

DECEMBER 7, 2019



**WINTER 2020 BEYOND RESEARCH  
CAMPAIGN  
BRAND PORTFOLIO**

**BRONWEN GILL**  
WRITING AND COMMUNICATIONS  
Toronto

## **Client: MAP Centre for Urban Health Solutions**

### *About us:*

The Centre for Urban Health Solutions helps improve the health and livelihood of people facing barriers to good health, like poverty, bias and homelessness. We operate out of Toronto's prestigious St. Michael's Hospital.

Our primary goal is to make it easier for people facing barriers to access the factors that improve health, such as health care and quality housing. We are researchers, but also doctors and health care providers, who work with people facing barriers. We bring real issues back to our centre, then develop and test solutions to reduce barriers and increase access to resources.

We carry out research to help develop and implement realistic responses within health care and social service systems. We also focus on how to change public policy to support our goal of improving access to good health and health care.

Our research covers topics such as homelessness, Indigenous health and wellbeing, addiction, drug policy, and access to health care.

# Client Brief

Client: MAP Centre for Urban Health Solutions	
Project Name: Winter 2020 Beyond Research Campaign	
Contact Name:	Mailing Address:
Phone:	St. Michael’s Hospital
Email:	30 Bond St., Toronto, ON
	M5B 1W8

<b>Overview</b>
<p>MAP Centre for Urban Health Solutions, (formerly the Centre for Urban Health Solutions), is a research centre housed in the Li Ka Shing Knowledge Institute at St. Michael’s Hospital in downtown Toronto. We are dedicated to tackling urban health issues to create a healthier future for all. We have recently taken on a new name and have changed our image and our website. We would like the work of MAP to become more broadly recognized beyond the directly connected research community. We would ultimately like to reach a new audience, of non-researchers, consuming our content and engaging with the ideas and work produced by MAP.</p>
<b>Project Objective</b>
<p>The objective of this project is to share and promote the work of MAP Centre for Urban Health Solutions, with 1000 members of our new target audience, as evidenced by website and social media visits and engagement, by the end of 2020.</p>
<b>Target Audience</b>
<p>Our target audience for this campaign are adults, over 18 years old, non-researchers, interested in social issues and in the health of marginalized people. They are people who see and read about social and health issues, and wonder what they can do to change things. Here are some examples of our the target audience:</p> <p>Charles is a 35-year-old financial manager living in Burlington (Millennial) who has just started working in downtown Toronto. He’s married with two young children. He notices homeless people sleeping on the sidewalk vents on his walk to the office from Union Station. He is curious about the cost of homelessness to society, and wonders if there is a more effective way to improve this situation.</p>

Angele is an 18-year-old psychology student at the University of Toronto. She moved to Toronto from a smaller city in Ontario. She is Gen Z and very comfortable in the digital world. She's been learning about youth homelessness in one of her courses. She wonders what the issues are, how these kids end up on the street, and if there is any way to help.

Sonia is a 45-year-old woman (Gen X), divorced, with two children in their teens. She lives and works in the suburbs of Toronto. She has heard about the opioid crisis on tv and in the news, but wonders if there is any way to make a real difference. She is tech-savvy with the help of her kids.

### **Focus of the Campaign**

The focus of the campaign is to increase the engagement of a new target audience of with the work MAP-CUHS is doing. We want average people outside of the research and clinical world to gain a new understanding of urban health issues, and engage with them through other actions in their lives: sharing information, writing letters, voting, donating, and volunteering.

### **Who, What, Where, When, Why**

We want our target audience to engage with the content of MAP-CUHS on our blog and social feeds, Facebook, Twitter, and Instagram. We want them to consume our content and share with others. We want them to take on some new behaviours, including sharing the information, writing letters, voting, volunteering and donating.

We want our target audience to consume our content and change behaviours so that our work has more relevance, and begins to prove to make actionable change.

### **Attitude**

The overall style of the brand is professional, but accessible. We have the research and scientific information, but want to share it in a casual, friendly, helpful way.

We want to make people feel:

Hopeful, Inspired, Informed, Prepared, Powerful, Able, Connected

### **Key Message**

MAP Centre for Urban Health Solutions is doing research that can improve the health of marginalized people, and reduce health and social costs for all of us. With some thoughtful and well-researched

studies we can improve the health and wellbeing of the most vulnerable, and improve the health of

### **Deliverables and Format**

Three weekly blog posts, to be published on the MAP home page. One will be in listicle format, one under 600 words, one under 1500 words. At least one of these will translate one of MAP's research studies into casual, accessible language.

One blog post will include multimedia.

Each blog post will be SEO optimized, with a keyword list.

Three social media posts, for each of: Twitter, Facebook and Instagram

### **Schedule**

Audience Research	November 2019
Research for content creation	November 2019
Create blog content	November-December 2019
Publish Blog Post #1	December 2, 2019
Publish Blog Post #2	December 9, 2019
Publish Blog Post #3	December 16, 2019
Create social content	November 2019
Post to Twitter	December 2, 2019
Post to Facebook	December 2, 2019
Post to Instagram	December 2, 2019
Campaign completion	December 31, 2019

### **Budget**

Staff costs

1 month part-time work: \$5000

## Blog Posts

Blog Post #1: December 2, 2019

### It's Cold Today: The Top 10 Things Homeless People Need

Winter is here. You know by the frosty mornings, the snow falling, and the wet piles of blankets covering the ventilation grates on the sidewalks downtown. Yes, homeless people often stay outside through the coldest and most inclement weather. It's upsetting and hard to understand, but after a while we become immune to it. We'd still like to help though, in our hearts. Here's a good place to start.

What do homeless people actually need? I've compiled a list of the top 10 things homeless people need. Number one may surprise you.

#### 10. Extra pairs of socks

Their feet get wet, and stay cold, with all the walking homeless people do, from one meal program or shelter to another. They need extra pairs of warm, dry socks to prevent them from getting frostbite and damaging their toes and feet.

#### 9. Winter boots

As I said, homeless people do a lot of walking, and sneakers just won't cut it in the winter. They can't afford to be lazy when they're trying to survive the elements. Winter boots are a warm and waterproof way to protect their feet.

#### 8. A sleeping bag

They've chosen to sleep out on a grate, uncovered, for any one of several reasons: to make the most of the damp, slightly warm air, to make a statement, to avoid the issues that can arise in even the best-run shelters. A warm sleeping bag will help them make any place they choose to sleep more comfortable.

#### 7. A parka or winter coat

Not surprisingly, the coldest weather is slightly more bearable wearing a proper coat or parka. Homeless people need protection from the elements, protection from exposure to the cold, damp weather.

#### 6. Warm clothes

The same goes for warm clothes. When you're often out walking in the elements, you need warm clothes to protect you from the extreme cold weather.

#### 5. Mitts and hats

As your mother or someone else who cares about you probably always told you, we lose most of our heat through our heads. And from experience, you know that our extremities get cold first. Homeless people need mitts and hats to protect them from losing body heat, and keep them from getting frostbite.

#### 4. Psychological counselling

Here's where it begins to get real. Most homeless people are living with psychological issues, haunted by a difficult and painful past. They have faced difficult personal circumstances, discrimination, and traumatic life events. They may be dealing with mental health issues, that they may never have received treatment for. They need someone who can listen and provide them with real help.

#### 3. Addictions counselling

Dealing with psychological and emotional trauma often leads to addictive behaviour in an attempt to self-medicate and make the pain go away. Homeless people often face concurrent mental health and addiction issues, which require comprehensive counselling. This is a crucial step along their path to recovery.

#### 2. Regular meals

When you're hungry, you can't think about anything else. And when you have mental illness and addictions, healthy food can help you heal. Homeless people need to be able to count on the fact that they have access to regular, healthy meals. This is important for security, stability and healing.

#### 1. A home

They may not be able to pay the rent, or manage the bills, but homeless people need somewhere stable to live. This is the best way to reduce health and social service costs, and the best way to make homeless people healthier. Subsidized or assisted housing provides the stability they need at a much lower cost to society than continuing to patch up the wounds from living a homeless life.

#### What can you do?

You can help by donating your money and time to homeless shelters and other social service organizations. But, more importantly, you can write a letter to your elected officials asking them to support initiatives like MAP's [At Home/Chez Sois](#) program. This is a "Housing First" program that offers rent supplements and case management support as a *first* step to recovery, rather than requiring people to seek mental health and addictions treatment first. Find out more about the At Home program at <https://maphealth.ca/at-home-chez-soi/>

#### SEO Keywords for Blog post #1:

Search: "homelessness"

These relevant searches also come up:

"homelessness in Toronto"

"homelessness definition"

Keywords that come up in the top hits:

- "About"
- "What is"
- "Facts"

People also ask:

- “What is homelessness?”
- “What are the 3 types of homelessness?”
- “What is the main cause of homelessness?”
- “What are the 4 types of homelessness?”
- “What do you do if your (sic) homeless?”

Blog post #2: December 2, 2019

## “Honouring Lives”: Toronto’s Indigenous People are Dying Too Young

A Brief Summary of the ["Honouring Lives"](#) Report from MAP-CUHS

“Yes, this kind of premature death is preventable. I don’t know the answer to it but I know that we’re responsible to change it. I don’t feel like there was any other outcome in a situation the way the system currently exists. When I think of [Gordon] I see a little boy [...] a little boy that was ripped from his community and never repaired and did his best to find the ways that he could find things that worked to cope.” — Key Informant

Gordon was one of five Indigenous people in Toronto who died far too young. In 2017, researchers from [Well Living House](#) and [Na-Me-Res](#) (Native Men’s Residence), working with the Centre for Urban Health Solutions, did a pilot project about these five people. They called the project a “verbal autopsy” of each of them, honouring their lives, and investigating their deaths.

The researchers interviewed service providers, friends, and family members of these five people, who died between 2014 and 2017. The goal of this project was to explore the root causes and contexts behind these premature and preventable deaths, and the effects on their family and friends.

### *Verbal Autopsies*

Researchers suspected that the support community understood what was at the root of these tragic lives, lost too soon, and they set about finding information to confirm or disprove this understanding. Through these “verbal autopsies”, they found that the causes of death for these five people could essentially be traced back to the historical and ongoing processes of colonization, racism, and the attempt to assimilate Indigenous people into Canadian society.

They describe colonization as the systematic practice of separating people from their families, their communities, and their culture. It is a practice of separating people from their identities, thereby taking away their power. The researchers also found that racism against Indigenous people, and against these five people in particular, happens at an individual and systemic level. These five people were affected by racism personally, and through the larger structures of their lives.





A homeless person panhandles for money during an extreme cold weather alert for the City of Toronto on Monday, December 13, 2010. (THE CANADIAN PRESS/Nathan Denette)

### *Recommendations*

These research findings can be used to inform policy and service development at all levels of government. There are meaningful changes to be made in Emergency Departments, drop-in centres, and community organizations. There are also significant implications for policies on child and family services, mental health and addictions services, and housing.

The research made it clear there is work to be done in several areas of service and policy collaboration on Indigenous issues. One key recommendation is that community services in Toronto need to include culturally safe grief counselling and support for Indigenous people who are homeless or living in insecure housing. The second key recommendation is that the provincial health system needs to deal with racism and discrimination in Emergency Departments.

Each of the five subjects in this study was a valued member of their community, and they are deeply missed. This study honours their lives by telling their stories. It tells their stories, but also uncovers the tragic details of the contextual factors that made their lives so difficult and contributed to their premature deaths: colonialism, trauma, and child apprehension. We can change the outcome for Indigenous people living difficult lives and reduce the risk that they will die too young.

### **SEO Keywords for Blog Post #2:**

Search: "indigenous"

These relevant searches also come up:

## How to Save Money by Solving Homelessness

### MAP-CUHS Researchers Are Helping to Find Solutions

Take a walk down any street in our downtown core, and it's clear that homelessness is an issue in Toronto. We'd like to help, right? But we don't really know what to do. Isn't helping the homeless just going to cost us more money? Don't people just need to work harder? Some of the research done by [MAP Centre for Urban Health Solutions](#) and others leads us to the conclusion that solving homelessness will actually save us money. Let's take a closer look.

#### *What is Homelessness?*

We can start by asking, "what is homelessness?" I suppose it seems fairly obvious, but for a clear definition we can visit the "[homeless hub](#)", the online channel of the Canadian Observatory on Homelessness (COH). The COH is the largest national research institute devoted to homelessness in Canada, and MAP Centre for Urban Health Solutions provides some key research to the COH.

On the "homeless hub", [homelessness](#) is defined as the situation where a person, or family, or even a community does not have safe, permanent, stable housing. They also don't have the immediate prospect of it, or the means or ability to acquire housing. We also learn that in Canada, people who are homeless don't belong to a distinct population. The category is fluid, and the line between being homeless and not being homeless is blurry. Many people move in and out of homelessness, sleeping "rough" in a car or a park, moving to a shelter, into housing, in with friends, then back to the street.<sup>1</sup>

And it may surprise many of us to learn that [the homeless are not all the same](#). In fact, people and families who experience homelessness may have little in common with one another, aside from the fact that they are extremely vulnerable and don't have the income and supports to stay in housing.<sup>2</sup>

#### *What Causes Homelessness?*

How does the situation get to be so serious for some people? What happens in a person's life that they end up living on the street, in a park, or in a shelter? Again, the "homeless hub" has a great deal of information for us about how people end up experiencing homelessness. They say that the causes of homelessness reflect an interplay of several different factors: structural factors, systems failures and individual circumstances. Homelessness is usually the result of a number of these factors, rather than the result of a single cause.<sup>3</sup>

#### *The Economy and Society*

The "homeless hub" provides more details about structural factors as a contributor to the crisis. Structural factors are the issues within our economy and society that mean certain people are unable to stay in stable housing. The primary structural factors are inadequate income, lack of

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<sup>1</sup> <https://www.homelesshub.ca/about-homelessness/homelessness-101/what-homelessness>

<sup>2</sup> Ibid.

<sup>3</sup> <https://www.homelesshub.ca/about-homelessness/homelessness-101/causes-homelessness>.

access to affordable housing, lack of health supports, and the experience of discrimination. Changes in the economy nationally and locally can make it impossible for people to earn enough money to pay for food, housing and the necessities of life.<sup>4</sup>

### *Housing is Too Expensive*

As well, it's clear that there is a critical shortage of affordable, safe, stable housing, and this directly contributes to homelessness. When a family is spending more than 50% of their income on housing, they are defined as being in "core need". This situation puts them at serious risk of homelessness. Even when families are spending more than 30% of their income on housing, this puts them at risk of homelessness.<sup>5</sup>

The lack of affordable housing is the primary issue, but discrimination makes it worse. It's closely related because discrimination limits access to jobs, housing, justice and support services. Racial and sexual minorities are particularly susceptible to discrimination.<sup>6</sup>

### *When Support Systems Fail*

A third set of factors that contribute to the tragedy of homelessness are failures in the support system. We have systems set up in our society that are meant to support people through difficult times. When these systems fail, vulnerable people end up homeless. Some of the failures look like this: difficult transitions from child welfare services, and inadequate discharge planning from the hospital; they also include inadequate discharge planning from corrections services (jails and other institutions) and from mental health and addiction services; finally, they include a lack of support for immigrants and refugees.<sup>7</sup>

### *Difficult Lives*

Finally, people can have difficult personal lives, and experience issues in circumstance that can increase their risk of experiencing homelessness. Traumatic things happen to people-house fire, job loss-that change their life trajectories. People can also experience personal crises such as family break-up and domestic violence. They can face mental health and addiction challenges, including brain injury and fetal alcohol syndrome. These types of challenges can be both a cause and a consequence of homelessness.

### *Domestic Violence*

Domestic violence is a serious problem, and there is an undeniable connection between this and homelessness. Family violence affects 237 people per 100,000 (Statistics Canada, 2016), and can force people to leave home without proper supports in place. Young people, and women with children are at especially high risk. Women who are victims of violence and live in poverty are often forced to choose between abusive relationships and homelessness. Young people who are victims of sexual, physical or psychological abuse often end up experiencing homelessness. Seniors can also be at high risk.<sup>8</sup>

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<sup>4</sup> <https://www.homelesshub.ca/about-homelessness/homelessness-101/causes-homelessness>

<sup>5</sup> Ibid.

<sup>6</sup> Ibid.

<sup>7</sup> Ibid.

<sup>8</sup> <https://www.homelesshub.ca/about-homelessness/homelessness-101/causes-homelessness>

### How Much Does Homelessness Cost Society?

There have been a number of studies analyzing the cost of homelessness to society. As of 2013, [homelessness cost the Canadian economy \\$7.05 billion annually](#) (up from \$4.5-6 billion in 2007). It does cost us money to ignore homelessness. If we continue with the status quo there are the costs of emergency shelters and community supports, but there are also the costs of emergency services, health care and the criminal justice system.

#### AVERAGE MONTHLY COST OF HOUSING SOMEONE WHILE HOMELESS



Source:

Homeless Hub, 2019. <https://www.homelesshub.ca/about-homelessness/homelessness-101/cost-analysis-homelessness>

How much cheaper is it to house people rather than allow the emergency supports, health and criminal justice systems look after the problem? Significant research has been done comparing the cost of housing someone in the shelter system or jail, to the cost of housing them in social or supportive housing, and the difference is shocking. In a [2005 study by Pomeroy](#) they found that, across four Canadian cities, institutional housing (jails, hospitals etc.) cost \$66,000-\$120,000 annually, and emergency shelters cost \$13,000-\$42,000 annually. Supportive and transitional housing, on the other hand, cost \$13,000-\$18,000, and affordable housing without supports was \$5,000-\$8,000. This could be a savings of between \$10 to \$100 thousand per person per year. There is no question-we save money by providing a person with housing rather than just relying on emergency systems to deal with the fallout.

And this analysis simply considered the economic costs. It goes without saying that providing people with housing is a more humane response, as well as being cheaper. The longer people live with homelessness the more likely they are to suffer with mental health and addiction issues, and other health issues. Because of this they are at high risk of dying too young.

### Housing with No Preconditions

The other part of the problem, however, is that most housing programs are contingent upon people first being enrolled in treatment for mental health and addiction issues. Imagine how difficult it is to make to appointments, manage your medication, and follow healthy routines when you don't know where you're going to sleep at night. The "Housing First" model, on the other hand, begins with rent supplements and case management support as a *first* step toward recovery.

The MAP Centre for Urban Health Solutions used the Housing First model to carry out the [At Home/Chez Sois](#) study for people with mental health issues suffering from homelessness. In the first phase of this study they found that without stable housing, these individuals cost society an average of \$53,144 annually. In their paper published in 2019, they came to several more conclusions: participants spent more days in stable housing than those who only received the usual services in the community; and homeless adults with a high need for mental health services benefit most from Housing First. They did not find a difference in how participants felt about their quality of life and their community activities, nor a change in substance use.

*How Can We Help People AND Save Money?*

If we look at the research from the [At Home/Chez Soi](#) study by the MAP Centre for Urban Health Solutions, and other studies, we can see that there are very positive results. We can save money, and do the right thing as a society, if we put homeless people into housing as a first step. And worry about mental health and addictions counselling later.

### **SEO Keywords for Blog Post #3:**

Search: “what causes homelessness?”

These relevant searches also come up:

- “what causes homelessness in Canada?”
- “what causes homelessness in a society?”

Search: “homeless”

These relevant searches also come up:

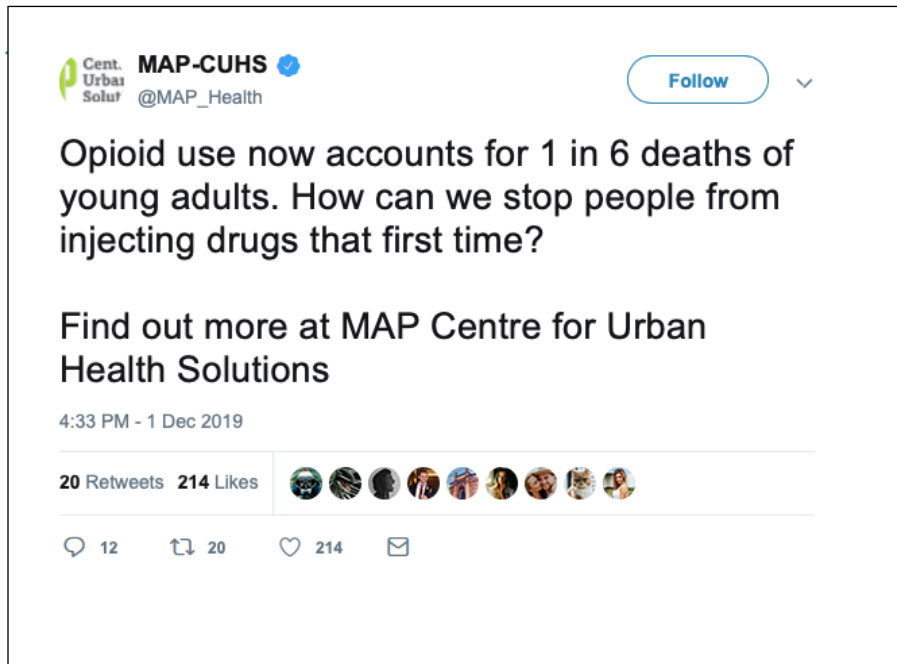
“homeless youth”

“homeless people”

“homeless shelter Toronto”

## Social Media

Twitter Post: December 1, 2019



Instagram Post: December 9, 2019

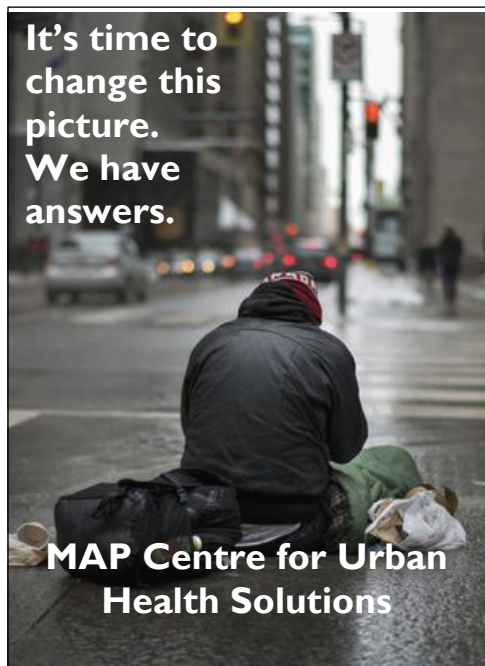


Photo Credit: Fred Lum/The Globe and Mail.

<https://www.theglobeandmail.com/news/national/comprehensive-statistics-lacking-on-number-of-homeless-people-in-canada/article33426865/>

Facebook Post: December 16, 2019



Fentanyl was responsible for an astounding **548%** rise in deaths from overdose between 2006 and 2015. Now people who inject opioids are more likely to die of overdose than anyone else.

We're going to find out what **STOPS** people from injecting drugs in the first place. **READ MORE**

Photo credit:

<https://www.cnn.com/2018/04/13/health/opioid-benzodiazepine-prescription-study/index.html>