Meeting Canada's Obligations to Affordable Housing and Supports for People with Disabilities to Live Independently in the Community:

Under Articles 19 and 28, Convention on the Rights of Persons with Disabilities

And under Articles 2 and 11, International Covenant on Economic, Social and Cultural Rights

Submission to:

UN Special Rapporteur on the Right to Housing for her next report to the UN General Assembly, 72nd Session

Submitted By:

Alzheimer Society of Canada
ARCH Disability Law Centre
Canadian Association for Community Living
Canadian Mental Health Association, Toronto Branch
Council of Canadians with Disabilities
IRIS – Institute for Research and Development on Inclusion and Society
People First of Canada
Social Rights Advocacy Centre
Wellesley Institute

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Introduction

This submission is about the housing and supports gap facing persons with disabilities in Canada. It responds to the Special Rapporteur on adequate housing's questionnaire and provides information for her report to the United Nations General Assembly 72nd session on the right to adequate housing of persons with disabilities. This submission reports on:

- Housing disadvantage, discrimination and homelessness faced by persons with disabilities in Canada;
- Lack of a rights-based framework in Canada to address homelessness and housing and supports gap experienced by people with disabilities; and
- Recommendations we urge the Special Rapporteur to consider including in her report.

Appendix A outlines the federal-provincial context for housing and social policy in Canada.

Responses to Questions 1, 2, 8

- 1. Please explain how the right to housing of persons with disabilities is guaranteed in domestic law, including constitutional provisions and human rights legislation.
 - The right to housing for persons with disabilities has, thusfar, not been recognized by Canadian courts. Canadian courts have explicitly rejected the notion that the Canadian Charter of Rights and Freedoms confers a right to housing.
 - After more than two decades of Canada ignoring recommendations for a
 national strategy to address the crisis of homelessness and inadequate housing,
 people with disabilities, homeless people and advocates initiated a legal
 challenge under the Canadian Charter of Rights and Freedoms.ⁱ
 - The Governments of Canada and Ontario brought a motion to dismiss the application, i.e. that the Court decide to refuse to review the evidence. The Ontario Court of Appeal rendered such a decision without reviewing the evidence.ⁱⁱ
 - Canada has ratified both the CRPD and the ICESCR. However, Canada's commitments under these international laws are not directly domesticated into

- Canadian law. As a result, the right to housing, conferred by these international laws, is not justiciable in Canada
- This denial of access to justice for people with disabilities who are homeless or denied support services and access to adequate housing, resulting in serious violations of their rights to life, security of the person and equality, is contrary to obligations to ensure access to effective remedies under the CRPD. The CESCR has expressed its concern in all reviews of Canada since 1993 about "the practice of governments of urging upon their courts an interpretation of the Canadian Charter of Rights and Freedoms denying protection of Covenant rights."
- At its most recent review of Canada in 2016 the CESCR expressed concern about "the limited availability of legal remedies for victims in the event of Covenant rights' violation, which may disproportionately impact disadvantaged and marginalized groups and individuals, including homeless persons, indigenous peoples and persons with disabilities."
- 2. Please provide any useful statistical indicators, analysis or reports regarding housing condition of persons with disabilities, the extent of homelessness and discrimination, (including failure to provide reasonable accommodation) in the private or public sectors. Please also provide references to any documentation (written, visual or otherwise) of the lived experiences of the housing conditions of people with disabilities.
 - In sum, people with disabilities in Canada are disproportionately homeless, living in poverty, subject to drastically restricted housing choices, subject to housing discrimination and likely to live in substandard housing. This is especially the case for Indigenous persons with disabilities.

General Overview – Housing, Homelessness and Canadians with Disabilities

- **Disproportionately in 'core housing need'** Over 13% of the population in Canada has a disability over 4 million people. Over 400,000 adults with more significant disabilities have "core housing need", the standard Canadian federal definition of deficient housing affordability, quality, and/or adequacy. We estimate there is a larger group than this because current national surveys are not capturing people with milder disabilities. V
- More likely to be homeless On any given night in Canada, about 35, 000 people are homeless or living in shelters, and an on annual basis there are 235,000 homeless Canadians. It has been estimated that 45% of the homeless population are people with disabilities or living with diagnosed mental health conditions.

- **Higher rate of poverty** Many people with disabilities face difficulty maintaining steady employment, especially better-paid jobs. Among working-age adults with disabilities the rate of poverty is twice as high as for Canadians without disabilities (20% vs. 10%).
- Constrained housing options Affordable housing prices, tenure options, and locations are all more restricted at lower incomes: Over 30% of adults with disabilities live in rental housing. Almost 45% of this group live on low incomes compared to 25% of renters without disabilities. Among lone parents, people with disabilities are much more likely than people without disabilities to have low income (34% vs.20%).
- **Discriminatory practices** People with low or irregular income and especially recipients of social assistance, all of whom are disproportionately disabled, often face discriminatory screening-out practices by landlords, related to both disability and ability to pay. Disability is often a barrier to obtaining housing and sustaining stable residency. Many landlords discriminate on the basis of certain disabilities, ix including evictions for disability-related behaviours and failure to accommodate disability-related needs.
- Compounded disadvantage: disability discrimination plus racialized status —
 There is well-documented discrimination in rental housing markets on the basis of racialized status. African Canadian renters indicate negative stereotypes are often encountered, "such as that African Canadian tenants are more likely to be involved with drugs or be violent and that racialized people are dirty." * When layered with disability stereotypes racialized minorities face even more barriers.
- *Unstable housing* People with low income and high rent/income ratios are at higher risk of rent arrears and consequent eviction. They are more likely to be subsequently screened out based on such tenancy records. if landlord disputes arise, certain disabilities may create a disadvantage in dealing with them.
- Lack of suitable supportive housing People with physical disabilities often require accessibility features that are not available in many properties; people with psychosocial or intellectual disabilities often require a support worker to help them meet tenancy obligations, but too few are available. Available stock, openings (turnover), and the locations of social and supportive housing are far more limited than for private-sector rental. Only 19% of people with disabilities living in low-income households report receiving all of the support they need with everyday activities. Social housing access policies can also put people with disabilities at a disadvantage. XiV
- **Living in sub-standard housing** The factors above result in people with disabilities more often living in poorly maintained rental housing, vo or housing of

- other low quality or space, e.g. rented rooms, and in neighbourhoods with disadvantages. Among people with low income, 16% of those with disabilities live in housing in need of major repairs, compared with 10% of those without disabilities.
- Difficulty exiting from homelessness The scarcity of supportive housing makes
 it difficult to exit from homelessness. Limited funding constrains providers in
 meeting their duty to accommodate, e.g. paying for support staff or physical
 modifications.**

People with Psychosocial Disabilities

- Estimates of Canada's population with psychosocial disabilities (serious mental illness or addiction) vary. Canada's most recent survey on disability, which identifies people with more significant disabilities, estimates 1,060,000 people or 3.9 percent of the total population age 15 or older. xvii
- People with psychosocial disabilities are in various housing situations, including living with family (73 percent), private rental, social housing, supportive housing, boarding homes, residential care facilities (group homes), and hospitals. Among this population, 21 percent are in low income households, and 10 percent of those with mental health conditions have core housing need. The latter rate is over 15% for those with a combined developmental and psychosocial disability. It is estimated that 520,000 people living with mental illness are homeless or precariously housed.xviii
- Independent rent-subsidized housing with flexible support services is widely identified as best practice, xix but the availability falls far short of needs. xx It has been estimated that Canada has just over 25,000 supportive social housing units (2012) for this population. xxi This is a small share of the 289,000 people with psychosocial disabilities living alone or with non-relatives.
- Many people with psychosocial disabilities live either in low-quality rented rooms, or in boarding homes that provide housing and supports on a "custodial" model that does not support well-being and autonomy. **XIII In many provinces this exceeds the numbers in supportive housing. Social housing is a small sector (4½ percent of households), has expanded little since the early 1990s, and faces steady phase-out of federal funding. **XIIII There are widespread gaps in capacity and availability of mental health supports, **XXIIII There are widespread gaps in capacity and between levels of government. **XXIIII
- There are also gaps for older persons with psychosocial disabilities, culturally sensitive services for a multicultural population, drug/alcohol users, people with high or complex needs, and Indigenous peoples. Mental health and addiction

- issues, and the lack of housing with supports, are major contributing factors in homelessness. xxvii
- Comprehensive nationwide data are lacking on the availability of housing with supports and the numbers in supportive housing, boarding homes, and other categories.
- In 2006 the Senate called for development of 56,000 units with supports over 10 years. In 2012 the Mental Health Commission recommended funding for 100,000 units with supports. It can be estimated that less than 3,000 have been developed since 2006.
- There are some positive recent developments. In several provinces, housing allowance programs have been expanded, xxviii and housing and poverty reduction strategies are being adopted. A federal National Housing Strategy and poverty reduction strategy are in development. There is widespread recognition of 'Housing First' approaches to homeless people with psychosocial disabilities as a best practice.
- Ontario's provincial auditor's report provides additional useful information

People with Intellectual Disabilities

- The Canadian Association for Community Living estimates that between 100,000 and 120,000 adults with intellectual disabilities face a housing and supports gap.xxxi Almost 25,000 Canadians with more significant intellectual disabilities have core housing need.
- Adults with intellectual disabilities are over-represented among the estimated 35,000 homeless population in Canada on any given night. Available evidence points to a much greater likelihood of being homeless than in the general population, xxxiii with intellectual disability a pre-disposing factor to homelessness and vulnerability for this group; xxxiii
- 13,200 adults with intellectual disabilities aged 30 and older live with their parents because they do not have the resources or community support to live in their own homes. Their families have unsustainable caring responsibilities, are draining life savings and have 'Nowhere to Turn' as a recent Ombudsman's report names the problem for the estimated 10,000 adults with intellectual disabilities waiting for residential services in Ontario. For too many people with intellectual disabilities, lack of access to housing and supports results in "institutionalization by default". xxxiv
- Almost 30,000 adults with intellectual disabilities reside in congregate residential
 facilities and group homes, based on their diagnostic label. Many want a home
 of their own but cannot, because of scarcity of affordable housing and of staff

- support outside the residential facility. There appears to be a re-emergence of these congregate options. **xxv*
- An estimated 10,000 adults with intellectual disabilities under the age of 65 are living in hospitals, nursing homes or long-term care facilities because they cannot get the personal supports and affordable housing they need.
- An estimated additional 60,000 Canadians with mild intellectual disabilities have never been identified in surveys of Canadians with disabilities. Studies of people with intellectual disabilities on a global level point to an estimated 1% to 3% of population having mild to severe intellectual disability, which equates to 0.3–1.0 million in Canada.

People with Dementia

- It is estimated that 564,000 Canadians are currently living with dementia, and that this will increase to 937,000 in 15 years, with 25,000 new cases diagnosed each year in Canada. xxxvii
- The current population of those with dementia are part of a larger group of 628,000 adults with 'memory'- related disabilities as identified in the Canadian Survey on Disability (2012). Almost 80,000 among this group have core housing need. A large proportion of the latter (over 60,000) also have pain-related disabilities. xxxviii People with dementia frequently have co-occurring conditions including visual, mobility, sensory, and psychosocial disabilities.
- A severe lack of integrated home and health care/nursing services means that
 people with dementia are less likely to realize their Article 19 rights to live
 independently in the community. The result is that a growing number are placed
 in Canada's already over-crowded long-term care system, with long wait lists.
- Community-based assisted living options, with many at a cost of up to \$5,000/month are out of financial range for most people with dementia who need such supports. The only option is long-term care if they are unable to be supported by informal caregivers at home. A Senate report on dementia noted that "This situation is detrimental to the individual, whose health will deteriorate more quickly in the long-term care environment, it is a costlier alternative than providing supports needed to keep the person in their home". xxxix
- Lack of community-based support to family and informal caregivers means that they – mostly women – "sacrifice their own time, finances and health in order to care for a loved one with dementia... Caregiver burnout often results in premature hospitalization of dementia patients... society should offer a range of supports for caregivers in order to lengthen the time that dementia patients can stay in their homes while also reducing the burden on the caregivers." xl

Indigenous Persons

- Indigenous persons in Canada are made up of many culturally diverse nations
 within the broad categories of First Nations, Inuit and Métis peoples. Indigenous
 peoples experience the poorest health, and the highest rates of alcohol abuse,
 violence and incarceration in Canada, which relates back to the lasting impact of
 colonization and the residential school systems. xli
- Indigenous housing needs are associated with this historical trauma, low income, isolated far-northern locations and First Nations reserves, xiii deep disadvantage in urban housing markets (62% lived in places not on reserves by 2011), xiiii "constant and ongoing discrimination" in that context, xiiv and under-funding of culturally appropriate services.
- Indigenous peoples in Canada experience a high rate of disability, 32 per cent, which is twice the national average^{xiv} and among this group almost 40% live in poverty.
- Urban Indigenous persons experience a hugely disproportionate rate of homelessness^{xlvi} (1 in 15 vs. 1 in 128 for the general population), and comprise an estimated 20 to 50 percent of all homeless people, much higher in some cities.
- There is a pronounced lack of quality and accessibility in on-reserve housing; tombined with a disproportionate rate of poverty and a higher rate of large families, this results in a housing crisis for Indigenous persons living on reserve.
- The intersection of Indigeneity and disability, with scarcity of community supports for Indigenous persons living off-reserve, creates severe unmet housing and support needs. For example, respondents in a study on challenges experienced by Indigenous people with disabilities living in Regina found that there was a great need for "more accessible and affordable housing to people with disabilities."
- 8. Please refer to any innovative initiatives that have been taken at the local, regional or national level to promote and ensure the right to housing of people with disabilities and identify lessons learned from these. Please also identify ways in which your Government or organization considers that the Special Rapporteur on the right to housing and other international human rights bodies or procedures could play a role in ensuring the right to adequate housing of people with disabilities.
 - We urge the Special Rapporteur to recommend that Canada take the following steps to address the gaps in legislation, policy and programs that result in

systemic housing discrimination and disadvantage for people with disabilities in Canada.

Canada and each provincial and territorial government should formally
recognize a right of people with disabilities to live independently in the
community, and a right to affordable, adequate and appropriate housing,
including any individualized supports necessary for this purpose.

Because Canada's courts have so far not recognized the Canadian Charter of Rights and Freedoms as conferring a right to housing, and because Canada's commitments under international law are not directly domesticated, Canada should articulate its recognition of this right under its obligations under Articles 19 and 28 of the UN CRPD and Article 11 of the ICESCR.

- Canada should review its approach to litigation with respect to housing needs and rights to ensure that the government is advancing interpretations of Charter rights consistent with the rights of people with disabilities under the CRPD and the ICESCR.
- 3. Canada, in collaboration with provincial/territorial governments, should conduct an impact assessment of policy and programs affecting housing for persons with disabilities.

The assessment should address: limited and declining social housing funding; insufficient support services; reliance on institutional rather than community-based approaches and on congregate rather than independent housing; housing needs of Indigenous persons; impact of policy decisions on the right to independent living and to be included in the community; social protection and employment of persons with disabilities.

Canada should ensure that such assessment is rights-based and meaningfully involves persons with disabilities and their representative organizations.

4. As part of its National Housing Strategy, and in collaboration with provincial /territorial governments, Canada should establish a policy and funding framework to remedy the shortfall in adequate and affordable housing with individualized supports to enable people with disabilities to live independently in local communities.

This framework should include measurable, rights-based goals, timetables, investment strategies, dedicated financial resources, benchmarks for measuring progress, meaningful consultation and collaboration with persons with disabilities and their representative organizations, complaints procedures, and transparent accountability mechanisms.

5. In collaboration with provincial/territorial governments and with the representative organizations of persons with disabilities, Canada should establish a system (including rights-based indicators) to independently monitor impact of federal and provincial /territorial policies and programmes on the rights of persons with disabilities under the CRPD.

The framework should ensure focus on access and enjoyment by persons with disabilities of the right to social protection and an adequate standard of living, the right to work, and the right to live independently and be included in the community.

6. Canada should incorporate measures, in collaboration with provinces and territories, to ensure that the financing announced by Canada for home care is delivered in a manner consistent with Article 19.

Measures should require and promote individualization, community-based supports, self-direction, and supports for inclusion.

7. Canada should work with provinces and territories to implement enhanced income security programs to address poverty of persons with disabilities.

The program should be guided by proposals put forward by DPOs and recognized in Parliamentary reports. A federal program would create fiscal room for provinces and territories to increase investment in disability supports, which largely fall under their jurisdiction.

Appendix A - Federal/Provincial Context for Housing Policy

Canada is a federal state, with responsibilities in different policy/program spheres shared and divided between a federal (national) government, and the provinces and territories. The division and sharing of responsibilities reflects the Constitution Act, evolving constitutional practice, and various laws and federal-provincial-territorial agreements and cost-sharing.

Canada is a decentralized federation. Each of the three policy/program spheres of health care, social and community services, and social housing, are primarily provincial (and territorial) in terms of policy frameworks and funding contribution. However, there is a large federal role in terms of broad leadership, policy frameworks, and cost-sharing. This includes the Canada Health Act, National Housing Act, Canada Health Transfer, Canada Social Transfer, and federal-provincial agreements governing housing programs. It includes federal departments or agencies responsible for health, social development, and housing, and programs and agreements specific to particular areas, e.g. homelessness.

The platform of the federal government elected in 2015 includes developing a national housing strategy. Consultations took place in 2016 and related announcements are expected in 2017.

Implementing Canada's obligations under international conventions therefore requires coordination and agreements between the federal government and the provincial/territorial governments. This approach is feasible and will build on Canada's existing system of intergovernmental arrangements.

Appendix B - Overview of Submitting Organizations

Alzheimer Society of Canada

The Alzheimer Society is the leading nationwide health charity for people living with Alzheimer's disease and other dementias. Active in communities across Canada, the Society offers help for today through our programs and services, and hope for tomorrow by funding research into the cause, prevention and a cure.

ARCH Disability Law Centre

ARCH Disability Law Centre is a specialty legal clinic dedicated to defending and advancing the equality rights of persons with disabilities in Ontario. For over 35 years, ARCH has provided legal services to help Ontarians with disabilities live with dignity and participate fully in our communities. ARCH provides summary legal advice and referrals to Ontarians with disabilities; represents persons with disabilities and disability organizations in test case litigation; conducts law reform and policy work; provides public legal education to disability communities and continuing legal education to the legal community; and supports community development initiatives. More information is available at www.archdisabilitylaw.ca.

Canadian Association for Community Living

The Canadian Association for Community Living is a family-based association assisting people with intellectual disabilities and their families to lead the way in advancing inclusion in their own lives and in their communities. We do this in Canada and around the world by sharing information, fostering leadership for inclusion, engaging community leaders and policy makers, seeding innovation and supporting research. We are dedicated to attaining full participation in community life, ending exclusion and discrimination based on intellectual disability, promoting respect for diversity and advancing human rights to ensure equality for all Canadians.

Canadian Mental Health Association, Toronto Branch

- To develop and provide community based support services that help people who are living with mental illness or mental health problems improve the quality of their lives in accordance with their defined needs.
- To provide information and education to increase knowledge and understanding of mental health and mental illness and services that promote mental health.
- To advocate for public policies that lead to improved quality of life for people living with mental illness or mental health problems, their families and our community.

Council of Canadians with Disabilities (CCD)

CCD is a national human rights organization of people with disabilities working for an inclusive and accessible Canada.

CCD's Priorities Include:

- Disability-related supports
- Poverty alleviation
- Increased employment for persons with disabilities
- Promotion of human rights
- Ratification and implementation of the UN Convention on the Rights of Persons with Disabilities (CRPD)
- Technology developed according to the principles of universal design
- Air, rail, bus and marine transport that is accessible to persons with all types of disabilities

CCD seeks to achieve these priorities through law reform, litigation, public education and dialogue with key decision-makers.

IRIS - Institute for Research and Development on Inclusion and Society

The Institute for Research and Development on Inclusion and Society (IRIS) provides policy research and social development leadership that encourages new ways of thinking, inspiration, and education to advance the citizenship, inclusion, human rights and well-being of people with intellectual and other disabilities. It builds on the legacy of L'Institut Roeher Institute. IRIS is an independent Institute working on behalf of the community living movement in collaboration with the broader disability and social justice communities.

People First of Canada

People First of Canada is the national organization representing people with intellectual disabilities. People First of Canada is the national voice for people who have been labeled with an intellectual disability. We are about rights – human rights, citizenship rights, accommodation rights, and language rights. We believe in the right to freedom, choice, and equality for all.

We see ourselves as self-advocates and full citizens of our country – living equally in the community. We see ourselves as people first, and as people who have taken back control of our lives from families, policy makers and professionals such as support workers, doctors, social workers, and others, who, for far too long, made decisions for us.

Social Rights Advocacy Centre

A not for profit NGO relieving poverty and improving access to adequate food, clothing, housing, education, healthcare and other requirements of dignity, equality and security through human rights research, public education and legal advocacy in Canada and around the world. SRAC is on the Steering Committee of ESCR-Net's Strategic Litigation Initiative, the ESCR Case Law Database and the NGO Coalition for the OP-ICESCR. SRAC co-directs a major research project on Social Rights in Canada. SRAC co-ordinates the Charter Committee on Poverty Issues, intervening in more than a dozen cases at the Supreme Court of Canada.

Wellesley Institute

Wellesley Institute works in research and policy to improve health and health equity in the Greater Toronto Area through action on the social determinants of health. Its mission is to advance population health and reduce health inequities by driving change on the social determinants of health through applied research, effective policy solutions, knowledge mobilization, and innovation.

Endnotes

¹ <u>Affidavit of Paula Nina Goering</u>, Full Professor, Department of Psychiatry and Faculty of Nursing, University of Toronto & Affiliate Scientist, Centre for Addiction and Mental Health, "Homelessness and People with Mental Illness and Addiction"; <u>Affidavit of Michael Bach</u>, Executive Vice President, Canadian Association for Community Building, "Barriers to Adequate Housing for People with Intellectual Disabilities".

^{II} <u>Tanudjaja v. Canada (Attorney General), 2014 ONCA 852</u>. See also prior Ontario Superior Court decision, Tanudjaja v. Attorney General (Canada) (Application), 2013 ONSC 5410 (CanLII)

CESCR, Concluding Observation: Canada. E/C. 12/CAN/CO/\$, E/C. 12/CAN/CO5 (22 May 2006) para 11(b).

iv E/C.12/CAN/CO/6 para 5.

Statistics Canada and Employment and Social Development Canada are aware that the disability surveys conducted to date have done well in capturing adults with moderate and severe disabilities but miss many adults with mild disabilities. To improve coverage, these two departments have joined forces with academics and the disability community through a 'Technical Advisory Group' and have developed a strategy that will better capture ALL Canadians who experience barriers because they have limitations in their activities related to a health problem or disability-related condition.

S. Gaetz et al. (2016), *The State of Homelessness in Canada 2016* (Canadian Observatory on Homelessness), 12.

vii W. Grigsby et al. (1987), "The Dynamics of Neighborhood Change and Decline" *Progress in Planning* 28:1-76.; G. Suttor (2015), *Rental Housing Dynamics and Lower-Income Neighbourhoods in Canada* (Research Paper 235, Neighbourhood Change Research Partnership, University of Toronto), 26-27; Ontario Human Rights Commission [OHRC] (2012), *Minds that Matter*, 45.

OHRC, Minds that Matter, 54; Sylvia Novac et al. (2002), Housing Discrimination in Canada: The State of Knowledge (Ottawa: Canada Mortgage and Housing Corporation).

ix OHRC, Minds that Matter, 52-53.

^{*} See for example, Ontario Human Rights Commission (2008), *Right at Home: Report on the consultation on human rights and rental housing in Ontario*. Retrieved from www.ohrc.on.ca/en/right-home-report-consultation-human-rights-and-rental-housing-ontario.

xi OHRC, Minds that Matter, 52.

xii OHRC, Minds that Matter, 56.

xiii Suttor, Rental Housing Dynamics, 32-33.

xiv OHRC, Minds that Matter, 48.

xv OHRC, Minds that Matter, 45.

xvi OHRC, Minds that Matter, 57.

Total population age 15 or more was 27,259,525 in 2011 (Statistics Canada, *National Household Survey*, catalogue 99-010-X2011026. See also OHRC (2015), *By the Numbers: A statistical profile of people with mental health and addiction disabilities in Ontario*. Retrieved from www.ohrc.on.ca/en/numbers-statistical-profile-people-mental-health-and-addiction-disabilities-ontario

wiii Mental Health Commission of Canada (2012), Turning the Key: Assessing Housing and Related Supports for Persons Living with Mental Health Problems and Illness, 10.

xix Turning the Key, 36.

xx Turning the Key, 34, 43, and passim. This is congruent with estimates that Ontario and that Ontario (with 38 percent of Canada's population) has about 16,000. On the latter, see G. Suttor (2016), Taking Stock of Supportive Housing for Mental Health and Addictions in Ontario (Toronto: Wellesley Institute). xxi ibid., 32. This is a count of "dedicated" units with rent subsidy and support services attached to projects.

https://www.ombudsman.on.ca/Files/sitemedia/Documents/NTT-Final-EN-w-cover.pdf.

surveys conducted to date have done well in capturing adults with moderate and severe disabilities but miss many adults with mild disabilities. To improve coverage, these two departments have joined forces with academics and the disability community through a 'Technical Advisory Group' and have developed a strategy that will better capture ALL Canadians who experience barriers because they have limitations in their activities related to a health problem or disability-related condition.

xxxviii Alzheimer Society of Canada (2016), Prevalence and Monetary Costs of Dementia in Canada.

xxxviii These results are from the Canadian Survey on Disability, in an analysis conducted for the Canadian Association for Community Living and The Wellesley Institute, by Adele Furrie, February 2017.

xxxix Senate of Canada, Standing Senate Committee on Social Affairs, Science and Technology (2016).

Dementia in Canada: A National Strategy for Dementia-friendly Communities, Ottawa: Author, p. 23

Dementia in Canada: A National Strategy for Dementia-friendly Communities. Ottawa: Author, p. 23.

xl Senate of Canada, Standing Senate Committee on Social Affairs, Science and Technology (2016).

Dementia in Canada: A National Strategy for Dementia-friendly Communities, Ottawa: Author, p. 19.

xii O'Donnell, Vivian and Wallace. (2011) Women in Canada: A Gender-based Statistical Report: First

Nations, Métis and Inuit Women. Minister of Industry, Statistics Canada.

viii Over half of Canada's Indigenous population lives in urban centres, but many live in First Nation reserves and far-northern communities.

xiiii Stats Canada. Aboriginal Peoples in Canada: First Nations People, Métis and Inuit.

Www12.statcan.gc.ca. Retrieved from: https://www12.statcan.gc.ca/nhs-enm/2011/as-sa/99-011-x/99-011-x2011001-eng.cfm

xliv Toronto Alliance to End Homelessness (2016, October) Renewed Hope Recommendations for a successful National Housing Strategy in Canada. Retrieved from

xxii Centre for Addiction and Mental Health (2012), From this Point Forward: Ending Custodial Housing for People with Mental Illness in Canada.

xxiii See C. Pacini, J. Hashim, and K. Foulds (2016), *National Housing Collaborative: Social Housing Research Paper* (Toronto: National Housing Collaborative); S. Pomeroy (2015), *Built to Last: Strengthening the Foundations of Housing in Canada* (Ottawa: Federation of Canadian Municipalities).

xxiv Turning the Key, 43.

Turning the Key, 35. See also, Office of the Auditor General of Ontario (2016), Housing and Supportive Services for People with Mental Health Issues (Community Services) Retrieved from http://www.auditor.on.ca/en/content/annualreports/arreports/en16/v1_307en16.pdf

xxvi Turning the Key, 40, 49, 52, 53, 54; also appendix 6.

e.g. *Turning the Key*, 39 re Toronto homeless.

Turning the Key, appendix, 214.

xxix For example, British Columbia (2006), Housing Matters BC: A Housing Strategy for British Columbia; Ontario (2016), Long-term Affordable Housing Strategy Update.

xxx Turning the Key, 36-38 and Appendix 6.

xxxi Canadian Association for Community Living (2016). Retrieved from http://www.cacl.ca/area/safe-and-inclusive-communities.

For U.S. prevalence study, see PM Oakes and RC Davies (2008), "Intellectual disability in homeless adults: a prevalence study," *Journal of Intellectual Disability* (December: 12(4):325-334).

xxxiii C. Mercier and S. Picard (2011), "Intellectual disability and homelessness," *Journal of Intellectual Disability Research* (April: 55(4):441-9).

Ombudsman of Ontario, Paul Dube (2016). Nowhere to Turn. Final Report. Investigation into the Ministry of Community and Social Services' response to situations of crisis involving adults with developmental disabilities. Retrieved from

xxxv See Housing Study Group (Developmental Services Sector – Ontario Ministry of Community and Social Services Partnership Table) (2013), Ending the Wait: An Action Agenda to Address the Housing Crisis Confronting Ontario Adults with Developmental Disabilities (online: http://www.dsontario.ca/news/ending-the-wait/).

https://static1.squarespace.com/static/56c4a231d51cd428ca552a3a/t/580e0b476a49636956cdd15b/1477315400136/Renewed+Hope+-+TAEH+recommendations+for+a+National+Housing+Strategy+-+Oct+2016.pdf. P. 5.

https://static1.squarespace.com/static/56c4a231d51cd428ca552a3a/t/580e0b476a49636956cdd15b/1477315400136/Renewed+Hope+-+TAEH+recommendations+for+a+National+Housing+Strategy+-+Oct+2016.pdf, p.5.

South, S. M. (2006). Urban First Nations people with disabilities speak out. *International Journal of Indigenous Health*, 3(1), 34.

x^{lvi} Y. Belanger, G. Head, O. Awosoga (2012), "Housing and Aboriginal People in Urban Centres: A Quantitative Evaluation" *Aboriginal Policy Studies* 2 (1): 4-25.

Toronto Alliance to End Homelessness (2016, October) Renewed Hope Recommendations for a successful National Housing Strategy in Canada. Retrieved from

xiviii South, S. M. (2006). Urban First Nations people with disabilities speak out. *International Journal of Indigenous Health*, *3*(1), 34.