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To:

From:

(sheena campbell)

Subject: Bridge Housing Society

Hi Dara.

Lucy asked me to pass on this draft of the research paper on the housing needs of women in the DTES that BHS initiated. The audience for the document is BHS itself. They are hopeful that the info will assist them in directing thier furture programming. If you can send me comments quickly I would really appreciate it. Thanks.

Housing for Women in the Downtown Eastside: a place to call home.

The need of women in the downtown eastside are clearly articulated...they need money. They need training and education and chances at jobs. They need support systems which offer sustained opportunity for themselves...They often need ..help at fighting their addictions..they need a place they can call home.

Introduction

Homelessness has reached crisis proportions in the downtown eastside (DTES) of Vancouver. With the increased vulnerabilities of women, the need to compile the relevant research and to focus specifically on the issues that homeless women face in the DTES, was identified. In order to increase understanding on this issue qualitative interviews were conducted and a review of the research was done.

This project was coordinated by the Bridge Housing Society for Women (BHS). BHS was established in 1993 to work with issues surrounding women and housing, and in particular, the lack of safe, affordable housing for women in Vancouver's Downtown Eastside. The mission statement is, to enable women, through self-direction and community involvement, to have a home to call their own. The primary focus has been to establish housing for women in the Downtown Eastside. After many years of fund raising and community networking, construction of Bridge's first building will begin in July of this year. By September 2000 it is expected that the new Bridge Housing Society building will be fully rented and operational.

There are 2 definitions of homelessness as defined by the United Nations. Absolute homelessness or shelterlessness refers to individuals living in the streets with no physical shelter. Relative homelessness refers to people living in spaces that do not meet basic health and safety standards,

including: protection from the elements, access to safe water and sanitation, security of tenure and personal safety and affordability. 1 It has been documented that if there is a history of mental illness or addiction then there is an increased risk for absolute homelessness.

There are no accurate estimates for the numbers of women in the DTES who are shelterless or relatively homeless. Surveys have estimated that 10% of the SRO rooms (relatively homeless) in the DTES are occupied by women. Other surveys have contacted over 200 women who are by the above definition absolute homeless. As data collection of this kind is extremely difficult there are no complete, updated or comprehensive numbers available.

2. Background

Vancouver's DTES is a area of contradiction. It is acknowledged to be the poorest postal code in North America. It is an neighborhood rife with conflict, addiction, police presence, crime and poverty. It is also a neighborhood which many residents describe as the only place of acceptance they have found; an area where there is a stable population and a great deal of community support. However, part of this seeming contradiction can be attributed to the rapid growth of the surrounding city, drastic cuts to social programs, the influx of drugs and the destruction of affordable housing. In a city experiencing rapid and uncontrolled development, the DTES, in light of it's proximity to the waterfront, is viewed by some as prime real estate. Residents are paying the price for this 'prime' location. Hotels which have historically been used as affordable housing are being destroyed at an alarming rate for the development of 'market' homes. The costs associated with refurbishing these buildings is prohibitive and therefore the buildings are generally torn down. With the tearing down of these buildings comes a reduction in available housing for the people of the area.

In situations where disenfranchised people are under attack by the prevailing social systems, it is the ones most vulnerable who fall first. Service workers estimate that women make up approximately 30-40% of residents in the DTES. The effects of poverty are keenly felt by these women. As one interviewee noted 'survival is a daily struggle'. Women in this area, like women everywhere, are victims of violence and exploitation. Many are drug addicted, or living with a mental disability. Many are involved in the sex trade. Many are mothers, some of whom have had their children apprehended by the state. HIV and hepatitis are present in epidemic proportions. Safety, comfort, clean water and healthy food are seen as luxuries not basic needs.

Very little accurate data exists to summarize the demographics of this area. The most accurate information was provided by those who work in the organizations which have contact with women on a daily basis. Amongst

those interviewed for this study, there was a high degree of corroboration as to the situation of women. Contrary to the outdated (and often non-applicable) census data, those interviewed estimated that women make up between 30-40% of residents in the DTES. The majority of these women are First Nations (approximately 65-80%). It was agreed that a vast majority (70-80%) were currently dependent on some form of drug, including alcohol and/or prescription medications (these results are accepted to be somewhat skewed based on the interviews being conducted with workers from agencies where women with addiction issues would come into contact). The women being seen by the service providers are also getting younger and younger. The average life expectancy for many of these women is estimated to be under 50 years.

3.

What the Research Reports

Women and Homelessness: an overview

Women are homeless for a number of distinct reasons. In contrast to men, homeless women often find themselves on the street based on an immediate crisis. The crisis may be financial but is more likely related to escaping a violent situation. As a result some of the women have their children with them. Many homeless women have histories of mental illness/institutionalization and substance use problems. Women tend to be homeless for shorter periods of time than men. Primarily this is because the situation for women living on the streets is overtly threatening, a situation which is further compounded when the woman has her children in her care. Women will also deny their experience of being homeless and will often enter into temporary relationships in order to find shelter. Generally speaking, as with all people who are homeless there are three commonalities. The first is that they have no housing available to them. The second is that they have no support networks - people or resources they can count on. Finally that they have very little, if any, income.2

Factors Influencing Women and Homelessness

Poverty

For women in the downtown eastside there is clearly a link between homelessness and poverty. The research consistently speaks to the need to address the basics of life which are currently unavailable to women in the downtown eastside3. Poverty is the largest single factor influencing the women's lives4. Poverty is an overwhelming characteristic of the women..with the average income being only 57% of the Statistics Canada poverty line figures5. Poverty is the identified as the root cause of many of the other factors influencing women's lives in the downtown

eastside, including their involvement in the sex trade. A full 100% of DTES women responding to a survey on violence stated that the enhancement or provision

4. influencing factors continued...

of the basic necessities (safe/affordable housing, food, money and daycare) was the first most important step to help eliminate violence in their lives6. Poverty is a form of violence and needs to be addressed as such.7

Violence

Violence is another factor which seems to greatly influence not only women's causes for homelessness (escaping an abusive situation) but also a continued threat once the women is homeless or in temporary shelter. Women will turn to the downtown eastside..once there, however, a woman often finds herself surrounded by yet more violence8 . In a study done in 1989 it was found that 43% of the women respondents had experienced physical violence in their places of residence9. The situation for homeless women seeking safety in the shelter system is no better. Many women have experienced violence, including sexual assault, in co-ed temporary shelters. Safety is not available to most women without homes. The experience of women living on the streets echoes many of the same concerns. It is a situation where women are constantly living in fear, every night facing the risk of being raped or killed10.

Abuse

The effects of childhood abuse is another factor cited by both the written research and during interviews with key informants. The statistics on the actual numbers however vary a great deal between the written research and the observations of the service providers. Regardless of the differences the numbers are still staggering. In

one study on violence, 65% of the respondents stated that they had been the victims of childhood abuse. In contrast the key informant interviews place that percentage closer to 90%. In either case there is agreement that women are often re-victimized by their experiences on the street. The effects of child apprehension and the residential school legacy further influence this victimization.

Many of the front line workers interviewed believe that most women are suffering from some form of from post-traumatic stress disorder. This situation is

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exacerbated everyday through the ongoing struggles to find a safe environment. In a daily situation which combines poverty, violence and trauma there is no room to heal from any past situation. New trauma's are being experienced everyday. One service worker described the victimization as 'relentless'. Without housing, or with the unsafe housing that is available to most women, women will never have the opportunity to experience a true sense of personal security.

Housing

The specific housing needs of women in the DTES has been documented. What is repeated as a priority in the reports is consistent. Housing is essentially unavailable and what there is, is unsafe.11 In the period between 1970 - 1994 Vancouver experienced an eleven (11%) percent decline in total number of SRO's and non-market housing units in the Downtown Core.12 The issues related to housing are the issues that affect women of the DTES every day; violence, poverty, histories of abuse and addictions. The need for safe, affordable housing has historically been singled out as a critical piece of the health continuum for women in the DTES.

For financial reasons many of the women in the area live in single room occupancy hotels. These hotel rooms are priced substantially higher per square foot than housing anywhere else in Vancouver. The majority of SRO's exceed the housing allowance allocated by income assistance. Still these rooms provide the only available option for most women. The requirement to spend more than the allotted shelter portion means that most women must sacrifice basic necessities in order to be housed. These rooms are generally without a proper lock, without basic cooking facilities and involve sharing a washroom - usually without a lock - with up to 10 men. Women are at a significantly increased risk of being victims of violent crime due in part to their physical inability to protect themselves within their homes.13 As noted in a recent survey conducted through the City of Vancouver approximately 10% of SRO rooms are occupied by women.14 Understanding this situation is to recognize that it is impossible under these conditions to ever escape poverty and therefore to ever escape the detrimental effects of poverty such as critically poor health.15

6. housing needs continued...

Given the immense numbers of women in the area living with HIV/AIDS and other life threatening illnesses, housing is a fundamental need. In her report on HIV and injection drug use in the downtown eastside, Dr. Parry clearly identified affordable, safe housing as the most critical factor to address in order to curb the present

woman, rather than the numbers of women served. For this to occur, funders will need to be educated as to the necessity of this style of service provision. There is a cycle of despair and contradiction perpetuated by the system of social services and their reliance on short term funding. This cycle is clearly articulated in the report done by McCallan and Roback. In order to exist an agency has to have funding. To justify the need for the agencies existence, the agency is forced to adopt [specific] criteria. The original goals of the agency can be slowly eroded by the need to secure and justify funding. When appeals for funds are made, agencies advertise the problems of their clients, and the indispensability of their service. In this way, agencies reinforce prevailing negative images.21 Movement to qualitative evaluations over quantitative ones

must be acknowledged as legitimate. This type of service provision should guide the program development of agencies in the DTES. In order for this to be effective organizations will need to work cooperatively.

Services that Reflect the Diversity of Women

The other method which should be employed to deal with the complexity of issues, is that of consumer directed and implemented programming. Women who use the services, who's lives mirror the complexities of the issues, need opportunity to direct the services available. There is information which supports this philosophy. Younes and Bourret note that centres for women, such as transition houses, seem to meet women's needs more effectively and offer services of a higher quality than those serving both men and women. They attribute this success to the philosophy that transition houses have been guided by of autonomy rather than charity.22 It is also critical that the staff reflect the women to whom they are providing services. This reflection should be inclusive of a wide range of factors - age, race, ethnicity, class, sobriety, life history, etc. Organizations must be committed to developing the skills (if necessary) for these positions through a mentoring process.

Holistic Programming

The three outstanding characteristics of homelessness must be addressed for change 8.

implication for programming continued...

to occur. As noted earlier those characteristics are the lack of housing, supports

and income. Through the BHS project housing will be addressed by definition, therefore it is important to address the other two outstanding issues. The facilitation of strong support networks and the development of opportunities to create or increase a woman's income should be a part of the planned programming.

Summary

Poverty, child apprehension, residential school history, childhood abuse, housing, addictions, violence, mental health issues, sexual assault, physical disabilities racism, sexism, discrimination...the list goes on and on. Many reports over the past 10 years have laid out clear recommendations for how to address the multitude of issues facing women in the DTES. The ongoing calls for increased housing services for women seems to be meeting with little success. The housing needs of women in the DTES are complex and challenging. In the majority of cases there is a need for coordinated approach to their crises. This coordination will require the collaboration of a wide variety of influential partners, various government ministries and most fundamentally the women themselves. Without a planned and deliberate approach the solutions to this problem will continue to falter.

Resources must also be made available to this community in order to properly address all of the issues. All agencies in the DTES need to integrate the specific needs of women into their planning processes and must be held accountable as to their success in this area. Agencies must work collaboratively, understanding that each of the issues women present must be addressed for progress to be made.