WOMEN AND HOMELESSNESS: IT’S TIME FOR A GENDER ANALYSIS

Presentation to the Ontario’s Expert Panel on Homelessness

YWCA Toronto

May 28, 2015

Good morning and thank you for the opportunity to talk with you about women and homelessness.

My name is Heather McGregor and I am the Chief Executive Officer of YWCA Toronto. YWCA Toronto helps women escape and recover from violence, move out of poverty and gain economic security, and access housing that is safe and affordable. We also work with young girls - building their leadership and critical thinking skills. Our Association serves over 11,000 women and girls annually in 30 programs in 12 communities across the City of Toronto.

We are also one of the largest providers of housing for women and their families. We have eleven shelter and housing programs - two violence against women shelters, a shelter for homeless women, two transitional housing projects, and six permanent housing programs. In total, we shelter and house 1,550 women and children annually. All of our permanent housing sites provide rent-geared to income, housing subsidies, or rent supplements provided either by the province or the city. Our largest housing site, on Elm Street, provides 150 market units, 100 supportive housing units for women with mental health and addictions issues and 50 units for families of Aboriginal descent.

In the time I have with you today I would like to focus on three issues:

- The unique systemic challenges that women face who are homeless and fleeing violence
- The inter-connectedness of violence, trauma, mental health and substance use
- The importance of including a gender analysis when funding, measuring, reporting, and setting targets to reduce homelessness

As you know, when talking about violence against women, it is always important to be guided by the voices of survivors. So I would like to start with a passage from a remarkable book:
One Hour in Paris- A True Story of Rape and Recovery, by Canadian author Karyn Freedman. Although specifically describing the impact of sexual assault, it applies to all forms of violence against women:

Talking about our traumatic experiences can help make whole our personal identities and can play an important role in the healing process. But there are also decisive political reasons for being outspoken. Talking about rape can help us to see it as a problem that is the result of the way societies are structured and resources and power distributed. The fact that rape is a social problem can be hard to remember, because rape is also intensely personal and deeply isolating; it is a violation that is typically experienced in private, held as a secret...and can make us think we are alone in the experience.

But despite the formidable personal challenges that survivors face, the widespread systemic debasing of women’s and children’s bodies by men is a problem that extends beyond victims of violence in the same way that poverty is a problem that reaches beyond individual poor people, which is why providing food for one hungry family or putting one rapist in jail is only a band-aid solution. While violence against women may take different forms and range in severity, it persists as part of a system of oppression and gender discrimination that is rooted in structural inequalities between women and men.

We face a formidable challenge, and the social, economic, political, and education changes that are needed to bring about social justice therefore requires political will of the strongest order...

This passage articulates the strong need and moral imperative to address the structural inequalities that lead to violence against women and girls. We know that gender-based violence is pervasive and it is why we strongly advocate for a gender-based analysis of services, systems, and social polices- especially for women who are homeless or fleeing violence.

Since the beginning of the year, the Association has been holding consultations with participants and staff—asking them to identify issues that the Association should focus on. Not surprisingly, issues such as violence prevention, housing, childcare, and full-time employment were identified as priorities.

Systemic Challenges

Women told us about the following systemic challenges:

- Precarious employment and a lack of safe affordable housing keep us trapped in poverty and unable to provide for ourselves and our children. For some of us it means we are forced to live in shelters for years at a time. This is not a healthy way to live or to raise children. For others, it means living on the street, couch surfing, or living with families and friends in crowded and unsafe conditions. If we are escaping violence, it means that we may return to a violent spouse because we simply do not have any other options. Long-term poverty and homelessness affects our mental health and impacts the long-term health of our children.
- Violence is one of the most traumatizing things that can happen to us—whether it is child abuse, sexual violence, or relationship violence. It is an unacceptable violation of our bodies, our mental and physical health, and our place in the world. The unique supports that we need to recover from violence must be provided so that we can rebuild our lives. We need women-specific programs such as detox beds, counselling to overcome trauma, and supportive women’s housing.

- The system is failing us—without a living wage and subsidized child care we can’t afford housing, move ahead, or feed our families. Those of us who have affordable housing are still falling behind because of the high cost of child care. And the waiting lists for social housing are so long that we feel hopeless.

**Violence, Mental Health and Substance Use**

The risk of developing depression, post-traumatic stress disorder, substance use, or becoming suicidal is 3-5 times higher for women who experience violence than those who do not. The very nature of the violence they have experienced may have contributed to the decline in their physical or mental well-being. We know that 1 in 3 women have experienced violence. Research has been conducted that demonstrates that women’s experience of violence often precedes their substance use or mental health issues.

Yet many women with mental health challenges or addictions face barriers and restricted access to shelters and transitional housing programs. This leaves them at substantial risk of homelessness and of being discharged from programs directly to the street where they are at increased risk of violence and assault.

Staff across our Association are reporting increases in women experiencing mental health issues and addictions. The current staffing and funding models do not reflect the level of complexity and the multiplicity of needs that homeless women have. It is why we now have mental health workers on staff and have adopted a trauma-informed model of practice.

However, there continue to be long waiting lists for specialized mental health and addiction supports across the system and those women who need supportive housing face 5-year long waits. There are also over 90,000 households on the affordable housing waiting list. This is one of the reasons that our Association now allows women to stay in our shelters and transitional housing programs for up to 1-2 years. Twenty years ago the length of stay would have been 6-12 weeks.

Like the women themselves, we are concerned that women are living in shelter and transitional housing for far too long and many could readily move to permanent or supportive housing if it was available. It is also why the Association is focused on developing permanent, affordable housing and working with community partners such as the Jean Tweed Centre, Anishnawbe Health Services and Women’s College Hospital to deliver case management and health promotion programs at our Elm St site.
We know that women respond to and recover from trauma differently and there is no one intervention or approach that works for everyone. Some women require specialized supports or individual counselling; others prefer women’s groups or peer-led supports. Some are helped through arts therapy, cultural or spiritually based work, body work, or fighting for social change. Some require specialized interventions and case management.

Women tell us that they cannot access the supports they need because they simply cannot afford them. There are long waiting lists. Some counsellors are not trauma informed. Recent reports have identified the gaps people face accessing affordable community based mental health counselling. We support new funding models to address this.

Measuring and Developing a Long-Term Plan to End Homelessness

Point -in- Time Counts

- We are familiar with “point in time” counts that measure the number of people who are living on the street or in homeless shelters and those counts conducted by provincial or national women’s organizations. While these are helpful, they do not reflect the true number of women who make up the hidden homeless. For example, the number of women who remain in violent relationships to maintain their housing, those that are in hiding for their own safety, those who are living in crowded conditions with family or friends, and those who may be hidden because of their precarious immigration status.

- Also, when looking at “point in time” counts, there needs to be a deeper gender analysis of the data. For example, how many women are living in homeless and family shelters? Are they driven to homelessness by poverty or violence or both? Of the Aboriginal people living on the street, how many are Aboriginal women?

Housing First Models

- Housing First programs target the chronic and episodic homeless population who are largely single men. Using a gender-based analysis, Housing First models need to include the hidden and episodic nature of women’s homelessness including moving in and out of abusive relationships and shelters.

- Women fleeing violence place a high priority on safety and security and housing locations that will give some level of protection from their abusers. Many women seek housing that is gender-specific and trauma informed. They want to create communities, peer support networks, and gain access to child care and employment. These are different, but essential principles that need to be included in Housing First models.

- The most significant increase in homeless shelter use is families. Homeless women with children need services that are responsive to their role as primary caregivers — access to schools, housing conditions that will not put their child custody or safety in jeopardy, and
poverty reduction strategies. These needs should not exclude them from accessing Housing First programs.

- Women’s shelters offer a unique model, and have a different purpose than Housing First programs. Both are equally important strategies to address homelessness. Funding one model at the cost of the other may unintentionally reduce funding and access to services for homeless women and women fleeing violence.

Long-Term Plan to End Homelessness

A long-term plan to end homelessness should include the following components:

- **Include a gender-based analysis** of women’s homelessness, particularly the connection between violence, mental health and addictions.

- **Prevent homelessness** by tackling systemic issues such as precarious employment, child care, violence prevention initiatives, eviction prevention programs, and initiatives that keep women housed such as emergency loan funds.

- **Provide a continuum of housing supports** for women—shelters, transition housing, supportive housing and permanent housing—recognizing that women are homeless largely because they are fleeing violence.

- **Support staffing and funding models** that deal with the complexity of trauma and the mental health and addictions issues that women experience—including case management, specialized services and partnerships, community based counselling and women’s programs.

- **Increase the supply of affordable housing, supportive housing, and rent supplement programs.** Where possible, dedicate under-utilized provincial land for new housing initiatives. Develop new funding models that assist the non-profit sector to build permanent housing.

- **Integrate a gender-analysis into Housing First models** so that women’s unique needs and the implications of life-long trauma are recognized and supported.

- **Ensure that data collection is gender-based** and that research includes assessing the impact of housing and homeless initiatives and policies on women.

- **Develop a long-term plan and set timelines, targets and indicators to measure change such as:**
  - Increase in the supply of affordable and supportive housing
  - Allocation of new funding for rent supplements
✿ Innovative staffing and funding models
✿ Decrease in the number of people on housing waiting lists
✿ Decrease in the length of time homeless women reside in shelters
✿ Overall reduction in the homeless population.

Thank you – that concludes my presentation. I would be happy to answer any questions you may have.

Heather McGregor  
Chief Executive Officer  
YWCA Toronto

Background Documents

1. **One Hour In Paris - A True Story of Rape and Recovery**  
   Karyn L. Freedman  
   Freehand Books, 2014

2. **Realizing Our Potential: Ontario’s Poverty Reduction Strategy**  
   Province of Ontario, 2014

3. **Saying Yes - Effective Practices in Sheltering Abused Women with Mental Health and Addiction Issues**  
   Prepared for YWCA Canada  
   Judie Bopp, 2014

4. **Report on Violence Against Women, Mental Health and Substance Use**  
   Prepared for the Canadian Women’s Foundation  
   BC Society of Transition Houses, 2011

5. **Housing First in Canada**  
   Gaetz, Scott, Gulliver  
   Canadian Homelessness Research Network, 2013

6. **The State of Homeless in Canada**  
   Gaetz, Donaldson, Richter and Gulliver  
   Canadian Homelessness Research Network, 2013
7. **H4W – Homes for Women**  
   Housing First, Women Second?  
   Gendering Housing First  
   Brief prepared by Janet Mosher, 2013

   Canadian Centre for Policy Alternatives, 2015