

May 6, 2011

The Winnipeg Street Health Report

n March 2010 the Winnipeg Street Health Report research team came together to set in motion a plan to study the health status, housing and social service needs of people who are homeless in the city. Spearheaded by the Main Street Project, Winnipeg's oldest emergency homeless shelter, the project is the first of its kind in Winnipeg. The Winnipeg Street Health Report has been modelled on similar reports conducted in other major cities. It presents the results of a survey on the health status of homeless people in Winnipeg conducted in the summer of 2010. The report provides an analysis of survey participants' responses, seeking to build an overview of homelessness in Winnipeg and contributing to an understanding of the daily living conditions of people experiencing this devastating social problem.

There is a distinct lack of comprehensive data on the health status and needs of people who are homeless in Winnipeg. Without local research data, community organizations such as Main Street Project have had to rely on anecdotal information and evidence from other jurisdictions to develop programs and lobby government for better policies, which may or may not reflect the needs of individuals and families experiencing homelessness in the Winnipeg context. The lack of research has also meant that the public has not been provided

with a true picture of how one becomes homeless, what it means to be homeless and what it really takes to end homelessness.

The findings focus on the physical and mental health status of homeless people, how they use health care and social services, and their experiences of accessing these systems. Based on these findings, recommendations are offered with concrete solutions and strategies to improve the health of homeless people and to address homelessness.

Some of the highlights of the research were:

- The top reason people give for becoming and staying homeless is economic. Rents are too high and accommodations are out of reach because people lack employment, damage deposits, or are discriminated against by landlords when their source of income is disability or income assistance.
- Mental illness is not a main cause of homelessness for participants in our study. Only three per cent (3%) of respondents pointed to mental health problems as their reason for becoming homeless.
- Many have been homeless for long periods of their lives. Ten per cent (10%) of the people we surveyed have been homeless for 10 or more years; twenty-five per cent (25%) have been homeless for 2 to 5 years.



FAST FACTS continued ...

- Emergency shelters have become home. Thirty-one per cent (31%) of respondents have spend two or more years in an emergency homeless shelter.
- People in homeless situations have considerable involvement in public services. Forty-three per cent (43%) of respondents had been in the care of child welfare as a child or youth. Forty-five per cent (45%) have spent at least one night at a hospital in the past year. Thirty-nine per cent (39%) have been hospitalized for a mental health issue in their lifetime.
- Violence and assault are a regular part of life when you're homeless. Forty per cent (40%) of survey respondents were physically assaulted in the past year, with an average of three times.
- Sexual assault is more common for homeless women. One in five women we surveyed had been sexually assaulted in the past year, most of them more than once.
- Pain and exhaustion are common experiences for people who are homeless. Almost half of the people we talked to usually experienced some pain or discomfort, mostly moderate to severe. Fifty-four per cent (54%) said they are often so tired that they did not have the energy to walk one block or do light physical work. This exhaustion comes from spending whole days outside walking or waiting in line, and a lack of sleep.
- Homeless people have significantly poorer health than the general population. The people we surveyed are:
 - 20 times as likely to have hepatitis C
 - 8 times as likely to have epilepsy
 - 3 times as likely to have had a heart attack
 - 6 times as likely to have angina
 - 2 times as likely to have asthma
- 2 times as likely to have arthritis or rheumatism
 - 3 times as likely to have diabetes
- 10 times as likely to have fetal alcohol syndrome/fetal alcohol effects

The Winnipeg Street Health Report offers 15 recommendations, stemming from the analysis of the research. The recommendations aim to:

- Prevent people from becoming unhoused in the first place
- Improve and expand effective delivery of housing, health and social services to people who are homeless, based on recognized practices in the field
- Improve support for Winnipeg's adult and youth homeless shelters, drop-ins, and meal programs
- Improve access to and quality in primary and preventative care for people who are homeless and those at risk of becoming homeless
- Ensure adequate supports are available for individuals who are homeless who have mental health and/or addiction issues
- Target the specific health, housing and social service needs of women and Aboriginal people who are homeless

It is hoped that the Winnipeg Street Health Report will initiate a coordinated effort towards reducing and preventing homelessness in the city. Main Street Project has committed to calling together representatives from the City of Winnipeg, the Province of Manitoba, and the Government of Canada, as well as community stakeholders, to discuss the creation of a dedicated oversight body to implement the recommendations. The Winnipeg Street Health Report is available online at www.mainstreetproject.ca/Winnipeg-street-health-report.pdf.

Suzanne Gessler is a community researcher with a background in social and city planning with a focus on the homeless crisis in Winnipeg.

Christina Maes, a graduate student in the Master of City Planning program at the University of Manitoba, has worked with people experiencing or at risk of homelessness as a support worker and advocate in Vancouver, Calgary, and Winnipeg.

