Original Research

Experiences of Newcomer Mothers Living in Emergency Shelters: Structural Violence within Canadian Systems

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Abstract

Background: Family homelessness is a pervasive and complex problem in Canada. The number of newcomer families accessing emergency shelters is troubling because of their experiences of interpersonal violence and the presence of children. **Aim:** The aim of this study was to explore the complex experiences of immigrant and refugee mothers in homeless shelters to better understand the role of structural violence on the mothers' pathways into and out of homelessness. **Subjects and Methods:** The community-engaged qualitative design utilized semi-structured one-on one interviews with ten women recruited from two emergency shelters and a group interview with seven newcomer mothers who had recently exited homelessness. **Results:** Findings revealed three themes; limited opportunities, intimate partner violence, and access to services. Newcomer women have limited opportunities to exit homelessness primarily due to public systems of support that are failing them. **Conclusions:** Canada's immigration, housing, and health care systems are a form of structural violence against newcomer women because structural barriers mimic the effects of interpersonal violence. Responses should be gendered, holistic and transdisciplinary.

Keywords: Immigration, Mothers, Violence, Homelessness

Introduction

Across Canada, family homelessness is growing and women and children stay in emergency shelters three times longer that adult singles [1]. Women make up approximately 27% of the adult homeless population and are the majority of lone parents in homeless families [2]. There is evidence that newcomers arriving through different admission streams may differ in human capital, family economic resources, and post-migration experiences, which may impact their long-term socioeconomic outcomes [3]. Most of these newcomers settle in urban centres, where affordable housing is an issue. Furthermore, many newcomers are likely to live in unsafe, overcrowded or illegal housing, and may lack the language and knowledge to understand their vulnerabilities in these situations and how to address them [4,5]. According to data from two family emergency shelters in Calgary Alberta, Canada, almost 30% of families on any given day are newcomers [6].

Although not all immigrants and refugees to Canada need long-term supports, some families will require assistance even after federal financial aid expires. Canadian public systems may expose newcomers to additional harms through siloed policies whilst providing inadequate supports to deal with complex needs [7].

The World Health Organization [8] declares that violence is a significant public health issue that is a leading cause of death amongst people aged 15-44 [9]. The United Nations [10] defines violence against women as "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life". Gender-based violence (GBV) recognizes how phenomena such as gender roles and expectations, entitlement, sexual objectification, and power differentials have silenced women and helped to perpetuate violence against them [11]. GBV may be divided into two categories: interpersonal violence (IPV) and structural violence. Interpersonal violence refers to "an act of economic, sexual, psychological, or other violence perpetrated by [one] individual against another" [12] whereas structural violence is the "social arrangements that put individuals and populations in harm's way" [13] and is built into society and its structures, including political, economic, and educational organizations. Structural violence differs from IPV in that it does not always have an obvious agent of violence, rather is integrated into the systems with which individuals interact. However, the effects of structural violence mimic the effects of IPV as policies and social practices enable, legalize, and normalize illegitimate and unfair acts that cause harm [14,15].

Aim of the Study

Structural violence leading to homelessness may operate on immigrant women from multiple directions, including limited labour market opportunities, restrictions on social assistance eligibility, and limited access to social supports and

services. Many of these issues are linked to poverty, a key structural cause of homelessness, to which recent immigrants are more prone than Canadian-born individuals [16]. Immigrant women feeling violence face additional barriers related to cultural ideals of sexism, isolation, stigma, and shame [17]. The current study explored the complex experiences of immigrant and refugee mothers in homeless shelters to better understand the role of structural violence on the mothers' pathways into and out of homelessness. Results of this study are used to propose policy changes that are 'gendered' to meet the needs of this vulnerable population.

Subjects and Methods

Study design

The qualitative design followed guidelines for ethnographic research that emphasize the importance of context to understand events and meanings [18]. Ethnography allowed the researchers to examine barriers and experiences that are not easily detected in quantitative or administrative data studies [19]. The ethnographic approach gave the research team an understanding of the participants' experience in an open-ended way that is particularly helpful when the problem is complex and/or participants are accessing multiple systems or sectors [20].

Data collection and sampling

Semi-structured one-on one interviews were conducted with ten newcomer women recruited from two Calgary, Canada -based emergency shelters. A group interview with seven newcomer mothers who had recently exited homelessness and moved into a supportive housing program provided opportunities to explicate strategies for 'successfully' ending homelessness. Participants were recruited using purposive sampling via posters and staff referrals at participating service agencies.

Retrospective interviews were chosen as this approach allowed for both historical and current data to be collected and examined simultaneously. As opposed to longitudinal research, which is costly and time consuming, retrospective interviews examine past histories and experiences in a much shorter time frame and allow participants to think, reflect and learn what effect past incidents have had on their lives [21].

Inclusion criteria

The inclusion criteria of the study included having been pregnant and/or had children within the last five years while experiencing homelessness; being over 18 years of age and English speaking. Participants received a $25 gift cards for their participation.

Ethical considerations

All members of the research team participated in training sessions for conducting qualitative interviews including how to gain consent, protect participant privacy and confidentiality, ensure voluntary participation, and ethical compliance for data storage. This study was approved by the University of Calgary Conjoint Health Research Ethics Board REB15-1765.

Community-engaged approach

Community- engaged research is an appropriate approach for studies involving marginalized groups, as it creates a means to break down power differences between researchers and participants [22]. In this study, representatives from two emergency shelters for families, a funder of housing programs and the provincial government ministry supporting vulnerable families served as part of the research team to provide expert feedback and advice. The inclusion of community partners brings diverse skills and perspectives to the inquiry process and adds rigour to the development of proposed changes. Their feedback and advice aided interpretation of results and the development of recommendations for changes in service delivery and public policy.

Data analysis

Sample size was determined based on guidelines for qualitative research for achieving thematic saturation [23]. Once themes were identified, the group interview was conducted to verify that no new information would be captured through continued interviews. The interviews were transcribed and analyzed using inductive thematic analysis, which involved an iterative process of a) reading and memoing of transcripts to identify potential themes, b) describing what is going on in the data to provide detailed descriptions of participants and their experiences and c) classifying the data into themes [24]. Each member of the research team read and openly coded each of the interview transcripts, which were organized into crude thematic frameworks. The research team met as a group several times to discuss and compare learnings.

Results

Upon arriving in Canada, many women were faced with realities that they neither anticipated nor desired and all had difficulty navigating the resettlement process, primarily due to barriers within the multiple public systems they had work through. Themes identified are: limited opportunities, intimate partner violence, and access to services.

Summary

Theme	Limited Opportunities	Systems Issues
Sub-theme	1. Transferring skills 2. Language and employment barriers 3. Childcare 4. Fear and violence	1. Complex, uncoordinated systems 2. In-eligibility for services

Limited opportunities

Some mothers had good jobs in their home countries but were unable to transfer their skills in Canada. *"In [my home country], I work [as an] accountant. I came here I work in the restaurant and after the restaurant they close. I work nail salon"* (Participant 6). Others were unable to find employment due to language barriers or lack of employment opportunities. Many women were dependent on their partners for their immigration status and work permits. Some mothers did speak proficient English and were ready to enter the workforce, but they were either faced with a string of temporary job offers or were ineligible to work due to suspended work permits. *"[The psychologist at the shelter] said I don't have a problem with anything with stress. It's only my status, that's my problem. My work permit"* (Participant 4).

The negative effects of these bureaucratic barriers often trickle down to other services and supports that are necessary for mothers to take care of their children and transition out of homelessness. *"I can't work, my kids can't get health care and I can't qualify for government benefits"* (Participant 5).

Navigating an unfamiliar human services system and labour market can be tremendously stressful, especially with long wait times for obtaining work visas. *"I am very able to work and very willing to work...but I am not allowed to. I've been a victim of family violence and bureaucracy and now I don't want to be a victim of the shelter... I applied for my permanent residency through humanitarian and compassionate considerations. They said it's going to take a year before they can decide"* (Participant 4).

The responsibility to take care of their children often conflicted with mother's ability to work. *"Before I go [to the shelter], I work seven days a week but ... when I have pregnant, I work six days a week. Now I have her... and no work"* (Participant 6). Whilst staying in shelter, mothers are often required to supervise their children around the clock as daycare is scarcely provided. *"So [at the shelter], I couldn't really work because you have to be around your kid at all time"* (Participant 2).

Intimate partner violence

All of the mothers suffered from partners who were abusive emotionally, physically, and/or sexually. *"Well first time I came here [shelter] I very sad. because my husband, he very bad guy"* (Participant 6).

Many mothers cited fear for their children's safety and wellbeing as a major contributing factor for them to finally leave their partners even though this compromised their status and work eligibility. *"He trampled on my self-esteem and just made me feel like I was nothing and nobody so even out here [after I left] I struggled.... I struggled..."* (Participant 2).

"I stayed to avoid homelessness... I stayed so long... because I knew ... I'm unable to work."(Focus group participant).

Fleeing from violence left many mothers in a precarious financial situation and many were unable to afford the costs of living as a result. *"Work labor job with two boys, you are low income, you need the low-income subsidy house. I try to apply, the [municipal subsidized housing program] didn't accept my application. I didn't have any choice. I don't try to come [to the shelter]. (Participant 3).*

Systems issues

Once homeless, mothers had to navigate multiple systems that are meant to be supportive but are confusing and complex. *"I didn't know what I was eligible [for], not being a Canadian, so that could be a confusion"* (Participant 2).

"Unfortunately, I wasn't able to get my papers because in, the law, if you're seeking refuge, you have to seek refuge from there. I seek refuge in the U.S. [which] made it more difficult for me to seek refuge in Canada so I wasn't able to...no kind of government support whatsoever. (Participant 2).

Many mothers shared their experiences facing barriers that complicate and delay their transition out of homelessness. Barriers to housing, for example, include expensive rents and long wait lists for subsidized housing. One participant explained, *"I can't get an apartment cause I can't afford the rent... it is very expensive to live here"* (participant 2).

Inability to access public healthcare and other government benefits was seen as an issue by many women and for some, a precipitating factor for homelessness. *"My son was really sick, my younger child... We didn't know what it was [...] I'm not a Canadian now or resident so I didn't have any kind of health care...I lost my job because I had to care for him"* (Participant 2).

One mother explained how receiving access to basic necessities was like "drawing the lottery". Another alluded to the lack of coordination of services and programs by sharing her experiences of being sent from one organization to the other and having to tell her story repeatedly. This experience was demoralizing. *"I feel stuck, I feel lost. There's nothing to do. I just feel empty"* (Focus group participant).

Another discussed how disappointing life is for her in Canada.

"If I had the money, I'd pack up the kids and go back home to...Hong Kong. I was in Toronto and that was a big disappointment, and I came here and it was a big disappointment. There's nothing for me here" (Focus group participant).

Discussion and Implications

The experiences of newcomer mothers in this study revealed difficulties faced in trying to navigate complex Canadian systems. Some women felt pressure to stay with

their partners, despite violence, in order to retain benefits. Others discussed being ineligible for benefits because they had left their partners during the sponsorship process. Intimate partner violence and immigration policies were the root cause of many of the women's struggles, including poverty and homelessness.

Recommendations

As many patriarchal norms and expectations are pervasive across cultures, it is unlikely that all sponsored, immigrant women who are victims of violence will be able to leave their abusers. Some may be worried about their children. Others may be impacted by cultural expectations of women, including silence about abuse or the normalization of violence [25]. However, efforts should be made to improve supports available to newcomer women, regardless of their status. This should include transdisciplinary partnerships to provide access to wrap around services for financial supports, housing, healthcare and childcare. For example, by having a staff member in shelters who has expertise in immigration and legal issues in particular, barriers that exist between several public systems could be reduced.

There is also a need to prevent homelessness among those families who are at high-risk. After leaving their partners or becoming the head of household, many of the women experienced a period of time where they were able to manage to maintain housing or a job. However, there is evidence that many individuals live within one 'precipitating event' from homelessness [26]; it is possible to provide supports to women who report experiencing domestic violence or those who are seeking financial or housing assistance within immigrant settlement agencies themselves, particularly if they have formal partnerships with affordable housing providers. A change in federal policy extending government supports beyond the current one year maximum for lone parent mothers who are fleeing violence would provide more time to access training, education employment and housing. Recognition of foreign credentials and work experience in other countries, would improve the employment outlook for these women and help to prevent poverty and homelessness. Policy changes may also be needed around wait times and documentation required for work permits and citizenship, especially for women fleeing violence.

While enhancing service delivery within and amongst service agencies working with different mandates (homelessness, violence, settlement) and changing federal policy is one approach, addressing structural violence for these women is considerably more challenging. Many felt trapped in homelessness because of the multiple 'systems' they had to navigate to deal with each 'issue' and feeling overwhelmed, helpless and demoralized when they were continuously "rejected" in their search for supports. Navigating access for supports for health care, employment, education and housing is further complicated by complex immigration policies that dictate eligibility and access. This is particularly difficult for women with language barriers and no familiarity with Canadian systems.

According to Thobani [27], public systems are organized in ways that forcibly exclude newcomer women in particular because they are seen as 'outsiders' and a strain on government resources. This experience is gender-based structural violence because public policies and subsequent service delivery do not recognize gender differences, roles and expectations, meaning they are not designed to deal with the unique vulnerabilities that women face including violence and protecting children. This creates inequities that have silenced women which perpetuates violence against them [11]. The results mimic the effects of a violent relationship [7,14]. A first step is recognizing the impact that siloed and complex public systems have on women who have already been made vulnerable by IPV. Second, responses need to 'gendered'. That is, able to ensure safety, supports for children and be flexible and adaptive to the needs of each family.

Limitations

This study had two primary limitations. Firstly, although the study involved the collection and analysis of detailed qualitative information, the sample size was small and does not represent the whole of the immigrant population. It was not possible to analyze by certain experiences such as immigration stream, length of time in Canada, or country of origin and thus, future research could use these findings to reach a broader group of mothers. Secondly, the research team brings their own biases to the research process. To diminish these, several meetings were held with the full research team. The inclusion of the insights of those working in shelters, government and housing programs enabled for a deeper understanding of current practises, gaps in the system, and ideas on innovative alternatives. Their feedback offered complementing views on the researchers' interpretations of the material that was shared by the mothers in their interviews.

Conclusion

This research elucidates some of the difficult experiences of newcomer mothers who are or have experienced homelessness. The women in this study faced multiple barriers to exiting homelessness. Many women in this study had left violent relationships leading them to seek temporary shelter in the first place. Exiting violent relationships leaves these women feeling uniquely vulnerable about losing their benefits or work permits. Transitioning out of shelter living is difficult because of the limited access to low cost or subsidized housing. Additional issues are barriers to adequate healthcare and other services due to the lack of coordination between services leaving women to be sent from one organization to another.

The findings serve as a starting point for discussing the broad issues and unique vulnerabilities of newcomer mothers experiencing homelessness and intimate partner violence, including understanding and responding to structural violence as a root cause of their homelessness. Future research could posit specific approaches to reduce structural violence and could evaluate the effectiveness of changes to policy and practice.

Acknowledgements

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