Harm Reduction and Family Housing Instability

Understanding the System, Identifying the Gaps, and Embracing Change

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Definitions

Harm reduction

While there is no universal definition of harm reduction, it can be understood as an approach which emphasizes positive change to a targeted harm without having abstinence or other prerequisites as a goal or requirement for service, and is effective for drug use (Barrett et al., 2022). In particular, harm reduction seems to be an effective way to help people work through complex societal problems (Collins et al., 2019).

Housing First

Housing first is one way harm reduction has been applied to homelessness. This intervention program is based on helping provide a person's basic needs, such as housing, so they can begin to work on the other things that plague them (Tiderington et al., 2021). The effectiveness of this system has been widely recorded within single homeless populations and has been widely influential with families (Collins et al., 2019).

Family housing instability

Throughout this article, I will use "family housing instability" to describe families experiencing any form of housing instability. This includes, but is not exclusive to, those who do not have a fixed nighttime address, live in "inadequate" habitation, shelters, transitional housing, safe havens, motels, couch surfing, and more. With this term, I am attempting to include various types of housing instability to reduce invisible homelessness and be more inclusive.

Acknowledgement

Methods

During the past six months, I used databases such as PsycInfo, SociIndex and Google Scholar to find articles related to terminology such as "family housing instability," "harm reduction," and "Housing First," among others. I reviewed approximately 30 articles and narrowed my list down, considering their focus, research question, and publication date (maximum of 15 years from publication date). Other non-peer-reviewed sources served to understand how this system applies in a social context, and where there may be gaps in the literature. Conversations with individuals in the community including social workers, service providers, front-line workers, and stakeholders served to inform this exploration further and understand the themes seen within family housing instability within the local context of the Calgary community.

Residential School Syndrome

This is a subtype of post-traumatic stress disorder, not currently approved by the American Psychological Association, in which Indigenous individuals who have attended a residential school or are involved with someone who has, have had a negative experience and now experience intense feelings of fear and anger, and tend to abuse alcohol or drugs (Robertson, 2006, p. 9).

Historical Trauma

"Cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences" (Heart, 2003, p. 7).

Examples of group trauma: residential schools, forced migration, forced relocation, war, famine, or others.

Historical Trauma response

A collection of features reacting to historical trauma, which may include substance abuse as a vehicle to numb the pain of the trauma, self-destructive behaviour, suicidal thoughts, anxiety, depression, low self-esteem, and unresolved grief (Heart, 2003, p. 7).

Events

- High records of family housing instability
- Youth 193x more likely to be involved with children services than the general public
- Negative outcomes for parents and children after separation including post-traumatic stress disorder symptoms, trauma, drug abuse, violence
- Defunding of harm reduction clinics

Patterns

- Child apprehension contributes to social isolation, stigma, violence, discrimination
- Stigma against homelessness and harm reduction
- Drug use
- Lack of funds
- Lack of housing
- Wait times

Structures

- Violence
- Social isolation
- Discrimination
- Lack of safety
- Reduced opportunities

Mental Models

- Ideas of what a family should look like
- Gender
- Race
- Colonialism

Introduction

Family housing instability is highly prevalent in Calgary, with it being in the top 10 cities in Canada with the highest number of people experiencing homelessness (*Calgary | The Homeless Hub*, n.d.). Intersecting and complex factors such as income, housing, education, trauma, physical and mental health, and drug use, among others may lead to families experiencing housing instability. Data from the 2021 Canadian Census of Population revealed that:

12,565 people were staying in shelters during that time, and around 15% of Canadians were experiencing invisible homelessness (Government of Canada, 2022). Moreover, Inn from the Cold, a Calgary homeless shelter, reported a 55% increase in families needing help to prevent or escape homelessness from 2021 to 2022 (Horwood, 2022). Most organizations and governmental institutions aimed at supporting people experiencing housing instability focus on a definition of homelessness formed with only visibly homeless adults in mind, failing to recognize the unique and intersecting struggles of families, gender, and race, therefore excluding their voices and unique struggles (Vissing & Nilan, 2020). Because of this, I have decided to use "housing instability" to describe unsheltered, invisible, family and other kinds of homelessness that are not easy to measure or see.

When it comes to families, factors surrounding housing instability, such as drug abuse, trauma, and violence, can mean a higher risk of Children's Services interventions and the separation of the family unit, with Homeless Hub reporting that **youth experiencing homelessness are 193 times more likely to have been involved with children services than the general public** (*Child Welfare and Youth Homelessness in Canada: A Proposal for Action | The Homeless Hub*, 2017).

STOP 1

Moreover, child apprehension may contribute to family members' experiencing social isolation, stigma, violence, and discrimination (David et al., 2012). Separation of family members due to drug use, lack of funds, lack of housing, and an unsafe environment for children has adverse outcomes for both parents and children, highlighted in one study where researchers found that adults exposed to children services or removed from their parents as children were generally at a higher risk of various mental disorders, suicidal thoughts and mortality compared to those who did not have these experiences (McKenna et al., 2021, p. 1141). In cases of family housing instability, organizations such as Inn from the Cold, Brenda's House, and more serve to help families that are struggling, and therefore have first-hand experience on what these families face. Staff at Trellis, a Calgary-based community organization that works with families using a Housing First approach, have also noticed many negative impacts on parents and children when a separation occurs, and have noted the trauma it seems to bring for families (Trellis Harm reduction Group, Personal Communication, October 26, 2022). Because of these issues, it is essential to consider how family housing instability occurs and is maintained through a systems perspective, and what can be done to help families experiencing it. Moreover, one of the methods that many organizations have begun to use is the harm reduction approach through Housing First or in drug rehabilitation programs. In Alberta, the provincial government has set forth a response to homelessness focused on working with community-based organizations to implement Housing First (*Alberta's Homelessness Response*, n.d.). **Due to these findings and current implementations, this paper asks how a harm reduction approach can be applied to family support programs (housing and caregiver support) with the goal of increasing family wellness and decreasing Children's Services intervention and apprehensions.**

When looking at housing instability through a systems lens, one has to consider the various organizations that work to end housing instability, the dynamics of a family, the ideas of safety that workers and the public hold, colonialism, and many other aspects which make this system highly complex. Because of this, I believe it is important to state that the topics discussed during this report, due to the nature of this project, will not fully explain the breadth of family housing instability and all the nuances and components that make part of it. I will be speaking about this system through a harm reduction lens, aiming to move towards this framework as a society. Moreover, only certain barriers will be addressed, not to invalidate the existence and effect of other barriers that affect housing instability, but to make this system more manageable to discuss.
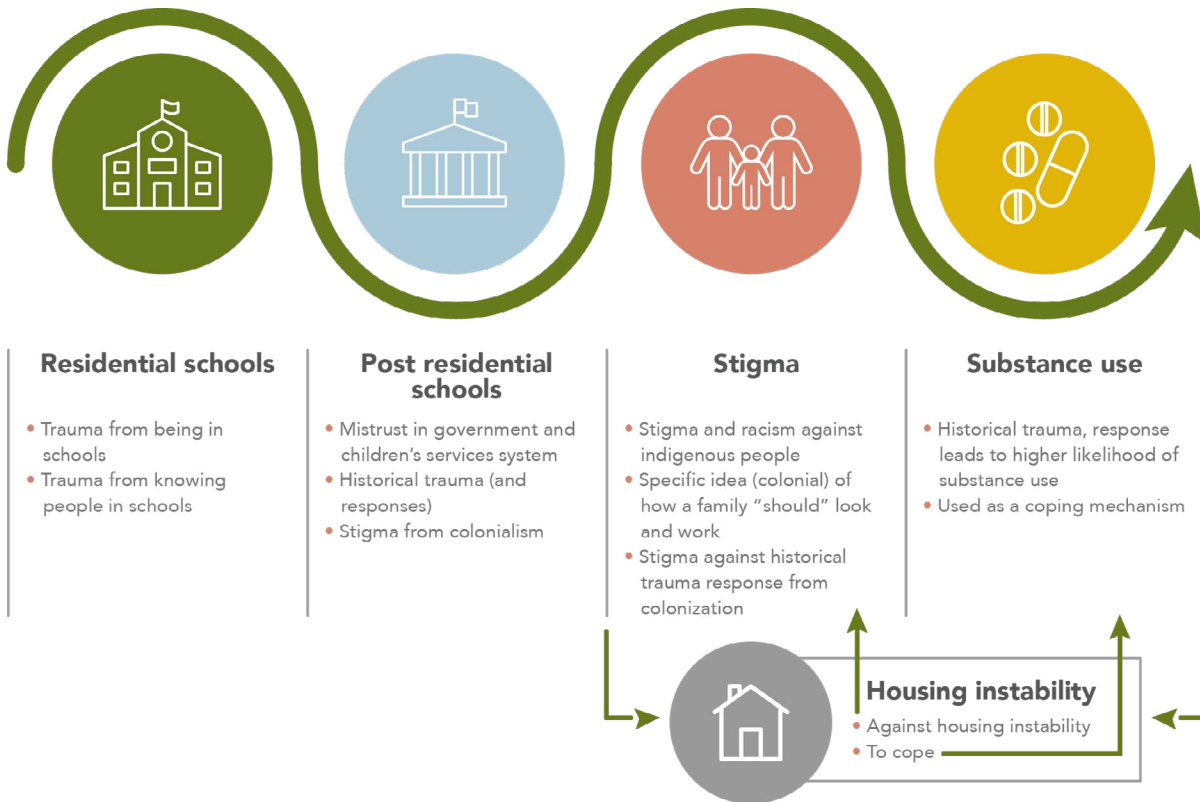
Barriers within Housing Instability

In the book by Eduardo Galleano, "Upside down," the author looks into multiple discriminatory systems of race and ethnicity, socioeconomic status, gender, and more (2000). He approaches these systemic issues as, overall, being one and the same. The author emphasizes how systems of discrimination are arbitrary, as they are created by humanity with no fundamental basis for exclusion, yet are significant in everyone's lives. He shows how all these discriminatory hierarchies work the same way, simply placing different groups of people at the "top." These ideas are highly relevant to family housing instability. One's race, gender, sexuality, and more could intersect to create situations surrounded by a lack of safety, increased stigma, and reduced opportunities for families experiencing homelessness. This is significant when considering colonialism and drug use, the two specific barriers I will focus on for this section.

STOP 2

Colonialism

Residential schools

- Trauma from being in schools
- Trauma from knowing people in schools

Post residential schools

- Mistrust in government and children's services system
- Historical trauma (and responses)
- Stigma from colonialism

Stigma

- Stigma and racism against indigenous people
- Specific idea (colonial) of how a family "should" look and work
- Stigma against historical trauma response from colonization

Substance use

- Historical trauma, response leads to higher likelihood of substance use
- Used as a coping mechanism

Housing instability

- Against housing instability
- To cope

Before colonization, Indigenous families found "home" on the land through interconnection with one another and the environment (Ruttan et al., 2010). For some Indigenous people, home still does not signify a house, but a sense of security, independence, and freedom to live as wanted (Thistle, 2017). In many research studies, "home" for Indigenous populations seems somewhat external from the material, focused on family and a sense of being in the world (Christensen, 2013). Thinking of "home" as a "house" neglects ideologies which may not subscribe to such definitions (Christensen, 2013). These definitions created with European ideals caused housing norms to be separated into "right" and "wrong" (Thistle, 2017). While research acknowledges that homelessness is intersectional, the definition of homelessness is rooted in the idea of "lack of housing," which further excludes other types of homelessness (Christensen, 2013). Indigenous experiences are unique as they connect to (neo)colonial and sociocultural dynamics (Christensen, 2013).

Historically, Indigenous children have been removed from their homes due to their heritage, leaving traumatic scars linked with their identity (Ruttan et al., 2010). It has been argued that the disproportionate number of Indigenous children set up for adoption or transferred to long-term foster care with non-Indigenous families is a continuation of "assimilationist policies as placement," which "usually results in separating children from family and community, cultural disconnection and painful experiences" (Christensen, 2013; Ruttan et al., 2010, p. 69). The trauma from these situations may create negative experiences within the children services system for the Indigenous population (Christensen, 2013).
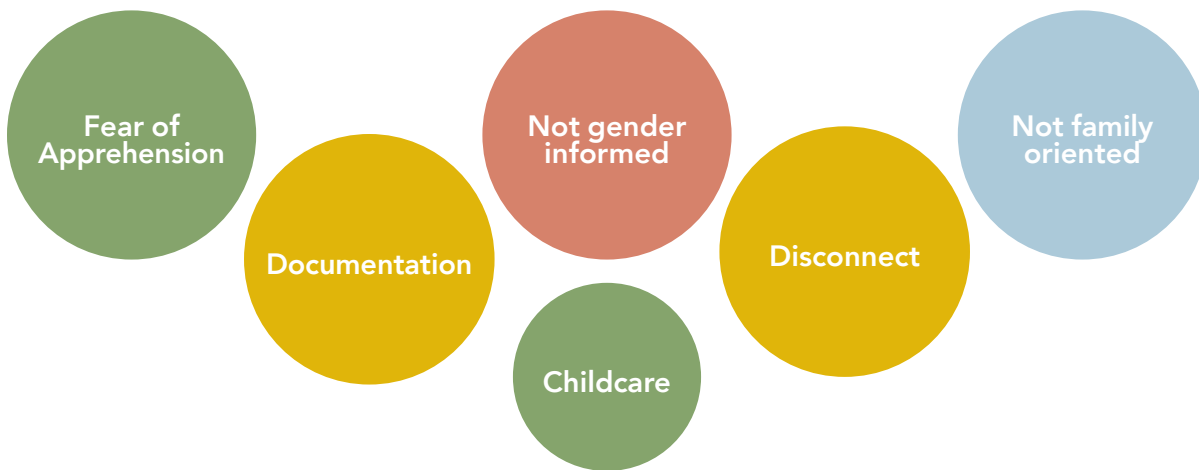
In a film called "Kímmapiiyipitssini: The Meaning of Empathy," Elle-Máijá Tailfeathers goes in-depth on the effects of colonization and drug use within the Kainai First Nation in southern Alberta (TVO Today Docs, 2022). The documentary outlines the lives of various people living both within residential areas and outside of them. In both cases, they experience racism and discrimination because of colonization, and they have to struggle with the trauma of colonization while managing housing instability. This documentary made it clear that colonization is a significant component of housing instability, as the trauma and scars that people experience from having been in residential schools, knowing someone who experienced residential schools, or having had generational trauma passed on to them, made it harder to become separated from a system of care embedded in colonialism. People in the documentary experienced racial profiling, showed symptoms similar to post traumatic stress disorder, and experienced losses that kept bringing them back toward housing instability (TVO Today Docs, 2022). Moreover, barriers such as the defunding of harm reduction clinics, wait times between detox centres and rehabilitation facilities, lack of supportive housing, ideas of what a 'family' should be, and stigma against harm reduction preventative care also increased the difficulty for the individuals to be able to support themselves and their families (TVO Today Docs, 2022).

Drug Use

Drug use is highly relevant and important to consider for many people experiencing homelessness, including Indigenous individuals. Drug use can be a factor in entering housing instability, or can come from experiencing housing instability. Many factors contribute to the stigma surrounding drug use. One of these is blame, as people with substance use disorders are considered more responsible for their condition than people with other mental illnesses (Norms et al., 2016). In addition, families with a member dealing with substance abuse face many barriers to accessing treatments (Wolfson et al., 2021). The effect of parental substance use has not been largely studied under the system of homelessness, specifically concerning how we can use harm reduction to aid children in families with parental substance use (Barrett et al., 2022).

Fear of Apprehension

Documentation

Not gender informed

Childcare
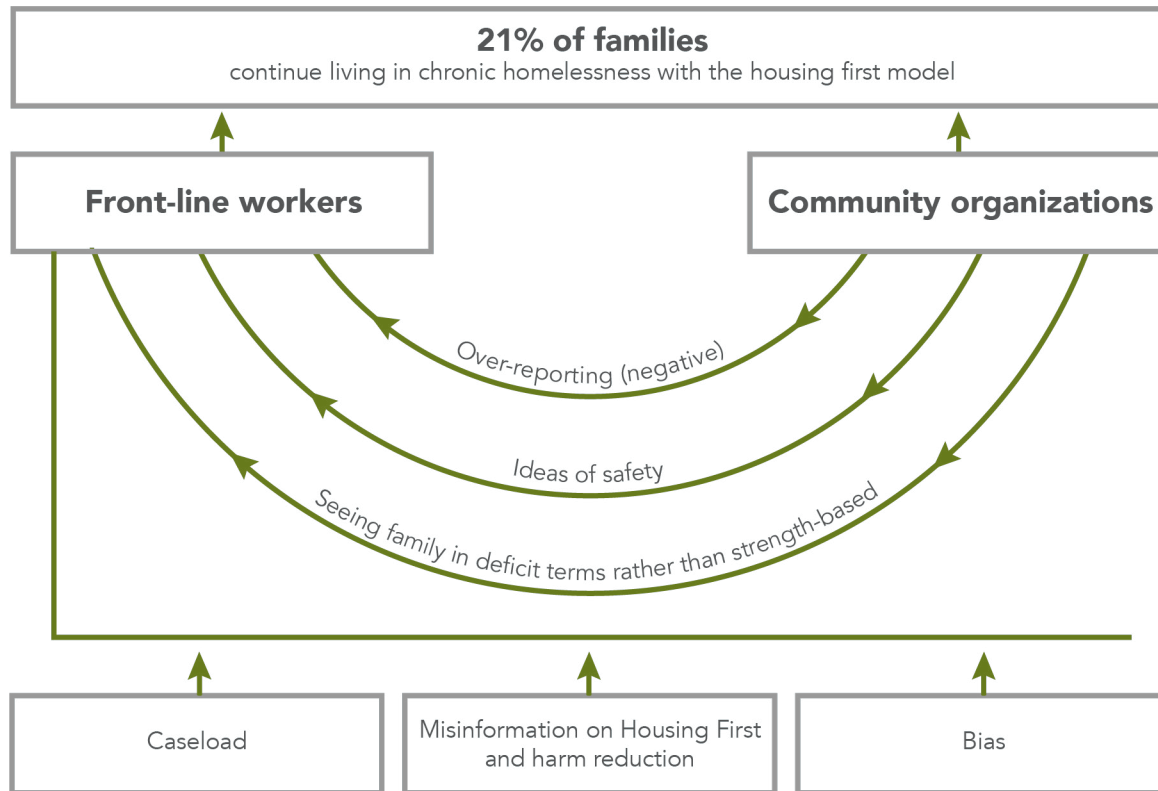
Disconnect

Not family oriented

For many families, the fear that their children may be apprehended if they express their need for support is enough to stop them from pursuing treatment for drug use and family services (Wolfson et al., 2021). Moreover, substance use treatments are not gender-informed or family-oriented, with no consideration for childcare while in treatment or family values and safety (Wolfson et al., 2021). Additionally, parents are required to provide a large amount of documentation and tasks to reunite with their children, which is difficult to achieve when dealing with substance use and the traumatic removal of children (Wolfson et al., 2021). When it comes to housing instability, there is a more significant disconnect from information, resources, and socioeconomic support needed to face these barriers (Wolfson et al., 2021).

When considering the role of colonization, residential school syndrome and historical trauma have to be taken into account. With residential school syndrome and the historical trauma response, there is a higher likelihood of abusing substances due to direct and intergenerational trauma (Heart, 2003; Robertson, 2006). Since substance use can be seen as a risk factor leading to homelessness, understanding historical trauma and residential school syndrome may help us understand why there are such high rates of Indigenous people experiencing housing instability. Moreover, by understanding the heteronormative, colonial way of thinking about families, and what their roles are, we can further understand how these hierarchies of discrimination intersect and interact to create unsafe and high-risk environments for families experiencing housing instability, as they experience high levels of stigma and various barriers that not only push them towards housing instability, but that maintain them within the system itself.

Housing First and the Role of Helpers

21% of families
continue living in chronic homelessness with the housing first model

Front-line workers

Community organizations

Over-reporting (negative)

Ideas of safety

Seeing family in deficit terms rather than strength-based

Caseload

Misinformation on Housing First and harm reduction

Bias

The most prevalent harm reduction method currently implemented for family housing instability is the Housing First approach. The Housing First approach provides case management and permanent housing to homeless individuals with no preconditions and for as long as needed (Tiderington et al., 2021). This method of housing recognizes that recovery from drug use is non-linear and does not use punishment or punitive measures in response to setbacks (Tiderington et al., 2021). Providing this kind of subsidized housing along with comprehensive case management is associated with positive outcomes, including "clients" enrolling in public assistance benefits, decreasing involvement in the child welfare system, and fewer cases returning to homelessness (Collins et al., 2019). While this system has helped many families experiencing housing instability, one study found that 21% of people within the Housing First program returned to the shelter (Collins et al., 2019). This is interesting when considering another study, where it was found that just a few years prior, 42.8% of homeless families entering shelters returned to the shelter within a year (Kim & Garcia, 2019). While this percentage shows how effective the program is, it is important to see how it can improve, and the populations it may be failing.

When it comes to Housing First, one of the aspects that may be affecting families experiencing housing instability is over-reporting of "negative" parental behaviours. Collins et al. (2020) compared housing-first welfare-involved families, and families receiving traditional child welfare services. While both groups showed decreased children services involvement, people within the Housing First group were more likely to have substantiated and unsubstantiated child welfare reports. These results could indicate a few things. First, "negative" parenting behaviours, which may typically go unobserved or would not be given importance, were possibly over-reported due to constant observation from case workers (Tiderington et al., 2021). In addition, misinformation regarding Housing First and harm reduction philosophy may have influenced this result (Tiderington et al., 2021).

In a study by Tidirengton et al., it was found that views on "imminent danger" for a child, and what constitutes child safety also vary among front line workers (2021). When deciding to report a behaviour, deciding whether the safety of the child and harm reduction for the parents are incompatible rests with the front-line worker, who, in most cases, prioritizes child safety (Tiderington et al., 2021). Furthermore, the different intersecting values between a resource based on harm reduction and others that are not can create further barriers for the families involved, as the disconnect between these resources may cause families to be treated differently, or may have different requirements for care, affecting the quality of care (Tiderington et al., 2021). All these issues, including the bias of a front-line worker's values, the decision between child safety or parent harm reduction, working within the confines of being a "mandated reporter," definitions of child safety, and other biases and opinions significantly affect how one interacts with the family, and when or how one makes a call to children services. Moreover, some studies show front-line workers dealing with bias and burnout as they manage their caseload (Collins et al., 2019; Tiderington et al., 2021). These issues create barriers within this harm reduction service that cause those 21% of families to continue living within chronic housing instability, as the system itself brings them back.
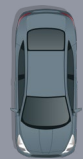
In conversations with different parties working with families facing housing instability, various themes arose that outline other aspects of the family housing instability system. These aspects were not seen within the literature review (within the time constraints of the fellowship). One player that emerged as valuable and capable of large change was Children's Services, and the protocols surrounding it. Individuals expressed that Children Services' involvement was a barrier to applying harm reduction approaches with families. Although Children's Services was seen as a generally effective service provider, whose actions have helped keep many children safe, it was also expressed that its rigidity to rules as an organization and lack of open communication with other organizations that help aid families experiencing housing instability can be a barrier to applying a harm reduction approach. Themes surrounding children services showed that the organization seems to focus mainly on child safety without considering the safety and dynamics of the family as a whole.

Another theme that emerged was the tendency for families to be chronically involved in the system. Families experiencing housing instability were described in deficit terms, with discussions generally aimed at giving temporary solutions rather than supporting families to exit the system in a way they can fully support themselves. Moreover, organizations aiming to help families experiencing homelessness seem to have more strict ideas of what safety means and how to handle it, compared to the front-line workers actively engaging in these situations. These ideas are congruent with the research I found, which shows a large discrepancy between individual workers' thoughts and organizations' guidelines (Tiderington et al., 2021). This is also important when considering the bias that workers insert into these situations, such as what a family "should" look like, colonial biases, and more.

STOP 4.2

STOP 4.3

STOP 4.4

Where do families who experience housing instability need more support?

Challenge Mapping	Impact Gaps	Solutions Mapping

• Front-line workers have personal ideas of how to help a family, which differs from both legal obligations and organization guidelines
 	
• System currently works to chronically keep people dependent on aides
 	
• Expectations surrounding what it means to have a family, and what it looks like
 	
• Parents are expected to change and be "perfect parents" despite struggle with drug use
 	
• Grassroots organizations are predominantly implementing harm reduction approaches compared to other supports
 	
• Treatments are individual rather than family-oriented (individualist rather than unit)
 	
• Parents have a harder time accessing resources
 	
• Colonial ways of thinking
	• Open and intentional communication between:
	  • Workers and families
	  • Workers and organizations
	  • Various organizations
	  • Organizations and government
	
	• Move towards strength-based approach and work to see families as capable of sustaining themselves
	
	• Change of colonial, sexist, etc ways of thinking, see each family, as unique to itself
	
	• Housing first, various harm-reduction approaches (including in perfectionist mindset)
	
	• Making childcare, family, treatment centers, and general respite care/transportation more available
	
	• More research and more representation
	
	• Removal of saviour complex
		• Convergence is happening between the values of front line workers and legal (or policy) guidelines within organizations
		
		• Help families be able to sustain themselves
		
		• Move towards keeping families together vs removing the child from the family
		
		• Seeing each family as an individual unit that is an expert on their own life and experiences (not imposing structures)
		
		• Understanding that nuance and difference in parenting style doesn't necessarily mean unsafe
		
		• Harm reduction and mindset changes implemented at the government level
		
		• Family dynamic is considered and deemed important
		
		• Respite resources readily available for parents to be able to better themselves without separating the family
		
		• Understanding ones biases and recognizing/changing current colonial structures and mindsets

Challenges Identified

To effectively create and implement solutions, it is crucial to first comprehend the challenge at hand and identify areas where improvement is needed. It is important to recognize that there is no single solution to address these issues, as each family is unique and requires tailored support to help them achieve stability. Throughout this process, I connected with various individuals, including social workers, service providers, front-line workers, and stakeholders as content experts. These conversations informed my perspectives and allowed me to view themes that emerged for families in need of more support. Their knowledge, perspectives, and understanding, as well as an analysis of the research I read are the basis of the following section. Furthermore, the proposed actions presented in this paper aim to transform the system to better assist families experiencing housing instability. It is important to note that these actions are based on my own biases and ways of thinking, and should not be considered the only solution or the absolute truth.

One important theme I have identified is the discrepancy between the ideals, values, and definitions of safety held by front-line workers and those of their organizations. I found that front-line workers are often open to nuance and different approaches tailored to each family's unique situation. In some cases, workers have even deviated from guidelines provided by children's services, their organizations, or the government because they were not helpful or could potentially harm the family's relationship and safety. This disconnect between worker beliefs and the approaches taken by organizations and the government highlights the need for a more flexible and nuanced approach to helping families experiencing housing instability.

Another common theme emerged where solutions and ideas for families experiencing housing instability were centered around providing people with resources and fixing the family's weaknesses, rather than leveraging their strengths and unique skills. While some solutions aimed at addressing systemic issues such as colonialism, stigma, and bias, others focused on providing families with resources that did not enable them to become self-sufficient in the long run but rather created a dependency on external support. One evident example of how resources can end up perpetuating a cycle where families are constantly reliant on the system is the scarcity of treatment centers that provide childcare or transportation, making it difficult for parents to seek help with drug addiction without jeopardizing their relationship with their children. Furthermore, most treatment centers tend to focus solely on the individual seeking treatment and do not prioritize the family unit.

Along with the challenges discussed, it is crucial to address the stigma and expectations surrounding what constitutes a family and how they should behave. One significant theme that emerged was the notion that individuals are the experts of their own lives, an idea that has also been discussed in the counseling and family therapy literature (Jong & Berg, n.d.). I have observed a prevailing attitude of "knowing based on expertise" throughout this process, both within the research and in conversation. This attitude implies that those with education or published works are deemed to possess more knowledge about what safety entails for a family and what it should look like than the family themselves. This perspective speaks to several biases in our current society, with the colonial mindset being one of the most prominent ones, as well as reductionist and techno-industrial mindsets. Canadian society has been founded on colonialism, which has conditioned our biases and ways of thinking. We have established expectations of what a family should resemble, how they should act, and what is deemed right for them. We stigmatize those who do not conform to this norm, and struggling parents are often excluded.

With regards to drug use by parents, there is an expectation for them to overcome their struggles for the sake of their children and maintain a higher standard of perfection than the average parent. Any failure to meet this expectation is deemed a failure, which exposes the classist ways of thinking of families. Many behaviours that families experiencing

housing instability and drug use are condemned for are the same behaviours that middle and upper class families can participate in without anyone batting an eye. These ideals and values permeate the work aimed at assisting these families, and the families sense it in their interactions with frontline workers, children's services, non-profit organizations, and government agencies.

Exploring the Solutions Landscape
Reimagining Research and Education

Challenges present an opportunity for growth and change, especially when it comes to helping families in need. In the case of family housing instability, there is a significant lack of research available. This became evident during my search, particularly when trying to narrow down the results to Canada, and even more so to Calgary. Another crucial gap is the lack of research on Indigenous populations, as there was minimal research on this population from what I found during this project. To address these gaps, there are two crucial steps that we can take to further our understanding of family housing instability. First, we need more research in Canada that explores different cultures and ways of being, specifically related to family housing instability. Second, we need more representation of BIPOC individuals in research, with publications that provide insight into their community. By taking these steps, we can start moving towards a more comprehensive understanding of family housing instability in Canada, including the experiences of diverse populations.

In addition to what has been mentioned, I believe that education needs to be transformed on various levels to address the issues faced by families experiencing housing instability. It has been emphasized during conversation that front-line workers may have been trained to see themselves as the "hero" or "helper" in their role of assisting families experiencing housing instability. This could be due to a lack of genuine understanding about the families they are serving. The current education system is built on colonial structures and places great emphasis on empirical evidence. While empirical evidence is highly useful in moving society forward, it has, in turn, devalued the importance of qualitative experiences. True learning is not just about facts and memorization, but also about empathetic interaction with individuals and their experiences, particularly in fields like social work or psychology. From this type of education, there may be ideas surfacing of knowing more than the family itself, of having more knowledge and therefore being more of an expert in a family's life than they are. This creates a power dynamic that places institutions, workers, and other organizations aimed at helping families experiencing housing instability in a position of power over families. It is important to remember that those serving families experiencing housing instability are there to help, not to "save" them. Serving others requires humility and empathy, which can create space for understanding and differences, an ideal that is currently lacking.

Harm Reduction Approaches

This highlights the importance of harm reduction and strength-based approaches. One of the first steps to take is to start destigmatizing harm reduction approaches and implementing them on every level of society. While Housing First has been implemented in non-profit organizations in Calgary that help families experiencing housing instability, we need to broaden its reach. Harm reduction, both in Housing First and as a treatment for drug use, has been created with the individual in mind, but we need to start thinking of a family as a unit. Since treatments for drug use and mental health are not family-oriented, many people cannot access care as there is no consideration for childcare while in treatment, wanting to maintain the family, accessible transportation to services, or teaching the parent how to use safely with a child (Wolfson et al., 2021). This means we should apply more robust respite care for families, addressing issues such as childcare, accessible transportation to services, and teaching parents how to use safely with their children.

Strength-Based Approaches

Using a strength-based approach can help change the power dynamic between families experiencing housing instability and those providing support. This approach focuses on an individual's self-determination and strength, allowing for aid to be client-led, centered on outcomes, and encouraging people to make changes for themselves (MSc, 2019). If we apply this approach to families, it will help frame them as the ones leading their lives and making the changes they believe are necessary, encouraging open communication. By using harm reduction and a strength-based approach, both applied through a family-oriented lens, we can shift the family housing instability system to view clients as experts in their own lives, allowing them to be self-sufficient and independent of the system itself.

Better Communication

When considering family housing instability, one critical aspect is the lack of communication. The lack of communication between front-line workers and the families they serve is a significant issue that contributes to power dynamics and may deter families from seeking help. Additionally, there is a disconnect between front-line workers and their organizations, resulting in differing beliefs about how to address family needs. Beyond these gaps, there needs to be more communication between various organizations that support families experiencing housing instability. This was represented in conversation with various representatives from community organizations, who came together to discuss the system, and it became evident that these kinds of conversations are rare. How are we supposed to help families experiencing housing instability if the organizations that are supposed to help them can't coordinate to create a strong net of support? How can we help them if there is no discussion between organizations on how not to become stagnant, to keep improving, or keep growing? Coordination between these organizations is crucial to provide families with a strong support network and to avoid red tape and subpar care. Furthermore, there needs to be more communication between these organizations and the government. The government, across Canada, must keep up with current trends and implement harm reduction strategies and reduce stigma for families experiencing housing instability, something I have found little evidence of during my research. It is essential to communicate these trends clearly and enthusiastically to various levels of government to further support families in need and inform public policy.

Reducing Stigma and Recognizing Biases

Finally, we must consider the overall stigma and biases within family housing instability. As discussed, we have various biases regarding what a family should look like, how it should work, how parents should react and the expectations around their responsibilities, drug use, and more. Many of these biases, I believe, come from our conditioning to be racist, homophobic, sexist, and more due to living in a society that has come from colonialism. Because of this, the slow path to change overall within family housing instability, and in my opinion, many other societal issues, if not all, comes from addressing the fact that we have these biases and then making an effort to change them. In the long run, I believe the most significant change will come from changing how we think about the world, what family means, and unlearning our inherent racism, classism, ableism, and more. That is where real change happens, as that is where we change ourselves. We are as much part of the world as the world is part of us, and by changing our perspectives and working on our biases, we each take a collective step to creating an environment which effectively aids those that have been disadvantaged.

Closing Remarks

In "Upside Down: A Primer for the Looking-Glass World" Eduardo Galeano emphasizes that our world, the way we view it, and how it is conducted is upside down (2000). The world is upside down as we are upside down, and we are as much part of the world as the world is part of us. I believe these teachings are reflected within family housing instability. We in Calgary, and around the world, have the potential to aid families struggling to move through housing instability. We have the potential to work together, communicate, reduce our biases, and implement supports and ways of thinking which can help families be healthier and stay united. We can take our upside-down ways of viewing and reacting to family housing instability and we can change them, flip them right side up, especially by first doing so within ourselves. Doing this, taking part in this system and moving towards helping these families, as well as looking within and changing our own biases and conditioning, takes us one step closer to a more equitable world. As Eduardo Galeano said:

"If the world is upside down the way it is now, wouldn't we have to turn it over to get it to stand up straight?"
- Eduardo Galeano, p. 337 of Upside Down: A Primer for the Looking-Glass World

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