

VITAL SIGNS ISSUE AREA: HOUSING



“All Ontarians deserve access to basic elements of a safe and healthy life...housing.”

(Open Minds, Healthy Minds)

Mental health & addictions problems can lead to homelessness; homelessness can cause or worsen these problems. Mental health, addictions & trauma are particularly prominent among youth, Aboriginal and chronic homeless populations. (Informing the Future: Mental Health Indicators for Canada. MHCC 2015; A Place to Call Home. Report of the Expert Advisory Panel on Homelessness).

INDICATOR/SOURCE	DATA
<p>With prevention and early intervention, Ontario expects to see “more people living in safe, stable homes and fewer living in shelters or hospitals.”</p> <p>SOURCE: Province of Ontario's Comprehensive Mental Health and Addiction Strategy (2011)</p>	<p>In 2015, a total of 2,670 unique individuals experiencing homelessness stayed an average of 41 nights across London's 320 emergency shelter beds.</p> <p>263 individuals were identified as experiencing homelessness during London's Housing Registry Week, October 20-23, 2015.</p> <p>(City of London)</p> <hr/> <p>Middlesex County has one emergency shelter in Strathroy for women and their children. Young men, older men, and individuals with mental illness in need of emergency shelter housing must get to London, or may be housed in a motel. (Women's Rural Resource Centre of Strathroy and Area)</p>
<p>Violence and trauma are key factors leading to homelessness and can worsen mental health and addiction issues.</p> <p>SOURCE: p. 22. A Place to Call Home. Report of the Expert Advisory Panel on Homelessness</p>	<p>In 2014/2015, 513 women and 202 children stayed in shelter at Women's Community House; 4,750 calls were received by the helpline; 547 people walked in for help and there were almost 100 second stage housing tenants.</p> <p>(http://shelterlondon.org/welcome/)</p> <hr/> <p>Over 1,000 women visit My Sisters' Place each year. On average, about nine out of ten have mental health issues and almost half have addictions. A number have suspected brain injury and do not get the mental health and housing help they need.</p> <p>(My Sisters' Place)</p>
<p>“Solving homelessness together in London”</p> <p>Using a Housing First and housing stability approach London's Homeless Prevention System creates a coordinated effort to address, reduce and prevent homelessness together in London by providing immediate access to permanent housing and support services (City of London).</p>	<p>Every \$10 invested in Housing First supports can save about \$20 in hospitalization and other government service costs, reduced use of emergency shelters and fewer visits to emergency departments. (p. 22. A Place to Call Home. Report of the Expert Advisory Panel on Homelessness)</p>

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Community Data

INDICATOR/SOURCE	DATA	NOTES																					
<p>Susan Macphail, My Sisters' Place</p>	<ul style="list-style-type: none"> • 196 women receive Housing Stability support on an ongoing basis – 75% in permanent housing and 25% in temporary housing, waiting for housing or homeless • It is estimated that on an average day, 45% of women served are elderly and 30% are First Nations/Inuit/Métis 																						
<p>Number of Mental Health Occurrences and Number of Mental Health Crisis Calls</p> <p>Mental health occurrence: person assessed by officer to be experiencing a mental health issue</p> <p>Mental health crisis call: mental health issue is assessed to require crisis response</p> <p>SOURCE: London Police Service</p>	<p>In 2015, the London Police Service responded to 1,028 more mental health occurrences than in 2012.</p> <table border="1" data-bbox="511 583 1224 863"> <thead> <tr> <th colspan="3">NUMBER OF MENTAL HEALTH OCCURRENCES</th> </tr> <tr> <th>Year</th> <th>All</th> <th>Youth (Age 18 and under)</th> </tr> </thead> <tbody> <tr> <td>2011</td> <td></td> <td>238</td> </tr> <tr> <td>2012</td> <td>1,743</td> <td>327</td> </tr> <tr> <td>2013</td> <td>2,423</td> <td>526</td> </tr> <tr> <td>2014</td> <td>2,650</td> <td>467</td> </tr> <tr> <td>2015</td> <td>2,771</td> <td>410</td> </tr> </tbody> </table> <p>Number of mental health crisis calls</p> <p>2013: 2,104 2014: 2,066 2015: 2,446</p> <p>Number of times mobile response team notified:</p> <p>2013: 700 2014: 926 2015: 984</p>	NUMBER OF MENTAL HEALTH OCCURRENCES			Year	All	Youth (Age 18 and under)	2011		238	2012	1,743	327	2013	2,423	526	2014	2,650	467	2015	2,771	410	<p>The mobile crisis response team has helped London Police respond to a growing number of mental health crisis calls, helping to provide individuals with the emergency help they need rather than having to go to emergency hospital services.</p>
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Shelley Yeo, Women's Community House www.shelterlondon.org	<p>2010/11</p> Number of emergency shelter residents: 540 Number of women: 316 Number of children: 224 Number of helpline calls: 4,841 Number of tenants at second stage housing: 96 Number of transitional outreach clients: 381 women, 8 men <p>2011/12</p> Number of emergency shelter residents: 555 Number of women: 333 Number of children: 222 Number of helpline calls: 3,702 Number of tenants at second stage housing: 98 Number of transitional outreach clients: 570 women, 13 men <p>2012/13</p> Number of emergency shelter residents: 527 Number of women: 326 Number of children: 201 Number of helpline calls: 3,254 Number of tenants at second stage housing: 104 Number of transitional outreach clients: 523 women, 6 men <p>2013/14</p> Number of emergency shelter residents: 593 Number of women: 387 Number of children: 206 Number of helpline calls: 3,241 Number of tenants at second stage housing: 98 Number of transitional outreach clients: 493 women, 5 men <p>2014/15</p> Number of emergency shelter residents: 715 Number of women: 513 Number of children: 202 Number of helpline calls: 4,750 Number of tenants at second stage housing: 93 Number of transitional outreach clients: 533 women, 5 men <p>2015/16</p> Number of emergency shelter residents: 629 Number of women: 443 Number of children: 186 Number of helpline calls: 3,623 Number of walk-ins: 652 Number of tenants at second stage housing: 48 women, 64 children = 112 Number of transitional outreach clients: 490 women, 0 men, 9 dependents	

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	<p>Most common mental health concerns are anxiety and depression-related. Panic attacks, insomnia, bipolar and PTSD are also common. PTSD is being diagnosed more, recognizing the impact of the trauma and abuse vs. labelling symptoms as something else.</p> <p>They come with mental health issues that are often caused by past trauma, grief and loss. This often leads them to access substances to cope, which then leads to a downward spiral.</p> <p>Systems do not support women in this situation so they often experience financial, housing and legal difficulties.</p>	
<p>Christine Sansom, Canadian Mental Health Association Middlesex</p>	<p>The Transitional Case Management Program (TCM) is a partnership between Mission Services London and the Canadian Mental Health Association Middlesex.</p> <p>“We know that the most vulnerable time for an individual experiencing mental health concerns is when they are discharged from the hospital. TCM assists individuals in managing day-to-day activities while they are in recovery.”</p> <p>One of the general trends observed by the TCM program: seeing increased number of individuals who are homeless or at risk of homelessness.</p>	
<p>Chris Babcock, Canadian Mental Health Association Middlesex</p>	<p>SouthWest Healthline lists 23 agencies providing the main supportive housing programs throughout London & Middlesex. Some are specifically targeted to individuals with mental illness providing residential care while others are more generalized.</p> <p>“With waitlists in most if not all supportive housing there is a need for more of what works. The apartment model CMHA Middlesex offers is a promising practice; an independent apartment with staff available if needed on site and structured programs that they can choose from.”</p> <p>“The biggest barrier is finding affordable, safe accommodation where and when the individual wants it. When an individual is in a transitional program, they can tie up a bed because there is no affordable and safe accommodation to move to.”</p> <p>“Another barrier in moving people on to more independent living is the start-up costs of groceries and furnishings.”</p>	