



Inquest Into the Death of Drina Joubert, 1986

Verdict of Coroner's Jury, 1986

The Coroners Act, Province of Ontario

We,

Aiko Amemori of Weston

Lenore Atwood of Toronto

Peter Blackwood of Don Mills

Ronald Y. Oberlander of Toronto

David Ramsey of Scarborough

the jury serving on the inquest into the death of Joubert, Drina, aged 41 years, held at 15 Grosvenor Street, Toronto on February 12, 13, 14, 17, 18, 19, 20, 21, 24, 25th, 1986, by M. Naiberg M.D., Coroner for Area No. 9, having been duly sworn, have inquired into and determined the following:

1. **Name of deceased:** Drina Joubert
2. **Date and time of death:** December 17, 1985, 16:53 Hours
3. **Place of death:** Rear of 230 Sherbourne St., Toronto, Ont.
4. **Cause of death:** Exposure
5. **By what means:** Accident caused by alcoholism, mental illness and homelessness and the failure of our support system to deal with these problems

This verdict was received by me this 25th day of February 1986

[Signed] Coroner M. Naiberg M.D. for Area No. 9.

WE WISH TO MAKE THE FOLLOWING RECOMMENDATIONS:

Introduction

Drina Joubert was an alcoholic and mentally ill person with chronic physical illnesses. She sought help from practically every available social agency and hospital service in the city of Toronto. She got worse. On Dec. 17, 1985, Drina froze to death in an abandoned truck. Clearly, the bureaucracy designed to help the most disadvantaged among us has become unresponsive to the needs of the people it was created to serve. It is fragmented and inefficient. We, the taxpayers of Toronto, who pay a good deal for this system, deserve a healthy system that will be more successful in achieving its objectives.

Recommendations

1. Within three months we recommend that the Manager of Hostel Operations for Metro Toronto identify the approximately 185 single women who have become constant users of the existing Hostel services. Once identified, we urged that each of these women be assigned a "case management worker" whose specific objectives will be:
 - (a) to within a period of 1 year, help the client obtain an alternative long-term affordable housing option.
 - (b) to maintain regular contact with these women helping them take advantage of the many support services currently available.
 - (c) to pay particular attention to skills development, and general training programmes.
2. A public trustee (which should be the case management worker) should be encouraged to monitor the finances of a client who has proven unable to do so herself. This should be done more frequently than it is at present.

AGENCIES AND SERVICES USED BY DRINA JOUBERT

Queen Street Mental Health Centre

3. A better system for patient record transfer from Queen St. Mental Health Centre to other hospitals must be implemented immediately.
4. An adequate network of crisis and drop-in centers must immediately be created for ex-patients of Queen St. Mental Health Centre.
5. Psychiatrists at Queen St. Mental Health Centre must lean towards involuntary admission for 5 days if there is any chance that a patient's life might be in jeopardy because of the patient's poor judgement. The question of the psychiatrist being herself or himself in legal jeopardy, and the question of reducing occupied bed rates must be of secondary importance.

6. No patient may be discharged from Queen St. Mental Hospital until an appropriate place is found for the patient to live. This dwelling place must be approved by the patient's case management worker.

Hostels

7. Training Hostel Personnel – that Metro's per diem hostel allowance for single woman be increased by \$0.50 no later than June 1, 1986. That this specific allocation be directed solely towards the training of Hostel employees who have client contact. While the jury feels that training staff in the management and control of drug users and alcoholics is of great importance, we recommend that the individual Hostel's top management person be responsible for choosing the training programmes to be given to their staff.
8. A registry should be maintained by the hostels so that the whereabouts of each woman requesting accommodation but referred elsewhere can be determined.
9. In hiring new staff members, special consideration should be given to suitable ex-psychiatric patients and hostel users by providing retraining courses and employment in the various support services and hostel operations. Their first-hand experience and knowledge would contribute greatly to a more humane, effective and efficient operation.
10. No one who is in residence in one hostel must be required to leave that hostel to move to another hostel.
11. All hostels receiving Metro Community and Social Services per diem allowance must be open by 4:00 p.m. Such hostels must not close earlier than 10:00 a.m.

Drop-In Centres

12. Ministry of Health and Social services should increase program funding to 416 Dundas East Drop-In Centre to enable extension of her operating hours to 10:00 p.m.
13. Drop-In Centres should have Support Services on a regularly scheduled basis and on call. These should include psychiatrists, nurses, occupational therapists, and others deemed necessary. This should be the responsibility of Metro Social Services.

Addiction Research Foundation Detoxification Centre

14. Records from all special facilities such as A.R.F. Detoxification Centre, Archway, and any other special facility must be immediately forwarded to the client's family doctor and her case management worker.
15. Records must be kept of all people referred or self-referred to the Addiction Research Foundation Detoxification Centre. These records must be kept whether or not the referrals are admitted.

Housing

16. Bearing in mind that the establishment of supportive housing programmes involves the Ministries of Municipal Affairs and Housing, Health & Community and Social Services. The Premier appoint as soon as possible, one of these ministries to be the

lead ministry to deal with proposals for such housing and be responsible for achieving progress on those proposals that are deemed to have merit.

17. Efficiency of hostel operation in its present form is severely impaired due to overcrowding, abuse and shortage of staff. To ease the pressure and restore the hostel's original function, namely to provide "shelter during crisis" we recommend that long term housing options must be developed and made accessible to women who are homeless and in crisis. We therefore urge the immediate implementation of Recommendations #8 and #9 as submitted in the Final Report by the Working Committee on emergency and Short-Term Accommodation.

FUNDING AND FINANCES

Introduction

Throughout the inquest, the Jury was very aware of the substantial costs involved in maintaining the current system of supportive services for single homeless women in Toronto. We are, as well, aware of the vital need to reduce Government expenditures in all areas of our society.

As a point of principle, therefore, we feel that the financing of any new programme that we suggest must come from existing budgets.

We believe this is possible because as a group, we were amazed by the numbers, diversity, duplication and extent of medical and social support "programmes" aimed at single homeless women. We strongly suspect that due to the lack of co-ordination considerable money is being wasted. More importantly we feel that a goodly number of existing programmes that have been funded for several years are not achieving the objectives and mandate that they originally claimed for themselves.

Our recommendations will not be able to be implemented without "political courage" on the part of the respective ministers of the departments concerned.

18. (a) That within 3 months, the concerned minister sees to it that all programmes that have been funded for more than 3 years aimed at single homeless women in the physical and social support areas be listed together with their original objectives and mandate.
- (b) Those programmes that have no objectives or mandate be cancelled with minimum notice (within 1 year).
- (c) That the minister of the concerned department appoint a small, well-paid, capable panel to evaluate all remaining programmes against their original objectives and mandate (within 6 months).
- (d) That some system of ranking be developed that will permit the minister to cease funding the bottom 10-15% of programmes thereby permitting him to fund new programmes or more importantly, increase funding to existing programmes that are rated as highly successful.

A NEW CONCEPT

Introduction

“The lack of Affordable housing in Metro Toronto is the single most important factor impacting on the hostel network.”

“Difficulty in obtaining employment was identified as a major problem for these individuals.”

The above two quotations are the basis for the following observations and recommendations.

The jury heard considerable evidence about the need for affordable housing for homeless single women in Metro and we agree that such a need exists. We are convinced that housing is not even half the solution. We believe that this group of disadvantaged people are probably under-educated and lack basic employer-required skills.

We therefore suggest that with the exception of single women with mental disturbance problems

19. (a) Subsidized housing be made available on the basis of the tenant attending school to acquire the equivalence of grade 12 education and skills development programmes which are designed to complement employees' talents and the marketplace's job requirements. (Woman over 35 would receive more customized curriculum)
- (b) That some system of income support be established which would permit successfully progressing students to afford reasonable housing. This should not affect welfare or family benefit income. In fact, we wish to pay students to improve their knowledge and skills.
- (c) That these recommendations be an integral part of a new test programme aimed at single homeless women in Metro Toronto.
- (d) We suspect that this programme would be self-financing within a 4-5 year period due to:
 - (a) reduced welfare payments
 - (b) new sources of income tax

THE CORONER

20. The Coroner must keep statistics on all deaths that relate to homeless and unemployment.

21. That the chief coroner be directed to forward to the appropriate people within the hospital, ministries of health and community and social services, copies of this jury's

findings, and that a response outlining what action has been taken on them be received by the chief coroner within one (1) year, and further that a copy of that response be forwarded to the foreman of this jury.

22. Pat Capponi – We wish to express our appreciation to Pat Capponi for her witty and perceptive testimony. Her testimony was of great help to us. We are confident her efforts will be of increasing value to our community.
23. Peggy Ann Walpole – Peggy Ann Walpole must be highly commended for the leadership and commitment she has shown in helping disadvantaged women. This remarkable person has devoted her life to a problem that, until recently, few of us knew existed. She is a guiding light for all those who wish to help the poorest of the poor and the weakest of the weak in our society.

[Signed] Foreman, David Ramsey