

Impact of COVID-19 and associated public health responses on health, social well-being and food security on users of Housing First services in Toronto, Canada.

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Land acknowledgment

I welcome everyone and I acknowledge that this land is the ancestral territory and land home of many diverse Inuit, Métis, and First Nations people.

I also acknowledge that Toronto (Canada) is covered by Treaty 13 signed with the Mississaugas of the Credit and the Williams Treaty signed with multiple Mississaugas and Chippewa bands.



Picture source: Charmaine Pwerle (author)

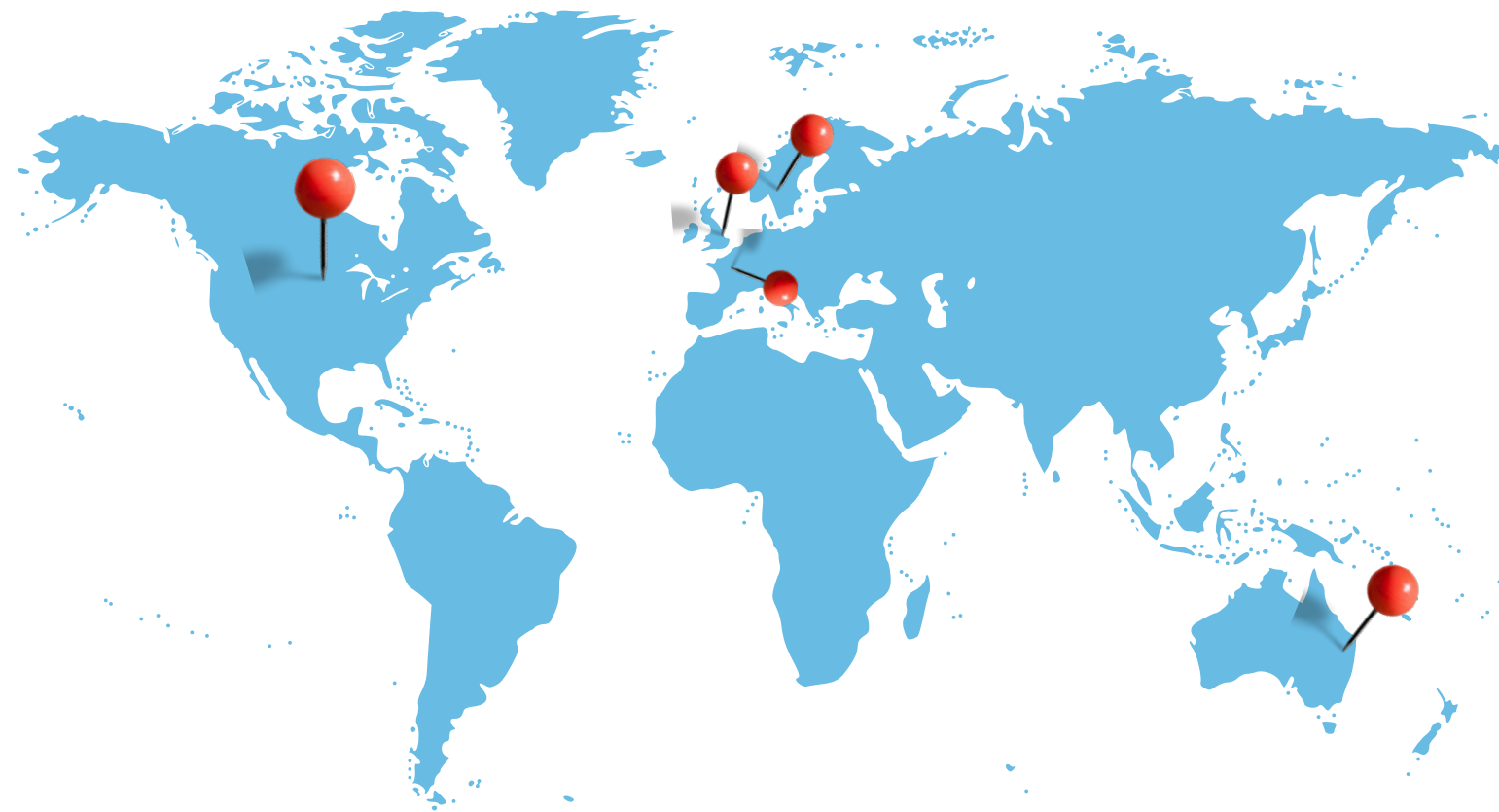
Outline

- Work's background
 - Toronto At Home/Chez (AH/CS) Soi-Quali study: COVID-19 related sub-study (Impact of COVID-19 pandemic on HF Housing First (HF) services, providers, and clients).
 - The response of HF programs during the first wave of the COVID-19 pandemic.

Impact of COVID-19 on the health, social well-being and food security
 - outcomes of HF clients in Toronto during the first wave of the COVID-19 pandemic.
 - Conclusions and recommendations
-

Background (i)

Housing First (HF) programs/interventions: implemented mainly in high-income countries, including **Canada** to help people (adults/youth) exit homelessness.



HF main foundation: facilitate access to housing and social, community and health-supportive services **without readiness conditions.**

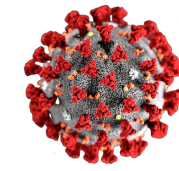
Background (ii)

HF programs/ interventions Effectiveness



- Increase housing instability in short and long-term horizons.
- Improve access to primary care services and reduce the number of visits to the emergency department and hospitalization days.
- Improve multidimensional well-being trajectories: better quality of life, housing stability and community integration while decreasing substance use severity.
- Decrease the number of violence-related traumatic head injuries.

Background (iii)



COVID-19 pandemic



People who have economic, health and social unmet needs and/or experience structural inequities and exclusion have a higher risk of suffering the harmful impacts (including death) of the COVID-19 pandemic than the general population.



Transitioned to independent or supportive housing



Poverty



Community/social exclusion



Physical/mental health issues

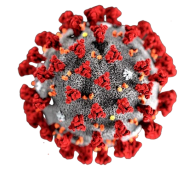


Employment/education barriers



Structural inequities

Background (iv)



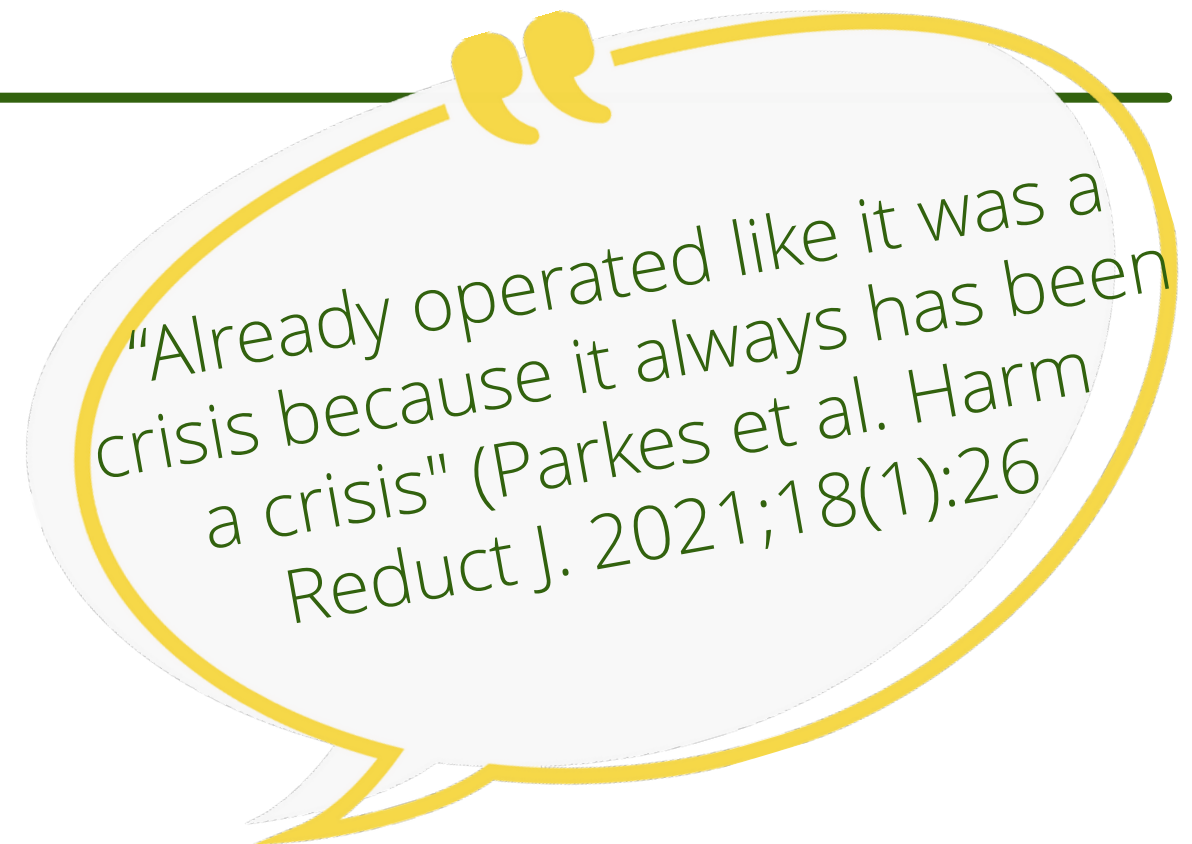
COVID-19 pandemic



Disrupt the response capacity and services provided by
social support services/programs



It further increases the risk of experiencing **negative social, health, housing and economic outcomes** during the pandemic and beyond for socioeconomically excluded



Background (v)

- Identification and understanding of the impacts of public health and social emergencies on different life dimensions of underserved/socioeconomically excluded people.

And

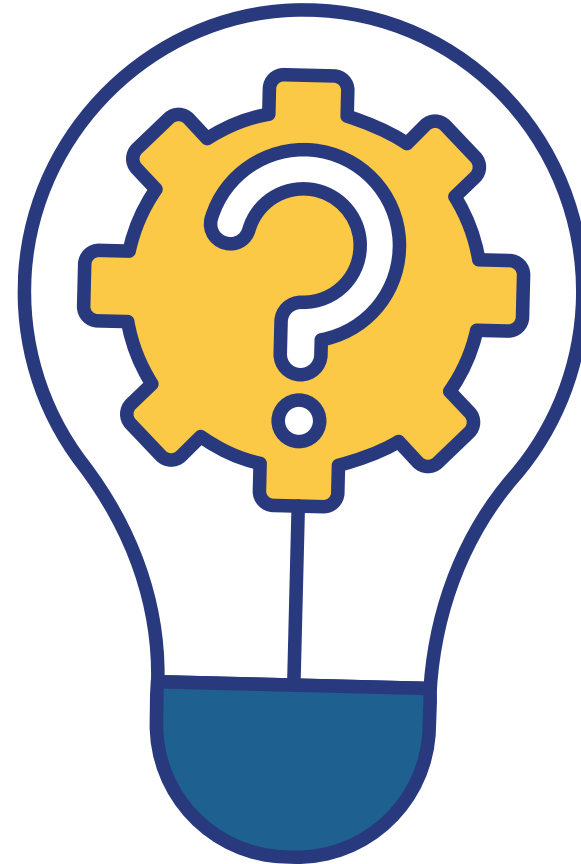
- The challenges, adjustments and response strategies implemented by support services/programs (including HF services) during public and social health crises.



To inform **crisis preparedness and response, and recovery plans** in a more equitable, inclusive, timely and sustainable way.



Conducted a qualitative COVID-19-related study with HF clients and providers during the first wave of COVID-19 in Toronto, Canada



A qualitative COVID-19 related sub-study (i)

A qualitative COVID-19 related sub-study

(embedded in the Toronto AH/CS Soi-Quali study)

(April 2020 - October 2020)

20 participants from Toronto At Home/Chez Soi Study

who received HF-ACT/ICM+Rent Supplements

10 men & 10 women (one transgender)

9 HF Case Managers from three Toronto HF programs

3 men & 6 women



Questions

- On whether the COVID-19 pandemic had impacted their health status, social well-being, leisure activities, food access, and access to health, social, housing and other services.
- If they were receiving financial support and ability to access preventive COVID-19 information.

- On challenges, Frontline HF providers experienced in providing support services to their HF clients.
- What kind of adjustments HF program/HF providers had implemented to support their HF clients.

A qualitative COVID-19 related sub-study (ii)



A qualitative COVID-19 sub-study: Results (i)



HF response, challenges & adjustments:

- On challenges, Frontline HF providers experienced in providing support services to their HF clients.
- What kind of adjustments HF program/HF providers had implemented to support their HF clients.



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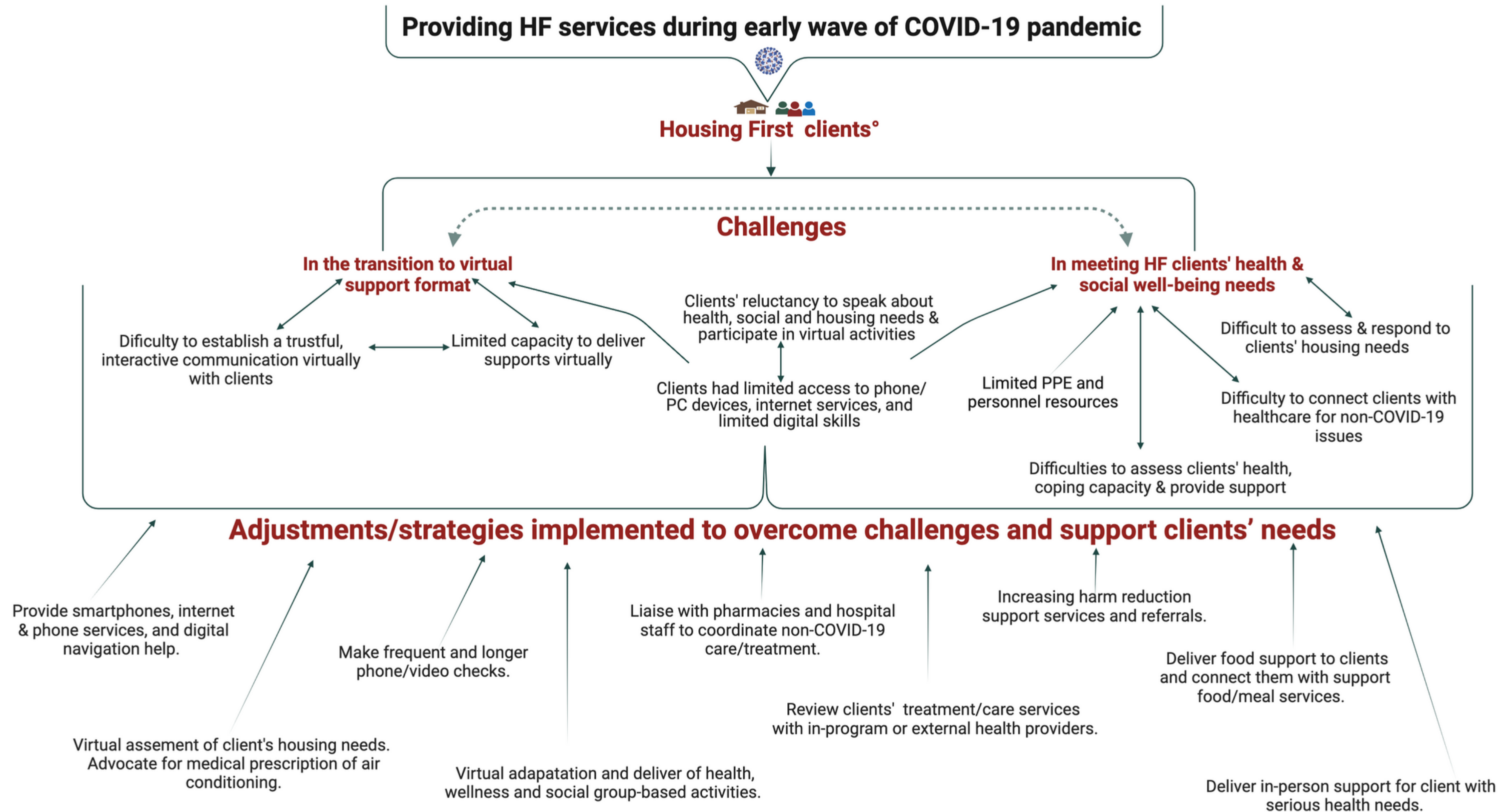
Full title: Providing Housing First services for an underserved population during the early wave of the COVID-19 pandemic: A qualitative study.

Short title: Serving underserved populations during the early wave of the COVID-19 pandemic.

Authors: Cilia Mejia-Lancheros^{1,2*}, James Lachaud¹, Evie Gogosis¹, Naomi Thulien^{1,3}, Vicky Stergioupoulos^{4,5}, George Da Silva¹, Rosane Nisenbaum^{1,3,6}, Patricia O'Campo^{1,6}, Stephen Hwang^{1,3,7}.



Results (ii): HF response, challenges & adjustments



Results (iv): HF response, challenges & adjustments

Providing HF services during early wave of COVID-19 pandemic


Housing First Providers

Adjustments/strategies implemented to overcome challenges and support HF clients' needs

Provide smartphones, internet & phone services, and digital navigation help.

Make frequent and longer phone/video checks.

Virtual assessment of client's housing needs.
Advocate for medical prescription of air conditioning.

Liaise with pharmacies and hospital staff to co-ordinate non-COVID-19 care/treatment.

Review clients' treatment/care services with in-program or external health providers.

Virtual adaptation and deliver of health, wellness and social group-based activities.

Increasing harm reduction support services and referrals.

Deliver food support to clients and connect them with support food/meal services.

Deliver in-person support for client with serious health needs.

A qualitative COVID-19 sub-study: Results (v)



Impact of COVID-19 on HF clients's outcomes:



- Health
- Social well-being
- Food security

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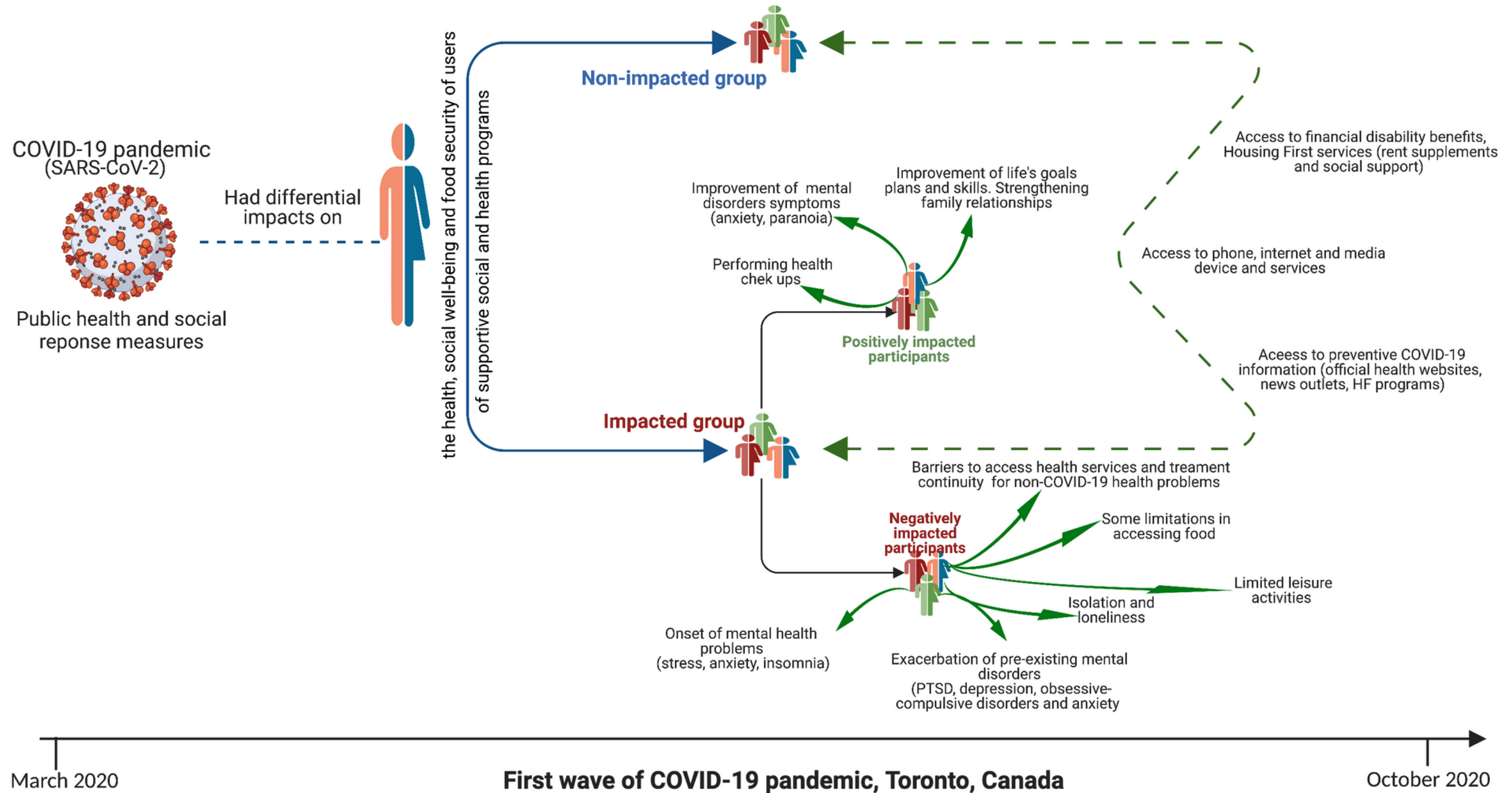
ORIGINAL ARTICLE

Health and Social Care in the community WILEY

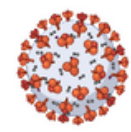
Differential impacts of COVID-19 and associated responses on the health, social well-being and food security of users of supportive social and health programs during the COVID-19 pandemic: A qualitative study

Cilia Mejia-Lancheros MPH, MSc GHP, PhD^{1,2}  | Samira Alfayumi-Zeadna PhD^{1,3}  | James Lachaud PhD^{1,2}  | Patricia O'Campo PhD^{1,4}  | Evie Gogosis MSW¹ | George Da Silva BA¹ | Vicky Stergiopoulos MD^{5,6}  | Stephen W. Hwang MD, MPH^{1,7}  | Naomi Thulien PhD^{1,4} 

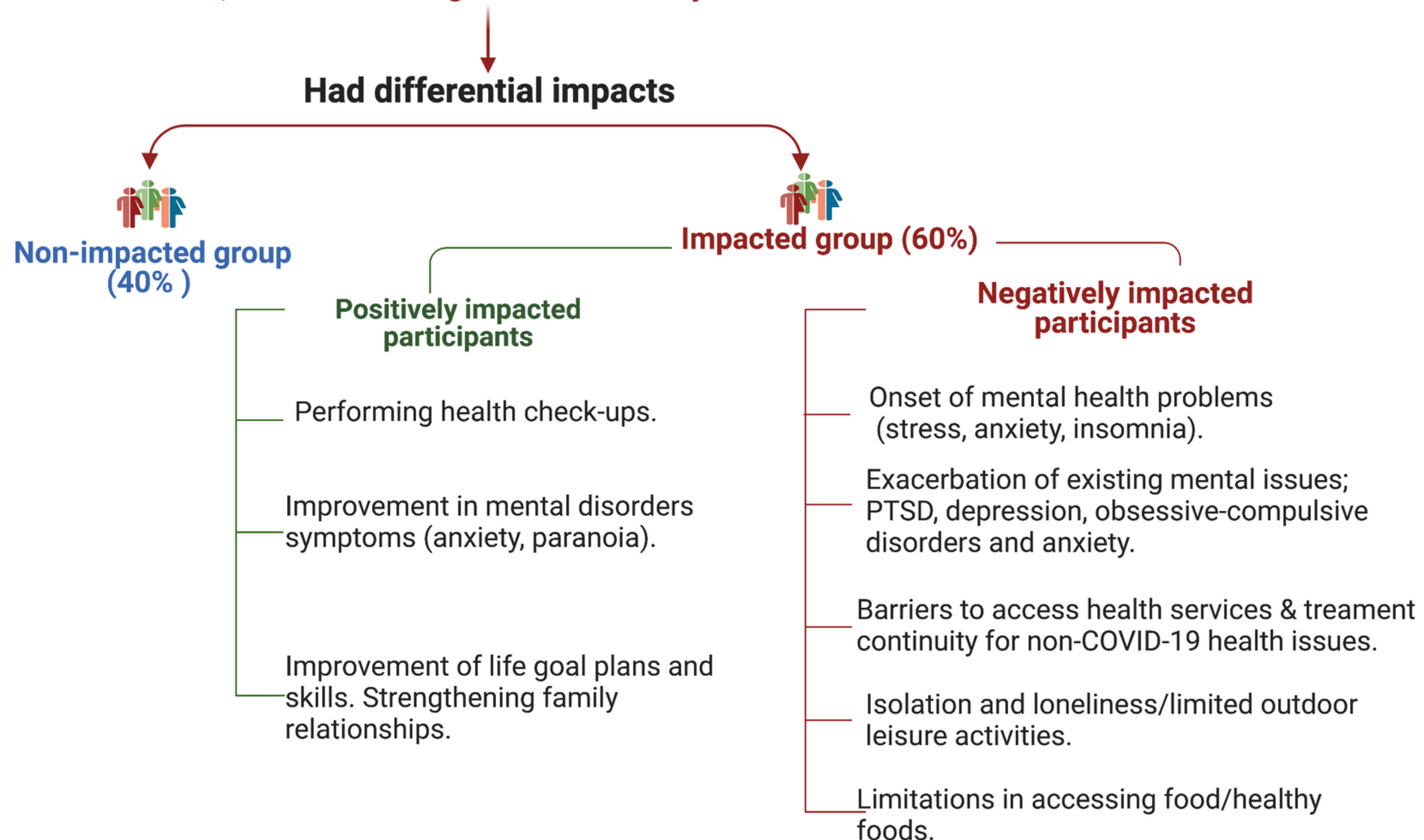
Results (vi): Impact of COVID-19 on HF clients's outcomes



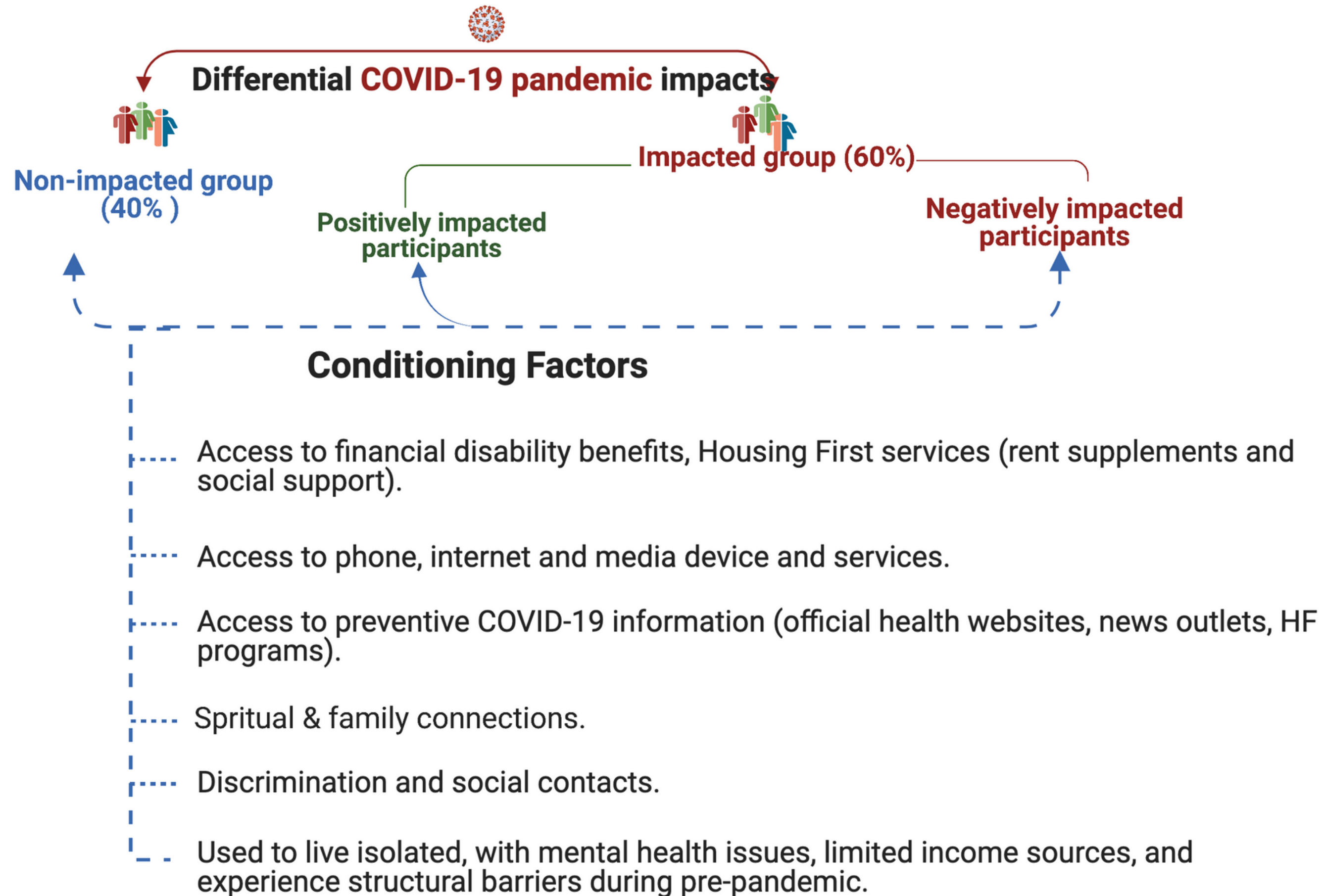
Results (vi): Impact of COVID-19 on HF clients's outcomes



**Impacts of COVID-19 pandemic and public measures(early wave)
on health, social well-being and food security of HF clients**



Results (vii): Impact of COVID-19 on HF clients's outcomes



Conclusions

- HF providers (front-line workers) experienced several interrelated work-, program-, resources-, and structural-related challenges to respond to clients' needs during the early wave of the COVID-19 pandemic in Toronto.
 - HF providers (front-line workers) had a critical role in responding to the social, health, financial and food necessities of HF clients during the early wave of the COVID-19 pandemic in Toronto.
 - The COVID-19 pandemic negatively impacted the mental health, social well-being and food security of some HF clients during the early wave of the COVID-19 pandemic in Toronto.
 - The everyday life of some HF clients during the early wave of the COVID-19 pandemic (Toronto) has been marginally impacted or changed.
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Recommendations (i)

- Appropriate and timely access to social, health and housing services should be guaranteed to meet the housing, health and socioeconomic well-being needs of underserved and socioeconomically excluded people during public health emergencies and beyond.
- More efficient, integrated and equitable emergency response and recovery plans/strategies need to be implemented to support the socio-economically excluded people.
- To enhance access to affordable, reliable and stable virtual communication tools, including telephone, computer and internet services for underserved and socioeconomically excluded people.



Recommendations (ii)

- HF /social support services should evaluate their support response during the COVID-19 pandemic to inform improvements in their emergency response management, readiness and capacity.
- HF /social support services should strengthen inter-agency, private, community and government partnerships to increase support response integration and coordination.
- Local and federal governments should increase specialized mental health services, including substance use and self-harm reduction supports and make them available, easy and safely accessible.
- Expand HF-based services paired with a strong portfolio of employment, training, financial, recreational, health and food services.
- Local and federal governments should increase and sustain the financial support and resources allocated to social, housing, and health organizations.



Acknowledgments

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