A Study of Local Responses to the Food Needs of Homeless People in Toronto

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BACKGROUND

Communities across Canada are currently struggling to establish and sustain effective responses to the growing numbers of homeless people in their midst. While one could argue that the roots of homelessness in Canada lie in macro-level changes in social and economic conditions and the policy changes that underpin these, the problem itself takes root and resides in communities, and it has become their job to figure out how to respond. The location of responsibility for problems of homelessness within communities is reinforced by the recent federal policy initiatives, as indicated by the National Secretariat on Homelessness's statement that "local solutions reflecting local realities and needs from the basis of an appropriate and effective national response to homelessness."

At the core of community responses are a myriad of services to help homeless people meet their basic subsistence needs for shelter, food, personal hygiene, and primary health care. Local food provisioning efforts typically include soup kitchens, street outreach programs, and meal provisions in hostels and shelters, but also include the network of faith communities that comprise the 'Out-of-the-Cold' program. Meals and snacks are also being offered to homeless people on a smaller scale by an increasing number of social service agencies, drop-in centres, community development programs, and health centres.

Reports of food scarcity and deprivation are commonplace among homeless youth[1-5] and adults alike[6,7]. Our own research with a sample of 260 homeless youth in Toronto reported extremely high levels of nutritional vulnerability and food deprivation. Further, youth in the study who relied more heavily on charitable food programs were just as vulnerable to nutrient inadequacies and food deprivation as those who used charitable food programs less often[8].

Research documenting food problems among homeless populations raises questions about the capacity of charitable food programs to meet the food and nutrition needs of those who must depend on them. It is unclear whether the primary problem is a lack of coordination among services or lack of awareness of services among homeless people, or if there are more fundamental issues related to the adequacy and appropriateness of the services being offered. To date, there has been no attempt to define the magnitude and nature of community food provisioning activities required to enable homeless groups to achieve and maintain some basic level of nutritional well-being. As well, the range and totality of food provisioning activities that exist in the city and the effectiveness of these programs have not been documented.

STUDY PURPOSE

We undertook this study to catalogue the scope of food services available to homeless people in Toronto and examine the potential for such programs to meet homeless people's nutritional needs.

STUDY METHODS

There were 3 components to the study. They are described in the table below:

| Study component	Purpose	Data collected
1. Inventory of programs in Toronto	To gain a comprehensive description of the scope and nature of current food provisioning efforts in Toronto	- A list of programs serving food to homeless people in Toronto compiled using '211 Toronto' web resource; lists of meal/snack programs receiving food from Daily Bread Food Bank, Second Harvest, and North York Harvest Food Bank; and a list of programs that were participating in the 'Out-of-the-Cold' network in the fall-winter 2004 - Telephone surveys with program operators
2. In-depth study of a sub-sample of food programs	To gain an in-depth understanding of the structure and function of a range of programs (e.g., mobile vans, soup kitchens, health centres, shelters, and multi-service agencies)	- In-depth audio recorded interviews with program coordinators - Dietary information from a sample of meals served at each site - Observations of programs
3. Key informant interviews	To explore the decision-making processes that underlie the provision of resources (funding or food) to individual programs	- In-depth, audio recorded interviews with policy makers, program funders, and senior staff in agencies that supply donated foodstuffs to programs

RESULTS

1. Who's serving food in Toronto?

In August 2004, we identified 157 programs providing food to homeless people in Toronto. The programs span the geographic boundaries of Steeles Avenue to the north, Highway 427 (including Etobicoke) to the west, Lake Ontario to the south, and the Rouge River (including Scarborough) the east.

Telephone surveys were conducted with program operators from 148 of these programs; this represents a 94% participation rate. Included in the inventory were 47 shelters (including 2 supportive housing programs), 17 'Out-of-the-Colds', and 84 'day programs' (see Figure 1). 'Day programs' comprise a diversity of programs, including traditional 'soup kitchens', drop-in centres/ multi-service agencies, mobile vans, outreach programs, health care services, counselling/ support services, education/ training programs, and churches/ spiritual centres.

Figure 1: Inventory of programs providing food to homeless people
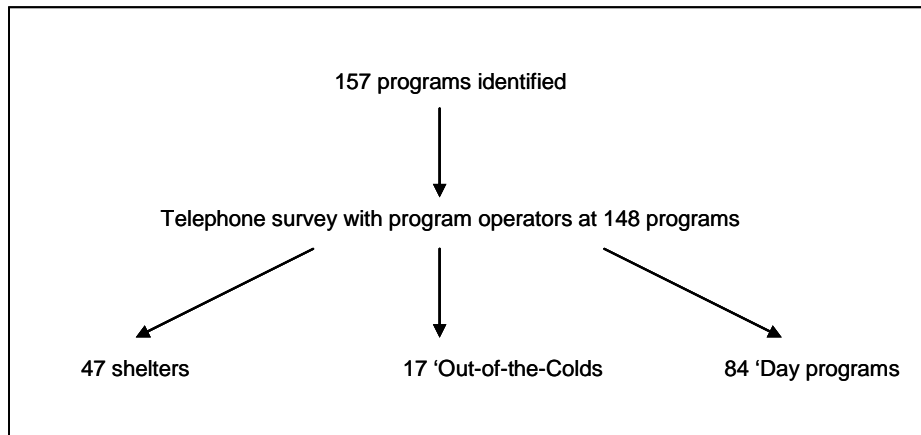
Program Clientele

Although we began this study with a particular interest in community food provisioning efforts for homeless people, it quickly became apparent that, apart from shelters, most programs serve people with varying levels of housing. Virtually all (97%) of those using shelters were homeless, but on average, only 55% of people using 'out of the colds' and 44% of people using 'day programs' were thought to be homeless. The considerable number of people using meal/ snack programs who aren't homeless include the 'under housed', namely people who were living in shelters, hostels, rooming houses, or other

low-cost accommodation who are either 'working poor' or receiving social assistance and do not have enough money for food after paying rent.

It appears that most of the individuals who use food/ snack programs, depend on them regularly. On average about 80% of people who eat at the programs were identified as 'regulars' by the programs operators surveyed (the proportion of 'regulars' for shelters was 90%, 78% for 'out-of-the-colds', and 72% for 'day programs'). Thus, the nutritional quality of the offerings at community food programs and the nature of the dining experience likely have a significant bearing on their clients' nutritional health and well-being.

2. When did charitable food programs start and why?

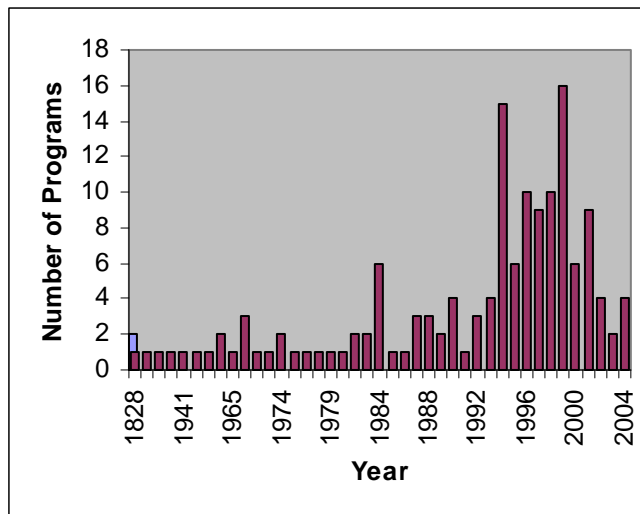The evolution and expansion of programs is represented in Figure 2.

Figure 2. Numbers of charitable food programs in Toronto 1828-2004.

The mid-nineties was a period of worsening conditions for Ontario's poor due to changes in government policies. In 1995, both the federal and Ontario governments cancelled funding for building new social housing, and the Ontario government cut social assistance levels by 21.5%. At the same time, the federal government placed additional restrictions on Employment Insurance eligibility making it more difficult for out of work people to qualify for support. Further, during a period of extremely low vacancy rates in Toronto, in 1996 the Ontario government introduced legislation to dismantle the rent controls that offered tenants protection from excessive rent increases and unfair evictions.
By the late 1990s, concern was growing about increasing numbers of homeless people, not only in Toronto, but in most urban centres across the country. In 1999, after mounting

pressure from both community groups and municipalities across the country, including the Toronto Disaster Relief Committee and the City of Toronto's Mayor's Homelessness Action Task Force, the federal government launched the National Homelessness Initiative. The initiative was intended to "ensure community access to programs, services, and supports for alleviating homelessness" by targeting funding to community priorities identified through an extensive, inclusive, community planning process. Originally proposed as a three-year program, funding for the National Homelessness Initiative has been extended until 2006. The initial release of funding was designated for community-based programs and services that serve homeless people or people at high risk of becoming homeless.

By and large, community food programs in this study emerged in response to perceived food needs among clients or individuals in the local community. Virtually all program operators asserted that they began serving food because "there was a need…." In effect, offering food was a response to broader system and policy failure, specifically deinstitutionalization polices, high housing costs/limited affordable housing, and inadequate levels of welfare and disability payments. Meal offerings at community food programs were seen as support mechanisms or "band aids" for food insecure people who were experiencing system failure. Food and other supports were 'do-able' for community agencies that could not provide the income and housing supports that they believed were ultimately required to house homeless people.

While a few of the programs surveyed had been operating since the late 1800s, over 70% began operations in 1990 or later. The charity-based organizations (often faith-based groups) with missions to serve the most vulnerable in society are among the longer-established programs. Some meal programs operating out of community centres have also been in operation for several decades, however the client-base of these programs has evolved with social changes over time. The 'Out-of-the-Cold' program was initiated in the late 1980s and grew rapidly in the 1990s, but the largest growth in food provisioning activity has taken place among 'day programs', with the peak years for their initiation occurring between 1994 and 2001. Some new programs were initiated after needs assessments identified underserved areas of the city such as Scarborough and Weston-King, while others grew out of existing programs.

3. How are these programs operating?

Operations
Although the meal programs in shelters appeared to be fully funded and some 'day' programs located in major charitable organizations were supported by highly organized fund-raising campaigns, most other programs operated with little dedicated funding for food, facilities, or staff. In these programs, resource constraints structured the nature and frequency of meals services.

Some programs restrict their services to particular subgroups of the homeless and underhoused. For example, some target and serve youth; others serve women only; and still others define their clientele as survivors of the psychiatric system. Since some programs have restricted access, it is not possible for individuals to move freely in and out of each of the 148 programs included in the inventory. Food access through community meal programs is also limited due to the considerable physical distances between many programs.

Although most of the shelters included in the inventory provided two or more meals/day, 7 days/week, year round, other programs did not provide nearly such regular access to food. Out of the Cold programs, by design, operate only in the winter. All but one of the Out of the Cold programs surveyed operated weekly; most provided a dinner at night, followed by breakfast the next morning. Most day programs serve food on weekdays, but most (63%) are open fewer than five days/week. On any single day when a day program was serving food, approximately two-thirds provided only a single meal or snack (with the actual number varying by day of week). Thus, it would be impossible to even get two meals each day, five days a week at most of the day programs surveyed. On weekends, the prospect of obtaining food from day programs becomes even more remote: 79% of programs provided no food on Saturdays and 82% provided no food on Sundays. Of the few programs that were accessible on these days, most offered only one meal or snack.

Although very few programs operated seven days/week, most (>90%) of the programs surveyed were providing more than food. The other services offered ranged from 88% of programs providing clothing to 49% offering medical, dental, and/or mental health care. Most programs endeavoured to link clients to housing, employment, and/or income supports, and many provided additional supports such as showers, harm reduction supplies, and help with transportation.

Staffing
Whereas 94% of shelters had a paid coordinator and almost half of shelters staffed their meal programs entirely with paid workers, other programs relied much more heavily on volunteers to run their programs. Only 62% of day programs and 6% of 'Out of the Cold' programs had a paid coordinator. Indeed, 14% of day programs and 59% of 'Out of the Cold' programs had no paid staff at all. In some of these programs where there were only two or three paid staff positions, one was dedicated to a security guard. The limited funding for staff to work in meal and snack programs offered in conjunction with other services is perhaps a function of the way in which these programs have been started. As 'add-ons' to existing services, many meal programs appear to operate outside the framework of core funding.

Although only 115 of the 148 programs surveyed used volunteer labour, an estimated 1734 volunteers could be found working in these programs on any given day. Volunteers

came from a number of sources, and some had little connection to the community in which they were working. At many of the church-connected programs, volunteer members of the church worked in all aspects of the program. Established organizations such as the Red Cross have a 'volunteer management' division of the organization which processes and trains volunteers who are subsequently dispatched to various Red Cross agencies. Agencies also made use of high school students who are required to complete community service hours for their curriculum, as well as individuals who were working off community service hours, in welfare work placements or in welfare volunteer placements.

In 65% of day programs, 35% of 'Out of the Cold' programs, and 13% of shelters, the volunteers included some people who were clients. Some day programs that emphasized community development, encouraged their clients/ members to work as volunteers. Volunteering was seen as a way to, not only, get needed work done, but also as a way to develop skills. In some cases, clients were paid a stipend for their work.

Depending on the program, the degree of reliance on volunteer labour and the nature of the volunteer position, volunteers held different degrees of power within a program. For example, in some programs volunteers had limited or no access to the kitchen and training, while in other cases, volunteers were given free reign and treated as equals to the paid staff members.

Programs that relied on client volunteers had to deal with monthly ebbs and flows in available labour – on and around 'cheque day' volunteers were less likely to show up. In some cases, program operations had to be curtailed because of volunteers were unavailable to do essential tasks (e.g., outreach van not running without a second person on board). Some programs that operated only once or twice per week reported an abundance of volunteers. However, coordinators of these programs suggested that they would be unable to expand their operations to certain times or days of the week (e.g., Friday or Saturday night), even though there was a need, because it would be too difficult to get volunteers to work at these time.

Despite the management issues associated with volunteer labour, programs were generally grateful for the volunteers they had. They felt that they would be unable to provide the services they did without them, and many recognized the sizable savings they achieved using volunteer labour.

Food
Donations from 'food recovery' operations and local food retailers constituted at least part of the food served in 85% of programs. The sources of donations varied between programs, in part based on program type. 'Out of the Cold' programs did not rely on Daily Bread or Second Harvest for their food, getting donations through other routes. Approximately half of shelters got food from Second Harvest and/or other donors, but

only 26% obtained supplies from Daily Bread. Many day programs reported getting food from Second Harvest and/or Daily Bread, and 61% also received food from local retailers or other donors.

Soliciting donations from suppliers other than Second Harvest and Daily Bread required considerable initiative on the part of program operators, as they worked to identify and maintain contacts in the food retail industry. This could range from regularly picking up leftovers from a local coffee shop, responding to occasional calls to retrieve food left from a business luncheon or social event, or arranging for a volunteer to pick up donated bread from a local bakery to making 'deals' to regularly receive a supply of coffee from a sympathetic business group.

Despite the resourcefulness of program operators in soliciting donations, it was very difficult for any program to function entirely with donated food because of the limited, and sometimes unpredictable, assortment of foods obtained through this route. Invariably some foods needed to be purchased in order to put meals together and regularly provide beverages like coffee.

Lack of resources limited both the quantity and the quality of food offered in some programs. Particularly in larger programs, program operators were constantly challenged to balance supply and demand when deciding what to serve and how much food to permit any single person to eat.

Almost two-thirds of programs surveyed reported running low on food. When this happened, most programs coped by serving a more limited menu, but 27% of programs reported cutting portion sizes. To curtail demand when food supplies were limited, 12% of programs had shortened their hours of operation, and 6% reported turning clients away. While these measures might seem extreme, agencies without access to funds to purchase food when donated supplies ran low had little capacity to maintain meal services without donations.

A notable feature of many programs is the extensive use of disposable plates, cups and cutlery. The use of disposable paper or Styrofoam dishes and plastic cutlery may be convenient and also necessary in programs lacking adequate washing facilities. However, considering the costs and potential environmental impact of this practice, the appropriateness of allocating scarce funds for disposable items is questionable.

Style of food delivery
Three main styles of food delivery were evident in programs of the in-depth study: table service, cafeteria style service, and self service. To some extent, the style of food delivery was a function of the space and facilities available and also the numbers of users accessing the meal service. Some programs operated with little more than a domestic kitchen, in

terms of size and equipment, and it is remarkable that these programs manage to store, prepare or even just re-heat the volume of meals distributed over a week.

In some programs with limited space/equipment, there was insufficient seating for patrons. One quarter of programs surveyed said they could not comfortably accommodate everyone who came for food. Program operators tried to cope with excess demands by having people line up and eat in shifts. Some also described scenarios where people took their food outside or ate it while sitting on the floor or in a stairwell because there were insufficient tables and chairs. In some programs there was limited conviviality; people arrived, ate their meals, and quickly departed.

4. How do charitable food programs contribute to the nutritional needs of program users?

A preliminary analysis of a sample of meals from the in-depth study, looking at 'best case scenarios' in each program, revealed that the energy provided at a single meal ranged from 267 kcal to 2,550 kcal. The average energy content of meals was 1098 kcal. To put this estimate in context, it represents about half of what a healthy adult would require if he or she was engaged in only minimal physical activity during the day. Although some program operators believed that the meals they provided constituted the only food some of their clients would consume in the course of a day, this is worrisome given the low energy and nutrient content of many meals observed. Our preliminary analysis suggests that individuals who regularly depended on programs for their meals would need to augment the meals with food from other sources in order to meet their nutrient requirements. Our findings also raise concerns about the long-term health of people who depend on these programs because most meals observed were high in saturated and trans fats, low in fibre, and limited in fruit and vegetable content.

While 59% of programs surveyed afforded participants some choice over what they ate, the results of our in-depth study suggest that the choices available would not likely result in healthier meals. The programs that offered choice were most likely to offer a vegetarian option, but this typically meant the omission of the meat-based entrée.

In evaluating the nutritional adequacy of meals offered in these food programs, it is important to bear in mind the infrequent service of meals and snacks by most programs other than shelters. The regular use of multiple programs by any one client is thwarted by the physical distance between programs and the fact that many programs restrict their services to particular subgroups of the homeless and underhoused. Thus, it is not possible for anyone to move freely in and out of each of the 148 programs included in our inventory.

SUMMARY

Through this study, we have documented extensive community activity to provide meals and snacks to homeless and underhoused people in Toronto. Many of these programs have been established and expanded over the past decade, paralleling major shifts in social policy and deteriorations in the social programs available for low-income groups. Indeed, the mobilization of community resources that underpins local food provisioning efforts is consistent with federal policy directions on homelessness. However, our data suggest that the structural limitations of these initiatives make it impossible for them to meet the food and nutrition needs of the homeless and underhoused people who depend on them.

The shortfalls of food programs identified in Toronto raise broader questions about what can be done at a community level to address the food and nutrition needs of those who are homeless or those who are housed but without enough money for food after paying rent.

REFERENCES CITED

1. Hagan, J. & McCarthy, B. (1997) Mean Streets: Youth Crime and Homelessness,. Cambridge University Press, Cambridge UK.
2. Gaetz, S., O'Grady, B., & Vaillancourt, B. (1999) Making Money: The Shout Clinic Report on Homeless Youth and Employment. Central Toronto Community Health Centres, Toronto ON.
3. Antoniades, M. & Tarasuk, V. (1998) A survey of food problems experienced by Toronto street youth. Can.J.Public Health 89: 371-375.
4. Dachner, N. & Tarasuk, V. (2002) Homeless "squeegee kids": food insecurity and daily survival. Soc Sci Med 54: 1039-1049.
5. McCarthy, B. & Hagan, J. (1992) Surviving on the Street The Experiences of Homeless Youth. Journal of Adolescent Research 7: 412-430.
6. Bunston, T. & Breton, M. (1990) The eating patterns and problems of homeless women. Women Health 16: 43-62.
7. Tarasuk, V. & Woolcott, L. (1994) Food acquisition practices of homeless adults: insights from a health promotion project. J.Can.Diet.Assoc. 55: 15-19.
8. Tarasuk, V., Dachner, N., & Li, J. (2005). Homeless youth in Toronto are nutritionally vulnerable. *Journal of Nutrition, 135,* 1926-1933.