Gender and Experiences of Family Homelessness

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Nov 4, 2019

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Introduction

Each year, two million Canadians are affected by family conflicts, abuse, or violence which lead to relationship breakdown and housing precarity (Sinha, 2013)

Homelessness is not only the absence of a secure and safe housing, but it is also lack of resources to acquire a new home (The Canadian Observatory on Homelessness, 2012)

Background and significance

Families who experience homelessness are one of the fastest growing demographic segments among homeless population (Segaert, 2012)

The experience of homelessness among families is distinct from other forms due to issues such as of the size of family, the presence of children, common experiences of violence, housing challenges, extra expenses, and family poverty (Noble, 2014)

Primary study background

The primary study aimed to discover the factors that put families at impending risk of homelessness and to find appropriate methods to address these factors

Rotholme's homelessness prevention pilot program

Primary study background

The Rotholme's homelessness prevention pilot program employs **staff** to work collaboratively with **families** seeking assistance through an emergency shelter to see if they can maintain housing and prevent admission into the shelter.

29 adults were interviewed participated in the shelter diversion program

2 focus groups (36 participants) experience homelessness

2 focus groups with 10 frontline staff

Study Purpose

Gaetz et al. (2013) state that the process of being homeless is heterogeneous, and the experience differs from person-to-person and family-to-family

Aim: to understand experiences of family homelessness in a mid-sized Canadian city, and in particular the role that gender plays in these experiences

Four Themes

- A Scarcity of Resources

- Relationship Breakdown

- Living with Precarious Mental Health

- A Common Experience

Findings

Theme 1:A Scarcity of Resources

A lack of resources: limited financial assistance + affordable housing + subsidized childcare = risk for the experience of family homelessness

F: "So now I'm living off of my baby's money a month for food, for everything else when really it shouldn't be like that."

F: "We got denied everywhere because of bad credit"

Findings

Theme 2:Relationship breakdown

(landlord-tenant relationships)

Participants noted the gendered nature of harassment that some experienced by landlords

F: "No, there are some gender [sexist] landlords in this city"

Findings

Theme 3: Living with precarious mental health

Women identified the complexity of their situations where they tried to manage parenthood in the context of poverty, while also living with mental health concerns

To meet the needs of the family, participants tended to prioritize others tasks first, and when it comes to their own mental health they give up or ignore it

Findings

Theme 3: Living with precarious mental health

F: "Bad credit. That was due to mental health … I had great credit, I ended up having a nervous breakdown and couldn't work for a while, all bills got backed up and [have] never been able to catch up."

F: "Oh well, with like depression uhh for instance a lot of people that are depressed tend to go out and…. Like for me tend to go out and spend money on say like fast food because it's too much to cook …"

Findings

Theme 4: Common Experiences

Traditional gender roles collapse during housing crises as the sole focus becomes meeting immediate family demands and essentially survival
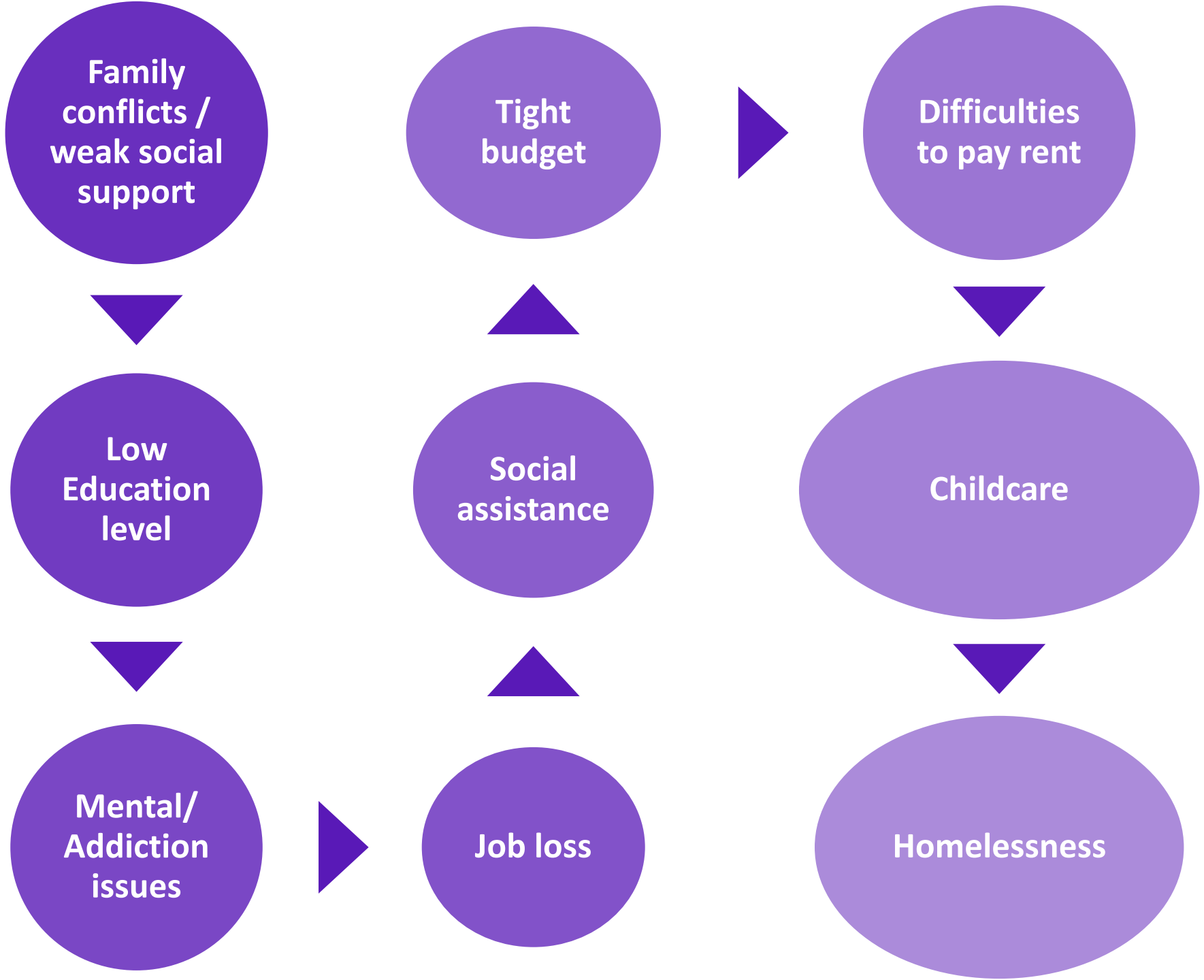
While gender differences were evident in pathways into homelessness, in describing time in shelter and efforts to leave shelter, stories were strikingly similar

Discussion

- The results speak to the strong relationship between poverty and high housing costs with family homelessness

- participants also noted that using medication to treat mental illness can also impair one's ability to track their house obligations such as paying rent monthly, increasing the risk of housing loss.

Implications for Policy

- Social assistance rates for families should reflective the true costs of housing

- Increasing the number of subsidized childcare spaces

- Shelter staff should receive appropriate training to qualify them in dealing with those who have experienced trauma, including many women experiencing homelessness

Implications for Nursing Practice

- Nurses are uniquely positioned to transform primary care or community mental health to better support mothers in their homes, to prevent housing loss

- New technologies such as mood monitoring apps connected to electronic medical records may be a form of nursing intervention that expands care from clinic to community

Implications for Nursing Education

- Learning about family homelessness is an effective means to introduce students to issues of injustice, human rights, and housing

- Beside focusing on biomedical practice related to these concerns, nursing students could be supported in adopting humanitarian values and educated in how compassion and empathy relate to action on public policy

Implications for Nursing Research

What community-based mental health interventions are women looking for that would meet their needs without detracting from their ability to support their families?

Whether knowledge of tenant rights is sufficient to protect women from predatory landlords, or are further supports required?

Conclusion

Homeless families are unnecessarily vulnerable due to insufficient preventative and reactive health and social supports.

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