

Deputation to Board of Health
Item HL 1.6
January 16, 2023

By Cathy Crowe

Good morning. For those of you who don't know me I have been a street nurse for 35 years and I am a former Board of Health member.

26 years ago, on a Sunday morning in January a Toronto SUN reporter called me to tell me that a homeless man had been found dead - frozen in an above ground parking lot at Adelaide & Simcoe. **His name was Garland Sheppard, 'Newf'.**

Then City Councillor Jack Layton was in my co-op that morning. He hammered out a press release on my computer and City Councillor Olivia Chow sent it to the media.

Jack then joined me to examine the parking garage site on Adelaide near University Ave. where "Newf" was found.

Why? Because it was close to -20C and the City had not called an extreme cold alert or opened warming centres.

We held a press conference calling for an improved cold weather alert system.

Why? Because only a few months earlier what is known as the 'Three Freezing Deaths' Inquest had completed, and a city task force (which I was on) had established a cold alert response plan.

The cold alert plan was obviously dysfunctional.

It still is and this applies to Extreme Heat Alerts as well.

Please deal with this today. I support a review and health and dignity need to be taken into consideration, not warehousing.

Over the years – we've had to beg and fight for:

-alerts to be called in inclement weather (such as rains, floods, icestorms) because the city's threshold is impractical

In fact, Toronto got away with not opening warming centres for about ten years until a homeless man named Richard Kenyon died in front of the old Maple Leaf Gardens during an ice storm in 2013. This was more than embarrassing as the city had opened emergency warming shelters for the housed population who had lost power in the same ice storm.

We've had to fight for all the following and I should add barely any of this has been accomplished. I urge each of you to visit the centres on their next opening to see for yourself.

We've had to appeal for:

- adequate number of centres in appropriate locations (not achieved)
- enough mats and eventually cots
- sleeping options for people who cannot get down to a cot (not achieved)
- enough blankets
- pillows (not achieved)
- that have adequate number of accessible washrooms and showers (not achieved)
- privacy - Metro Hall lobby was the norm for years.
- privacy and respect for mixed gender use of space (not achieved)
- adequate food – as in 3 meals a day. Meals, at least one hot meal, not snacks (not achieved)
- health care on site or on call (not achieved)
- adequate harm reduction support
- adequate staffing
- free TTC during heat and cold alerts (not achieved)
- free public shuttling of people to sites (not achieved)

WE NEED STANDARDS that would surpass those of a refugee camp. Today's practice of operating warming (and cooling) centres does not do that.

With respect to the motion by Councillors Malik, Bravo and Perks:

Point 1 - emphasizing medical experts it should be 'health' experts to recognize nursing, social work and harm reduction.

Point 4 - faith-based groups should not be involved in operation of 24/7 sites and there should be no return to an Out of the Cold model which involved inadequate locations, reliance on volunteers, and nightly migration from site to site.

In conclusion:

1. There must be a review of the existing Cold and Heat alerts and their respective centres.
2. There simply must be 24/7 low barrier permanent respite/warming centre openings immediately at least to June 1 or until a post-COVID shelter-to-housing plan gets operationalized.

I want to close by addressing the Mayor and his staff.

I say to you STAND DOWN. Stand down. Let the humanitarian response take place that I know staff are capable of and that your citizens deserve.

You are micro-managing this ‘file’.

You should declare a right to shelter in your city and make it your priority moral value for your last 4 year as mayor.

Attached please see my recent column on this issue.



Image: Metro Hall warming centre December 2022. Provided to Cathy Crowe

Emergency shelters. Is this as good as it gets?

It would be kind to say that the City of Toronto's operation of emergency shelters has been less than enthusiastic.

Warming centre in December 2022 at Toronto's Metro Hall. Credit: Cathy Crowe

In the movie *As Good As It Gets*, Jack Nicholson's antisocial character Melvin Udall, who lives with obsessive compulsive disorder, asks a group of psychiatric (sic) patients ["What if this is as good as it gets?"](#)

I remember anti-poverty activist Norm Feltes telling me how much he hated that question. I didn't understand why at the time.

Today I do.

The question is in part a plea, but mostly it's a despairing resignation to accept less.

For emergency shelter, one of the most life-sustaining, Maslow inspired components of human need, I ask: “Do we think this is as good as it gets?”

Crowded, congregate shelters, where people may be sleeping on cots or mats, not even real beds. People including seniors, people with disabilities, families – stuck there for years.

Canada has stalled, in fact rear ended any momentum it had to reinstate a national housing program that would build sufficient social housing.

Instead, home ownership has dominated the housing policy landscape and we’re supposed to be happy with a smattering of 300 square feet modular housing units constructed for ‘the homeless.’ Governments and [Housing First](#) proponents want us to believe ‘this is as good as it gets.’

Dumbing policy down even further, cities treat the provision of emergency shelter in extreme weather as ‘this is as good as it gets.’

Provinces are mostly missing in action.

The results are like a post-apocalyptic scene.

Dr. Raghu Venugopal, an ER physician recently commented: “My patient is homeless for years. They stay in the subway or come to the ER. This is a policy choice. We could house everyone, but we choose not to. My patient doesn’t need me. I’m not the solution.”

Warming centres a “no-brainer”

In the midst of December’s [weather bomb](#) in Ontario, multiple cities had roller coaster openings and closings of warming centres if any at all.

People say to me all the time: “This is Canada. We know winter’s coming. Warming centres are a no-brainer. Right?”

Wrong. Cities have inadequate winter plans. As Rafi Aaron, spokesperson for the Interfaith Coalition to Fight Homelessness in Toronto said: “This is the only city in the world where the Office of Emergency Management endangers people’s lives.” Here he refers to the city’s evictions of people in encampments during harsh weather, the confiscation of tents and survival gear amidst a shelter crisis with warming centres not opened.

Toronto is not alone in its negligence of protecting human life.

Hamilton’s Medical Officer of Health cancelled a cold alert Christmas Eve that closed warming centres. In response to the outcry, officials later scrambled to blame the decision on a funding glitch. The centres will now stay open until the end of March.

Problem could have been fixed decades ago

Let me backtrack because the impact of severe weather on the unhoused should have been fixed 25 years ago.

One of the most notable markers of Canada’s evolving homelessness crisis was the cluster of freezing deaths in Toronto in 1996. Three men – Eugene Upper, Irwin Anderson, and Mirsalah-Aldin Kompani froze to death on the streets in January and February. People across the country reeled in shock when this happened.

The circumstances were horrible. Upper died in a bus shelter on Spadina Ave. Anderson died in a door well in Toronto’s east end Chinatown. Kompani, an engineer, died below a ramp to the Gardiner Expressway, his hands frozen to his face and his notebooks, filled with handwritten mathematical formulas, by his side. It took days for his hands to thaw from his face to allow the autopsy.

An advocacy group I was part of obtained legal test case funding and hired lawyer Peter Rosenthal. We called for and obtained standing at an inquest into the deaths. For the five-week inquest, the courtroom was full and community agencies took turns providing a daily lunch outside on the sidewalk with media availability and rallies.

There was enormous resistance from *day one* to ensuring a full and fair inquiry into the circumstances of the deaths.

We had to fight for the right for homeless people to be expert witnesses. We had to fight to submit evidence on homelessness, harm reduction, and housing. Of note, the coroner literally refused to allow the word ‘housing’ to be used.

Knowing that something was missing from the evidence in Mr. Kompani’s case, Rosenthal kept insisting there had been notebooks found with the body and that he wanted to examine them. They remained missing until Rosenthal complained to Dr. James Young, the province’s chief coroner. Shortly after his complaint, a police officer under cross-examination suddenly disclosed that the books had been found. They were on Mr. Kompani’s body in the morgue.

Rosenthal was taken to the morgue, given a pair of gloves and he removed the briefcase from the body bag. Inside were the notebooks. Rosenthal (also a University of Toronto math professor) poignantly described the math notes as “beautiful, creative, and very coherently thought out”. Many in the room were in tears. This evidence greatly humanized the victim and the process, challenging stereotypes and judgment about the men who had died.

I describe this effort to show advocates did not accept “This is as good as it gets.” The jury agreed. Their [verdict](#) led to numerous recommendations to improve the shelter system including the first managed alcohol program in Canada at Seaton House.

Also a result, Toronto began its system of [Extreme Cold Weather Alerts](#) which would trigger the opening of warming centres. Other cities eventually followed suit.

Warming centres run worse than jails

However, Toronto never took kindly to the notion of running these centres and that has been evident in their sloppy operation.

Over the years, advocates exposed the fact that the warming (and eventually) cooling centres were operated worse than jails. No cots, mats, blankets, or privacy barriers. No meals, no activities such as cards or a newspaper or a TV to pass the time. No healthcare on site.

In the summer of 2016, amidst repeated heat waves, Toronto was forced by advocates to open cooling centres on day one of a heat wave instead of their usual day three. Yet they were opened in a miserly fashion with no staff, water, or food.

In the winter of 2016-17, Toronto [operated one of its warming centres](#) without any public advertising of its location and with doors that remained locked all night.

In the summer of 2018, only one cooling centre operated twenty-four hours a day.

Numerous reports have documented these atrocities. From Toronto Disaster Relief Committee's [Shelter Inspection Report](#) (2003) to the Ontario Coalition Against Poverty's [Out in the Cold: The Crisis in Toronto's Shelter System Report](#) (2016) to Health Providers Against Poverty's [An Evaluation of Toronto's Warming Centres and Winter Response to Homelessness](#) (2018). They have delineated human rights violations that range from the absence of showers, cots, pillows, blankets, and meals to an inadequate number of toilets, to overcrowding and safety issues.

Is this as good as it gets?

Toronto got away with not opening warming centres for about ten years until a homeless man named Richard Kenyon died in front of the old Maple Leaf Gardens during an ice storm in 2013. Yet the city had [opened emergency warming shelters](#) for the housed population who had lost power in the same ice storm.

It shouldn't be a fight to get these emergency sites open, but it always Toronto city managers routinely refuse to introduce an ounce of flexibility in the formula used to trigger the opening of warming or cooling centres, squabbling with health workers over the -15C degree temperature requirement or how to gauge the effect of wind chill, an ice storm or torrential rains and floods.

As Dr. Andrew Boozary, has noted: “The current policy of opening warming centres when it is -15 C is not aligned with the evidence. The majority of cold related injuries that come to our emergency departments are when it is warmer than -15 C. We should not need “extreme weather” to show humanity.”

Whether it’s the state of our health care system, public parks, transit, or shelter: This is not as good as it gets.