



The Health Status of Homeless People and Homeless People With Concurrent Disorders in Toronto

### Homelessness in Toronto

City of Toronto: population 2.48 million

 25,000 different people use a homeless shelter in Toronto each year

- City of Toronto Street Needs Assessment
  - → 5,052 homeless individuals (April 2006)

# Study background & methods

- Findings are from a larger study conducted by Street Health in winter 2006/2007.
- The Street Health Report 2007: representative, random sample of 368 homeless men and women at meal programs & shelters across downtown Toronto
- Homelessness defined as: having stayed in a shelter, with a friend/relative, in a public place, or other site not intended for human habitation for at least 10 of the last 30 nights

# **Community Involvement**

- Peer researchers: data collection, analysis and dissemination
- Community Advisory Committee
- Key study partners: Wellesley Institute, CRICH -St. Michael's Hospital, NFB: Filmmaker-in-Residence Project
- Research bulletins on specific topics

### What is a 'Concurrent Disorder'?

- Term used to describe any combination of mental health and substance use issues
- Lack of coordination between mental health and addiction services. Can make it very difficult to access any type of social service
- Study definition of CD: mental health diagnosis &/or hospitalization for mental health reason and regular drug use &/or heavy alcohol use

# Findings: Prevalence of CD

 26% (95) of the total sample had a concurrent disorder

- 14% (51) mental health issue only
- 43% (157) substance use issue only
- 17% (65) neither

# Findings: Demographics

- 65% identified as male; 35% female
- Average age 41 years
- 91% born in Canada
- 48% had a high school degree or more
- Homeless an average of 5.4 years

# Findings: Homelessness

 Economic factors were the main reasons given for becoming and remaining homeless

 People with CD more likely to cite poor living conditions as the reason for losing last housing (35% vs. 23%)

## **Findings: Daily living conditions**

- 64% unable to get a shelter bed at least once in the past year (vs. 49%)
- 39% often went hungry in past 3 months (vs. 25%)
- 45% had been physically assaulted at least once in the past year (vs. 32%)

# Findings: Health & well-being

 Worse self-rated general health (2.5 vs. 3)

Worse daily stress (3.9 vs. 3.2)

 Greater social isolation: 52% said they often feel lonely or remote from other people (vs. 34%)

# Findings: Health & well-being

 85% have at least one serious physical health condition\* (vs. 70%)

 85% report using substances for selfmedication: to relieve stress, pain or feel better about their lives (vs. 69%)

\*includes: cardiovascular and respiratory diseases, hepatitis and other liver diseases, gastrointestinal ulcers, diabetes, anemia, epilepsy, cancer and HIV/AIDS

## Findings: Access to health care

 41% hospitalized at least 1 night in past year (vs. 18%)

 67% visited an ER in past year an average of 7 x (vs. 49% on average 3.4 x)

### Findings: Barriers to health care

- 43% left ER without being seen (vs. 28%)
- 53% unable to follow health advice or treatment plan (vs. 26%)
- 43% experienced discrimination from a health care provider in past year (vs. 25%)

### Recommendations

Focused on key immediate needs:

- Supportive housing options for people with CD
- Expansion of community-based intensive case management services
- Create and expand community-based mental health and addictions programs
- 24-hour non-medical crisis support centre
- Community Support Worker positions in ERs
- Increase detox and residential treatment options for people with CD

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#### **Street Health Research Publications**

Available at: www.streethealth.ca

### Street Health Stories Film (NFB)

9 mins: available on YouTube

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