

25 Conclusion: Listen up! The role of dignity, respect and inclusion in our response to homelessness

Stephen Gaetz

“We need to not only bear witness to the words of people who have experienced homelessness but also act against cultural indifference. We need to listen and learn about the endurance needed while contending with the violence of the system...the deaths—or more accurately—murders. As ex-homeless/academic I have to think that there needs to be an audience for these words so that i/we/you can work against the indifference that perpetuates homelessness. We keep trying in different ways to get the message across, the same message, because we know the solutions. This is why we are presenting narrative truths –truths that are witness to the politics of poverty, the industry of homelessness, the lack of housing and so on as evidence of suffering which at the same time must be seen as a refusal of indifference. People need to listen and learn”

(Davis, 2014, personal communication)

In the fall of 2014, at the Canadian Conference on Ending Homelessness, a group of people who had experienced homelessness discussed ways to have their experiences acknowledged, respected and heard. Conference attendees included policy makers, planners, service providers and researchers, some of whom may have experienced homelessness at one time or another, but it is safe to say

that the vast majority (including this author) have not. Speaking to this large audience, the Lived Experience Advisory Council of the Canadian Alliance to End Homelessness proclaimed that there cannot be solutions to homelessness without the active involvement and engagement of those with lived experience. They suggested the enactment of the following seven guiding principles:

1. Bring the perspectives of our lived experience to the forefront
2. Include people with lived experience at all levels of the organization
3. Value our time and provide appropriate supports
4. Challenge stigma, confront oppression, and promote dignity
5. Recognize our expertise and engage us in decision-making.
6. Work towards our equitable representation
7. Build authentic relationships between people with and without lived experience

This call for inclusion in establishing solutions to homelessness is incredibly valuable. In Canada, we often pride ourselves on the fact that human rights are of utmost importance—that all individuals are treated with dignity

Do we listen to the voices of people with lived experience? Do we listen carefully, and listen enough? Do we present authentic opportunities for participation and for meaningful engagement in the design and delivery of solutions to homelessness?

and respect. A true test of how and whether we actually embrace these values comes when we look at the experiences of people who are, or have been, homeless. Do we accord people who find themselves in this situation the same rights and respect as those who are housed? Is there recognition that all individuals—regardless of their housing situation or personal circumstances—should be acknowledged, their knowledge and experience respected and their voices heard? One of the peculiarities of the way we respond to the problem of homelessness is that the voices of people who experience homelessness are not always heard. I am talking not only about situations in which people access services, whether shelters, healthcare or day programs. This lack of respect for the voices of people in these circumstances is also evidenced at the policy and planning levels, and even in many research contexts.

It is worth asking—for those of us who are concerned about the problem of homelessness—do we listen to the voices of people with lived experience? Do we listen carefully, and listen enough? Do we present authentic opportunities for participation and for meaningful engagement in the design and delivery of solutions to homelessness?

This volume speaks to these themes. It is the outcome of the work of the Inclusion Working Group (IWG) of the Canadian Observatory on Homelessness. This working group is comprised of people with lived experience of homelessness and works in collaboration with researchers, service providers and decision makers in government and service delivery. The mandate of the IWG is to consider ways in which, through engagement and collaboration, personal experiences can be brought to bear on our understanding of and response to homelessness through policy and practice. The idea being that lived experience is knowledge, and that capturing and mobilizing that knowledge and experience is a worthy aim of research.

People with lived experience of homelessness rightly speak with frustration about how we as a society have responded to the issue. There is a strong sense that nobody is listening—that we have built a ‘homelessness industry’ to respond to the issue that, in some ways, creates many more problems than solutions. We don’t focus enough on prevention—on ensuring that we have supports in place and systems that work to help people avoid homelessness. Once people lose their housing, we often blame them for their circumstances or make the false assumption that this is their ‘choice’—because if people choose to be homeless, we really don’t have to care, do we?. The systems and services we have in place often times treat people poorly and with disrespect, and sometimes it seems there are too many barriers in place designed to deny people service. The status quo is not okay.

So people who have been homeless came together to write this book because they want people to listen. They wanted readers to learn about their experiences, and hear what they have to say.

There is a strong desire from the writers for their experiences to speak to policy and practice in Canada, and to improve responses to homelessness. This is where the collaboration with researchers became important, as it became our task to take this knowledge and translate it into recommendations for policy makers and practitioners. Several key themes emerged from this exercise, some of which

made it into chapters in this volume. Some of the core messages from this body of work include:

1. We need to shift our approach from managing people while they are homeless, to preventing it in the first place.

There is nothing I fear more than being homeless again. I grew up in a household of fear, and have survived several forms of abuse. I have been addicted to opiates. I have been incarcerated. I have had to fight for my literal survival on a lot of different occasions. I have hitchhiked across America, and lost everyone I loved at one point. My life has had more than a fair share of frightening moments, but nothing scares me nearly as much as homelessness (LeBlanc, 2015, p. 96).

One of the things that the contributors to this book hope to make clear is that we need to think differently about how we respond to homelessness. Too many people in Canada are comfortable with the notion that emergency services should form the basis of our response; that if there are shelters and soup kitchens in place, we are doing enough. In the end, emergency services are there because something bad happened that led to someone becoming homeless, and so we need them. But we need to do more. We need to look at what happened upstream and deal with the problem at the source.

Many of the authors wrote extensively about what led to their experiences of homelessness. For the reader, learning about their pathways into homelessness is instructive. One can see how for many people, if the right interventions were in place when they were really needed, a whole lot of hardship could have been avoided. Ensuring that women fleeing violence have the right supports and the opportunities to move forward in a safe and planned way would be a start. For those struggling with addiction, making sure they are able to access treatment and support in a timely fashion would be beneficial. For those who have experienced trauma either through their personal lives or their work, having access to resources and supports is key. It makes much more sense to help people when they are struggling, and to prevent homelessness by providing the right interventions at the right time.

I began my career, as do many, as an idealistic young officer, wanting to help. Many, many traumatic events, and without

resources and supports to process them, and within a culture of policing that requires officers to ‘man it up,’ stole my idealism and my life (Anonymous, 2015, p. 54).

As Anonymous’ above quote highlights, prevention means more than crisis support. We need to address broader structural issues that put people at risk. The lack of affordable housing in Canada is a well-understood problem, yet continues to be one we ignore. The fact that people don’t have enough income to meet basic needs—not just rent, but food and clothing—contributes to the risk of homelessness, putting people on the edge. Domestic violence continues to be an issue. Racism and particularly the trauma that has resulted from the impact of colonialism on Aboriginal peoples must be addressed. Solving homelessness in some way means addressing -> poverty, because in a way homelessness is just a very extreme form of it.

It must be recognized, however, that the immediate need for basic services such as food will continue to rise due to government cuts, declining economies, low vacancy rates, etc. In the sector that serves people who are homeless we have always needed prevention as well as intervention services. (Huntingford, 2015, p. 90).

Finally, we have institutions and systems in place that are complicit in producing homelessness, and therefore are badly in need of reform and restructuring. The ‘problem’ of homelessness is not just about individuals so much as the failure of systems, and the fact that many people are more or less dumped into the shelters. People being discharged from hospital or mental health facilities into homeless shelters when we know through research that their conditions will get worse is one example. Discharging people from prison into homelessness becomes a ‘crime production’ strategy, again because we know that the risk of reoffending increases when ex-prisoners become homeless. Finally, our child protection laws and practices need

*“Started flattered
then was battered
papers scattered
dinner plattered
dishes clattered
people nattered
teeth chattered
face spattered
clothes tattered
blood splattered
dreams shattered
nothing mattered”*

(Duggan, 2015, p. 74)

updating, to end the flow of young people leaving care into homelessness.

So responding to homelessness means doing much more than providing emergency services and supports, no matter how necessary they are. Even our current focus on prioritizing chronic homelessness can be seen as well meaning, but ultimately limited in its ability to really get at the root of homelessness. While most certainly we need to support people who have been homeless a long time, and those who have mental health and addictions challenges, at the same time we are capable of doing more (we can handle more than one priority response), and an equally important priority is to prevent homelessness in the first place. Those who are chronically homeless now were not always homeless. If we really want to address chronic homelessness, we should do more to stop people from becoming homeless in the first place. In Stasha's words: "I want to live in a world where we view access to housing, basic needs, privacy, and dignity as human rights (rather than as privileges)" (Huntingford, 2015, p. 99).

2. The need for respectful encounters in service delivery is paramount.

A common theme in the stories presented here is that when engaging services—either within the homelessness sector or mainstream services like healthcare—people are not treated with dignity and respect. Their stories tell us that they are not always seen as valued human beings who aside from experiencing hardship and trauma bring strength, energy, hope, good ideas and assets that should be acknowledged and respected. All too often in service delivery environments people are treated without respect, and their choices and opinions are not heard.

In fact, I would argue that we often infantilize people in this situation—creating unrealistic structures and rules designed to benefit a service, but ultimately disrespect the rights and lived experiences of individuals who are dependent on the system because they lack the opportunities and choices that available to housed people. Curfews; demanding that people not drink as a condition of obtaining services; making people leave shelters during the day even if they are sad, depressed or ill; restricting outreach workers from giving food to people living on the streets; and overcrowded shelters that function as a warehouse for individuals with nowhere else to go, are all examples of how expedience and service goals trump individual rights and respect. As Sean pointed out in his story, what is often missing in these contexts is a respect for relationships and

human dignity. People should not be treated as ‘homeless individuals,’ as lesser persons, or as completely outside of society. Rather, they should be treated as human beings with the capacity to contribute to society.

The way we deliver services influences whether people feel judged and shameful about their experiences. It is very important to me that our services reflect our values. I believe that services should be shaped for (and by) the people that need them, not the other way around (Huntingford, 2015, p. 89).

We need approaches that respect the rights of individuals and the choices they make. One of the strengths of Housing First is that it is built on the notion of choice and participation in decision-making. Individuals have a choice about their housing and the level of service provision they need.

Similarly, harm reduction approaches are based on the idea of choice, and of individuals participating in decisions regarding their own substance use and recovery. Many in this volume spoke of how their lives were characterized by the problematic use of drugs and alcohol, and in fact keeping people in a state of homelessness where their only option is emergency shelters can exacerbate the problems.

A lot of the problematic substance abuse in shelters is because one almost has to be intoxicated just to deal with all of the drama that the homeless face daily: violence, oppression, condescending attitudes, a horrid diet and worst of all: nothing to do. There are so many things that can mess with your day in such a place (LeBlanc, 2015, p. 99).

One of the strongest approaches to harm reduction is to provide people with housing and supports because the very experience of ongoing homelessness can create and exacerbate addictions.

When I look back at the most helpful resources that did the most to get me off the street, they were not goal-directed; the case workers were simply present and listening, while I created goals that I felt ready to accomplish in my own time. As a parent, I use the same style to raise my kids—a mixture of harm reduction, active listening and trust in the natural sense that kids (and all people) have of right and wrong. I don’t need to put so much energy into pushing my kids into some idea I have of who they should be, and I

think they appreciate it. (Book, 2015, p. 22).

Give people choice. Give them options. Most importantly, give them housing and the supports that they need. This should seem like an obvious approach simply because the very notion that individuals should have choices and the ability to make their own decisions is one we hold in high regard for both ourselves and our friends. It should also be true for people who experience homelessness.

3. There is a need for better coordination between homelessness services and mainstream services.

It is sometimes said that the homelessness sector is one of the only ‘businesses’ where we do not really listen to the customer. So listen up. Many of the people who wrote in this volume shared their experiences of a poorly coordinated ‘non-system’ that is burdensome to navigate, which becomes a real barrier to moving forward with their lives.

People need access to services and supports. When someone experiences problems and fall on rough times, we should not put up barriers, or assume that emergency services, such as shelters and day programs are a reasonable or suitable response. As Richard shared in his story:

I think, for the most part, the major contributor to my ending up on the streets was the lack of addiction treatment programs available. Any long-term treatment has a six- to eight-month minimum wait time. Shelters become an easy option with free meals and a roof over your head; and you're close to downtown, which leaves no need for a bus pass for transportation” (Henry [Richard], 2015, p. 57).

It is not just a lack of access to services that creates problems. The lack of connection between large institutions such as hospitals, prisons and the homelessness services produces outcomes for people that can be dehumanizing, degrading and sometimes extremely dangerous. The story that Jesse tells of being discharged from a hospital after shattering his leg and suffering a deep infection shows what can happen in these situations.

The first night at the homeless shelter the pump was gone. By the third and fourth nights my prescription was, just like the expensive medical equipment, stolen. A week into my stay, the infection was

back. Not surprisingly, the nurse never came. When I had the pump, my meds, and my hope I could at least see the light at the end of the tunnel, I could at least dream of keeping my leg and walking on my own again. After my stuff was stolen, I just had nothing left. It was then that I totally gave up and turned to the two things that had always made me forget: drugs and alcohol. (Thistle, 2015, p. 38).

The 'logic' of discharging people from hospitals because they recover better at home breaks down when there is no home to go to. When Jesse was discharged into an emergency shelter where the care he needed was not possible, the result was nearly death. The trauma and frustration of his experience is clear:

I guess the people who wrote the rules never figured that homeless people have crippling surgery too and need a safe place to recover, or maybe they did and didn't care. Who knows? All I knew was I wasn't welcome to stay (Thistle, 2015, p. 38).

Such a situation should never happen. It should never be acceptable to discharge people from institutions into homelessness. This is a failure of planning, systems coordination and service delivery. We have to fix this.

4. Combatting stigma is essential to ending homelessness.

The contributors to this book were very clear on one thing: they wanted to be treated not as 'homeless persons,' but as individuals for whom homelessness was something they experienced. People did not want their identity to become one and the same with that experience. Homelessness was something that happened to them, but does not define them or their lives. This is important because homelessness is a label that stigmatizes people and carries with it a lot of negative connotations. As Stasha says: "Homelessness is a symptom of holes in our social safety and social support nets. I think it is interesting how the phrase 'the homeless' distracts from the fact that homelessness is a *symptom* of policy failure" (Huntingford, 2015, p. 91).

It is unfortunate that as a society many of us do indeed tend to hold very negative views about people who experience homelessness. A study by the Salvation Army (2010) reveals some of the popular misconceptions regarding people who experience homelessness. In a poll of Canadians, it was found that:

- **Approximately 40 percent** of Canadians believe that most homeless people **want to live on the street** and in shelters.
- **Almost 30 percent** of Canadians believe that a **good work ethic** is all you need to escape homelessness.
- **Nearly one-fifth** of Canadians believe that individuals experiencing homelessness are **always to blame** for the situation they are in.
- **43 percent of Canadians never give money** to a homeless person on the street.
- **More than 60 percent** believe that money given to a homeless person is likely to go to **drugs or alcohol**.
- **40 percent** believe that most homeless people are **mentally ill**.
- **More than one-third of Canadians** are scared of homeless people.

Having been homeless, Jesse is all too aware of these attitudes:

Being a homeless person you're matter out of place. You're the grotesque, unwanted wildlife living in the urban-hinterland forests. Everyone stares at you, judges you and tells you to get a fucking job. The social distance that separates you from civilization also separates you from your own humanity. I know. I've lived it (Thistle, 2015, p. 36).

These negative perceptions can have a strong impact on policy and practice. If we think that people choose to be homeless and /or don't want to better their situation, then we don't have to care. The consequences of such views are considerable. A better outlook would be the one Rose shares in her story: "We all have problems. The truth is: we all have the same wants, needs and solutions" (Henry [Rose], 2015, p. 25).

5. The most progressive and rights based approach to addressing homelessness provides people with the housing and supports they need.

Housing is a right, and in Canada should be recognized as such. It is not something you have to earn or prove you are worthy of having. Unfortunately, we as a society fail to adequately make this commitment. Instead, our response to

homelessness is more likely to focus on the provision of emergency services, without a clear pathway out of homelessness.

Emergency supports should never be confused with a solution to homelessness

We will always need emergency services, because bad things happen to people that mean they need short-term support until they get back into housing. However, such emergency supports should never be confused with a solution to homelessness. As Sean describes, the environment is not really acceptable for long-term living, and can undermine people's efforts to move forward with their lives:

There is no such thing as healthy living at a shelter. The food for the most part is rancid, and you are surrounded by every sort of illness with people stacked like books in a library. It is almost impossible to improve one's lot in life, and seems to me that it is simply existing, as opposed to living, that the government wants for us.

Privacy is also not an option at a shelter. One rarely has a chance to collect one's thoughts when always surrounded by other people. There is always pressure when surrounded by addiction, violence, mental illness—most times it feels almost hard to breathe (LeBlanc, 2015, p. 100).

I sometimes feel that we have become too complacent as a society when it comes to homelessness. I suspect that what gets in the way of action is that many feel that while emergency shelters for people who are homeless are not ideal, it is the best we can do in times of austerity. This logic this is absurd.

All humans deserve the dignity of having a home, regardless of their circumstances, or their personal pathways. We know from the success of interventions like Housing First that if individuals who have been homeless for years, who may have complex mental health and addictions problems—and it is worth pointing out that by no means do all, or even most homeless people suffer from these problems—are provided with housing and the right supports, they stay housed! Not only that, they thrive. This is not merely an opinion—there is an extensive and established body of research that attests to this (Goering et al., 2012; Tsemberis, 2010; Rynearson, Barrett, & Clark, 2010).

Shelters are important, but they are not a solution. We need to invest in housing

and support interventions that help people who experience homelessness obtain and sustain housing. As a society we pool our resources for common goods, whether it be infrastructure, policing or healthcare. We don't think, "Why am I paying for the street lights two streets over? Should my tax dollars really support the building of sidewalks across town?" No, we make a commitment to share resources to get important things done.

One of those things has to be to ensure that everyone in our society has access to housing. It is not a luxury, it is a basic human right.

6. People with lived experience should be key contributors to solutions to the problem of homelessness.

There are many roles to play in creating real and sustainable solutions to homelessness. We need policy makers who understand the issues and craft effective and humane responses to homelessness. Service providers and community planners need to provide services and supports that are effective and respect the dignity of people who need them. We need researchers to help us understand the problem of homelessness and the effectiveness of solutions. As for people with lived experience? We all too often see them just as consumers of the solutions we concoct.

People with lived experience can and should be given the opportunity to contribute so much more. The knowledge and wisdom that comes from experiencing homelessness is one that can genuinely contribute to policy and effective practice.

Stasha shares her experiences with policy makers who make decisions often without real world experience of the problem, or without even understanding the underlying nature of some issues such as addictions:

I wanted the people around that table to understand that addiction is often a symptom of trauma and that you cannot judge a person's choices until you look at what they are choosing between--for example 'pay the rent or feed the kids', where no one can make the 'ethical' choice (Huntingford, 2015, p. 88).

From a service delivery perspective, that experience can mean providing a more

understanding and empathetic encounter, because the provider has in a sense 'been there'. Stasha also speaks to the value of employing people with lived experience. She herself has been employed as a social worker:

I base my work on the idea that people need relationships with people the same as themselves and with people different from themselves. People need to feel like they belong and also be exposed to diverse views so that they can gain some perspective on their own. (Huntingford, 2015, p. 86).

Derek, whose journey into homelessness began when he was young, is now a counsellor dedicated to helping those who are struggling with the impacts of homelessness. Not only does his experience help his understanding, he points out that he also continues to learn from his clients: "(I don't) push my clients—if anything, they push me to see new things every week. I make it a habit to get out of the way while providing support, and they surprise me every time. People are amazing" (Book, 2015, p. 22).

Engaging people with lived experience is not just about tokenism, not just something we must do for appearances. Listening to people is not just to 'give people a chance to speak'. No, the ultimate goal is to involve people because their knowledge and experience matters. It is a kind of knowledge that I and others don't have. It is important knowledge. It informs the kinds of skills that people can bring to the table, whether planning services, or delivering them. It also provides hope and purpose, which Launa Sue discusses in her story:

Somehow I hope all my experience with temp work, drop-in centers, coffee and donut shops, and helping with the first Food Bank in Nanaimo, British Columbia in 1983 is just a beginning. I hope my sharing has somehow enhanced the lives of others as it has mine, and allows others the dignity and respect they deserve. We are all of one earth, and I hope to be part of the solution, with all the willing hands giving a 'lift up, not a put down' (Leboe, 2015, p. 81).

This is really important, because for the most part we have developed a response to homelessness that needs to be radically reorganized. We need to move from simply managing the symptoms of a problem, to working to prevent it, and to ensuring people get access to the housing and supports they need as quickly as possible. In many communities across Canada, we are making good progress in this regard.

But to really be effective, we need to find meaningful ways to include people with lived experience of homelessness in the creation and implementation of solutions. We need an inclusionary approach based on a profound respect for the rights and dignity of people who have lived through the experience of homelessness. In Sean's words:

I ultimately hope for the day when we no longer need to be writing stories like this, when adequate housing is recognized as a right as opposed to a privilege that escapes a large part of our community. Hope is beautiful, and may my hope that we all are housed properly be realized sooner than later. Until then, 'dream a little dream with me...' (LeBlanc, 2015, p. 102)

References

Davis, N.V. (2014). Personal communication.

Goering, P., Veldhuizen, S., Watson, A., Adair, C., Kopp, B., Latimer, E. and Ly, A. (2012) At Home/Chez Soi Interim Report Mental Health Commission of Canada. Retrieved from <http://www.mentalhealthcommission.ca/English/document/5032/home-interim-report>

Rynearson, S., Barrett, B., Clark, C. (2010). Housing First: A review of the literature. Prepared for the National Center on Homelessness among Veterans. Tampa, Florida. Retrieved from http://mhlp.fmhi.usf.edu/publications/view_publication.cfm?PUBLICATIONID=162

The Salvation Army. (2010). Poverty shouldn't be a life sentence: A report on the perceptions of homelessness and poverty in Canada. Retrieved from <http://www.homelesshub.ca/resource/poverty-shouldn%E2%80%99t-be-life-sentence-report-perceptions-homelessness-and-poverty-canada>

Tsemberis, S. (2010). *Housing First: The Pathways Model to End Homelessness for People with Mental Illness and Addiction*. Center City: Hazelden Publishing.