Mental Health and Addictions data. Health System Utilization for Mental Health and Substance Use, City of Thunder Bay 2018." September 2019.

<sup>2</sup> Northwest Local Health Integration Network. "Health Profile – City of Thunder Bay Integrated District Network," May 2012. [http://www.northwestlhin.on.ca/~media/sites/nw/uploadedfiles/Home\\_Page/Integrated\\_Health\\_Service\\_Plan/IDN%20Profile\\_CityOfThunderBay\\_09May2012.pdf](http://www.northwestlhin.on.ca/~media/sites/nw/uploadedfiles/Home_Page/Integrated_Health_Service_Plan/IDN%20Profile_CityOfThunderBay_09May2012.pdf) (accessed September 24, 2018).

<sup>3</sup> Public Health Ontario. "Opioid Mortality Surveillance Report." June 2019. <https://www.publichealthontario.ca/~media/documents/opioid-mortality-surveillance-report.pdf?la=en> (Accessed October 8, 2019).

lines of Canada's opioid crisis.<sup>4</sup> While there is currently a heavy focus on opioid use in the area, the use of alcohol tends to be a larger substance use issue in Northwestern Ontario. In 2018, emergency department visits attributable to alcohol were more frequent than all other substances combined.<sup>5</sup> The rate of heavy drinking as reported by the NW LHIN was 24% in 2015, compared to 16% in Ontario, and the rate of emergency department visits from alcohol was 287.7 per 10,000 people; this is six times the rate of Ontario at 44 per 10,000.<sup>6</sup> For pregnant mothers, 7.2% reported consuming alcohol while pregnant in North Western Ontario, a rate that is more than double the Ontario average of 2.5%.<sup>7</sup>

As the Thunder Bay Drug Strategy has shown in their research, certain groups are more at risk for substance abuse related harms. These groups include people who have had adverse childhood experiences; people with mental health disorders; people with workplace injuries and older adults; youth who have a history of trauma or neglect; homeless people; people working in the sex trade; and indigenous people.<sup>8</sup> According to CAMH, "Canadians in the lowest income group are 3 to 4 times more likely than those in the highest income group to report poor to fair mental health."<sup>9</sup>

As most of TBDSSAB's clients experience low income, the risk of mental illness and addictions issues is increased. For example, nearly 18% of community housing tenants in the District of Thunder Bay reported suffering from a mental health issue, and 6% reported suffering from an addiction in the TBDSSAB 2018 Tenant Satisfaction Survey.

TBDSSAB has experienced an increase in security issues and incidents in our social housing projects. This increase has resulted in the provision of enhanced security measures, such as security patrols, exterior lighting, and the monitoring of surveillance systems, which is costly to TBDSSAB.

TBDSSAB tracks housing units that require extensive repair upon move-out where it is believed that the damage is a result of mental illness or addictions issues. This is not based on evidence of a diagnosis, but rather on issues related to the tenant and the findings in the unit. For example, if a unit is heavily damaged and there is extensive evidence of alcohol and drug use, this will be recorded as a possible mental health and addiction issue. Fifteen units were flagged with damage that may be attributed to a

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<sup>4</sup> CTV News. "This city has the highest per-capita opioid overdose death rate in Ontario." September 6, 2019. <https://www.ctvnews.ca/canada/this-city-has-the-highest-per-capita-opioid-overdose-death-rate-in-ontario-1.4582296> (accessed October 8, 2019).

<sup>5</sup> North West Local Health Integration Network. "City of Thunder Bay Sub Region" – Mental Health and Addictions data. Health System Utilization for Mental Health and Substance Use, City of Thunder Bay 2018." September 2019.

<sup>6</sup> North West Local Health Integration Network. "Population health profile." [http://www.northwestlhin.on.ca/~media/sites/nw/reports/Population%20Health%20Profiles/Population\\_Profile\\_December-2015.pdf?la=en](http://www.northwestlhin.on.ca/~media/sites/nw/reports/Population%20Health%20Profiles/Population_Profile_December-2015.pdf?la=en) (accessed October 8, 2019).

<sup>7</sup> Ibid.

<sup>8</sup> Thunder Bay Drug Strategy, *Building a Better Tomorrow 2017-2021*, 5, <https://www.thunderbay.ca/en/city-hall/resources/Documents/ThunderBayDrugStrategy/BuildingaBetterTomorrow-Drug-Strategy.pdf>

<sup>9</sup> Centre for Addiction and Mental Health. "Mental Illness and Addiction: Facts and Statistics." <https://www.camh.ca/en/driving-change/the-crisis-is-real/mental-health-statistics> (Accessed October 8, 2019).

possible mental illness or addiction issue in 2018; on average, it costs approximately \$15,000 for repairs to these units, some as high as \$30,000, where regular move-out maintenance would cost \$2,500 to \$3,000 per unit.

To help tenants that are struggling and to help prevent evictions, TBDSSAB employs 5 Tenant Support Workers (TSWs) who attend home visits, help with paperwork and make referrals to community agencies for supports. In 2018, the TSWs made 3,400 home visits and 1,200 referrals to community agencies for supports.

There are an average of 90 people staying in shelter on any given night in the City of Thunder Bay.<sup>10</sup> In order to better understand the causes of homelessness, in 2018, TBDSSAB, in partnership with Lakehead Social Planning Council, the Thunder Bay Indigenous Friendship Centre, and the Homelessness Partnering Strategy, conducted a survey and enumeration of people experiencing homelessness. Of those 474 people who participated in the survey, 45% reported suffering from a mental health concern, and 71% reported suffering from an addiction, with 49% of total respondents reporting increased substance use after becoming homeless. 33% of respondents reported addiction as the main factor causing their homelessness.

In March 2017, the province requested Expressions of Interest (EOI) from Service Managers, outlining proposals that would address the Home For Good (HFG) priorities while focusing on local needs. TBDSSAB submitted an EOI outlining how partnerships with community support service providers and the funding of a 30-bed transitional and supportive capital project would address the needs of chronic homelessness and those at risk of becoming homeless in the District of Thunder Bay.

The aim of TBDSSAB HFG initiative is to significantly reduce chronic homelessness and expand homelessness prevention measures by providing enhanced supports to at-risk tenants in the District of Thunder Bay through a collaborative, multi-faceted approach addressing all four priority target populations: chronic homelessness, youth homelessness, Indigenous homelessness, and homelessness following transition from provincially-funded institutions and service systems.

Responding to identified local needs, TBDSSAB partnered with Dilico Anishinabek Family Care and St. Joseph's Care Group for tenant supports while augmenting proven in-house supports through the creation of an additional Tenant Support Worker (TSW) position within TBDSSAB.

In addition to the operational funding, HFG offers a capital construction funding component. TBDSSAB, partnering with St. Joseph's Care Group, secured funding for the development of transitional housing for people who require a supported residential

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<sup>10</sup> TBDSSAB Shelter Statistics. 2018 Average.

environment to stabilize complex conditions that will allow them to successfully transition to more independent living.

Through the HFG funding, TBDSSAB works with these community partners to identify individuals who are homeless or at risk of homelessness, determine their individual needs for housing and supports, and attentively address the unique needs of this population.

The partnership with Dilico Anishinabek Family Care is one of the cornerstones of this HFG funding proposal. Dilico provides a range of responsive individual, family and community programs and services throughout TBDSSAB service area. By partnering with Dilico it is anticipated that individuals experiencing homelessness, or at risk of becoming homeless, will be identified, assessed, and placed into housing with the culturally appropriate supports offered through Dilico.

Another key to this proposal is the partnership with the St. Joseph's Care Group. St. Joseph's offers a Community Support Program – a community-based treatment program for persons with severe and persistent mental illness. The approach to treatment is client-centered, delivered by a team from a variety of disciplines, and able to provide 24-hour 7-day a week assistance and emergency after hours call system and crisis response. This level of support addresses the requirements of high-needs tenants.

The HFG program builds upon the High Needs Homeless system established by TBDSSAB in the Fall of 2016. TBDSSAB approved the High Needs - Homeless Social Housing Waitlist prioritization category which established a priority category which allows for the streamlining of housing applications to those most in need. Through the HFG funding the TBDSSAB, as of February 1<sup>st</sup>, 2020, is currently providing a portable housing benefit to 86 High Needs Homeless individuals and providing case management support to 103 individuals who were previously chronically homeless. This total exceeds the original application targets of housing 80 individuals that was proposed to the MMAH.

**It is the opinion of TBDSSAB that the next phase of the Poverty Reduction Strategy should focus on the rising issue of addictions and mental health, and their link to poverty and homelessness.**

**It is also the opinion of TBDSSAB that housing solutions for those struggling with Mental Health and Addictions through the Home for Good and Community Homelessness Prevention Initiative continue to be prioritized and should be enhanced.**

## Support for Expanded EarlyON Child and Family Programming

EarlyON Child and Family Centres offer free programming for all parents, caregivers and their children, aged 0-6 and are designed to support positive experiences and outcomes for families. In the District of Thunder Bay, these programs are offered through 11 service providers, with a total of 25 EarlyON Child and Family Centre program locations available to parents and care givers.

EarlyON Child and Family Centres allow children to develop as they learn through play and can build their sense of belonging and capacity for expression, enhance their own well-being and explore and engage with the world around them. EarlyON programs are a place for parents and caregivers to engage in conversations and information sharing about child development, parenting, nutrition, play and inquiry based learning, and other topics that support them in their role.

A total of 29,601 children visits and 24,702 parent/caregiver visits were recorded in the District of Thunder Bay in 2019 with 4,949 children unique visits and 4,159 parent/caregivers' unique visits being recorded. Of this total, 11.7 % of all children visits and 12% of all parent/caregiver visits were at the Indigenous Led EarlyON programs, of which there are five in the District of Thunder Bay.

**TBDSSAB urges the Province of Ontario to enhance funding to expand EarlyON Child and Family Programming as it is recognized that investments in child and family development results in reduced government costs in the future.**

### Adequacy of Ontario Works Benefits

To achieve the Province's goal of establishing an appropriate benefit structure, it is essential to address the adequacy of current social assistance rates; in particular, the need to improve the adequacy of maximum shelter allowances for recipients of OW is immediate.

Rents in Thunder Bay increased 3.5% between 2018 and 2019.<sup>11</sup> As illustrated in Figure A, OW shelter allowances are insufficient to cover housing expenses for a benefit unit of their size. Households are then placed in the position to draw on their Basic Needs Allowances meant for food and clothing to pay for shelter costs. For example, a single, 40-year-old male on OW will experience a shortfall of approximately \$229 after paying the average rent on a bachelor apartment and the cost of a nutritious food basket (\$249.96) in Thunder Bay.<sup>12</sup>

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<sup>11</sup> Canada Mortgage and Housing Corporation. Housing Market Information Portal. 2020. <https://www.cmhc-schl.gc.ca/hmiportal>

<sup>12</sup> Thunder Bay District Health Unit. "The Cost of Eating Well in the District of Thunder Bay 2019." <https://www.tbdhu.com/sites/default/files/files/resource/2019-10/The%20Cost%20of%20Eating%20Well%202019.pdf>

Figure A: Shelter Allowances Compared to Average Rent in Thunder Bay<sup>13</sup>

Benefit Unit Size	Apartment Size	Average Rent (Thunder Bay)	OW Shelter Rate	Average Shelter Allowance Shortfall
1	Bachelor	\$712.00	\$390.00	-\$322.00
	1 Bedroom	\$856.00		-\$466.00
2	1 Bedroom	\$856.00	\$642.00	-\$214.00
	2 Bedroom	\$1,075.00		-\$433.00
3	2 Bedroom	\$1,075.00	\$697.00	-\$378.00
	3+ Bedroom	\$1,324.00		-\$627.00
4	2 Bedroom	\$1,075.00	\$756.00	-\$319.00
	3+ Bedroom	\$1,324.00		-\$568.00
5	3+ Bedroom	\$1,324.00	\$815.00	-\$509.00
6+	3+ Bedroom	\$1,324.00	\$844.00	-\$480.00

Households in such circumstances ultimately turn to food banks to account for some of this shortfall. In the District of Thunder Bay, over 26,000 meals are provided each month.<sup>14</sup> Across Ontario, the number of people accessing food banks has increased 1.8% since 2018; 72% of households accessing food banks in 2019 lived in market rental accommodations. Only 0.7% of food bank users identify as homeless.<sup>15</sup>

When households receiving OW cannot afford market rental units and are waiting for a social housing unit, they will need to access emergency shelters. The number of emergency shelter beds used annually in Thunder Bay has increased an average of 2% per year since 2015. The Community Homelessness Prevention Initiative (CHPI) cost for an individual to stay in an emergency shelter in Thunder Bay for one month is \$1,089.<sup>16</sup>

While some gains in social assistance rates have been made since major adjustments were made in the 1990's, it should be acknowledged that people on social assistance often have the unfortunate choice of either paying rent to prevent homelessness or feeding themselves and their families. There has been a substantial upward trend in food bank and feeding program usage that substantiates this claim.

<sup>13</sup> Note: for benefit units above 4 members, the average rent for 3+ bedrooms used as per available data from CMHC. The average rent for units above 3 bedrooms will be higher, resulting in an increased deficit. October 2019 rents, current 2020 OW shelter rates.

<sup>14</sup> Regional Food Distribution Association. FAQs. <http://www.foodbanksnorthwest.ca/about-us/faqs/> Accessed February 19, 2020.

<sup>15</sup> Feed Ontario. Hunger Report 2019. <https://feedontario.ca/wp-content/uploads/2019/11/Hunger-Report-2019-Food-Ontario-Digital.pdf> Accessed February 19, 2020.

<sup>16</sup> TBDSSAB Shelter Data and CHPI shelter allocations



By bringing shelter rates up to the average market rent of a bachelor apartment in Thunder Bay for these individuals, the province and municipality could potentially realize a monthly cost savings of \$766 per recipient.<sup>17</sup>

**TBDSSAB urges the Ontario government to adjust Ontario Works shelter rates to match local average market rents as soon as possible. As well, TBDSSAB calls on the Ontario government to set basic needs and shelter rates for Ontario Works according to locally defined market baskets of essential goods, including transportation, telephone, average market rents and a nutritious food basket, that are adjusted annually according to the Consumer Price Index.**

## **A New Model of Social Assistance for Clients with Employment Barriers**

TBDSSAB recommends implementing a one-stop model of social and employment assistance to ensure local, responsive, client centered, and integrated client services. Ontario Disability Support Program (ODSP), OW, and Employment Ontario (EO) service delivery should therefore be delivered together from the same location.

ODSP directives should be made more flexible to accept long-term clients of OW with barriers to employment as OW is not meeting the needs of this cohort, often consisting primarily of addictions and undiagnosed and untreated mental health issues.

Internal evidence suggests that clients exceeding 12 consecutive months of OW benefits exhibit barriers to successful and sustainable employment and remain on the caseload long-term, but they are currently not considered “disabled enough” to qualify for ODSP.

The Value for Money audit conducted in 2018 by the Provincial Government suggested that the intent of the OW program is short term in nature, as a program of last resort, and is to assist people to engage in or return to employment. The audit found that it is not successful in its current iteration.

Further, the Province of Ontario has indicated that the transformation of Social Assistance delivery would include a reduction in rules and paperwork. These changes will allow more time for Caseworkers to offer life stabilization and support to clients.

An integrated ODSP, OW, and EO Service Delivery Location would provide enhanced person-centered casework allowing easy referral access with soft handoff referrals within a familiar service “hub” where clients are supported by their Caseworker as they move them to more specialized employment services programs and employment specialists.

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<sup>17</sup> Based on TBDSSAB calculations of CHPI shelter allocations and OW rates

Additionally, TBDSSAB is Service System Manager for Social and Affordable Housing and owner of almost 2,500 social housing units. TBDSSAB's integrated intake approach is a natural "hub" for tenants who access services on site such as applying for social housing, leasing up, paying rent, loading laundry cards, meeting property management staff, or requesting maintenance. Applicants and tenants access TBDSSAB services by telephone, in person, at social housing properties and in their units, and are already connected to staff who assist them on a daily basis such as Tenant Support Workers, maintenance staff, custodians and the staff mentioned above.

**TBDSSAB proposes that clients remaining on assistance for 360 days would be referred to a long-term case manager for assessment, then placed on a more flexible ODSP to account for any employment barriers they may be experiencing, allowing for more time to address these barriers.**

**The TBDSSAB also proposes that the Province integrate ODSP, OW and EO Service Delivery into a single and shared location.**

## **Ontario Works Drug Coverage**

As OW Discretionary benefits are no longer to be used to cover drugs pending Exceptional Access grant, it is TBDSSAB's policy to advise the client to go to the hospital or to their family doctor to begin the process. The waiting period for these grants is often over 3 months long, and OW clients are unable to afford their medication during this time.

While there are not many restrictions in legislation to the type and amount of benefits that can be issued through Discretionary Benefits, Service Managers are prohibited to issue any funds for prescription drugs. Another concern is that in order to qualify for any type of discretionary benefit, the applicant must be eligible for, and active with, either OW or Ontario Disability Support Program (ODSP)

**It is the position of the TBDSSAB that this directive is causing financial hardship for clients who are in need of an Exceptional Access grant for their medications; that the wait time for Exceptional Access grants is too lengthy; and that the OW Discretionary benefits should cover the wait time for the Exceptional Access grant for OW clients.**

## Conclusion

Following extensive and thorough consultations with a diversity of stakeholders a focus on addictions and mental health, an increase in OW shelter rates, a new model for social assistance and drug benefits were identified as an immediate need to respond to the growing issues of homelessness and access to affordable housing in our District.

**It is recommended by the TBDSSAB that these issues be addressed immediately to aid the reduction of poverty in the District of Thunder Bay.**