

Quality of Life amongst chronically mentally ill adults on Vancouver's downtown east side across a variety of dwelling situations*



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Vancouver's downtown east side as described by a female participant & DTES resident of 30 years - Abbot to the West, Water/Powell to the North, Commercial to the East, and Keefer to the South
(maps.live.com)

*Sponsored by BC Mental Health and Addictions Research Network & MITACS-ACCELERATE

Background

Vancouver's downtown eastside (DTES) is a notorious challenge, particularly in the areas of:

- ✓ Homelessness
- ✓ Severe Mental Illness (SMI)
- ✓ Hard-Drug Addiction

Recent international findings show that the prevalence of SMI and addiction is higher among homeless individuals in Western countries than among age-matched controls (1).

Low-income residents of the DTES express clear sentiments about feeling overstudied yet underserved. Facing a population fatigued by study called for a research design with a light footprint. No previous research has examined quality of life (QoL) amongst residents of the DTES, or examined QoL across different kinds of living situations.

Previous research (2) has shown that transitions from homelessness into housing are not always associated with improvements in QoL. Instead, improved QoL is more frequently associated with moves into independent living situations, as distinct from 'supportive' housing situations.

More research examining the interplay between different housing situations and QoL is called for.

Objectives

To perform an exploratory qualitative investigation of the interplay between QoL and housing situation in residents of the DTES with chronic mental illness.

Methods

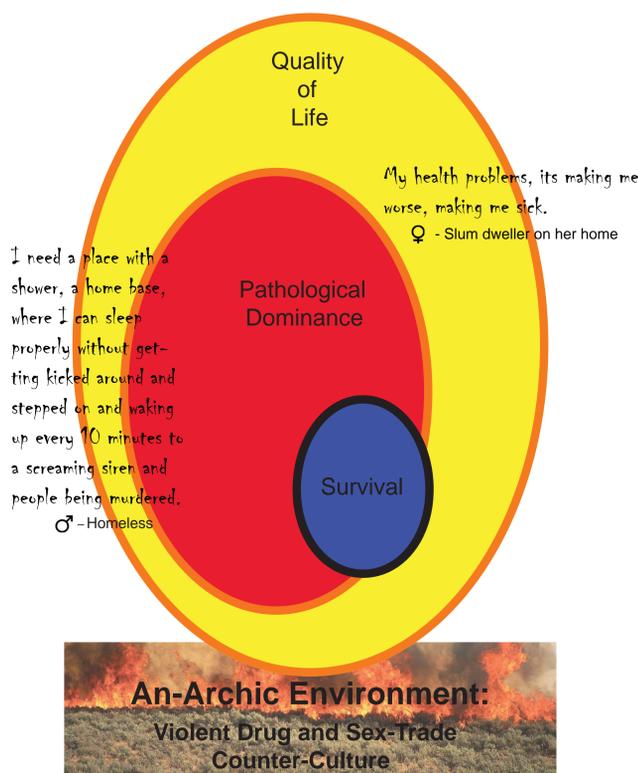
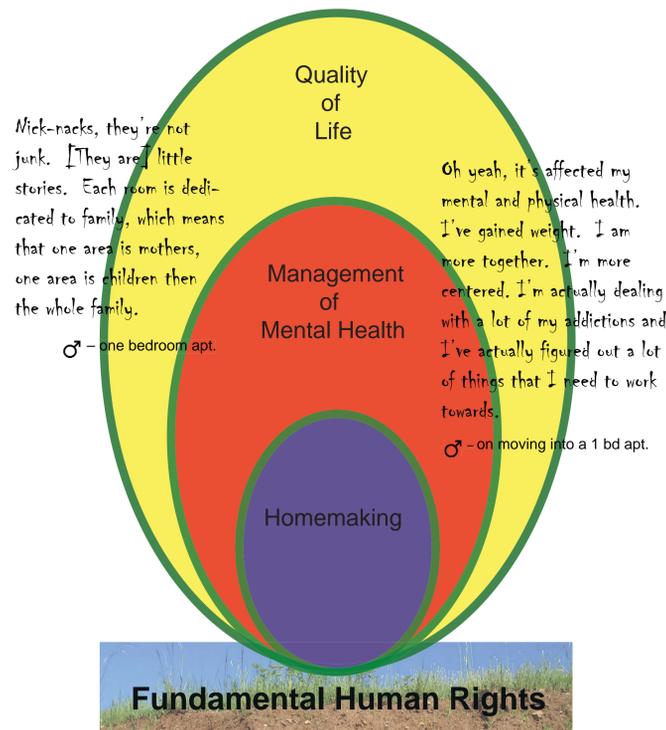
Overall Design: Qualitative research design paired with quantitative assessments (QoL assessed via QOL-BREF, severity of illness assessed via Clinical Global Impression (CGI) scale).

Participants: Individuals living with chronic SMI in the DTES were identified with the assistance of the Downtown East Side Residents Association (DERA) and the Vancouver Area Network of Drug Users (VANDU).

Based on literature review and consultation with DERA staff a semi-structured qualitative interview was designed. The qualitative data was transcribed and coded thematically.



Typical DTES SRO
(farm2.static.flickr.com/1126/946930296_5a939d019c.jpg)



Results

N = 12, Mean Age = 44 (SD=6.8)

Dwelling Types	Homeless	Shelter	SRO	Bachelor	1Bdrm	Multi-Rm House
Gender (Male/Female)	♂	♀	♂	♂	♂	♀

Mean QoL score = 10.5 compared to 14.0 for age matched peers in the general population (3).

Mean CGI score = 5 ("markedly ill").

Interim data analysis reveals 3 emerging themes with direct relevance to QoL:

- ✓ **Struggle for basic human rights**
- ✓ **Management of Mental Health**
- ✓ **Home Making**

While it is generally accepted that basic human rights are important for individuals to have a satisfactory QoL, in some dwelling situations on the DTES these conditions were not being met.

Participants are engaged in a day-to-day struggle for basic human rights

- ⊗ Stress over food and other basic needs
- ⊗ Unbearable living conditions (e.g. mold, small spaces, bed-bugs, cockroaches, rats, mice).
- ⊗ Anarchic and violent social conditions.

Management of mental health:

- Ψ Depressive symptoms
- Ψ Psychotic symptoms
- Ψ Addiction [Substance Dependence/Abuse]
- Ψ Medication Management Issues

Home Making:

- ⊗ Direct relationship between dwelling space and physical and emotional health
- ⊗ Development of identity and self expression through homemaking
- ⊗ Dependence on services for "housekeeping"



Henriquez Partners proposed solution: Stop Gap Housing. Semi-permanent housing made from shipping containers.
(www.henriquezpartners.com)

Conclusions

Similarly to Hulchanski's findings (4), we found that dwelling conditions on the DTES can prohibit fundamental human rights from becoming established. For the chronically mentally-ill this can exacerbate problems associated with the management of symptoms.

Furthermore, the anarchic environment, heavily influenced by violent drug and sex-trade based counter-cultures, appears related to the cultivation and perpetuation of psychopathology among the most vulnerable.

Achieving the basic tasks of home-making appear to be vital in attaining QoL and moderating the day to day severity of symptoms of mental illness. These tasks are more or less demanding depending on the dwelling type and provision of care services.

References

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