

Housing and Homelessness

Adapting the Violence Against Women Systems Response to the COVID-19 Pandemic: An Overview of Results from the MARCO VAW Study

Increase in Homelessness and Housing Precarity

72% of frontline participants reported that more of their clients were experiencing homelessness or housing precarity during the pandemic compared to before

Some VAW survivors had to stay in abusive situations because they could not access shelter or housing, a form of “hidden homelessness”:

“I think that it was hard for him to get a job, right? [...] So, he was a stress. The lease of the house where we were living it was going to end and we were looking for another place, but they were very expensive. So, the baby in the house, we sharing the space all the time. All the time because everything was closed. I couldn't go to a mall because I had to be there, because it was a lockdown.” [Survivor participant, C78]

“I started calling all the time to see what was available in shelters because I wasn't sure. [...] And the search went from Toronto to I'm looking I'm talking to people in Oakville, I'm talking to people in Oshawa and Ajax and Curtis and everywhere in southern Ontario. I have no car, but I can't let that stop me. And there's nothing available. So, we stay.” [Survivor participant, C74]

Some survivors experienced discrimination from housing providers, in combination with rising rents, making it even more challenging to secure housing during the pandemic:

“The landlord refused to have them as a tenant. It's not legal, but when they interview each other, [...] the owner directly asked her how many kids you have and if their children's age is younger, then they say no. Or when they say yes, they charge them more, extra money.” [Non-residential frontline participant, P138]



Challenges for VAW Staff in Securing Housing for Survivors

More than
1 in 2



frontline participants reported facing challenges in referring their clients to shelter or housing services because services were closed, disrupted, or at maximum capacity during the pandemic.

Staff often struggled with long wait times for securing housing for their clients due to a lack of stock during the pandemic

“I always get the same answer from housing workers and let me tell you, I've lost count the amount of resources and referrals I've had. It's always like, well, because of COVID, it's hard. And then the wait list is 10 plus years. And then they have this affordable market rent lists that they have come out every week. And I've tried to do those. And like every week I'm looking at at least 15 apartments, 15 different places, and it's all over the city.” [Survivor participant, C75]

Challenges in securing housing were even further exacerbated for survivors who are newcomers:

“Everything is so slow when they apply for the permanent resident or when they want to sponsor a family member or now, [...] If a client doesn't have a status, they are not able to apply to housing. [...] If they separate from the abuser, we only have three months to apply. After the three months, they [do] not qualify. So, getting the status is sometimes get more than three months, right? And now, more. So, yeah, immigration is like, it's very bad.” [Non-residential frontline participant, P92]

In addition, remote service delivery has been challenging for those staff working with survivors experiencing economic or housing precarity or survivors who are elderly or less technologically literate:

“The sister-in-law disconnected the internet, so she wouldn't be able to contact me through the email, but just the phone. But sometimes, we need internet access [...] She went to Tim Horton's with her young children [to access internet], and then her extended family stated that she does not care about children.” [Non-residential frontline participant, P138]

Transformative Capacity of Housing on Healing

While housing precarity can impede therapeutic progress, the opposite was also evidenced by participants: securing housing had a transformative impact on the lives of survivors and their healing journeys.

“What this pandemic did to me though, it made me stronger. And ever since I got my place in April, now I'm starting to quit cigarettes. [...] I always told myself when I was growing up, I want a home. I finally got my home. So it's time to quit [smoking].”

Survivor Participant,
C73

“I got the permanent residence. My child got the proper housing. Now I can cook my food for me. This stove thing, this personal fridge, like it means a lot. [...] Each and every corner of this house is important that I got that freedom. I got my house. I can sleep on my own. I can think on my own.”

Survivor Participant,
C77



Source: Yakubovich AR, Shastri P, Steele B, Moses C, Arcenal M, Tremblay E, Huijbregts M, Du Mont J, Mason R, Hough L, Sim A, Khoe K, Bayoumi A, Firestone M, O'Campo P. Adapting the violence against women systems response to the COVID-19 pandemic. MAP Centre for Urban Health Solutions, St. Michael's Hospital, Unity Health Toronto. Toronto, ON. June 2022.