LearningNetwork Brief 35

Women with Disabilities & Housing

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In March 2017, a collaborative of eight Canadian disability advocacy and research organizations developed a report entitled: *Housing Issues for People with Disabilities in Canada* presented to the UN Committee on the Rights of Persons with Disabilities in response to its review of Canada's initial report on the Convention on the Rights of Persons with Disabilities (CRPD).[1] The report offers one of the first attempts to examine the issue of people with disabilities and housing in Canada, noting that that there is limited aggregate data available. Further, while an intersectional lens is applied in this report, gender is not included in this analysis. The findings of this report indicate that there is pronounced discrimination and barriers for people with disabilities in attaining safe, affordable and accessible housing. Key findings outlined that Canadians with disabilities are much more likely than those without disabilities to:

- Be homeless – some estimates are that 45% of homeless people have disabilities or live with a psychosocial[2] disability;

- Have very few housing choices which relates to high levels of poverty experienced;

- Face discrimination in housing, i.e. "screening out" practices by landlords, including "evictions for disability-related behaviours and failure to accommodate disability-related needs". This is made worse because of a lack of resources or "power to bargain with landlords"; and

- Have 'core housing needs', i.e. deficient housing affordability, live-in substandard housing greatly in need of repairs and live in poor neighbourhoods. There is also a lack of accessible features in the housing that is available for people with physical disabilities and a lack of funding for support workers for people with intellectual and psychosocial disabilities who need such support to stay housed."[3]

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[1] Alzheimer Society of Canada, ARCH Disability Law Centre, Canadian Association for Community Living Canadian Mental Health Association-Toronto Branch, Council of Canadians with Disabilities, Institute for Research and Development on Inclusion and Society, Social Rights Advocacy Centre and the Wellesley Institute, (March 2017). Submitted to the UN Committee on the Rights of Persons with Disabilities the UN Committee on the Rights of Persons with Disabilities.

[2] I choose to use the term 'psychosocial' disability when referring to people often labelled with a 'mental health' or 'psychiatric' disability.

[3] Alzheimer Society of Canada et al., March 2017.

It is evident that there is limited research on disability and housing in Canada generally, with a few exceptions. The relationship between homelessness and psychosocial or 'mental health' disabilities, is a topic that has had much attention for two decades now. A brief prepared for the Library of Parliament entitled: *Current Issues in Mental Health in Canada: Homelessness and Access to Housing* offers a succinct estimation of the issue as one that is complex due to the fact that psychosocial disabilities predispose people to homelessness, at the same time housing insecurity and lack of affordability can cause, trigger and aggravate one's psychosocial state.[4]

The episodic nature of psychosocial disabilities, coupled with the lack of appropriate community-based supports can greatly effect one's "employment and income options"[5] which are needed to secure and maintain adequate housing.

There is also a growing body of work focused on Traumatic Brain Injury (TBI) and homelessness. TBI results in cognitive disability usually caused by a blow to the head due to falls, car accidents and physical assaults[6]. Further, the relationship between TBI, substance abuse and homelessness is multidimensional and mutually determining. For example, there is evidence that indicate TBI is common in the homeless population, which might be partially explained by the fact that substance abuse increases both the risk of homelessness and Traumatic Brain Injury[7]. Further, people who are homeless experience "high rates of injury" and are often assaulted on the streets. Thus, TBI may both lead to homelessness or occur during periods of homelessness.

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[4] Munn-Rivard, L. (2014, February 14). Current Publications: Health. Retrieved from https://bdp.parl.ca/Content/LOP/ResearchPublications/2014-11-e.htm
[5] Munn-Rivard, 2014, February 14.
[6] Hwang, S.W, Colantonio, A., Chiu, S., Tolomiczenko, G., Kiss, A., Cowan, L., Redelmeier, D.A. and Levinson, W. (2009). *Traumatic Brain Injury in the Homeless Population: A Toronto Study*. Retrieved from: www.homelesshub.ca/FindingHome © Cities Centre, University of Toronto. ISBN 978-0-7727-1475-6
[7] Hwang et al, 2009.
8 Disability Studies for Teachers, "Reassigning Meaning", Center on Human Policy, pg. 1, http://www.disabilitystudiesforteachers.org/files/ReassigningMeaning.pdf
[9]Linton, S. (1998). Claiming Disability. New York, NY: NYU Press.
[10] "Reassigning Meaning", pg. 1

Women with Disabilities & Housing

In an earlier issue of the Learning Network focusing on violence against women with disabilities, the authors set the context of the barriers to access services for disabled women. In this issue, when thinking about the issues of precarious housing for women with disabilities, it is important to also consider that barriers exist beyond just the physical barriers. For the most part, behind most barriers experienced related to issues facing women with disabilities is that of "ableism and ableist views" (Learning Network, Issue 7). Ableism and ableist views are ideas/beliefs that are based on the assumption that the 'able-body' is favoured/preferred over the disabled body.[8,9] Similar to the experience of racism, homophobia/transphobia and sexism, socially constructed characteristics of disAbility position people with disAbilities as an 'inferior' group to non-disabled people.[9,10] Disabled people have abilities that differ from the majority. This doesn't mean that we minimize or ignore the impairment, because most of the time, with the right supports in place, all people can contribute to their community.

Poverty and discrimination in housing is compounded if a person with a disability identifies as a woman, is Indigenous, black or African Canadian, is from other racialized groups, identifies as Trans and/or is a migrant or refugee with precarious immigration status.

As there is a clear lack of research related to disability and housing, the housing needs of women with disabilities in Canada is even less existent. The Canadian Feminist Alliance for International Action and the DisAbled Women's Network Canada - Réseau D'Action des Femmes Handicapées du Canada however, reported in 2017 that:

- Women with disabilities are more likely to spend over 50% of their before-tax income on housing than men with disabilities;

- They are also more likely to need accessibility features in their homes; and

- There is little indication that Canadian governments are providing housing support services to women with disabilities in a way that is allowing women to exit homelessness and access affordable housing.[8,11]

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[11] Canadian Feminist Alliance for International Action and DisAbled Women's Network Canada - Réseau D'Action des Femmes Handicapées du Canada. (2017, February). *Women with Disabilities in Canada Report to the Committee on the Rights of Persons with Disabilities on the Occasion*. Retrieved from: http://fafia-afai.org/wp-content/uploads/2017/02/FAFIA_DAWN_CRPD2017.pdf

When considering the issue of homelessness and women living with psychosocial disabilities it is important not to medicalize or pathologize women's experiences.

We know for example many women find themselves on the streets escaping violence and thus often what is determined as a 'mental illness' is more likely a reasonable response to ongoing trauma and systemic structural violence, such as violence that is a result of ableism/saneism, patriarchal-colonialism, racism and Transphobia experienced by Indigenous, refugee women and Trans women.

A study from the Homes for Women Campaign found that "homeless women experience high rates of PTSD (36%), drug and alcohol dependency (41%) and major depression (50%)" [12] Further, while there are supports for people with psychosocial disabilities who experience homelessness if they get a formal psychiatric diagnosis, this can often result in a "Catch 22" situation as Tam et al conclude, because homeless mothers who receive assistance from the mental health service system will also experience an increased vulnerability to having their children apprehended.[13]

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[12] YWCA Canada. End Homelessness of Women and Girls. Retrieved from: http://ywcacanada.ca/en/pages/advocacy/priorities/homeless
[13] Tam, T., Zlotnick, C., Bradley, K. (2008, September) The Link Between Homeless Women's Mental Health and Service System Use. *Psychiatric Services* Vol. 59 No. 9. Retrieved from: http://ywcacanada.ca/data/documents/00000382.pdf

Poverty, Violence, Homelessness and Housing Insecurity for Indigenous, racialized refugee women and women with intellectual and psychosocial disabilities

The Case for a Marginalized Women's Solidarity

There is a limited gender lens in housing research and advocacy work, thus women, in general, are rarely recognized as a distinct oppressed group with unique housing needs. Further, 'women' as a category is too broad and when used generically tends to make invisible the most deeply entrenched needs of extremely marginalized populations of women. Over the past decade, in my community and advocacy work largely conducted with IRIS-the Institute for Research and Development on Inclusion and Society and DAWN Canada, I have noted that when women have worked collectively around an issue, there is a struggle to include the participation and experiences of refugee, largely racialized women, and women with intellectual and psychosocial disabilities - even within the broader women with disabilities and immigrant women's movements. When Indigenous women are included in larger scale generic 'women's' efforts, it can feel tokenistic because there is rarely a reflection of the vast diversity that exists between nations, cultures, languages, regional histories and experiences. Further, the most marginalized populations of women-identified people, usually live within and across multiple experiences of disadvantage or social locations. Therefore, in my doctoral research and my work with IRIS and our partners, we have made an intentional choice to focus exclusively on Indigenous, refugee women and women with psychosocial and intellectual disabilities, because these particular populations of women experience persistent violence, poverty and thus housing inequity. Further, through IRIS' community organizing, development and advocacy work with coalitions made up of these specific grassroots marginalized women's populations in Vancouver, Regina, Toronto and Saint John[14]– we address the issues of poverty, violence against women and housing together in recognition of the role poverty and housing insecurity plays in violence production.

We believe that by addressing the needs of the most marginalized women, we find solutions that will benefit all people who are struggling with finding suitable, safe housing and dealing with poverty and violence.

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[14] Since 2015, IRIS has been working on a national project entitled: *Working Together: Combating Structural Violence against Indigenous, Racialized, Migrant Women and Women Labeled with Intellectual and Mental Health Disabilities.* For more information please contact: Doris Rajan at: d.rajan@irisinstitute.ca

Understanding the Context of Gendered-Housing Inequality for Marginalized Women

Oppression is historically rooted for all four of these populations of marginalized women resulting in conditions that have propelled them into situations of poverty, setting the foundation for ongoing violence. More specifically, with these four populations of women, their poverty is a result of colonization and imperialism, i.e. Indigenous women in Canada and for refugee women who come from imperialist fueled wars and resource invasion in their own lands and for women with disabilities, particularly women with psychosocial and intellectual disabilities, their historical segregation. The reasons why these groups of women are poor therefore have deep historical roots. Further when women are poor they live in unsafe homes and streets, where violence is an every day reality. Housing precarity create the conditions for most forms of violence against women, including neglect, exploitation, sexual and physical assault and trafficking. These populations of women share many commonalities in trying to find and keep affordable housing. It is thus critical not to separate the issue of gendered, historically-based oppression, poverty and violence against women, from housing if we are to come up with strategies that will make a difference in women's lives.

Put another way, if we do not understand the dependent relationship between oppression, poverty, housing and violence then we will not be able to break repetitive cycles that (re)produce housing precarity, inequity and vulnerability to homelessness.

Housing and Indigenous, racialized, refugee women and women with intellectual and psychosocial disabilities

IRIS has been convening Indigenous, refugee women and women with intellectual and psychosocial disabilities – including Trans women who identify as members of these populations – for a number of years now, to focus on these groups' specific barriers and strategies needed to address the structural oppression they experience. The rationale is by focusing on the *marginalized of the marginalized* women's communities, approaches and strategies will benefit all people struggling with housing, violence, and poverty. In Toronto, IRIS is involved in a collaborative initiative lead by Riverdale Immigrant Women's Centre and the Centre for Equality Rights in Accommodation that deals specifically with the housing needs of these specific groups of women. The project entitled: *Toronto - A Place to Call Our Own: Empowering Women to Take Action for Affordable Housing,* seeks to identify and deepen the city of Toronto's understanding of the diverse systemic barriers and institutional gaps that result in these populations of women-identified persons living in precarious and unsafe housing. The aim of this project is to convene a space for grassroots, front-line housing service providers to work with the public, private and other housing advocacy efforts to develop a strategy to address these specific women's groups' lack of access to affordable housing as well as what is needed to keep women housed. We have completed the research component of this project consisting of; a Scan of Affordable Housing government organizational structures, policies and programs; an Environmental Scan of reports, community programs and resources related to these populations; and Focus Groups with women from the target populations.[15] We spoke to a total of just under 40 women in the following focus groups;

1. Indigenous women

2. Racialized migrant women

3. Low income, homeless women

4. Trans women

5. Women living with disabilities - a focus on psychosocial and intellectual disabilities; and

6. Community housing service providers for women- most who represented the populations of focus, i.e. women with disabilities, migrant women, street involved women, Indigenous, etc.

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[15] For information on how to obtain a copy of this research report, please contact Doris Rajan at d.rajan@irisinstitute.ca

There was an almost equal representation of each population group.[16] The following diagram summarizes the findings of the focus groups in the areas of: barriers to finding a place, problems with current housing arrangements, strategies for policy and procedure reform, what constitutes adequate subsidized housing and women's thoughts on ideal housing design.

A Place to Call our Own project team will be announcing
their detailed Action Plan in a public launch to be held
at the Riverdale Hub in Toronto, fall 2018.

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[16] The exact breakdown of women was: 7 Indigenous, 6 women with disabilities, 7 refugees, 7 Trans women, 8 homeless and 8 housing service providers. You will note that the total is over 40 due to intersectional identities, for example many of the Trans women were also refugees.

Key Findings: Toronto Dialogue with Women on Housing

The Problem:
Barriers to attaining housing and problems with current housing arrangements

Barriers to finding a place to live
1) Lack of income
2) Prejudice and discrimination
3) The process of securing housing is complex and difficult to navigate
4) Impact of marginalization
5) Eligibility requirement for immigration status
6) Lack of standards for landlords
7) Detrimental policies and procedures

Problems with current housing
1) Feeling isolated - in your unit and/or the location where you live
2) Feel unsafe
3) Too many rules and regulations
4) Inaccessibility – units and buildings
5) Ghettoizing all low-income people together
6) Inadequate and unsanitary condition of housing
7) Lose your housing if in prison/custody
8) Difficult to get supports needed to stay housed
9) Insensitivity of Housing Service Providers

Strategies for Change

Adequate Subsidized Housing
1) Safe secure buildings
2) Clean and ongoing maintenance services
3) Less rules and flexible intake processes
4) Skilled staff, with lived experience, non-discriminatory and provide population-specific services
5) More housing and housing options, i.e. transitional housing
6) Attentive to housing design and programming

Policies and Procedures
1) Rent control
2) More housing programs geared to women
3) Prioritize housing for all abused women, i.e. more than intimate partner violence, i.e. trafficking, abuse by caregivers, families etc.
4) Speed up refugee hearings
5) Fast access to counselling services for women
6) Housing First priority
7) Realistic income supports
8) Person-centred, culturally appropriate holistic supports
9) Policies that dedicate accessible units
10) Special incentives to make housing more affordable
11) Transportation planning needs to be linked to affordable housing
12) More training for Toronto Community Housing staff
13) People with lived experience formally work with housing providers
14) Able to choose where you want to live

Holistic Community Supports
1) Access to education
2) Employment supports
3) Health, including mental, spiritual, physical and preventative health
4) Addiction support
5) Trauma counselling
6) Effective violence prevention & response services
7) Rights knowledge

Housing Design Ideas

Location
1) Near libraries, malls and ethnic community and supports
2) Safe neighbourhoods with good schools
3) Close to nature, beach, parks

Housing Design
1) Discrimination free, open to all differences
2) Programming, i.e. cooking, art activities, yoga, advocacy work
3) Common area, to socialize, cook together, i.e. more communal environment
4) Social enterprise attached to housing
5) Live together with your own women's community
6) No labelling of units
7) On-site staff support
8) Small buildings
9) Women and children only housing