ADDICTION IN PERSONS WITHOUT HOUSING

A systematic analysis of the disproportionate substance abuse rates experienced by People without housing in Vancouver, British Columbia

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In 2021, there were **235,000 persons without housing** in Canada. This population is growing at the same rate as the general population.

**60%** of Persons without housing in Vancouver **experience addiction**.

They experience **disproportionately poor health** with the city needing to invest up to **$55,000/person**.

**100%** of Vancouver Downtown Eastside residents report being **negatively affected** by drug use of people around them.
HOMELESSNESS AS A MONOLITHIC TERM

Homelessness is an outdated monolithic term, oversimplifying the diversity of unhoused populations and carries connotations perpetuating societal stigma.

Types of Persons without Housing

- **Unsheltered**
  - Living on streets or places not intended for humans

- **Emergency Sheltered**
  - Staying in overnight shelters

- **Provisionally Accommodated**
  - Relying on temporary and unsecure accommodation without anywhere else to go

Terms such as **PERSONS WITHOUT HOUSING** OR **UNHOUSED** reduce stigma burden, but society is responsible for recognizing that they can't be lumped into 1 large group.
SYMPTOMS OF ADDICTION IN UNHOUSED PERSONS

61% of unhoused person deaths is to drug use.

Addiction symptoms affect everyone in the local and greater community.

Unhoused Addiction Perpetuates systemic marginalization.

Subjected to higher levels of stigma.

Increased risk of mental health illnesses.

A comorbidity that amplifies physical, and mental health issues.

Additional healthcare system strain decreased addiction service accessibility.

Deceases capacity to get help.

Leading cause of death.

All these symptoms make it harder to find work and housing, keeping unhoused persons trapped.

Unhoused Addiction
Substance use in unhoused persons is the result of a complex interplay of micro and macro forces. Mental health and Governments have the greatest impacts.
Some good mental health services are available, but low awareness and high wait times are significant barriers to accessibility. Clinical under-diagnoses of mental health issues despite disproportionately high levels make treatment harder to get. Dehumanization leads to apathy and oversimplification which contributes to stigma and inadequate service development/implementation. Housing and food insecurity impede treatment. Government policies often fixate on only 1 priority like housing, with certain services such as shelters increasing relapse risk. There is funding distributed through local, provincial and federal initiatives attempting to address these issues. Advocacy, research, and consultation/outreach about unhoused persons lead to better addiction program development for unhoused persons. Societal dehumanization is common towards people without housing, generating stigma that harms their physical and mental health. It makes treatment harder to get. Despite Diversity
Becoming trapped in an addiction-mental illness loop is a significant threat to health and safety of both the individual and community.

People observing unhoused, mentally ill persons using drugs generates negative stereotypes. This overlooks the complex socioeconomic factors that initiated this behaviour.

Drug use & Mental Health Positive Feedback

Poor Mental Health and drug abuse amplify each other in a positive feedback loop that is difficult to break.

Society promotes negative connotations creating lacks of empathy and understanding. Many of these are unfounded.

Systemic Discrimination

Govermental mistreatment has left populations, especially Indigenous, suffering from intergenerational trauma, racism, and reduced opportunity.

Drug Dependency in People Without Housing

Dehumanization Despite Diversity

Society promotes negative connotations creating lacks of empathy and understanding. Many of these are unfounded.

Barriers to Stability & Safety

This breeds institutional mistrust leading to reduced service access.

WHAT IS HOLDING THE STATUS QUO

It decreases peoples' ability to access services & resources, needing much more time and support.

Mental Health Issues

Becoming trapped in an addiction-mental illness loop is a significant threat to health and safety of both the individual and community.

This disproportionately increases their likelihood of experiencing comorbidities mental illness, substance abuse, and homelessness. There are inadequate resources available to break this cycle.
Advocates have the strongest ability to drive governmental changes by raising public will & awareness

**GOVERNMENT**
- Has the strongest ability to implement change through policy & law

**Educational Institutions**
- Researchers & Students
- Develops and implements
- Justifies the need
- Generate & distribute knowledge regarding

**Public Services**
- Aims to provide short & long term housing for
- Directly impacts, supports, and protects

**Vulnerable Members of Society**
- Unhoused
- Marginalized
- Mentally-ill
- Minority
- Non-profits
- Businesses
- Residents
- At disproportionate risk of becoming

**Local Community**
- Charities
- Business
- Residents
- Directly interacts with

**Unhoused Persons with substance use issues**

**Policy Makers**
- Implement policies & laws that affect
- Directly impacts

**Homeless Families & Individuals**
- Information System
- Provides data for

**International organizations (WHO, ISSUP)**
- Have influence over

**Residents**
- Directly impact

**Charity**
- Inspires & Evaluates

**Businesses**
- Policy planning & implementation
  - Economics
  - Crime
  - Addiction
  - Housing
STAKEHOLDERS INVOLVED

**Substance Use in Unhoused Persons**

**Alcohol**

**Heroine**

**Opiodes**

**Cocaine**

Legend

- One-Way Relationships
- Reciprocal relationships
International Strategies
The Netherlands uses a decentralized continuum of care model. Municipalities have primarily adopted a "Continuum of Care" model where persons without housing must improve their health first before they can move up the "housing ladder". This has led to a 12-19% decreases in common drug dependences.

National Strategies

Provincial Strategies

Local Strategies

Positive Impact on Addressing Addiction
Neutral Impact on Addressing Addiction
Negative Impact on Addressing Addiction

Complex Care Housing provides levels of support exceeding current housing programs. Facilities come equipped with specialized staff and resources for health, mental health, and substance-use challenges.

Housing First Initiatives focus on supplying stable housing. These can lower substance rates but don't address other root causes such as mental health illnesses.

Decriminalization of drugs for personal use reduces stigma and barriers to accessing treatment, employment and housing.

Safe injection sites provide clean needles and health professionals. This decreases mortality and healthcare system strain.

Psychiatric Deinstitutionalization closed mental health facilities leaving many patient on their own. This directly increased rates of homelessness and addiction.

Coordinated Access System & Homeless Individuals & Families Information System collect and provide homelessness data to inform policy making. Implementation has been slow due to leadership uncertainties.

Reaching Home is Canada's first federal Strategy for homelessness, overprioritizing housing. Direct funding for addiction or mental health services is not available.

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SOLUTIONS ACROSS SOCIETY
Colonial approaches to drug abuse harm Indigenous Persons

Celebrate minority ways of healing

Increase accessibility to Indigenous healing practices in substance use services

Allocate accessible funding for non-profit multicultural healing services

Set performance benchmarks to evaluate program efficacy

Work to rebuild trust with Indigenous communities through reconciliation

Establish healthcare/social work education curriculum guidelines to improve understanding of minority health issues & healing practices

Work directly with minority populations/advocates to understand trauma and best practices to support those populations
Unaddressed Mental Health Issues & Self-Stigma

Recognize and address mental health as a main cause of substance abuse

Elevated substance abuse & mental health issues

Vulnerable & Disadvantaged Population

Inadequate mental health services

The BC Government's "Psychiatric Deinstitutionalization" accelerated this feedback loop

Elevated substance abuse & mental health issues

FEDERAL GOVERNMENT

Amend the “Reaching Home” plan to provide sustainable funding for non-profit mental health and substance use services

PROVINCIAL GOVERNMENT

Partner with cities such as Vancouver to prioritize & implement holistic “Complex-Care” programs

Fulfil promises from "Psychiatric Deinstitutionalization" to provide more community mental health services in vulnerable communities

UNHOUSED PERSONS & ADVOCATES

Work directly with minority populations/advocates to understand trauma and develop best practices to support those populations
Public Apathy and Prejudice Raise awareness about the causes and impacts of addiction and becoming unhoused

GAPS AND LEVERS

GAP
Public Apathy and Prejudice

LEVER OF CHANGE
Raise awareness about the causes and impacts of addiction and becoming unhoused

INTERVENTION
Provide citizens avenues for learning and engagement with persons without housing

STAKEHOLDER ACTIONS

ACADEMIC INSTITUTIONS
- Develop community-based policy plans to raise awareness about unhoused health and wellbeing
- Encourage student engagement in public health by offering classes on topics such as unhoused health

ADVOCATES & NON-PROFITS
- Conduct awareness campaigns regarding current policy shortcomings, and why it is important to society as a whole
- Promote engagement opportunities where citizens can work with, support, and learn from persons without housing

Unconscious Bias Affects
Policy Makers
Researchers
Leadership
Healthcare Providers
Everyone

Negative & Inaccurate Connotations

Everyone Affects
Encourage governments and other institutions to abandon the usage of the term "homelessness".

Acknowledge that unhoused persons have unique stressors & needs, so a one-size-fits-all "Housing-First" strategy is inadequate.

Directly engage & consult with persons without housing to inform and refine holistic policy.

Create sustainable programs that address substance use and remove barriers to employment.

RECALL THAT:
- Every unhoused Person has unique circumstances and unique needs.
- These needs decrease ability to get help for addiction.
- Terms like Homelessness are monolithic and oversimplify this issue.