BE IT RESOLVED that the Canadian Nurses Association (CNA) work with nursing, health and human services, and civil society allies to stop the decline in overall federal housing investments while continuing to advocate for the development of an integrated, comprehensive, national housing strategy.

Submitted by: Registered Nurses’ Association of Ontario (RNAO)

Rationale: In their nursing practice and daily lives across Canada, registered nurses, nurse practitioners and nursing students witness the premature deaths, adverse health outcomes and suffering that accompanies poverty. As documented by the CNA-commissioned paper Better Health, four major and intersecting health determinants that generate and reproduce health inequities across the life span are income, food insecurity, housing and social exclusion. Because CNA members understand the evidence and consequent importance of healthy public policies to address the root causes of health inequities, resolutions on affordable housing, homelessness and poverty were passed at CNA’s annual meetings in 2005, 2009, 2010 and 2011.

While the public health and public policy rationales for transformative action on poverty and affordable housing become more clear, people’s health deteriorates and federal government policy is moving in the wrong direction. The loss of the long-form mandatory census and other data gaps make it increasingly difficult to precisely understand the full scope of the problem. It is estimated that over 35,000 Canadians are homeless on any given night and over 235,000 different Canadians experience homelessness in a year. An estimated 733,275 renter households (18 per cent of all Canadian renter households) experience “extreme housing affordability problems” such that they are at risk of homelessness, as they have low income and are spending more than 50 per cent of it on rent.

Where we do have reliable information, the situation is getting worse. To use Ontario as an example, the most recent Ontario Non-Profit Housing Association statistics indicate that, at the end of 2013, there were 165,069 households waiting for rent-geared-to-income housing. Average provincial waiting times for rent-geared-to-income housing continue to increase, from 3.2 years in 2012 to 3.89 years in 2013. Peel region has the longest overall waiting time at 8.39 years. For every household occupied, two cancel their applications and three more apply.

Over the past 25 years, Canada’s population has increased by almost 30 per cent, while the annual national investment in housing has decreased by over 46 per cent. In 1982, all levels of government combined had funded 20,450 new social housing units annually, which steeply dropped to around 1,000 units annually in 1995. While the number of new social housing units increased to 4,393 annually in 2006, the cumulative impact of cancellation of funding for affordable housing means more than 100,000 units of supportive housing have not been built over the last 20 years. Federal per capita spending on low-income housing (adjusted for inflation in 2013 dollars) dropped from an average of $115 per person in 1989 to just over $60 per person in 2013. While there has been time-limited, federal housing investments in recent years (such as $1 billion for affordable housing in 2010 and $2 billion for new housing and
homelessness initiatives as part of the 2009 stimulus spending), the overall trajectory is a “downward slide.”\textsuperscript{18}

With a federal election on the horizon in 2015, addressing the basic human right and need for decent and affordable housing must remain an advocacy priority for CNA. Without action, federal operating agreements that support rent-geared-to-income subsidies for low-income households in cooperative, non-profit and social housing, which are scheduled to end over the next 20 years, will put 365,000 additional Canadians at risk of homelessness.\textsuperscript{19} At present about 36 per cent of Toronto Community Housing’s residential portfolio is considered to be in poor or critical condition.\textsuperscript{20} Without substantive investments by federal, provincial and municipal governments to repair this housing stock, over 90 per cent of these residential units will be in poor, critical or closed condition by 2043.\textsuperscript{21} Investing in good to fair housing stock would have economic, social, environmental and health impacts, including preventing 544,000 instances of resident illnesses over 30 years with better housing conditions.\textsuperscript{22} Every $10 spent on housing and supports for chronically homeless individuals results in a $21.72 savings related to health care, social and housing supports and involvement with the justice system.\textsuperscript{23} Investing in housing is the right thing to do for health, human rights, public policy and economic reasons.

**Relevance to CNA’s mission and goals:** Advancing this resolution will serve CNA’s mission of advocating for healthy public policy and serving the public interest. It will assist with the goal of advancing leadership for nursing and for health and will shape healthy public policy at all levels of government. This resolution is consistent with CNA’s belief that RNs “have both a professional and ethical responsibility to promote health equity through action on the social determinants of health.”\textsuperscript{24}

**Key stakeholders:**
- CNA’s jurisdictional members and their interest groups
- Federal and provincial governments
- Health and human services providers and their organizations
- Civil society groups and movements
- The general public\textsuperscript{25}

**Estimated resources required or expected outcomes:** The *Alternative Federal Budget 2015* has recommended stopping the sharp decline in overall federal housing investments by increasing federal spending by $2 billion annually for affordable and social housing programs with related programs.\textsuperscript{26} Researchers at the Homeless Hub have proposed increasing federal spending from projected commitments of $2.09 billion to $3.75 billion in 2015-2016, with a total investment of $44 billion over ten years, in order to drastically reduce chronic and episodic homelessness.\textsuperscript{27} This proposal would raise per capita federal investment in housing to approximately $106 per Canadian annually, which is still less than what was invested in 1989.\textsuperscript{28} CNA would be expected to maximize its current policy/political action resources and to expand where necessary.

**References:**

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9 Gaetz et al., p. 5.


11 ONPHA, 2014.

12 ONPHA, 2014.

13 ONPHA, 2014.

14 Gaetz et al.

15 Gaetz et al.

16 Gaetz et al.

17 Gaetz et al.

18 Gaetz et al., p. 4.

19 Gaetz et al.


22 CCEA.

23 Gaetz et al.


26 CCPA.

27 Gaetz et al.

28 Gaetz et al.