

**Canadian Population Health Initiative's  
*Improving the Health of Canadians:  
Mental Health and Homelessness***

No one knows exactly how many Canadians are homeless.<sup>1</sup> Definitions vary, as do methods by which to count or estimate a city's homeless population. Although different approaches yield different results, current data suggests that more than 10,000 people are homeless on any given night across Canada.<sup>2</sup> Further, current research on the homeless population indicates a higher prevalence of mental illness,<sup>3</sup> substance abuse,<sup>4</sup> and suicidal behaviours<sup>5</sup> relative to the general population.<sup>6</sup>

This information was featured in a recent report released by the Canadian Population Health Initiative (CPHI), a part of the Canadian Institute for Health Information (CIHI). Created in 1999, CPHI seeks to: foster a better understanding of factors that affect the health of individuals and communities; and contribute to the development of policies that reduce inequities and improve the health and well-being of Canadians. On August 30, 2007, CPHI released *Improving the Health of Canadians: Mental Health and Homelessness*.<sup>7</sup> The report, which is the first of three reports on mental health that CPHI will release over the next 18-months, presents an overview of research, data, and policy and intervention specific information related to mental health and homelessness.

Determinants of Mental Health

Mental health is more than the absence of a diagnosed mental illness.<sup>8</sup> According to the World Health Organization (WHO), it is “a state of well-being in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”<sup>9</sup>(p. 1) A number of individual and broad-level determinants of health, in isolation or in combination, are linked to mental health and homelessness - for example, the amount of income spent on housing, mental illness, addictions, poor mental health, loss of social support, and family conflict. These and other factors can influence mental health in complex ways that are not always well understood.<sup>6</sup> By focusing on specific groups in the population, such as Canada's homeless, these links can be explored further.

Mental Health and Homelessness

Increasingly, studies involving the homeless have had a mental health focus—exploring the roles of stress, coping, self-esteem, and social support in health and well-being. These studies show a tendency for higher levels of stress,<sup>10</sup> lower perceived self-worth,<sup>11</sup> less social support,<sup>12</sup> and coping strategies in which there is a distancing from a stressor as opposed to active problem-solving.<sup>10</sup> Research suggests that these factors are associated with depressive symptoms, substance abuse, suicidal behaviours, and poor self-rated health.<sup>10, 13-15</sup>

### Hospital Use among the Homeless

New analyses of CIHI data presented in the report indicate that mental disorders are the most common reason for emergency department visits (35%) and inpatient hospitalizations (52%) among a sample of homeless adults in Toronto, Calgary, and Vancouver. Among the general population, injuries and poisonings are the most common reason for emergency department visits (25%), while pregnancy and childbirth (13%) are the most common reasons for inpatient hospitalizations.

### Policies and Programs: Housing and Community-based Mental Health Programs

The report also looks at the effectiveness of two types of related policies and programs — housing and community mental health programs. Published evaluations indicate that programs with a Housing First approach are effective at helping the homeless achieve stable housing<sup>16</sup> – this approach provide clients with housing first and then any necessary training or treatment they may require, on a voluntary basis. <sup>17</sup> Evidence also indicates that some community-based outreach and case management programs are effective at helping homeless individuals achieve stable housing, obtain greater satisfaction with their overall well-being, and require fewer hospitalizations and emergency department visits.<sup>18</sup>

### Roles for Others

Mental illness and compromised mental health are more common for the homeless than for the general population.<sup>19</sup> But which comes first? Some studies suggest that compromised mental health and mental illness can worsen with continued homelessness.<sup>20</sup> Other research has found that people with compromised mental health or mental illness are at risk of becoming homeless.<sup>3</sup> This, along with other information presented in the report, indicates there is a role for everyone, across all levels of government and sectors within and outside of health, to play in understanding and addressing the link between mental health, mental illness, and homelessness.

### Close-Ups

Within one week of its release, *Improving the Health of Canadians: Mental Health and Homelessness* received mention in 53 print articles nationwide, 68 broadcast mentions, and 46 electronic mentions.

The report can be downloaded free of charge from [www.cihi.ca/cphi](http://www.cihi.ca/cphi).

## References

1. P. Begin et al., *Homelessness* (Ottawa, Ont.: Parliamentary Research Branch, 1999), [online], cited June 26, 2006 from <http://www.parl.gc.ca/information/library/PRBpubs/prb991-e.pdf>.
2. Statistics Canada, *2001 Census: Analysis Series—Collective Dwellings* (Ottawa, Ont.: Statistics Canada, 2002), Statistics Canada catalogue no. 96F0030XIE2001004.
3. Mental Health Policy Research Group, "Mental Illness and Pathways Into Homelessness: Findings and Implications," presented at the Mental Illness and Pathways into Homelessness Conference, Toronto, Ont., on November 3, 1997.
4. P. Goering et al., "Characteristics of Persons Who Are Homeless for the First Time," *Psychiatric Services* 53, 11 (2002): pp. 1472-1474.
5. The McCreary Centre Society, *Against the Odds: A Profile of Marginalized and Street-Involved Youth in BC* (Vancouver, B.C.: The McCreary Centre Society, 2007).
6. Public Health Agency of Canada, *The Human Face of Mental Health and Mental Illness in Canada* (Ottawa, Ont.: Minister of Public Works and Government Services Canada, 2006).
7. Canadian Institute for Health Information, *Improving the Health of Canadians: Mental Health and Homelessness* (Ottawa, Ont.: CIHI, 2007).
8. World Health Organization, *The World Health Report 2001: Mental Health - New Understanding, New Hope* (Geneva, Switzerland: World Health Organization, 2001).
9. World Health Organization, *Mental Health: Strengthening Mental Health Promotion* (Geneva, Switzerland: WHO, 2001).
10. E. Votta and I. G. Manion, "Factors in the Psychological Adjustment of Homeless Adolescent Males: The Role of Coping Style," *Journal of the American Academy of Child and Adolescent Psychiatry* 42, 7 (2003): pp. 778-785.
11. J. B. Unger et al., "Homeless Youths and Young Adults in Los Angeles: Prevalence of Mental Health Problems and the Relationship Between Mental Health and Substance Abuse Disorders," *American Journal of Community Psychology* 25, 3 (1997): pp. 371-394.
12. S. J. Farrell, T. Aubry and E. Reissing, *Street Needs Assessment: An Investigation of the Characteristics and Service Needs of Persons Who Are Homeless and Not Currently Using Emergency Shelters in Ottawa* (Ottawa, Ont.: University of Ottawa, 2001).
13. J. B. Unger et al., "Stress, Coping, and Social Support Among Homeless Youth," *Journal of Adolescent Research* 13, 2 (1998): pp. 134-157.
14. R. G. Smart and G. W. Walsh, "Predictors of Depression in Street Youth," *Adolescence* 28, 109 (1993): pp. 41-53.
15. S. T. Ennett, S. L. Bailey and E. B. Federman, "Social Network Characteristics Associated With Risky Behaviors Among Runaway and Homeless Youth," *Journal of Health and Social Behavior* 40, 1 (1999): pp. 63-78.

16. S. Tsemberis and R. F. Eisenberg, "Pathways to Housing: Supported Housing for Street-Dwelling Homeless Individuals With Psychiatric Disabilities," *Psychiatric Services* 51, 4 (2000): pp. 487-493.
17. D. K. Padgett, L. Gulcur and S. Tsemberis, "Housing First Services for People Who Are Homeless With Co-Occurring Serious Mental Illness and Substance Abuse," *Research on Social Work Practice* 16, 1 (2006): pp. 74-83
18. A. F. Lehman et al., "A Randomized Trial of Assertive Community Treatment for Homeless Persons With Severe Mental Illness," *Archives of General Psychiatry* 54, 11 (1997): pp. 1038-1043.
19. S. W. Hwang, "Homelessness and Health," *Canadian Medical Association Journal* 164, 2 (2001): pp. 229-233.
20. C. J. Frankish, S. W. Hwang and D. Quantz, "Homelessness and Health in Canada: Research Lessons and Priorities," *Canadian Journal of Public Health* 96 Suppl 2 (2005): pp. S23-29.