

CANADIAN WOMEN AND THEIR HOUSING: 1997

Introduction

Until the past decade, housing issues and their effects on women's health and well-being received little consideration. As more women have become independent housing consumers with particular needs and concerns, this deficit must be addressed. Canada Mortgage and Housing Corporation (CMHC) supports the principle of access to affordable housing, especially for the disadvantaged, and commissioned a study of Canadian women and their housing to provide input to policy-makers and researchers.

Housing, a basic need, is much more than a roof over your head. It is private space, family space, a place of learning and teaching within a larger community environment of services, schools, employment and social interaction. The Canadian government recognizes that adequate shelter, along with safety, sanitation, exercise and nutrition affect individual and community health.

As far back as 1961, the World Health Organization identified healthy residential environments as having two components—the unit itself and its neighbourhood. In 1992, the United Nations noted adequate housing as being well-built, with privacy, space, lighting, ventilation and in a location convenient to employment and services—all at a reasonable cost. A 1993 British study identified healthy housing as having space, heating, lighting, waste disposal, noise control and safety.

Objectives and methodology

The objective of this research study was to provide an analysis of women, health and well-being related to housing issues in the 1990s, and to suggest future directions for dialogue and study by academics, planners, policy-makers and women generally.

Quantitative and qualitative data was collected using a number of research methods including literature review, interviews and discussions with key informants about housing and/or women in Canada. Ideas were generated using a Delphi Panel of housing and health experts who considered issues and priorities for women's housing.

Findings

Housing affects the health and well-being of women in many ways. Location, for example, impacts access to:

- employment and community infrastructure;
- education, transport, health services, shopping.

Housing type and tenure affects:

- public health;
- safety and crime risk;
- empowerment and control over the surrounding environment;
- sense of family and community belonging;
- access to support networks.



A 1983 report, *Women as Housing Consumers* (McClain and Doyle), constructed a national statistical profile of Canadian women based on household composition, income, child-rearing responsibility, housing condition, shelter cost and tenure status. It concluded that women had not been acknowledged as housing consumers and that their housing requirements had not been addressed. Even in 1997, social policy thinking still centred on the traditional nuclear one- or two-income family.

While the nuclear family is still a reality for many Canadians, non-traditional households are common. Where one person is solely responsible for every household activity, that single parent (typically the mother) must do household chores, raise children, earn a living and attend to house repairs. Housing policy has not kept pace and housing design needs to address changing household composition.

Female-headed families are often unable to afford single-family, owner-occupied homes or to locate in neighbourhoods that have community schools and play facilities. As 34 per cent of single mothers do not own vehicles, housing location is important for community access. If healthy housing is to be achieved, more than a housing unit isolated from social and emotional needs is required.

Demographic and economic trends

According to Statistics Canada, females comprise 50.4 per cent (14.2 million) of the Canadian population. In 1991, just over 16 per cent (2.2 million) of the total female population were immigrants. Visible minority women have grown from six per cent of the population in 1986 to nine per cent in 1991 with 79 per cent born outside Canada.

Of Canada's female population, single women living alone account for 12.3 per cent with a further 3.9 per cent living with unrelated persons and 3.9 per cent living with other relations. Single-parent families, most headed by females, have grown from 10.4 per cent (1971) to 13.7 per cent (1981) to 16.4 per cent (1991) of all families with children.

In all age groups, single males have higher incomes than single females with a continuing income gap between male- and female-headed families. While women have

increased their presence in the labour force, they continue to earn less than men and have a higher rate of unemployment and part-time employment.

Tenure and affordability

The majority of women in two-spouse families live in owner-occupied homes. Single mothers, and women with low incomes, have alternate housing arrangements. The great majority are renters. In 1994, 31 per cent of single mothers were homeowners compared to 58 per cent of single fathers.

There has also been a significant increase in the number of Canadians (both male and female) who pay more than 30 per cent of their income for rent. In 1980, 38.2 per cent of tenants paid more while by 1995 that number had increased to 47.2 per cent.

Housing factors affecting women's health and well-being

Housing Choice

Women are more likely to rent and their decent housing choices are limited, especially for Inuit women and women with disabilities. Affordability problems have increased across Canada except for the three most western provinces. The Delphi Panel suggested that a plentiful supply of affordable housing for women should be a top priority.

Stability and Security

Housing must be stable and secure. Constant moving, often due to circumstances beyond their control, undermines female confidence and the healthy development of children. In 1995, female home ownership increased slightly—by 3.6 per cent—over 1980 but was still 30 per cent below the rate for males. While this suggests more stability for some, insecurity of tenure is a critical housing issue for women, especially seniors. National Population Health Survey (NPHS) data indicates female homeowners have lower levels of stress and better health than female renters.

Discrimination

Women face discrimination based on factors such as gender, ethnicity, marital and social status. Landlords or property managers may refuse to rent to teenage mothers or low-income or visible minority women. Even though home ownership rates among Canadian women increased from 36.7 per cent in 1980 to 40.3 per cent by 1995, accessing credit can be a particular concern for women when trying to obtain loans or mortgages from financial institutions.

Homelessness

Links between homelessness and health are well documented. An estimated 30 to 40 per cent of shelter users or homeless people in Toronto and Montreal are women. In the North, few emergency/transition shelters exist, despite overcrowding in Inuit communities. Shelter users are more vulnerable to disease, overcrowding, violence, poor nutrition and family breakdown.

Violence

The impact of violence on women's housing choices, as well as having a direct effect on their health and well-being, is significant. Many women return to abusive relationships because they have no other place to go. If a woman is forced to live in a neighbourhood or environment where she feels unsafe, the stress resulting from constant uneasiness or fear will affect her well-being.

Influence Over Housing Environment

Part of a health-promoting environment is influence or control over one's housing and the ability to remain in a stable community. Statistics Canada's NPHS data notes that female homeowners report a higher sense of mastery over their lives than female renters. CMHC's Centre for Future Studies in Housing and Living Environments found that participation and satisfaction do not correlate with income and education alone, but were strongly influenced by level of control.

Support Networks

Social support from family, friends, neighbours and co-workers within one's community greatly enhances social, emotional, mental and physical well-being. Single parents particularly benefit from strong, active community ties that provide companionship, child care, elder care and even house sitting during vacations.

Location of Housing

Location is important for ready access to community services. Some social housing projects are situated in "second choice" locations such as re-developed industrial lands or remote suburbs. Areas with pollution, exposure to lead or mercury, poor air quality or few green spaces negatively affect health.

Women Working in the Home

Most domestic activities such as shopping, meal preparation, house cleaning and child care are still typically undertaken by women today, regardless of whether they are also employed. Household work involves many stress factors, and is carried out in an environment that uses potentially toxic products and poses accident risks. In some cases, women also undertake home-based, paid work. It has been noted that female home-based workers spend considerably more time than their male counterparts maintaining family responsibilities, which could have important implications for health, particularly stress levels.

Conclusions

While the situation of some women has improved over the past two decades, with more women living in homes which they own, many women still face some of the same issues and challenges as in 1983. These include changing or reduced economic status, affordability problems, sole or primary responsibility for dependent children, changing lifestyles, non-traditional career and family decisions, and risk of or exposure to violence, particularly in the home.

This study identified a number of priorities for women's housing, health and well-being, including discrimination, special needs, safety, homelessness, location and access to community services. Other priorities, largely identified by the Delphi Panel, included:

- government support and funding for housing;
- improvements in housing choice, affordability, supply and access;
- improvements in housing stability and security of tenure.

The researchers suggest that there is a need for dialogue and action and an ongoing mechanism to review and monitor progress in meeting women's housing needs.

A key consideration is the strong involvement of women as stakeholders, facilitated by a national forum and related dialogue on women and housing.

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Research Report: *Canadian Women and Their Housing: 1997*

Research Consultants: SPR Associates Inc.

A full report on this project is available from the Canadian Housing Information Centre at the address below.

Housing Research at CMHC

Under Part IX of the *National Housing Act*, the Government of Canada provides funds to CMHC to conduct research into the social, economic and technical aspects of housing and related fields, and to undertake the publishing and distribution of the results of this research.

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