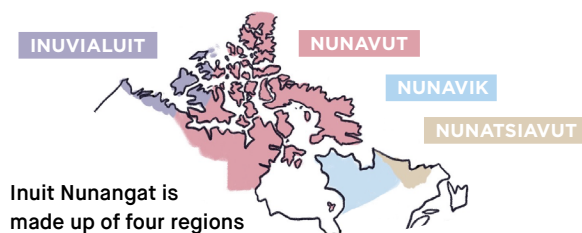


IMPACT OF A REHOUSING INTERVENTION IN NUNAVUT AND NUNAVIK

This study, part of a doctoral thesis in public health, takes place in the context of a rehousing intervention in Nunavut and Nunavik, two of the four regions making up Inuit Nunangat. It examines its strong potential for reducing social inequalities in mental health between Inuit and other Canadians.



1. The invariable form of the proper noun Inuit has been retained, attesting to its borrowing from Inuktitut.

Project made possible thanks to the support of:



SUMMARY

The results indicate that a significant improvement of psychological health and well-being was observed among project participants after their rehousing. This reduction in psychological distress is notably attributed to the reduction in the number of adults in the household and an improved feeling of having a “home.” Strategies to reduce overcrowding are levers for action with multiple potential benefits.

In particular, this research project shows that investments leading to the construction of hundreds of social housing units in the North serve as tools for social and identity transformation and, in doing so, promote psychological health and well-being of families. However, the scale of the socio-economic challenges in the Inuit regions is also highlighted, as is the importance of adopting an integrated approach aimed at an overall improvement in living conditions. The logic model developed for this project can be applied to other contexts, and support reflection on the impact that various types of housing interventions have on mental health and well-being, as well as on the associated mechanisms.

A brief history of housing in the northern region

■ BEFORE 1950: Semi-nomadic lifestyle and traditional dwellings

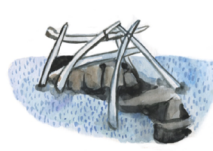
Until the 1940s, people moved around the territory to ensure their survival, by building dwellings adapted to the seasons and the needs of families.



Igloo made of snow



Summer tent made of skins



Qarmaq made of whalebones covered with skins

■ 1950-1960: Forced rehousing and sedentarization

The colonialist policies of the time led to the forced rehousing of the Inuit into fixed communities, primarily to support economic activities outside the Inuit way of life, to defend the Arctic and rationalize service costs (housing, health and education in the form of residential schools). This led to the emergence of federally funded houses in the area.

■ 1960-1972: Housing policies as an instrument of cultural assimilation

As a result of the first housing program in Canada's North, "matchbox houses" were built. Unsited to the arctic climate, these small unequipped dwellings quickly became overcrowded.



■ 1973-1984: Federal social policies, creation of Nunavik and housing corporations in Canada's North

The signing of the James Bay and Northern Québec Agreement, which formalized the creation of Nunavik in 1975, marked a major turning point in the political and legal organization of the Inuit of the Ungava region, notably through the establishment of housing agreements.

■ 1985-2015: Disengagement of the federal government in social housing financing, creation of Nunavut and political mobilization of Inuit

In 1993, the government's decision to halt new social housing projects exacerbated the housing crisis in northern regions. The Nunavut Housing Corporation, established in 2002, was tasked with creating, administering and coordinating the region's housing programs.

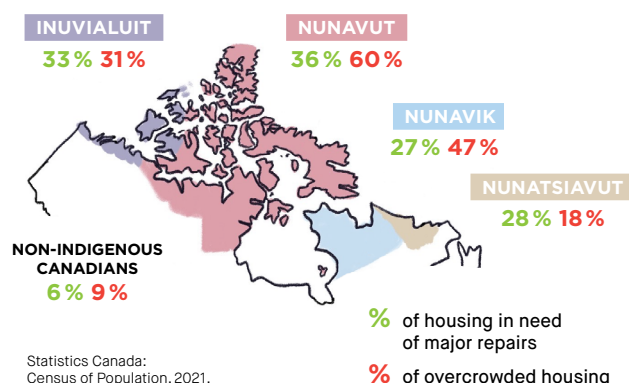
■ SINCE 2015: National and regional housing strategies

The advent of a new government in 2015 led to the implementation of the National Housing Strategy (NHS) and the adoption of the NHS Act. In 2019, the new Inuit-Crown Partnership Committee implemented the Inuit Nunangat Housing Strategy.

The scale of the Inuit housing crisis

Despite the various policies put in place and the advances in architecture, housing has never responded to the needs of the Inuit. Today, the housing crisis in Canada's North is characterized by:

- **A housing shortage** illustrating a major imbalance between the housing supply across the entire continuum and the population's needs.
- **A high proportion of inadequate housing (requiring major repairs)** within the available housing. In 2021, compared to non-Indigenous Canadians, the Inuit of Nunavik and Nunavut were 4.5 and 6 times more likely, respectively, to live in housing requiring major repairs.
- **The highest household overcrowding rates in Canada.** By 2021, just over half of the Inuit in Inuit Nunangat (53%) lived in overcrowded accommodation (of which the size is unsuitable for the number of occupants). In Nunavut, the rate of overcrowding was almost 7 times (60%) that observed among non-Indigenous Canadians (9%).



AVENUES FOR ACTION

The National Housing Strategy Act, in effect in Canada since 2019, explicitly recognizes housing as a fundamental human right. Among other things, the Act created the Office of the Federal Housing Advocate (OFHA), from which "submissions" can be made to report human rights violations caused by unsuitable housing conditions. On the basis of these submissions, the OFHA has the power to recommend changes to the housing regulations, policies and programs so as to modify the systemic factors at the root of the poor housing conditions. The Act provides citizens and organizations with new tools to approach the right to housing in a new, more concrete and holistic way.

The results of this study can be used as supporting documents (proof, as it were) should an observation be submitted to the OFHA and thus amplify the voices of those concerned.

The mental health impact of housing-related interventions

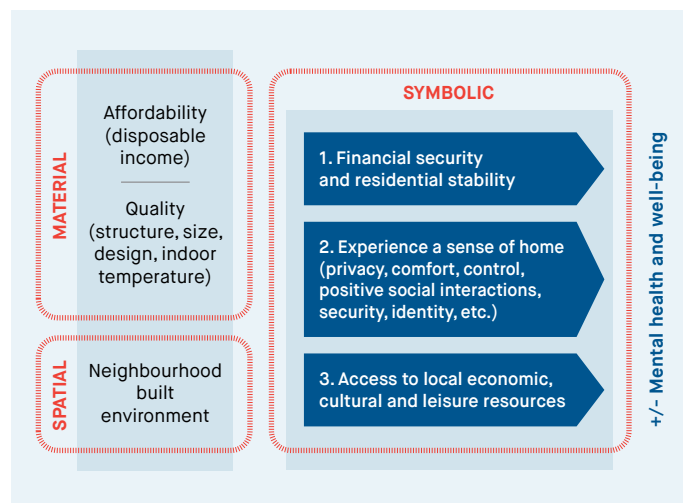
The primary objective of policies or programs aimed at improving housing is generally not to improve health. However, it is implied that by improving socio-economic determinants of health, such as income, built environment, and social support, such interventions subsequently have significant impacts on health.

LINKS BETWEEN HEALTH AND HOUSING

- The **material** (or structural) dimension, which includes the physical and financial aspects of housing and refers to the Canada Mortgage and Housing Corporation's (CMHC) definition of adequate housing, i.e., housing of adequate quality, of suitable size, and that is affordable.
- The **symbolic** (or psychosocial) dimension, which corresponds to the psychosocial benefits of "home" and is linked to the notion of ontological security of "home" (see section "What is home?").
- The **spatial** (or environmental) dimension, which situates the housing within its context, whether that be a neighbourhood, a community, or broader geographic area.

These three dimensions point to mechanisms in which action can be taken to improve health through housing, for example, by making housing more affordable.

FIGURE 1 The three dimensions of housing



What is a "home"?

- The place where you live and where you can live according to your values.
- Where you maintain harmonious relations with your family and community.
- Where there's enough space and privacy to function properly.
- Where you can exercise choice and control over your life.
- Where you feel safe.

According to the ontological security theory of "home" used for over 30 years, **housing can be a source of well-being**:

- if it offers stability, security and privacy, thereby enabling the development of meaningful practices;
- if residents feel in control and can fulfill their potential both individually and collectively;
- if these conditions lead to the development of harmonious relationships and a positive individual and social identity.

This theory aligns with the Inuit conception of well-being, which emphasizes social relationships and identity as fundamental elements of "home" experiences that can influence health.

HOW HOUSING SHORTAGES AND OVERCROWDING AFFECT HEALTH

According to the results of the study, the significant housing shortage and high rates of household overcrowding in Nunavut and Nunavik undermine the study participant's sense of "home." This has negative impacts on the psychological health of adults and the well-being of families.

The experience of overcrowding usually means living in "forced" cohabitation with several members of the extended family in multi-generational households where children, parents and grandparents all live together.

The results of this study show that it is the cohabitation of several adults which is detrimental to psychological health, since it involves constant compromises in daily practices and child rearing, and because it causes tensions in social interactions.

Causes of overcrowding

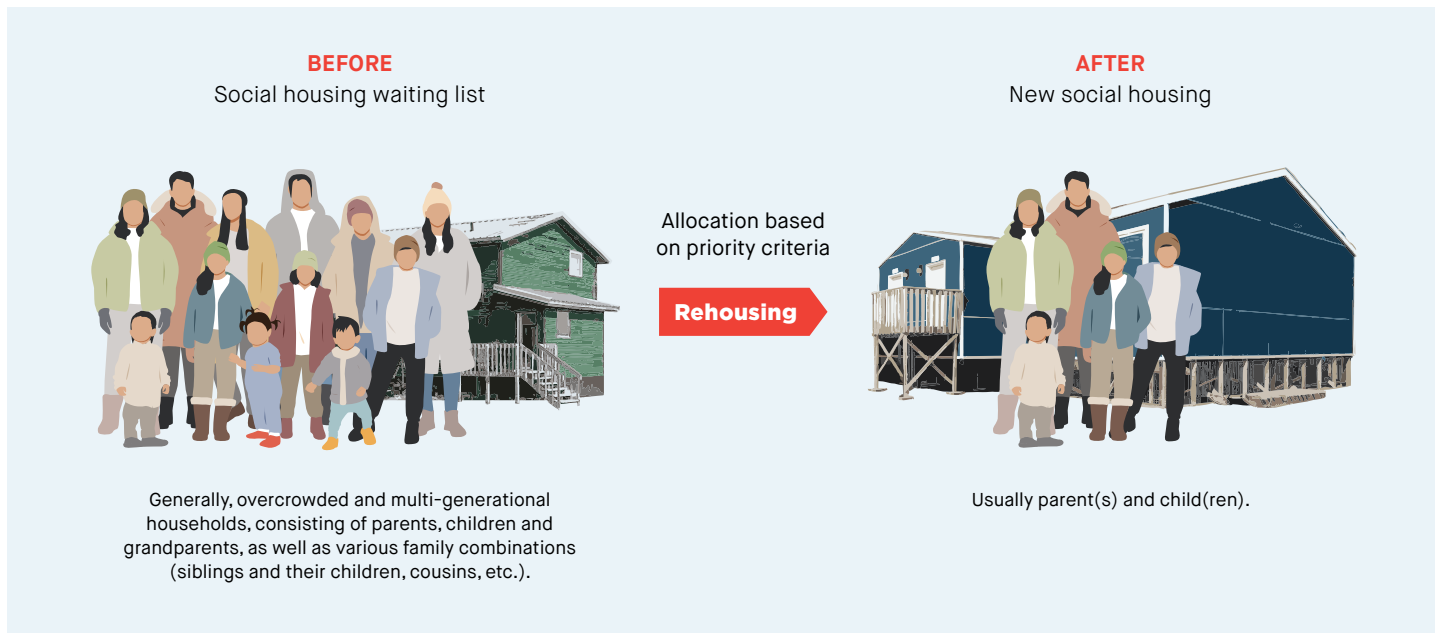
- The underfunding of housing since forced sedentarization.
- The resulting severe housing shortage, forcing people to crowd into existing accommodation.
- The inability of the private market to provide housing for the entire population, given the widespread poverty, economic volatility and the spatial dispersion of industries across a large area.

The rehousing context

The study, which took place in 12 Inuit communities presenting the greatest housing needs, examined the rehousing of Inuit adults registered on the social housing waiting list.

Units were allocated according to priority criteria established by the Nunavut Housing Corporation (Nunavut) and the Société d'habitation du Québec (Nunavik). These criteria included, among others, the level of overcrowding, dependent children,

and health problems caused or aggravated by the housing conditions. Rehousing generally took place in the fall, when construction or renovation of the units was completed. Most of the time, the people who were allocated the available units were already living in social housing (with their parents, grandparents, in-laws or extended family) and had been waiting for housing for several years.



Intervention at the heart of the study

In 2014–2015, more than 400 social housing units were built in Nunavut and Nunavik. This intervention led to the launch of a research project aimed at assessing the health impact of improved housing conditions, in collaboration with Inuit organizations responsible for housing, public health, advocacy, the safeguard of the rights and the promotion of Inuit interests.

This study explored the link between Housing conditions, psychological health and well-being of Inuit families in the context of a rehousing intervention. Data were collected before and after the rehousing, in order to identify the effects on mental health attributable to changes in housing conditions.

The project was carried out according to a mixed methodology, including a survey and in-depth interviews.

SURVEY

A total of 289 people were recruited to complete survey questionnaires in the 12 participating communities in Nunavut and Nunavik. Of these participants, only 186 moved into new housing, even though the situation of the entire sample was deemed a priority. More than 15 months after moving into their new homes (i.e., sufficient time for the effects on mental health to become apparent), 102 people completed the same questionnaires again.

INTERVIEWS

A total of 25 people from a Nunavut community were recruited to take part in in-depth interviews. Of these participants, 14 were on the waiting list for social housing, and 11 had moved into a new social housing unit more than a year earlier.

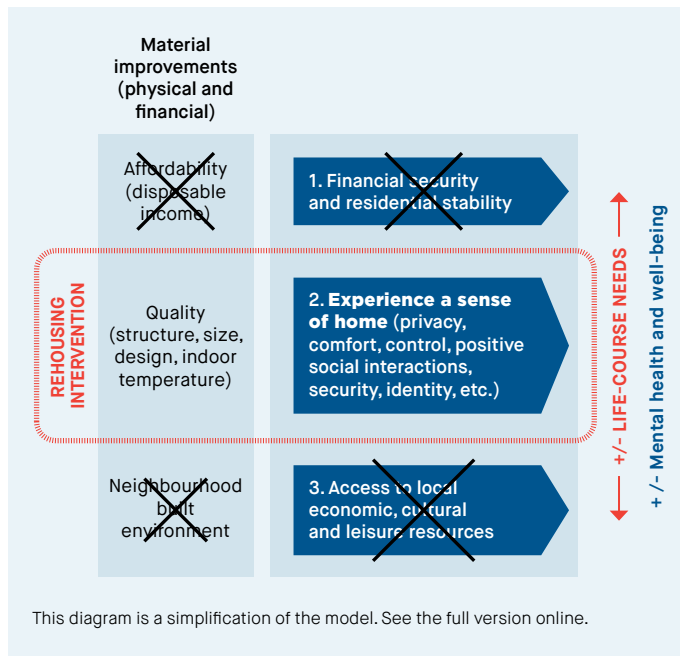
Both in the surveys and in the interviews, those who were waiting for social housing were generally living in overcrowded conditions, with extended family and often in a multi-generational context. After rehousing, they generally had chosen to live with their immediate families, which usually consisted of one or both parents and their children.

The example of rehousing applied to the logic model

ACTIVATED MECHANISMS

When referring to the main mechanisms identified in the conceptual framework illustrated in Figure 2, the results of the study show that improvements in psychosocial health and well-being are attributable to the **reduction in overcrowding** (the “size” criterion of the material dimension) and to the **psychosocial benefits (or meaningful experiences) of “home.”** It is through this pathway that the daily lives of individuals and families are positively transformed to better meet their needs and enhance their well-being.

FIGURE 2 Mechanisms of action on well-being enabled by the rehousing intervention under study.



Source: Karine Perreault

NON-ACTIVATED MECHANISMS

Improved financial security and changes related to access to economic, health and recreational resources (which can occur during neighbourhood revitalization or when moving to a different neighborhood) were not activated as part of the intervention under study. These are nevertheless two important ways in which housing can contribute to the health and well-being of communities.

It's well known that the North is facing a major affordability crisis. It is a key consideration in discussions about the future of housing policies in Inuit Nunangat. The preponderance of subsidized housing in Nunavut and Nunavik is in fact a symptom of the many barriers to employment and pervasive poverty, which limit access to housing on the private market.

It is unlikely that the rehousing intervention was accompanied by a significant change in access to services (health, education, childcare, etc.) and recreational opportunities, or that it has generated an increased sense of security within the community. Given the small size of Inuit communities, people often move only a few blocks away from their former housing unit.

How rehousing has improved mental health

The mixed results of the study show that the rehousing intervention allowed the participants to break free from several processes that are detrimental to mental health and well-being. After rehousing, there is a noticeable decrease in psychological distress, attributed in particular to:

- a decrease in the number of adults in the household;
- an improved sense of having a “home.”

The extent of this improvement in mental health is clinically significant (as well as statistically significant). It is reflected in a decrease in symptoms measurable using clinical instruments or indicators.

A HOME FOR REHOUSED FAMILIES

The experiences underlying such an improvement in mental health resonate with the notion of ontological security of “home” (see page 3), namely:

- a **greater control** over daily life, due to fewer adults in the household, which helps facilitate family functioning;
- **the creation of a refuge**, i.e., a peaceful and stable place, where family members can be themselves and develop in a healthier way, relieved from the stresses of overcrowding;
- **an improvement in family relations** in the new housing, with adults communicating more effectively and children interacting and playing more freely;
- **the journey toward reclaiming one's identity**, accessing a place that feels “like home,” paving the way for meaningful life milestones, and realizing certain aspirations, such as getting married or pursuing artistic or professional projects, which was impossible before rehousing.

A CERTAIN PSYCHOLOGICAL DISTRESS PERSISTS

Although the benefits of the intervention were significant, they did not completely alleviate the participants' psychological distress. Indeed, their level of psychological distress after rehousing remains considerably higher than the Canadian average.

Three main reasons for this situation have been identified:

- Rehousing in itself does not completely eliminate adversity (food insecurity and financial difficulties).
- New housing remains culturally inadequate.
- The persistence of high overcrowding rates in communities contributes to the erosion of extended family ties, a central component of well-being from an Inuit perspective.

AVENUES FOR ACTION

The logic model was designed to explain the causal link between housing conditions and mental health.

Its application to other contexts is therefore justified.

Indeed, this model can support reflection on the impact that various types of intervention have on mental health and well-being, and on the associated mechanisms.

The results obtained demonstrate how such mechanisms, which transform families' daily lives, strengthen family bonds and facilitate cultural practices, which are often part of a healing process.

The logic model presented can therefore be applied in other contexts, notably in interventions within aboriginal or remote communities, such as in Gaspésie or in Côte-Nord. This framework can also fuel reflection when working with population subgroups that are disproportionately affected by housing problems, such as recent immigrants, racialized groups or the LGBTQ+ community.

Other interventions where the model can be applied

The interventions aimed at improving housing conditions that have been studied thus far for their effects on mental health fall into three broad categories:

- **the optimization of thermal comfort and air quality (e.g., reducing humidity and mould) or of the energy efficiency**, including the installation or repair of central heating, insulation, the installation of double-glazed windows, or a combination of these interventions;
- **housing renovations** in response to environmental or building standards (e.g., ventilation, plumbing or radon mitigation), or as part of various repairs (installation of locks or secure front doors, renovation of kitchens, bathrooms or exterior siding);
- **rehousing (sometimes in the context of a neighbourhood revitalization)**, which involves moving to a home that is likely to be in better condition within large-scale, government-funded affordable housing construction initiatives.

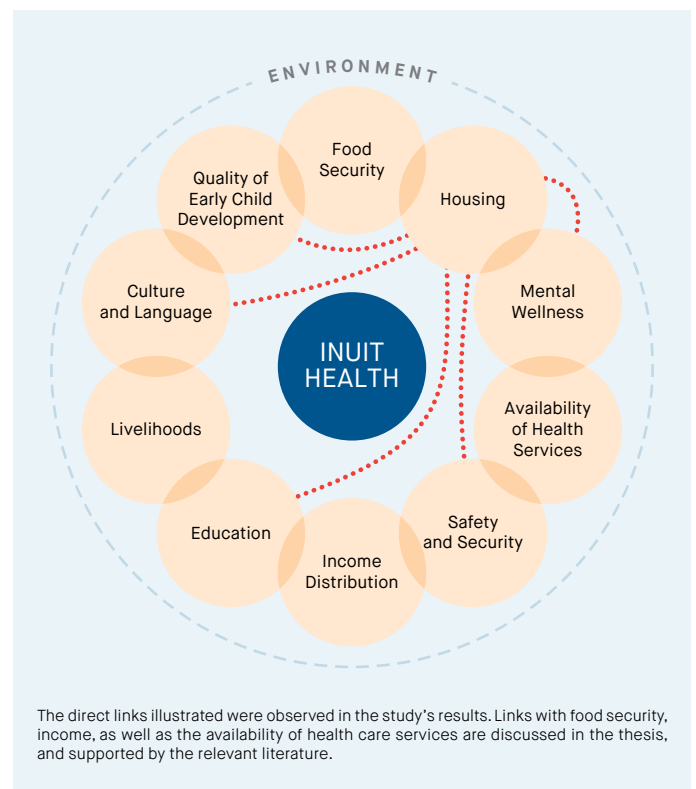
Links between housing and the social determinants of Inuit health

Housing has been of particular interest to Inuit and Indigenous organizations because of its strong impacts on other social determinants of health. Figure 3 shows the determinants of Inuit health affected by housing conditions. Indeed, this study uncovers the impacts of housing shortage, and the resulting overcrowding, not only on the mental health and well-being of Inuit, but also on other health determinants, notably through the following mechanisms:

- The shortage of housing makes victims of domestic violence even more vulnerable, as they have nowhere to turn for refuge.
- Residential insecurity, hidden homelessness² and overcrowding affect children's education by imposing many constraints on parenting roles and limiting the transmission of important values. Some housing situations over which people have little or no control, such as hidden homelessness, can lead to the intervention of youth protection services and the placement of children in foster care.
- All these factors affect the development of Inuit children and hinder the preservation of their cultural identity.

2. Definition of hidden homelessness adapted from *Profile of Homelessness in Nunavut* (Vink et al., 2014), and *Hidden homelessness in Canada* (Rodrigue, 2016). Hidden homelessness refers to people who do not have a stable home and are housed temporarily by relatives, friends or other people in the social network. Depending on the definition, hidden homelessness may include homeless people in correctional institutions or medical facilities.

FIGURE 3 Housing and its effects on the social determinants of Inuit health



Source: ITK

Housing and “home” from a human rights perspective

The results support the recommendations of the former United Nations Special Rapporteur on adequate housing that the efforts to advance human rights among Indigenous people is deeply rooted in the notion of “home.” According to the analysis of the results, the reduction in overcrowding following rehousing contributes significantly to the families’ well-being, and these changes are attributable to the activation mechanisms related to the symbolic aspect of housing, i.e., “home.”

This study puts forward a number of proposals that could be incorporated into the National Housing Strategy to ensure that Inuit have a real right to adequate housing and regain the dignity that would contribute to their health and well-being. Many of these proposals are consistent with the demands of organizations representing Inuit nationally and regionally, notably regarding efforts required to address housing deficits (in particular, emergency housing and healing centres on Inuit territories).

The Government of Canada’s housing policy must also address the intersecting dimensions of poverty, inadequate income support, labour market inequities and power imbalances in housing governance in Inuit regions.

THE STRENGTHS OF THIS STUDY

- The involvement of research partners based in Nunavut and Nunavik.
- The qualitative approach and the central role played by participants’ perspectives and experiences.
- The concrete changes proposed to the National Housing Strategy to tackle the systemic housing issues in Inuit Nunangat.

THE LIMITS OF THIS STUDY

Several factors, including but not limited to the following, affect the validity of the survey results:

- the small sample size (especially after rehousing);
- the absence of a control group;
- the scope of the subject, as only the impacts of housing on psychological health and well-being were studied, whereas housing also affects physical health, which is inextricably linked to mental health.

However, the sequential use of quantitative and qualitative methods has revealed convergent results between both components of the project. There is a high degree of consistency between the associations identified in the survey and the participants’ narratives, which strengthens confidence in the validity of the survey data through corroboration.

Conclusion

As the results provide a rigorous overview of the impacts of social housing investments in Nunavut and Nunavik, the partners involved in this research project can use them as evidence to support their claims.

This study demonstrates that the current situation violates fundamental human rights and is unacceptable. Furthermore, by measuring the extent of the improvements resulting from rehousing, it illustrates how **improved housing conditions are a powerful tool for promoting mental health and well-being**. The implementation of policies grounded in the notion of “home” could help mitigate the legacy of colonial policies and create new opportunities for generations of children whose parents and grandparents grew up in conditions that undermined their well-being.

In its conclusion, the study paves the way for new perspectives and proposes **three avenues with potential for innovation in research on housing as a determinant of health**:

- health economic evaluation from a human rights perspective;
- links between adequate housing and food security;
- reflections on the development of the housing sector in Inuit regions, particularly regarding infrastructure needs and household energy security.

AVENUES FOR ACTION

Discussions with research partners led to the adoption of a perspective aligned with that of “gender-redistributive housing policies.” This perspective emphasizes the importance of recognizing that women and men have different, but interdependent, needs in the context of the housing crisis in the North. Since women’s social roles are closely associated with child rearing, elder care and food security, women’s housing needs are inextricably linked to issues of family safety and well-being. The needs of men, especially those living alone or who are separated, would be better met by smaller social housing units. Young men also have a great need for transitional housing offering short- and long-term accommodation, along with healing services and practices.

The organizations representing Inuit emphasize that the implemented actions should recognize these distinct needs without, however, privileging one over the other, while acknowledging that the ultimate goal is to create conditions that foster healthier relationships between genders.

ABOUT THIS STUDY

OBJECTIVES

- Compare housing conditions before and after the rehousing intervention funded by public investments that led to the construction, in 2014–2015, of over 400 new social housing units in Nunavut and Nunavik, with the primary objective of reducing overcrowding and providing better quality housing for the population.
- Examine the impacts of this intervention on the mental health and well-being of the hundreds of families who were allocated the newly built housing units.

METHOD

- The study is based on a collaborative approach involving regional partners. The methodology used is an explanatory sequential mixed methods design, in which the results from a survey conducted in 12 Inuit communities are then subsequently examined in depth and interpreted through a series of interviews conducted in one of those communities.

Ethics certificate from the Institutional Review Board of McGill University (certificate A09-B51-16A); from the Comité d'éthique de la recherche en santé de l'Université de Montréal (certificate 18-003—CERES-P); and from the Nunavut Research Institute (scientific research permit 03 016 18R-M). Authorization was also obtained from the Nunavut Nutrition and Health Committee, which acts as an ethics committee in Nunavik.

Funding: The various components of the project were funded by the Canadian Institutes of Health Research's Institute of Indigenous Peoples' Health (grant GIR134230), as well as by ArcticNet (a Network of Centres of Excellence of Canada), and the partnership grant from the Social Sciences and Humanities Research Council—Canada Mortgage and Housing Corporation: At Home in the North (1004-2019-0007).

FOR MORE INFORMATION

- Regarding Karine Perreault's doctoral thesis in public health: *Impacts des conditions de logement sur la santé psychologique et le bien-être d'adultes inuits au Nunavut au Nunavik*
- Regarding the scientific articles presenting the thesis
- Regarding the right to adequate housing
- Regarding the Office of the Federal Housing Advocate
- Regarding the Canada Research Chair in Housing, Community and Health
- Regarding the Inuit Tapiriit Kanatami
- Regarding the United Nations Special Rapporteur for adequate housing

Please visit our resources page



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