### Poverty and Social Exclusion for Psychiatric Survivors

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### Poverty and social inclusion

- ♦ In Canada, 27% of psychiatric survivors live in poverty
- ◆ Access to basic human resources → increased quality of life and community integration
- Psychiatric survivors are considered to be one of the most socially excluded and marginalized groups in our society
- Evidenced in: the housing market, when seeking employment, social relationships, access to resources, and in social policies

#### Purpose

- to better understand psychiatric survivors' experience of poverty and social exclusion through a social justice lens focusing in particular on the co-existence of, and the relation between, poverty and social inclusion.
- \*\*social inclusion\*\*

#### Social Justice Framework

- Nussbaum's (2011) Capabilities Approach
- ▶ Emphasis on access to resources based on actual and potential abilities...Different people/different needs
- Agency and empowerment
- ♦ At its core, the Capabilities Approach requires that we question if *human dignity* is being respected (Nussbaum, 2006)
- ♦ Echoes WHO Organization's (2001) framework of disability

#### Research Design

- ♦ Community University Research Alliance
- Participatory Action Research
- Mixed methods
- Ontario, Canada

# Research Design: Data Collection

- Four subgroups were recruited: homeless, employed with housing, unemployed with housing, and those residing in group home settings
- ♦ Sample sites: homeless shelters, group living settings for psychiatric survivors, community and psychiatric survivor agencies, public housing, Employee Assistance Programs, and feefor-service mental health services
- Advertised in multiple ways

### Research Design: Data Collection

- Open and closed-ended questions regarding their perceptions of fairness and ethics
  - Ex: 'What is your experience of poverty?' and 'How does poverty relate to your experience of mental illness
- Followed by 13 quantitative surveys, face to face
- Demographic info collected
- ♦ Honorarium

#### Research Ethics

- Research ethics approval was obtained
- Consent was obtained after the letter of information was reviewed, & verbally discussed.
- De-identified data- storage
- Community resources and emergency referral preparedness

#### Data Analysis

- ♦ Theoretically informed by Nussbaum's Capabilities Approach to social justice (Nussbaum, 2011).
- ▶ Lofland and colleagues' framework for analytical coding (Lofland, Snow, Anderson, & Lofland, 2006).
- ♦ Initial emerging codes → focused into categories

### Demographic Findings

- ▶ Participants were between the ages of 18 and 72, with mean age of 40.7 years
- ♦ Approx. 67% of participants experienced homelessness at least once
- Mean income for one month was \$1068
- ♦ Majority of participants were single never married (62%; n=264).
- ♦ Grade school was highest level of education for approx. 47% of participants
- ♦ Approx. 75% (n= 286) of participants were unemployed at the time of enrolment

### Findings: Themes

- Poverty and mental health: "You just try to survive"
- ♦ Stigma: "People treat you like trash"
- Belonging: "You feel like you don't belong"
- ♦ Shared concern and advocacy: *"Everyone deserves housing"*

## Poverty and mental health: "You just try to survive"

- "They go hand in hand"
- "I started to live in poverty after (my) mental illness because it affected my ability to work".
- "...you are stuck between what do I buy, groceries or meds".
- ♦ Catastrophic impact: "Sometimes because of poverty you feel like you wanna commit suicide"; "The stress is to the point I tried to commit suicide not once, but twice. If this is what the world is I don't want to be a part of it".
- Survival, compromising access to basic human needs: "You just try to survive" → homelessness, prostitution, food insecurity

# Stigma: "People treat you like trash

- External and internal impacts and examples
- Unequal employment and housing opportunities & decreased sense of self-worth
- Based on a multitude of factors; mental illness & poverty
- Recognized mistreatment/deserving and accepting of judgments
- ▲ Internalization of external stigma: "abnormal", "worthless", hopeless, and helpless; "I am disgusted with myself too"

# Belonging: "You feel like you don't belong"

- Feeling like an outsider, "less than, "different"
- Impacted by stigma
- "when you're considered a freak, loser, moron, just because you're different it makes people look down on you twice as much"
- "I've pushed people away and people have pushed me away because they can't stand to see me hurt myself"
- Positive family support, organizations, engaging with people facing similar stressors

# Shared concern and advocacy: "Everyone deserves housing":

- ♦ Shared concern for other individuals: "Everyone deserves a living wage"; "Everyone deserves housing"
- Peer support
- ▲ Advocacy: "You can't speak for yourself, you need an advocate to speak for you and you have to jump through hoops just to get enough money to survive".

#### Discussion

- Social justice is not being met: "What does a life worthy of human dignity require?" the participants shared the counterpart
- Opportunities for a life with human dignity were perpetually denied as a result of societal and systemic discrimination and exclusion
- Shared yet individual experiences

#### Study limitations

- ♦ Limited to those who speak and understand spoken English
- Large sample for qualitative research (strength of this balances out disadvantage)
- ▶ Interview responses were handwritten by RAs, rather than being audio-recorded and transcribed verbatim

#### Conclusion

- ▲ If social justice is premised on the notion that human life is deserving of dignity, we question why psychiatric survivors have been deemed so 'undeserving' of such a life, and how such inequality can be countered
- Nussbaum's theoretical approach a fitting lens
- More research