Towards Healthy Homes for All:
RentSafe Summary and Recommendations

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RentSafe Project Team

Kathy Cooper*  Allison Murray*
Karen SchlachtΔ  Erica Phipps*
Samantha DavidsonΔ  Carlos Sanchez Pimienta+
Helen Doyle*  Beth Schilling
Bob Hart*  Randi Wang+
Rachel Hayton+  Olanna WhiteΔ
Lynn Marshall  Caryn Thompson*
Jeff Masuda*  Lukas Mortensen-Truscott+
Jill McDowellΔ  Vittoria Vecchiarelli*
Amanda McManamanΔ

* Writing team  + Student research assistants, Queen’s University
Δ Past member of RentSafe Project Team

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RentSafe is an intersectoral initiative, led by the Canadian Partnership for Children’s Health and Environment (CPCHE), that aims to address unhealthy housing conditions affecting tenants living on low income in both urban and rural communities in Ontario. With active involvement of public health, legal aid clinics, municipal property standards/by-law enforcement, and social service sectors as well as housing providers and tenants, RentSafe aims to build awareness and capacity across sectors so that tenants, when faced with mould, pests, lead, radon and other unhealthy housing conditions, are better able to get the support they need. This 3-year initiative, launched in December 2014, is funded by the Ontario Trillium Foundation, with the Environmental Health Institute of Canada serving as the lead CPCHE partner organization. The RentSafe Project Team is actively involved in implementing the RentSafe initiative. A RentSafe Advisory Committee serves to broaden the base of expertise and experience brought to bear on the project, and to facilitate sustained engagement of key organizations and sectors.

For more information:
Erica Phipps, Executive Director, CPCHE
erica@healthyenvironmentforkids.ca
www.healthyenvironmentforkids.ca/collections/rentsafe
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About This Document

This document presents the findings of research efforts conducted by the RentSafe Project Team over the past three years, work that has been led and supported by multiple partner organizations and sectors. It reflects the input and perspectives of more than 1000 people across the province who have participated in RentSafe via online surveys, focus groups, and intersectoral meetings, retreats and events, as well as the work of the RentSafe Advisory Committee.

This summary report is supported by more detailed information available online (www.rentsafe.ca). Work continues among RentSafe partners as we collectively build our understanding of the underlying drivers and circumstances that perpetuate unhealthy housing in Ontario, and the potential solution pathways that will lead to healthy housing for all.
Summary Overview

Housing is a basic need and is internationally recognized as a human right.\(^1\,2\) Housing provides shelter, security, a space in which family life can happen and where children grow up and thrive. Yet, for many people, their housing jeopardizes their health and well-being.

Unfit conditions in housing, disproportionately experienced by people living in low income or other marginalizing circumstances, are not only a source of discomfort and inconvenience, but also negatively affect people’s physical and mental health. Multiple chronic diseases and acute effects, including asthma, respiratory conditions, allergies, chemical sensitivities, as well as cardiovascular disease and its numerous risk factors can be exacerbated or, in some cases caused, by poverty, stress, and living in unhealthy conditions.\(^3\)

Nearly 1.9 million people in Ontario, or 13.8 percent of the population, live on low income, defined as a household income of less than $38,920 per year.\(^4\,5\) Nearly 1 in 5 (19.6%) of these people are children.\(^2\) 13.4 percent of Ontarians are in core housing need, defined as households with housing that does not meet one or more of the standards for adequacy, suitability and/or affordability, and that have to spend 30 percent or more of their income to access acceptable local housing.\(^6\) Households in the lowest-income quintile accounted for 81 percent of all households that do not meet all of the adequacy, suitability and affordability standards in 2011.\(^7\) Families and individuals on low income are faced with difficult choices in allocating scarce resources for food, clothing, shelter, heat and other utilities, health care and medications, transportation, and investments in training or education. Many have to settle for whatever housing is available that they can afford.

Ontario’s housing stock is also aging. Nearly 3 out of 10 (27.2%) of the occupied private dwellings were built in 1960 or before\(^8\) and 322,735 units (6.6%) are in need of major repair. More than half of Ontario’s renters (51.6%) live in a unit below one or more housing standards.

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\(^3\) For more information, see the [RentSafe Background Paper on Housing-Related Health Risks:](www.healthyenvironmentforkids.ca/collections/rentsafe)


The Ontario-wide RentSafe initiative, led by the Canadian Partnership for Children’s Health and Environment (CPCHE), conducted three years of baseline research on existing capacities and challenges related to addressing unfit housing conditions experienced by people living in low-income rental housing. The aim was to provide a solid foundation for RentSafe’s efforts to find ways in which all relevant stakeholders – tenants, landlords, professional sectors and service providers, and policy makers – can better work together toward the goal of healthy housing for all. The RentSafe Project Team and our many collaborators explored the types of conditions that tenants are experiencing, including mould, pests, structural disrepair, lead, and poor air quality among others, as well as their experiences in trying to get help. We worked with various professional sectors – public health, legal aid clinics, frontline social services, and municipal property standards enforcement officers – to better understand existing institutional capacity to respond adequately to unhealthy housing concerns and to do so in ways that are coordinated, supportive and effective. We interacted with housing providers about the challenges of maintaining healthy housing conditions, in particular the circumstances of small-scale landlords. We also reviewed existing laws and regulations in Ontario, with a view to seeing how their application could be improved and where there are gaps that need to be filled.

**What is RentSafe?**

RentSafe is an intersectoral initiative, led by the Canadian Partnership for Children’s Health and Environment (CPCHE), that aims to address unhealthy housing conditions affecting tenants living on low income in both urban and rural communities in Ontario. With active involvement of public health, legal aid clinics, municipal property standards/by-law enforcement, and social service sectors as well as housing providers and tenants, RentSafe aims to build awareness and capacity across sectors so that tenants, when faced with mould, pests, lead, radon and other unhealthy housing conditions, are better able to get the support they need. Ultimately, the goal of RentSafe is to support the right to healthy homes for all.

[www.rentsafe.ca](http://www.rentsafe.ca) / [www.logementsain.ca](http://www.logementsain.ca)

Through this research, which is summarized in Section 1, we heard about the disrupted lives of tenants who experience unhealthy and unsafe conditions in their homes, including the stigma, fear, and/or frustrations that some tenants experience when trying to get problems resolved. Input from tenants and small-scale landlords alike revealed a need for greater awareness and clarity on the respective rights and responsibilities of tenants and housing providers, and the challenges posed by financial limitations. Input from professionals in public health, legal aid, and frontline social services suggest that insufficient resources, intersectoral connections, and capacity for follow-up can make it difficult for agency staff to adequately respond to housing habitability concerns. Many professionals who responded to RentSafe surveys indicated a lack of confidence that the referrals they make will result in resolution of the problem (49 percent of respondents from legal aid clinics, 29 percent of frontline worker respondents, and 14 percent of public health respondents).

RentSafe partners have also been working to support information sharing, capacity building, intersectoral integration, and advocacy efforts. For example, the RentSafe video for frontline workers aims to support and catalyse integrated efforts among local agencies and service providers to better address concerns about unhealthy housing conditions in their communities. A suite of three videos created by RentSafe
tenant advocates underscores the human dimensions of the problem, including the need to confront stigma and to challenge assumptions about what constitutes adequate housing for people living in marginalized circumstances. A network of RentSafe tenants’ rights advocates is being established to advance those aims. RentSafe partners are using their leadership roles within relevant professional sectors to trigger critical and creative thinking about ways to better support healthy housing conditions by presenting at conferences and webinars and engaging in other knowledge exchange opportunities. These RentSafe outreach, capacity building and intersectoral integration efforts are summarized in Section 2.

Throughout these research and capacity building efforts, the RentSafe Project Team has been gathering ideas and insights about what is needed to ensure healthy and dignified homes for all residents of Ontario. Vital to this effort has been the wisdom and input of the multi-stakeholder RentSafe Advisory Committee (Annex 1) including discussions at their October 2015 meeting in Toronto and subsequent conversations; the views and ideas shared at the RentSafe Roundtable event (Hamilton, November 2016); ideas generated at the RentSafe Tenant Advocates Retreat (Stratford, November 2017), and ongoing conversations and collaborations with many organizations and individuals across the province. An overview of ideas generated and a first set of RentSafe recommendations is summarized below, and further elaborated in Section 3.

**Intersectoral capacity and connectivity:**

- Strengthen intersectoral capacity to support mutual awareness and better integration of institutional capacities to address housing habitability concerns and address related gaps
- Invest resources in intersectoral work on healthy housing for all as essential to key societal goals
- Share and promote promising practices to improve housing habitability

**Strengthening legal bases for the right to healthy housing:**

- Pursue law reform to achieve an integrated and preventive approach to ensuring healthy housing
- Broaden the definition of health to encompass physical and mental health and well-being
- Update municipal by-laws and standards for healthy housing
- Ensure minimum standards for healthy rental housing across the province
- Enact policies to prevent “renovictions”
- Establish a provincial housing commissioner

**Knowledge, research and data:**

- Bring greater attention to research on the links between housing conditions and health
- Gather and publish core indicators of housing quality

**Education and empowerment:**

- Improve outreach to ensure tenants and landlords know their rights and responsibilities
- Build professional competencies for service providers to act as champions for the right to healthy housing
- Strengthen training requirements for professionals applying pesticides indoors
- Strengthen knowledge and capacity of the Landlord Tenant Board on indoor environmental health concerns

**Unifying a vision of the right to adequate housing:**

- Enshrine the right to adequate housing, as broadly defined by the United Nations High Commission for Human Rights
- Position healthy, adequate housing as a keystone strategy for population health and well-being
- Apply an equity lens to address the drivers of housing inadequacy
- Unite the vision for an end to homelessness with the right to healthy housing for all
Section 1: RentSafe Baseline Research – Activities and Key Findings

An initial motivator for the RentSafe initiative was the perceived lack of coordination among the various sectors, including public health units, legal aid clinics, municipal departments, and social services agencies, that are (or could be) in a position to contribute to the prevention and remediation of unhealthy conditions in rental housing. This going-in assumption was confirmed by what we heard from tenants who expressed frustration about their efforts to access assistance. Landlords, in particular those operating on a small scale, may feel inadequately supported by guidance and clarity from relevant agencies on appropriate remediation practices and the scope of their responsibility. The lack of a well-functioning network of institutional supports and services was also confirmed by the sector-specific surveys conducted with public health inspectors, legal aid clinic staff and “frontline” social service professionals who acknowledged to varying degrees a lack of confidence in referrals leading to problem resolution as well as constraints on capacity and resources to meet the demand for assistance.

1.1 Focus groups with tenants

Focus groups with tenants living on low-income were held in urban and rural regions of Ontario from June to August 2015, with a total of 80 participants. Four focus groups were held in Toronto, led by Toronto Public Health and South Riverdale Community Health Centre, 3 focus groups were held in the Grey Bruce region, led by the Grey Bruce Health Unit, and 2 focus groups were held in Lanark County, hosted by The Table Community Food Centre in Perth. Key findings include:

- Tenants reported multiple indoor environmental health issues in their housing units, including water and sewage leaks, mould, pests, poor ventilation, structural issues (e.g. broken doors, windows), broken/unsafe appliances, improper wiring, and security concerns.
- Tenants also talked about problems with landlords/building managers, including disrespect, intimidation, racism, and unreasonable requests to remediate problems on their own.
- Tenants suffer adverse impacts to their physical and mental health and social well-being as a result of substandard housing.
- Tenants reported approaching multiple agencies/personnel for assistance (e.g., municipal licensing and standards, public health, housing workers, legal aid clinics, social workers, tenant committees, municipal Councillors, community health centres, family doctors); some met with success in resolving their concerns but many received only partial/temporary resolution (“band-aid” repairs) or no resolution, resulting in frustration and discouragement. Mitigation of substandard housing conditions is hampered by landlord apathy, unclear/unenforced standards, and an overwhelming Landlord-Tenant Board process.
- Rural aspects include stigmatization (“black-listing” of tenants) and transportation barriers.
- Tenants put forth ideas on opportunities for improvement in the realms of regulation and enforcement, education (e.g., in tenants’ and landlords’ rights and responsibilities), navigation (e.g.,

“Multiple levels of people to deal with – there’s so much bureaucracy, it will never get solved.”

“Tenants aren’t in proper emotional place to jump through lots of hoops.”

“When you get beat down so much, you can only take so much.”

“I did not know my rights, I did not know how to go about it, so my kids and I became homeless. I learned through the process there’s different ways to go. ...[U]sing my voice to [say] to others hey, try this route…”

- RentSafe tenant focus group participants

9 The reports of the surveys of staff in public health units, legal aid clinics, frontline social services, and small-scale landlords are available online at www.rentsafe.ca. The report of the survey of municipal property standards and by-law inspectors is forthcoming and will be available on the same webpage.
RentSafe Summary and Recommendations

Indigenous peoples living in off-reserve rental housing experience unique challenges stemming from colonial legacies, racism, on-reserve/off-reserve dynamics and other factors. Two Sharing Circles (similar to focus groups) with Indigenous community members in Owen Sound are underway, as part of a related project, the RentSafe Knowledge-to-Action research initiative led by the Centre for Environmental Health Equity (see section 2.3). These will be a step forward toward engaging with Indigenous community members in the pursuit of improvements in the prevention of and response to unhealthy housing conditions. Also noteworthy is the Giiwe Project led by M’Wikwedong Native Cultural Resource Centre, the Friendship Centre in Owen Sound, which is bringing together housing-related agencies in Grey County to foster improved intersectoral coordination and increased competency for responding to Indigenous-specific housing needs and preferences.

1.2 Public health unit (PHU) survey

The PHU survey, led by the Ontario Public Health Association, York Region Public Health, and the Grey Bruce Health Unit, was completed in October 2015, with responses received from all 36 of Ontario’s public health units. Survey responses revealed wide variability in how PHUs interpret their mandate for responding to complaints about housing conditions, and varying degree of focus on health equity concerns and the needs of marginalized tenants. Key findings include:

- Most PHUs provide informational materials and over-the-phone consultations in response to indoor environmental health complaints.
- Over half of PHUs conduct on-site investigations for sewage, water issues, hoarding and mould; very few PHUs conduct on-site investigations for structural issues, thermal comfort (too hot/too cold), pesticides, and radon.
- Nearly three-quarters of PHUs refer issues to the building department or by-law enforcement; most (86%) rarely or never refer issues to legal aid; fewer than half feel that they always know where to refer the client.
- Fewer than half (47%) of PHUs feel they have adequate capacity and expertise to respond to indoor environmental health issues; most feel that confounding factors (e.g., mental health issues) challenge their ability to respond effectively.
- Fewer than half of PHUs believe that the majority of indoor environmental health concerns fall within their mandate.
- Approximately three-quarters of PHUs agree that housing conditions adversely affect the health of marginalized populations; fewer than half agree that this is a priority for their health unit; fewer than half of Ontario’s PHUs have internal policies that address substandard housing issues for marginalized populations.
- Approximately half of PHUs are developing public policies to address inequities associated with access to safe, affordable & healthy housing.

“We are working well with partners...but more collaboration and awareness is needed to identify and address confounding factors e.g. mental health, hoarding, low-income, inadequate supply of safe, healthy rental housing, seniors issues, new immigrants”

- RentSafe PHU survey respondent
1.3 Survey of legal aid clinics
The RentSafe survey of legal aid clinics across Ontario, led by the Canadian Environmental Law Association (CELA), was completed in November 2015, with responses received from 71 percent of Ontario’s 80 legal aid clinics (recognizing that some clinics do not have a mandate to address housing issues). The aim of the survey was to assess clinics’ response to indoor environmental health issues in rental housing. Key findings include:

- Pests, mould, structural issues are the most common issues raised, followed by noise, inadequate heating, hoarding, and flooding; other issues occasionally/rarely come up.
- Approximately three-quarters of clinics often use Community Legal Education Ontario (CLEO) or other informational resources (e.g., PHU, Landlord Tenant Board (LTB) resources); over 80% of respondents see a need for new/updated resources (addressing mould in particular, as well as pests, hoarding).
- Respondents noted many barriers facing tenants. The top 3 barriers cited were: fear of eviction; fear of need to move/pay higher rent for necessary repairs; and not knowing whom to call. Mental health was also noted as key barrier.
- Clinics most frequently make referrals to local by-law enforcement, the landlord, local PHU; more than 70% lack time to follow-up, and approximately 50% lack confidence that referrals will address concerns.
- Approximately 60% of respondents disagree that LTB repair orders will be enforced.
- Regarding clinics’ capacity to respond to these issues, the most commonly cited challenge (~80%) was confounding factors (e.g., mental health, landlord-tenant relationship, and hoarding); other commonly cited challenges were: finding and paying for experts; getting PHU involved in addressing issues; lack of follow-up by LTB to enforce repair orders.
- More than 80% of respondents agree there is a need for effective implementation of local bylaws and the Health Protection and Promotion Act.
- More than 90% of respondents agree that the Residential Tenancies Act should require provision of healthy rental housing.

1.4 Legal review
Parallel to the survey of legal aid clinics, CELA is conducting research to examine the legal rights and remedies available to tenants in Ontario faced with indoor environmental health risks. Three Ontario statutes are addressed (the Residential Tenancies Act (RTA), the Health Protection and Promotion Act, and the Ontario Human Rights Code). Also relevant is Ontario Regulation 517/06 established under the RTA concerning maintenance standards. More pertinent are local property standards bylaws established by municipalities under enabling provisions within Ontario’s Building Code Act. This research also addresses relevant decisions of the independent, quasi-judicial bodies established under these statutes as well as any associated case law.
Apparent across these laws and local bylaws is a high degree of complexity, a lack of integration, and a range of legal provisions that are incomplete and inconsistent with respect to factors that can adversely affect tenants’ health. The laws are also inherently reactionary versus preventative or precautionary.

For example, local property standards bylaws, enacted under the authority of the provincial Building Code, are of particular concern for several reasons. The Building Code spells out exacting details for new construction or major renovations. However, it provides no direction on the content of property standards bylaws and thus the condition of existing buildings, including residential tenancies. The Maintenance Regulation 517/06 established under the RTA would seem to fill this gap and set a minimum provincial standard for maintenance. However, the Courts have noted that in the case of municipal property standards bylaws with weaker or lower maintenance standards than those in Regulation 517/06, the (weaker) municipal standards apply.

This situation can be compared to the provincial Fire Code which is applicable to owners of all buildings, province-wide. The Fire Code states that for compliance under it or any other applicable laws or regulations, the most stringent requirement prevails. The legislative intent is to ensure a consistent level of protection across the Province with municipalities empowered to allow for differences to address local circumstances but not to undermine a basic minimum standard. No such minimum standards exist for property standards bylaws resulting in an inconsistent level of protection for residents across Ontario. Another central problem with local property standards bylaws is inconsistent enforcement placing an unreasonable burden on tenants with very limited resources who are heavily reliant on municipal enforcement of local bylaws. A key consequence of landlords avoiding routine maintenance is the ultimate need for much larger repairs.

Ontario’s Fair Housing Plan, announced in May of 2017, includes some important reforms to protect tenants. However, it does not address the reality of rising Above Guideline Increases (AGIs) in rent, especially in urban centres like Toronto. The Fair Housing Plan disallows the inclusion of certain measures from AGIs such as major elevator repairs or energy efficiency improvements. However, it does not address the broader problem of landlords who face no local enforcement consequences of neglecting their properties to the point where major repairs are needed.

AGIs contribute to the loss of affordable rental housing and can unfairly offload to tenants a landlord’s responsibility to maintain their investments. Those on low income are unable to pay and thus may get pushed out of their communities (termed “renovictions”). While major repairs can sometimes be necessary, the system is open to abuse. Improvements in the content and enforcement of property standards bylaws, including routine and preventative building maintenance, as well as changes to the RTA, are essential so that landlords are responsible for improving the value of their own buildings.

The widely varied definition of “health” is another central issue across these laws and bylaws. Health is defined very narrowly in the Health Protection and Promotion Act (focused almost exclusively on preventing infection or communicable disease), and it is not defined at all in the RTA or local property

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10 The Province sets an annual guideline for allowable rent increases that is generally in the range of 1-2%. Landlords may apply to the Landlord and Tenant Board for an Above Guideline Increase (AGI) to pay for major repairs.

11 See e.g., “Tenants say flimsy law opens door to renovictions,” Emily Mathieu, Toronto Star, March 23, 2018; and “Housing minister aims to curb renovictions,” Emily Mathieu, Toronto Star, March 27, 2018.
standards bylaws. Health has tended to be more broadly defined (e.g., to include mental health) in case law, although inconsistently. Likewise, the application of “health standards” is inconsistent in Landlord and Tenant Board decisions. These cases are hampered by a lack of expertise among Board members, and tenants can rarely afford to hire specialized experts. Compounding the problem is the fact that issues affecting tenants’ health, can be both highly complex (such as mould or chemical sensitivities12) and too narrowly considered (such as seeing bed bugs solely as a “nuisance” when increasing evidence13 points to the need to recognize their health implications).

This review will be completed during 2018 and will inform recommendations for more effective implementation of existing laws as well as law reform.

In addition, parallel research is occurring at CELA into the regulation of pesticides used indoors. Among its findings are important differences in training requirements between pesticides used outdoors, e.g., by farmers, and those used indoors by pest control companies. Ontario farmers must pass a safety training course to buy and use hazardous pesticides and update this training every five years. Likewise, farmers’ assistants must take, and regularly upgrade such training. Comparable safety training requirements are less stringent for pest control companies working indoors. Indeed, a single licensed operator can supervise up to three unlicensed applicators under one licence, and regular updating of licensee training is not required. Hence, residential pesticide applications can be done by those with limited safety training or oversight.

1.5 Survey of frontline workers /direct service providers

The frontline workers online survey, led by South Riverdale Community Health Centre (SRCHC), was completed in the fall of 2016. Responses were received from 451 frontline workers from across Ontario, including social workers, public health nurses, settlement workers, housing support workers and many others. The aim of the survey was to better understand frontline workers’ experiences and capacity to support their clients who may be experiencing unhealthy conditions in rental housing. Key findings include:

- Almost all (96%) of respondents had worked with clients who have experienced unhealthy conditions in their rental housing.
- 91% of respondents agreed that substandard housing conditions in rental housing are adversely affecting the physical/mental health of the clients whom their organization serves.
- 88% of respondents agreed that frontline workers have a role to play in supporting tenants in seeking resolution of unhealthy housing conditions in rental housing, but less than a quarter (23%) felt like they had the resources (e.g. time, budget) that they need to support clients with unhealthy housing conditions.

“I work with mental health clients. ...Managers often say “that is their standard of life. That may be what they want”. Worker ask the question of “Don’t they have the right to live with dignity?”

“I would like to be trained in what agencies we may go to and which ones respond faster and what to do next (when all we tried initially did not work).”

- RentSafe frontline workers survey respondents


The majority of respondents make referrals to other agencies to assist their clients in resolving unhealthy housing conditions, but only a third were confident that their clients’ concerns would be adequately addressed.

85% of participants agreed that they would like to become better equipped/trained on these issues so that they can be of greater support to clients who are experiencing unhealthy housing conditions.

Respondents identified a need for more comprehensive information on what constitutes unhealthy housing and proper channels to refer clients; an online training course on tenant rights and relevant laws and regulations; and real-world scenarios and strategies to improve skills to advocate for clients.

Information from the frontline workers survey informed the production of a short video for frontline service providers and the development of the RentSafe Connector tool (see Section 2).

1.6 Survey and focus groups with property standards and municipal law enforcement officers

The Grey Bruce Health Unit, an active RentSafe partner, conducted a survey of municipal inspectors in their region, followed by focus groups with municipal and public health inspectors. Key findings include:

- significant overlap in the types of housing complaints received by municipalities and public health,
- significant uncertainty about the applicability of specific legislation in dealing with housing complaints,
- challenges specific to rural areas such as: multiple municipalities with small operating budgets, different by-laws and different perceptions of the importance of the issue, and
- interest among municipal inspectors to partner with public health to explore solutions.

The Grey Bruce Health Unit is now developing sample language for use by local municipalities in their property standards by-laws to ensure that issues related to known indoor environmental health hazards (e.g., mould, dampness, and pest infestation) can be addressed by municipal inspectors.

Building on these efforts, RentSafe is partnering with the Ontario Association of Property Standards Officers (OAPSO) and the Municipal Law Enforcement Officers Association of Ontario (MLEOA) to conduct an online survey of property standards and by-law enforcement officers. The purpose of this survey is to learn about experiences with complaints and concerns about conditions in rental housing, and to gather perspectives on the sector’s capacities and challenges in supporting healthy rental housing conditions. The survey will be disseminated in May 2018 via the OAPSO and MLEOA memberships and networks across the province.

1.7 Landlord survey and focus groups

RentSafe partner the Centre for Environmental Health Equity (CEHE) collaborated with the Landlord’s Self Help Centre (LSHC) to conduct an online survey of small-scale landlords in Ontario about their experiences in maintaining healthy housing conditions. Approximately 120 small-scale landlords (defined as having 9 or fewer rental units) responded to the survey, which was issued via the LSHC’s contact lists in March 2017. Key findings include:

More than one third (36%) of respondents reported that at least one of their units needed repairs, with 9% reporting that at least one unit needed significant repairs.

Respondents had a good appreciation for the effect of housing conditions on health. For example, 95% consider the minimization/elimination of mould to be extremely/very important to residents’ health. Most agree they are responsible for addressing such issues.
The majority of respondents felt equipped to deal with structural (68%) and plumbing (66%) issues, and pests (64%). Respondents felt less equipped to deal with contaminants (43%) and tenant-mediated issues such as hoarding, smoking and noise (26%).

Most respondents (83%) identified tenant behaviour as an extremely/very important constraint on their ability to maintain healthy housing, followed by tenants not providing sufficient access to the units to enable repairs (62%), insufficient information on appropriate remediation (54%), and insufficient financial resources (50%)

Measures that respondents felt would be extremely/very important in supporting small-scale landlords to provide healthy housing include: more consideration of small-scale landlord concerns by Landlord Tenant Board (89%), tax breaks or other financial supports to offset remediation costs (75%), improved access to legal services (65%), and better advisory services from relevant agencies (e.g., municipal by-law, public health) (59%).

As a landlord it is my responsibility to keep the property up, however tenants can be very abusive to properties and cause a lot of these health problems. “

“More resources and support for landlords that do care to remedy the situations. More often than not we are faced with ultimatums and added pressure instead of help and support when approaching some of these agencies for help. ”

“I feel like small scale landlords are often not considered with respect to public policy around landlord/tenant and housing issues. They are an important part of the landscape and can also be vulnerable to financial trends and crises (with tenants or otherwise).”

RentSafe small-scale landlord survey respondents

The Grey Bruce Health Unit, as an input into RentSafe, conducted focus groups with private landlords in 2017. Participants reported challenges securing affordable maintenance services, with subsequent challenges in keeping rental rates low. Furthermore, landlords noted their lack of preparedness/skills in addressing the challenges that sometimes arise in providing housing to people living with mental illness and/or addictions. They suggested that intervention/mediation strategies involving relevant social service agencies could be of value when landlord-tenant issues arise in such situations. A further focus group with public housing providers, those providing housing directly to vulnerable populations or sub-contracting to private landlords, also took place in 2017. Participants in the latter focus group agreed with the challenges voiced in the former, and the possibility of bringing private landlords together with social housing providers to discuss these issues was raised.

Section 2: Supporting intersectoral awareness, connections, capacity, and advocacy

Connecting across sectors to build integrated capacity and prioritizing the leadership of community members with lived experience of housing inadequacy are central to the RentSafe model. The RentSafe Project Team has worked with multiple partners to stimulate intersectoral approaches to housing habitability concerns, and build mutual awareness (e.g., who does what) in support of more effective referrals and collaboration. We apply a rights-based framing to our collective efforts that is energized and informed by the grounded expertise of people whose lives bear witness to the social injustices and housing-related health inequities that such efforts aim to address.
2.1 Connecting across sectors: Resources for service providers

**RentSafe video for frontline workers**

A RentSafe video, *Frontline Connections: Supporting tenants’ rights to healthy housing*, was released in April 2018. Development of the three-minute animated video was led by members of the RentSafe team with guidance from a video steering committee comprised of staff from social service agencies and other relevant organizations as well as tenant advocates. The video, intended for use in training, webinars, conferences and other learning opportunities, reflects the reality that unhealthy housing conditions impede residents’ well-being and constrain the ability of frontline workers to do the work of supporting people in other facets of their lives. It introduces the RentSafe Connector as a tool that can help service providers build connections across sectors at the local/regional level so that they are better equipped to support tenants’ rights to healthy housing.

**RentSafe Connector**

The RentSafe Connector is a user-friendly template that enables local agencies and organizations to build mutual knowledge of who does what in their community to support healthy housing conditions. As a fillable online form, it enables staff to list contacts and main areas of competence and capacity for a wide range of sectors, including public health, municipal by-law enforcement, legal aid, social services as well as those working on efforts to address related drivers of health inequity, such as poverty reduction, food security, affordable housing, household energy security, and transportation.

**Print and online resources**

The RentSafe Project Team continues to build a suite of online and print resources to support intersectoral knowledge, capacity and connections. Flowing from the legal review and in response to requests made in the sectoral surveys, summary materials to be developed during 2018 will address the following topics:

- The *Health Protection and Promotion Act* and residential tenancies: Information for lawyers, public health and municipal inspectors, and social service providers
- The *Residential Tenancies Act* and indoor environmental health
- Mould
- Bed bugs
- Indoor pesticide use

Through RentSafe, we are also working to increase access to existing resources, including the housing law resources on the [Your Legal Rights](#) website and the [Steps to Justice](#) initiative of Community Legal Education Ontario (CLEO), and the [landlord learning videos](#) produced by the Landlord’s Self-Help Centre.

2.2 Support for tenants’ rights advocacy

To support understanding of the impact of unfit housing on peoples’ lives, RentSafe produced a short whiteboard video called *Home* that reflects the experiences shared by tenants during the focus groups about unhealthy housing conditions and barriers to accessing help.

A RentSafe Tenants’ Rights Advocates Retreat among tenant advocacy teams working in Owen Sound, Perth and Stratford was held in Stratford (1-3 November 2017) as an opportunity to discuss housing quality issues experienced by people in rural and small town contexts, and to share advocacy strategies
across jurisdictions. In addition to providing a rare opportunity for tenant advocates to connect with others working on similar issues, the retreat resulted in:

- **RentSafe Tenants’ Rights Advocates videos**: During the retreat, the tenant advocates created three videos as advocacy tools for the right to healthy housing. These powerful testimonial-style videos include: *Defining Adequate; Stigma in the System*; and *My Voice is Power*. All three videos are available with optional subtitles in Arabic, Chinese, French, Punjabi, Tagalog, and Spanish.

- **RentSafe Tenants’ Rights Advocates network**: Participants in the retreat expressed a strong desire and commitment to build a network of tenant advocates working in rural communities across Ontario. A Facebook group has been established and, with support from RentSafe team members, the advocates are exploring opportunities for funding to further develop their network and undertake joint advocacy on shared concerns.

### 2.3 Promoting intersectoral interaction

**RentSafe events**

RentSafe places a high priority on face-to-face interaction and relationship-building as essential to strengthening intersectoral capacity and action. The following keystone events were held, in addition to ongoing engagement with relevant sectors as summarized in Box 1.

*Inaugural meeting of the RentSafe Advisory Committee, Toronto, October 2015*

A full-day meeting in a retreat-style setting provided an opportunity for the diverse members of the RentSafe Advisory Committee to build a common understanding of the aims and potential of RentSafe, and to foster relationship-building. A presentation by the tenant advocates set the tone for the day. Participants formed small groups to discuss near-term actions to improve intersectoral response to housing habitability concerns, as well as broader, structural changes needed to address upstream drivers such as poverty and marginalization.
Province-wide RentSafe Roundtable, Hamilton, November 2016

The RentSafe Roundtable, held in Hamilton at McMaster University in November 2016, brought together more than 80 participants from multiple sectors, including tenants, landlords, service providers, academics and government officials, to review the RentSafe findings to date and discuss priorities for action. A pivotal moment at the Roundtable occurred with the opening presentation by the tenant advocates, who shifted the conversation from one about “housing” to the human need and right to have a home. The summary report and presentations are available on the RentSafe project page.

RentSafe Tenants’ Rights Advocates Retreat, Stratford, November 2017

As noted above, the retreat in Stratford (November 2017) enabled tenants’ rights advocates from rural communities an unprecedented opportunity to connect across jurisdictions around common experiences and issues of shared concern. The summary report is available on the RentSafe webpage.

<table>
<thead>
<tr>
<th>Box 1: Events at which RentSafe learnings were shared</th>
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<tr>
<td>RentSafe Project Team members and others have shared information on RentSafe at the following conferences and training events, reaching professionals in public health, legal aid, property standards enforcement, students and academics, tenant advocates, landlords, and other community members, within Ontario, elsewhere in Canada, and internationally.</td>
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- Regional Legal Clinic Training Conference, Kingston, May 2015
- The Ontario Public Health Convention (TOPHC), Toronto, April 2016
- Canadian Public Health Association Conference, Toronto, June 2016
- George Brown College course lecture, September 2016
- Canadian Institute for Public Health Inspectors (CIPHI) Ontario Conference, Ottawa, October 2016
- National Collaborating Centre for Determinants of Health and CHNET-Works! Webinar, January 2017
- Legal Clinic Housing Issues Committee Meeting, Toronto, January 2017
- Conestoga College course lecture, January 2017 and February 2018
- Best Start conference, Toronto, February 2017
- The Ontario Public Health Convention (TOPHC), Toronto, March 2017
- Ryerson University course lecture, Toronto, April 2017
- Queen’s University course lecture, Kingston, April 2017
- Ontario Association of Property Standards Officers (Southwest Chapter), Grey-Bruce, April 2017
- American Association of Geographers, Boston, USA, April 2017
- Grey Bruce Healthy Partnerships Breakfast: collective impact panel, Owen Sound, 2017
- Landlord Links Seminar, June 2017, Owen Sound, Ontario
- Residential Tenancy Act training session for Community Voices members, Owen Sound, September 2017
- Canadian Institute for Public Health Inspectors (CIPHI) Ontario Conference, Peel Region, October 2017
- American Association of Geographers, New Orleans, USA, April 2018
- Regional Legal Clinic Training Conference, Kingston, April 2018
- Ontario Association of Property Standards Officers Annual General Meeting, Niagara on the Lake, May 2018 (invited)

RentSafe Knowledge-to-Action Research Initiative

The Centre for Environmental Health Equity at Queen’s University, an active part of the RentSafe team, has received a $200,000 Knowledge-to-Action grant from the Canadian Institutes for Health Research for community-based research involving tenant advocates and other stakeholders in Owen Sound and the Grey-Bruce region. The research is involving multiple sectors (public health, legal aid, municipal officials, housing providers, local organizations, residents and others) in efforts to break down barriers to intersectoral action on housing inadequacy, with a focus on upstream drivers. Partners include the Grey Bruce Health Unit, the Bruce Grey Poverty Task Force, Community Voices, M’Wikwedong Native Cultural Resource Centre, the Health and Environment Analysis Laboratory at the University of Ottawa, and the National Collaborating Centre for Determinants of Health.
Section 3: Recommendations

The strong intersectoral collaboration and momentum achieved by RentSafe so far is testament to the importance of adequate housing in the context of health equity\textsuperscript{14} and social justice concerns nationally and provincially, and in local communities. The RentSafe Project Team’s efforts to connect with additional sectors and networks were consistently met, not just with interest, but with enthusiasm and commitment to get involved and generously share their experience and expertise. As such, our initial plans for a three-year project have been far exceeded by the breadth of engagement that has unfolded thus far and that continues to build.

To have a home, to have a healthy and safe place to live that supports – rather than impedes – well-being, is a foundational human need, and a human right (see Box 2). We are privileged in RentSafe to have the leadership and contributions of many people with grounded expertise whose voices have helped keep the vision of healthy homes for all at the centre of our collective work. The RentSafe tenant advocates who served as advisors throughout the project have generously contributed their first-hand knowledge of inadequate housing as well as their experiences and frustrations in trying to access an intersectoral “system” that is falling short. Their voices, passion, patience, friendship, and vulnerable honesty have helped all of us to do the important work of questioning assumptions and the ‘way things are done’ to explore new ways of thinking and doing.

This work continues at a time when housing is gaining traction as a societal issue, and when questions of health (in)equity are starting to receive the attention they deserve. Some promising signs of progress include the National Housing Strategy and the updated

\textbf{Box 2: The Right to Adequate Housing}

The right to adequate housing was first internationally affirmed as a fundamental component of the right to an adequate standard of living in the 1948 Universal Declaration of Human Rights, with multiple reaffirmations in other international treatises on human rights. The right of all people to adequate housing goes well beyond the basic need for shelter. The United Nations Committee on Economic, Social and Cultural Rights frames the right to adequate housing as the right to shelter that ensures security, peace and dignity.

The Office of the United Nations High Commission for Human Rights further elaborates a set of minimum criteria that must be met for shelter to be considered adequate housing.\textsuperscript{2} These include:

- Security of tenure (legal protection against forced evictions, harassment),
- availability of services, facilities and infrastructure (e.g., safe drinking water, sanitation, energy for cooking, heating, lighting),
- affordability (housing costs should not compromise attainment of other human rights),
- habitability (physical safety, adequate space, protection against cold, damp, excessive heat and other threats to health),
- accessibility (accounting for the needs of marginalized or disadvantaged groups),
- location (sufficiently proximate to employment opportunities, health and social services, schools; not located in polluted or dangerous areas), and
- cultural adequacy (respect and allowance for the expression of cultural identity).


\textsuperscript{14} Health equity means that “all people (individuals, groups and communities) have a fair chance to reach their full health potential and are not disadvantaged by social, economic and environmental conditions.” Source: National Collaborating Centre for Determinants of Health: http://nccd.ca/resources/glossary/
Ontario Public Health Standards (OPHS).15,16 Through the National Housing Strategy, the federal government is working to ensure Canadians, especially the most vulnerable, can access housing that meets their needs and that they can afford.17 The new OPHS have a greater focus on health equity, community engagement, multi-sectoral collaboration and population health approaches to the delivery of public health services. For example, the OPHS ask boards of health to move beyond traditional health perspectives that focus on disease and disability and towards the underlying social factors that influence health, taking into account mental and social well-being and quality of life. The new Healthy Environments and Climate Change Guideline under the OPHS suggests boards of health apply authority provided to them under Ontario’s Municipal Act to participate in developing, updating or reviewing municipal by-laws and standards (such as property standards, housing conditions, temperature control in rental housing, and pest/vermin control) to improve health outcomes and address the impacts of the social determinants of health.

The work that is summarized in this report and reflected in Figure 1 paints a picture of the current situation and shines light on the path forward towards the attainment of healthy homes for all. Collectively through RentSafe we have identified gaps in capacity and integration, we have better understood where existing laws and legal provisions are inadequate or underutilized, and we have confronted the misplaced assumptions, biases and “culture of blame’ that can impede a positive and productive way forward. In the following sections, the RentSafe Project Team offers a set of recommendations to guide future work. These recommendations focus specifically on the issue of healthy housing for all, and the intersectoral approaches, capacity-building, and investments needed to move toward that goal. Alongside this work, however, we recognize the vital importance of tackling big picture drivers, including poverty, class-based stigma, racism, patriarchy and other forms of discrimination, and the devastating legacy of colonialism.

3.1 It takes a village: Recommendations for intersectoral capacity and connectivity

Strengthen intersectoral capacity

Relevant agencies at the local/regional level should establish an intersectoral table (or utilize an existing one, such as an anti-poverty task force) to support mutual awareness and better integration of institutional capacities to address housing habitability concerns, and to identify and begin to address related gaps. Such intersectoral tables should:

- comprise a diverse range of sectors, including tenants, housing providers, home repair contractors, and agencies/organizations with mandates related to housing and health (e.g., public health, municipal by-law enforcement, legal aid, mental health, housing services) as well as those working on related social

determinants of health, such as energy poverty, food security, transportation, and social/community services (e.g., community food centres, Friendship Centres, law enforcement, etc.).

- provide a forum for (1) assessing the effectiveness of intersectoral coordination and capacity as experienced/perceived by tenants and housing providers, (2) improving the effectiveness of interagency referrals, and (3) better coordinating approaches among enforcement and adjudicative agencies, such as property standards, public health, the Landlord and Tenant Board, and the Health Services Appeal and Review Board, recognizing health and rights-based issues of housing.

- Contribute to timely and fulsome implementation of the revised Ontario Public Health Standards and associated Healthy Environments and Climate Change Guideline and Health Hazard Response Protocol, with the leadership of local Boards of Health.

- Include consideration of upstream drivers including poverty and access to affordable housing by aligning information inputs and activities with Ontario’s Poverty Reduction Strategy and the National Housing Strategy, including Ontario’s involvement in and implementation of the latter.

The RentSafe Connector may serve as a useful catalyst for convening/strengthening such intersectoral tables.

**Invest resources in intersectoral work on healthy housing for all as essential to key societal goals**

As part of Ontario’s Poverty Reduction Strategy, provincial participation in the National Housing Strategy, and in addressing the recommendations from the Task Force on Environmental Health, the Provincial government should financially support intersectoral work at the provincial and regional/local levels to address housing inadequacy, including habitability concerns, affecting low-income and marginalized populations. Such work should be recognized and supported as essential to addressing societal priorities, including the right to housing, poverty reduction, accommodation of disabilities, a preventive approach to population health and well-being, and the inclusiveness and livability of our communities.

**Share and promote promising practices to improve housing habitability**

Organizations and communities that are trying new approaches are encouraged to share their learnings across jurisdictions and sectors, a role that RentSafe can continue to support.

**3.2 Strong foundations: Strengthening legal bases for the right to adequate housing**

**Pursue law reform to achieve an integrated and preventive approach to ensuring healthy housing**

Reform of the *Residential Tenancies Act* (RTA) must be part of efforts to make legal requirements for housing conditions across multiple statutes integrated and coherent, including greater attention to the root causes of conditions that affect health (e.g., explicit recognition that addressing structural integrity or ventilation should address and prevent indoor air quality problems and mould growth, pest infestations, etc.). The RTA should include a positive duty on landlords to ensure housing conditions cannot undermine the health of tenants.

**Broaden the definition of health to encompass both physical and mental health and well-being**

In all provincial and local agencies, and the laws and/or policies they implement, the definition of “health” must be broadly inclusive, in particular to consider both physical and mental health. As a case in point, progressive public health approaches and supporting research underscore the need to recognize that bed bugs are not solely a nuisance but may be linked to stigma, anguish, sleep deprivation, anxiety, financial
hardship, eviction and mental health impacts that require coordinated intervention by officials adequately empowered and resourced to act.\textsuperscript{18,19}

**Update municipal by-laws and standards for healthy housing**

Local Boards of Health across Ontario should exercise their mandate under the revised Ontario Public Health Standards and associated guidelines\textsuperscript{20} to participate in the update/review of municipal bylaws and standards including those related to property standards, housing conditions, temperature control in rental housing, and pest/vermin control. This work should include a broad social determinants of health approach and involvement of relevant sectors.

**Ensure minimum standards for healthy rental housing across the province**

The provincial government should apply a minimum standard for consistent content in local property standards by-laws applicable to all buildings including existing building stock (comparable to the provincial Fire Code) to ensure a consistent level of protection for all tenants across Ontario.

**Enact policies to prevent “renovictions”**

The RTA should be amended to address the problem of “renovictions.” More rigorous requirements for routine and preventative maintenance of residential tenancies should prevent the deterioration of properties and thereby reduce the potential for abuse of procedures to seek Above Guideline Increases in rent to cover costly renovations.

**Establish a provincial housing commissioner**

The provincial government should establish a housing commissioner or ombudsperson whose role would be to investigate and advise on the current systemic issues with the purpose of ensuring adequate housing (see Box 2) that is healthy, affordable and accessible for all through improvements in policy, regulation and enforcement, education, and coordination among relevant agencies and sectors.

**3.3 Knowledge, research and data collection**

**Bring greater attention to research on the links between housing conditions and health**

The Ministry of Health and Long-term Care, Public Health Ontario, and local public health units should build on and foster access to research that demonstrates the links between housing and health (physical and mental) to support public health and other local authorities in assigning priority and expanding actions to address the health effects of housing conditions. These actions would go beyond enforcement to include population health strategies such as health promotion and advocacy.


\textsuperscript{20} Healthy Environments and Climate Change Guideline: “Boards of health shall participate in local processes for developing, updating or reviewing municipal bylaws and standards as authorized by municipalities under the *Ontario Municipal Act* to support changes which are intended to improve health outcomes and address the impacts of the social determinants of health.”
Gather and publish core indicators of housing quality
The federal government census and health measures surveys should include the routine collection and publication of core housing indicators, including in rental housing, related to both poverty and housing adequacy including affordability, need for major repairs, pests, (querying major types: bed bugs, cockroaches, ants, rodents), pesticide use, mould, air quality, adequate ventilation, and water damage. These research and data collection efforts should draw upon the groundbreaking efforts by public health officials in Montreal (see Box 3).

Box 3: The Need for Housing-Related Surveillance: Public Health Leadership in Montreal
Efforts to better understand the links between housing conditions and health by Montreal Public Health (MPH) have been instrumental in putting housing conditions on the public health agenda in Quebec. MPH found that, except for federal census data tracking whether housing is in need of repair, almost no data collection occurs at the municipal, provincial, or federal level on housing conditions. To begin to fill this gap, MPH undertook telephone surveys with tenants from 2010-2017 seeking data on pest problems, mould and water damage, safety and upkeep, affordability and food security. Valuable information was generated confirming, for example, widespread occurrence of bed bug problems, to support public health responses. Likewise, MPH noted the dearth of health surveillance studies or indicators at the provincial level to investigate links between housing conditions and health. This gap prompted studies in Montreal that confirmed such links, for example that large numbers of children have asthma and other respiratory challenges because of their housing conditions. The data generated by this research team have confirmed the links between housing and health as well as identified ongoing data gaps that need to be filled. The team has recommended action steps to fill data gaps and intersectoral work to support healthy housing.


3.4 Education and empowerment: Equipping all sectors for success
Improve outreach to ensure tenants and landlords know their rights and responsibilities
Strengthen mechanisms and outreach channels, including within the Ministry of Housing and the Landlord and Tenant Board, through which both tenants and landlords more clearly understand their rights and responsibilities. Make resources and supports available to ensure all parties are successful in their respective roles, with particular attention to the needs of low-income and marginalized tenants, and small-scale landlords. To this end, governments and funding bodies should support advocacy efforts of people with lived experience of unhealthy housing conditions to leverage their expertise in creating and disseminating information/resources about housing conditions and tenants’/landlords’ rights and responsibilities.

Build professional competencies for service providers to act as champions for the right to healthy housing
Mandate, through professional regulatory bodies, associations and/or governmental employment policy, training for all relevant sectors, including public health, municipal officers, frontline health and social service workers, and others to build and periodically update professional competency as champions for people accessing support to resolve housing concerns. The scope of such competencies should include: recognizing unhealthy housing conditions; understanding housing regulations; tenant and landlord rights and responsibilities; where to make referrals; and how to advocate for clients in resolving unhealthy
housing conditions. Such training should encompass competency and knowledge related to gender, cultural safety, histories of colonialism and other forms of oppression/marginalization, as well as the dismantling of stigmas about people with mental health and/or addictions issues, those who receive social assistance, and people living on low incomes. The RentSafe Tenants Rights Advocates videos – Defining Adequate, Stigma in the System, and My Voice is Power, may serve as useful resources in this regard.

**Strengthen training requirements for professionals applying pesticides indoors**
Regulation 63/09 under the Pesticides Act should be amended to require pesticide safety training and routine upgrading of safety training for pest control companies that apply pesticides indoors. These requirements for safety training and routine upgrading of this training should be comparable to those that the regulation requires of farmers in Ontario.

**Strengthen knowledge and capacity of the Landlord and Tenant Board on indoor environmental health concerns**
The RentSafe team should prioritize engagement with the Landlord and Tenant Board during the next phase of work, with a view to supporting the Board to conduct specialized training of its members on indoor environmental health issues in residential tenancies.

3.5 **A unifying vision: The human right to adequate housing as a keystone policy for health equity**

**Enshrine the right to adequate housing, as broadly defined**
The federal government, as well as all institutions, organizations and individuals advocating for strong housing policy in Canada, should define the human right to housing as the right to adequate housing, as broadly defined by the United Nations High Commission for Human Rights (see Box 2).

**Position healthy, adequate housing as a keystone strategy for population health and well-being**
Governments at all levels should prioritize healthy, secure and dignified housing as a keystone of population health protection and promotion strategies. To date, the potency of inadequate housing as a driver of poor health, disempowerment, and the exacerbation of inequities has been under-recognized.

**Apply an equity lens to address the drivers of housing inadequacy**
All professionalized sectors should apply a health equity lens in fulfilling their roles to address the causes and consequences of poverty, marginalization, mental health, and colonial legacy by focusing specifically on how these negative factors manifest in the inadequate housing conditions that too many people in Canada continue to endure.

**Unite the vision for an end to homelessness with the right to healthy housing for all**
RentSafe, along with other organizations, collaboratives, and individuals advocating for housing rights in Canada, should integrate their aims and strategies, such that the end to homelessness is inseparable from the attainment of homes that are healthy, secure and dignified, for all.
Figure 1: The current situation and the RentSafe vision for healthy housing for all

**DISRUPTED LIVES**
Unfit housing and stressful encounters to address unfit housing compound risks to physical, mental health and family wellbeing

**UNHEALTHY CONDITIONS NOT AN EXCEPTION**
Unfit conditions are prevalent and include recognized (e.g. mould, pests) and less recognized (radon, fumes)

**LOST IN THE SYSTEM**
People who are unsure of how to access their rights too often receive ineffective or uncoordinated response

**CONFLICTIVE RELATIONSHIPS**
A fragmented and under-resourced system leads to antagonism and a culture of blame

**HEALTHY CONDITIONS ARE THE NORM**
Policies and programs are in place to support tenants and landlords in maintaining healthy housing

**HOUSING SUPPORTS WELLBEING**
Healthy housing stabilizes lives and supports wellbeing

**EVERYONE IS A CHAMPION**
Tenants encounter a culture of support and advocacy everywhere they turn; there are no wrong doors

**MUTUAL RESPECT**
Both landlords, tenants, and service providers to work cooperatively to resolve issues

**FRAGMENTED SUPPORTS**

**FROM SHAKY GROUND**
ECLNORMEagalism
INSTITUTIONAL RACISM
OWNERSHIP SOCIETY
AGING INFRASTRUCTURE
AFFORDABILITY CRISIS
FEDERAL HOUSING WITHDRAWAL

**TO SOLID GROUND**

**HOW DO WE WORK TOGETHER TOWARDS**

**HEALTHY HOUSING FOR ALL?**

Concept co-created by Jeff Masuda and Erica Phipps
Annex 1: RentSafe Advisory Committee

**John Anderson**, Head Organizer
ACORN - Toronto

**Michael Blazer**, Staff Lawyer
Community Legal Education Ontario (CLEO)

**Alaka Brahma**, Housing Program Manager
Thorncliffe Neighbourhood Office

**David Brown**, Landlord
Toronto and Bruce County

**Keir Brownstone**, Manager, Energy Management
Toronto Community Housing

**Pat Burke**, Supervisor
Municipal Licensing and Standards Investigation Services, City of Toronto

**Kelley Bush**, Head, Radon Education and Awareness
Health Canada

**Tanya Butt**, Tenant / Community Voices Co-Chair
Owen Sound, Ontario

**Regina de la Campa**, Senior Officer
First Nations and Assisted Housing, Canadian Mortgage and Housing Corporation (CMHC)

**Geordie Dent**, Executive Director
Federation of Metro Tenants' Associations

**Nadine Desjardins**, Tenant
Owen Sound, Ontario / affiliated with M'Wikwedong Native Cultural Resource Centre

**Brenda Doyle**, Municipal Law Enforcement Officer / Property Standards Officer
Town Of The Blue Mountains

**James Dunn**, PhD
McMaster Institute for Healthier Environments

**Larisa Eibisch**, MD CCFP MPH
Staff Physician, Sherbourne Health Centre
Member, Ontario College of Family Physicians Poverty Committee

**Elizabeth Lee Ford-Jones**, MD FRCPC
Social Pediatrics and Infectious Diseases / Professor of Pediatrics
The Hospital for Sick Children / University of Toronto

**Kathryn Latreille**, Tenant
Ottawa, Ontario

**Fahmida Islam Lisa**, Tenant
Toronto, Ontario

**Dania Majid**, Staff Lawyer
Advocacy Centre for Tenants Ontario (ACTO)

**Daneen Danomme**
Ontario Aboriginal Housing Services

**Greg Nicol**, Fire Prevention Officer
Owen Sound Fire and Emergency Services
Stéphane Perron, MD, MSc, FRCPC
Medical Officer, Public Health Department of Montreal

Nicola Mulima, Executive Director
Centre for Equality Rights in Accommodation (CERA)

Brandy Rogers, Tenant
Perth, Ontario

Lindy Samson, MD
Chief of Staff, Children’s Hospital of Eastern Ontario (CHEO)
Co-Principal Investigator, IDEas Research Unit, CHEO Research Institute
Associate Professor, Department of Paediatrics, Faculty of Medicine, University of Ottawa

Hans Schleibinger, PhD, Director
Indoor Air Quality Laboratory, National Research Council

Misty Schonauer, Tenant
Owen Sound, Ontario

Greg Suttor, Housing Researcher
Wellesley Institute

Sherry Weese, Tenant
Toronto, Ontario

Members of the RentSafe Project Team also serve on the RentSafe Advisory Committee:

Kathleen Cooper, Canadian Environmental Law Association

Helen Doyle, Ontario Public Health Association (OPHA) Environmental Health Working Group / York Region Public Health

Bob Hart, Grey Bruce Health Unit

Lynn Marshall, MD, Environmental Health Institute of Canada

Jeff Masuda, PhD, Centre for Environmental Health Equity (CEHE) / Queen’s University

Allison Murray, Grey Bruce Health Unit

Erica Phipps, Canadian Partnership for Children’s Health and Environment (CPCHE)

Carlos E. Sánchez-Pimienta, Centre for Environmental Health Equity (CEHE) / Queen’s University

Caryn Thompson, Toronto Public Health (previously with South Riverdale Community Health Centre)

Beth Schilling, The Table Community Food Centre, Perth

Vittoria Vecchiarelli, York Region Public Health
Canadian Partnership for Children’s Health and Environment (CPCHE) – Partner Organizations

CPCHE Affiliate Organizations

Health and Environment Analysis Lab (HEALab), University of Ottawa