

POLICY BRIEF: HIGHLIGHTS

# COVID-19 and the Mental Wellness of the Homelessness Workforce

## ABOUT THE ISSUE

COVID-19 is having an overwhelming impact on people experiencing homelessness. The pandemic has highlighted and amplified existing gaps in housing policy and longstanding underfunding across the sector, leading to an increase in the rate of homelessness and precarious housing.

With the pandemic straining the capacity of shelters and community organizations, new research from the Centre for Addiction and Mental Health shows that frontline workers are at increased risk of burnout, vicarious trauma, and compassion fatigue<sup>1</sup> – all of which affects their ability to respond to their clients' complex health, wellness, and housing needs. These risks are even greater for staff and volunteers who have lived experience with their own mental health and substance use challenges.



### CHALLENGES AND CONSIDERATIONS

#### COVID-19 has magnified the links between mental health, substance use and housing.

Among people affected by homelessness, experiences of trauma, mental illness, and substance use are considerably higher than the general population. Addressing these health and wellness challenges while also attempting to prevent the spread of the pandemic has placed even more strain on shelters and community organizations already stretched thin.

#### COVID-19 is having a significant impact on frontline service providers.

The frontline workforce faces greater demands, fewer resources, and increased health risks. They see first-hand a tremendous amount of suffering among people with some of the most complex health and wellness needs. This kind of lived experience creates risks of stigma and discrimination, compounding the mental health and substance use challenges of the pandemic.

#### The social determinants of health are felt more acutely by the homelessness workforce.

Three-quarters of Canada's homelessness support workers are women. There are also more racialized and Indigenous workers than in many other sectors. In addition, wages tend to be low and employment is often on a part-time basis. Combined, these factors make this workforce particularly vulnerable to job insecurity, which can affect their mental wellness.

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<sup>1</sup> Kerman, N., & Kidd, S. A. Helping the helpers: Examining the mental health and support needs of direct service providers working with people experiencing homelessness.



The pandemic caused moderate or extreme financial problems for about 28% of service providers.



More than half of service providers have felt less effective in their jobs during the pandemic.

## POLICY RECOMMENDATIONS

Housing is more than physical shelter: it is a human right that is foundational to safety, public health, and mental wellness. To effectively combat COVID-19 while addressing the mental health needs and substance use concerns of both the homelessness workforce and people who are homeless or precariously housed, policymakers should aim to:

- ✓ Build on the emergency relief provided to shelters and social organizations during the pandemic to **address funding, resource, and policy gaps** at the federal, provincial, and municipal levels.
- ✓ Prioritize frontline service providers for the provision of **personal protective** equipment, vaccines, and other resources as the pandemic continues.
- Extend improvements to pay and benefits, including hazard pay and sick leave, as part of broader efforts to change the culture within the homelessness sector.
- Increase access to mental health and substance use services and supports for the homelessness workforce, including through employment-based benefits.
- Build the capacity of service providers to respond to their own mental wellness needs and the needs of others through ongoing training and supervision.
- Strengthen support networks within and across organizations working to address homelessness, including through community support, support from managers, and peer support from co-workers and people with lived/living experience.

#### VOICES FROM THE HOMELESSNESS WORKFORCE

We get \$400 a year for mental health support. That's nothing. That's three sessions. And for a job that requires continual exposure to vicarious trauma, we should be getting a lot more than that.

We're high risk every day. You're dealing with situations that are sometimes life and death, so you need to feel supported.

Download the full policy brief to learn more about this important topic.

You can also visit our website for more information about <u>our COVID-19 policy work</u> or to access <u>resources for maintaining mental health</u> during the pandemic.



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