

MOBILIZING COMMUNITY ASSETS TO SUPPORT SINGLE ADULTS LIVING WITH MENTAL ILLNESS AND SUBSTANCE USE DISORDERS IN SOCIAL HOUSING IN KINGSTON, ONTARIO, CANADA

RATIONALE AND GOALS OF THE PROJECT

We conducted this study to identify solutions for more effectively supporting the needs of tenants living with mental illness in social housing in Kingston, Ontario, Canada.

The specific goals of this project were to:

1) identify the specific strengths and psychosocial challenges of tenants living with mental illness and substance use disorders; and **2)** collaborate with tenants, social housing and community service providers to identify a strategy for more effectively addressing tenants' unmet needs.

This report summarizes the findings of a consultation conducted with:

1) tenants living in social housing; **2)** social housing providers; and **3)** health and social care providers in the broad community. The findings presented here will be used as a foundation for co-designing solutions that will follow the release of this report in the Kingston, ON community.



WHO DID WE INTERVIEW?



85
TENANTS



10
SOCIAL
HOUSING STAFF
& LEADERS



13
COMMUNITY
SERVICE
PROVIDERS

WHAT DID WE HEAR FROM TENANTS, SOCIAL HOUSING STAFF AND LEADERS AND COMMUNITY PROVIDERS?

COMMUNITY SERVICE PROVIDERS

THEME 1: Social housing is more important than ever, and we need to know how to support tenants as a community

THEME 2: *"We need to be sewing up the wound instead of just putting on a small Band-Aid that's going to fall off in five days"*

THEME 3: COVID has exacerbated inequities for tenants living in social housing

ESSENCE:
"WE'RE IN BETWEEN A ROCK AND A HARD PLACE"

TENANTS

THEME 1: Being chronically deprived

THEME 2: Surrounded by chaos

THEME 3: The critical importance of the relationship between social housing providers and tenants

SOCIAL HOUSING STAFF & LEADERS

THEME 1: *"It's like well okay you're landlords...but you still have...to take care of your tenants"*

THEME 2: We need services to be present with the person to provide effective support

THEME 3: *"Don't put a Band-Aid on it. Let's deal with it."*

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RECOMMENDATIONS

The findings of our stakeholder consultation have highlighted several needed changes to practice and policy that have the potential to lead to improvements in the lives of tenants living with mental illness in social housing and to and relieve pressure on social housing providers and community services. These include:

1. Identifying effective strategies for improving the social context of social housing to support tenant well-being: Such strategies need to be developed collaboratively among tenants, social housing providers, and community service providers.

2. Enhancing or implementing a trauma and violence-informed care approach within social housing and community services for individuals living with mental illness: The high rates of trauma among social housing tenants necessitates the use of trauma and violence-informed approaches within all health and social care contexts.

3. Designing on-site models of support to more effectively meet the needs of tenants living with mental illness in social housing: These models need to be co-designed with tenants, social housing providers, and community service providers. Once designed, the effectiveness of these supports need to be evaluated. Models known to be effective for improving the psychosocial well-being of tenants need to be properly funded in operational dollars to promote sustainability.

4. Designing solutions for improving collaboration between social housing providers and community services to more effectively address the needs of persons living with mental illness in social housing: Such solutions can be developed at the local level with opportunities for collaboration among community agencies and social housing providers.

5. Building healthier forms of community in social housing to increase the resilience of individuals living with mental illness: On-site supports and/or community agencies can collaborate with tenants to build community that supports well-being.

6. Providing education to community service providers and tenants regarding the nature of social housing and the limited supports that are available in current social housing models: Social housing providers may consider providing information to community service providers and tenants on what resources they may have at their disposal for supporting tenants. Such education can be provided in written materials, presentations, and in daily conversations with community service providers and tenants. This information can be used as a foundation for collaborating on supporting tenants.

7. Improving security in social housing buildings by using approaches that are not based on punishment and surveillance: While tenants in our consultation identified the need for increasing the presence of security guards in their buildings, we encourage social housing providers to be cautious about security-focused approaches which may unintentionally increase unnecessary evictions and criminalization, rather than provide needed support to tenants at risk.

8. Improving income support programs to more effectively enable tenants living with mental illness in social housing to meet their basic needs: Individuals living with mental illness in Canada have been disproportionately living in poverty for far too long. While there is hope that change is on the horizon with the passing of Bill C-22, a law that will introduce the Canada Disability Benefit (CDB), a federal benefit that will increase income support payments for qualifying individuals, this benefit has not been implemented [31]. As a community, it is imperative that we continue to advocate for structural changes that address ongoing poverty among individuals living with mental illness in social housing.

9. Increasing funding to enable social housing providers to repair existing social housing: In future refinements to the National Housing Strategy, policymakers may consider increasing community housing renewal funding to enable social housing providers to more adequately address delayed repairs to their buildings due to historical and current limitations imposed on capital funding for addressing these issues.

Want to know more?

<https://www.sjmhlab.com/mental-health-in-social-housing>

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