

Homelessness and suicidality: How do new emigrants confront the dilemma? Evidence from existing research conducted in Canada

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Abstract:

Framed under a systematic review design, this study aimed to extract specific evidence of how homelessness is associated with suicidality among new emigrants to Canada. A database search strategy was adopted, and biasness in the selection of studies was avoided by consulting with two independent reviewers. 18 studies were sampled purposively. It was concluded that migration to Canada is an important component of Canadian society. However, like other social processes, there are certain cons of migration to Canada. The newly emigrated individuals confront economic vulnerability, and homelessness is one of the possible outcomes. Homelessness is directly and indirectly associated with suicidality.

Introduction

Migration to Canada (emigration) is one of the hallmarks of Canadian society. Individuals from Arab and Asian regions have found Canada to be a place of opportunity due to its acceptance and tolerance for different cultures, nationalities, etc. However, emigrants still face significant problems upon their arrival, specifically those who move to Canada for employment. They face numerous problems, but one important issue is homelessness. Homelessness in Canada is common among new emigrants, but even emigrants in Canada who have been settled for years face this issue. Homelessness and mental health problems are linked. This systematic review focuses on homelessness as a precursor for mental health problems, leading to suicide and related behaviors.

Material and Methods

This is a systematic review based on searching using keywords in standard databases. Bias was avoided by sending the selected papers to 2 independent reviewers who were working as professors at universities in the field of sociology. The databases included Sociological Abstracts (showing 870 results), EBSCO host (showing 21 results) and Academic Search Complete (provided 3 highly specific publications). 18 studies were sampled purposively. The criteria for the studies included a) the research must have been conducted in Canada b) the research should be specific to homelessness and mental health c) the research must be focused on suicidality as an outcome of homelessness directly or indirectly.

Results and Discussion

P. Kissoon (2010) found that emigrants are one of the most vulnerable social groups to be homeless in Canada. Higher levels of poverty contribute significantly to homelessness among emigrants. Emigrants, specifically those who are new to Canada and the United Kingdom, are often dealt with by welfare organizations. Often times, even for many years they find themselves unable to have their own residence or have a place to rent. For some, homelessness becomes a whole life issue.

P. Miller *et al.* (2004) carried out research that is specific to homelessness in Canada. The study shows that homelessness is very common

in Canada among young persons, as most emigrants are young persons. The percentage of homeless youth is as high as 24% in Calgary. The purpose of emigration is to search for better employment and education. The experiences of emigrants to Canada are often negative and include, for example, negation, stress, a lack of sleep, food scarcity, and so on. This puts them on the brink of having psychological issues as well. The authors describe the issues associated with homeless youth in Canada. For instance, homeless youth are at high risk of becoming victims of violence and exploitation. The researchers refer to numerous studies that demonstrate the connection between mental disorders and homelessness by comparing homeless and non-homeless youth. Life on the streets is a sort of nightmare for homeless individuals in Canada.

C.H. Lindquist *et al.* (1999) explained that emigrants are vulnerable to many health-related complications. Most of them are psychological in nature; however, physical illnesses and symptoms also prevail. New emigrants are vulnerable to stress and anxiety, which in many instances lead to depression. The reasons for this include unmet needs, unemployment and homelessness. Suicide is a global concern. There is no country where the dilemma of suicide does not exist. However, suicide is relative, and the numbers vary; the causes and patterns also vary.

L. Sher (2010) investigated the socio-cultural determinants of suicide in Canada. This research is significant in terms of framing suicide in Canada under economic theories and frameworks. However, social variables, indicators and attributes are also framed under economic variables. For example, the social aspects are theorized under economic frameworks. First, gender is conceptualized in terms of unemployment rates. It is evident that higher unemployment rates put men at higher risk of mental illness and suicidal ideation. Masculinity may attribute to and be a mediating factor in this connection, as men are expected to earn and take care of the family. The failure to do so may lead to stress, mental illness and even suicidality. Secondly, the author found that per capita income affects mental health. For instance, widespread unemployment and mental health indicators are significantly correlated. The less the per capita income, the worse the mental health indicators. Intriguingly, research

also indicates that societies with less per capita income and higher unemployment rates have higher levels of alcohol consumption. Alcohol consumption, on the other hand, is linked with mental illnesses and concomitant suicide. For emigrants starting out, the unemployment rate is high, and therefore low per capita income and alcohol consumption is evident. This may be an important indicator for suicidality among emigrants. Third, scientists mention risk-taking behaviors, and suicide is included in such kinds of behavior. There is no doubt that having a low income is linked to risk-taking behaviors, and it is true for emigrants, at least in the early days of migration. Scientists refer to the role of occupational stress in mental illness leading to suicidality. Cyclical fluctuations in income are highly evident in the lives of emigrants, and in Canada it is certain that this leads to mental illness that may result in suicidality. For emigrant individuals, low incomes and occupational stress are significant risk factors that are in addition to lacking integration, such as not having friends or family. Furthermore, policies are also important for emigrants, and there is evidence that Canada's migration policies are not that friendly. This makes the situation worse for them in terms of income, occupational stress, alcoholism and mental illnesses. The author mentions Canada's suicide prevention policies as well, for example, its failure to implement the United Nation's guidelines.

Homelessness and problems in life are connected. Unmet needs, stigma and mental health are also connected (Khan and Naz, 2023). C.F. Wong *et al.* (2016) found that homelessness is significantly correlated with mental health problems. Stress and anxiety are common minor issues, while depression and bipolar disorders are major ones. S. Gutwinski *et al.* (2021) illustrate that homelessness is a concern for many European countries, specifically due to higher emigration rates. There is substantial evidence that the mental health of homeless people is poor compared to the non-homeless. In psychiatric wards, visits by homeless people are significant, and homelessness is labelled as a major indicator for both minor and major mental health problems.

Homelessness is a global issue; however, certain social groups are more vulnerable to being homeless, and emigrants belong to this group.

Conceptualizing homelessness is also important. Homelessness is a situation or condition whereby there is a not regular and/or fixed place to sleep at night. Next, we can look at the numbers. About 0.7 percent of the general population in Canada and the United States are homeless, yet as many as 33% of new emigrants are homeless for the 1st month of their migration. This means that 33% of emigrants are vulnerable to mental illness in the U.S. and Canada. But there is another sort of relationship as well: illness among emigrants leads to homelessness. Stress is the most common culprit. Stress and depression are linked to decreased interest in work. This is often the result of living away from their families, which may lead to mental illness and loss of work in another country, which in turn simply means homelessness. Therefore, there is a two-way relationship; first, emigrants remain unemployed for some time, leading to homelessness; second, mental illness affects their work performance, leading to unemployment and homelessness. Homelessness and emigration are linked by the mediating factor of mental illness. In between are the different attributes, including drug use, loneliness, a lack of social support, stress, social stigma, negation, and so on (Nishio *et al.*, 2017).

Bipolar illnesses and disorders significantly affect an individual's ability to control and express emotion, and one can say that there is a lack of balance between control and expression - at least there is a lack of balance when compared to the general population. This situation is a problem of its own, and it affects the relationships and interaction patterns of individuals. This affects familial life, but the biggest impact is on work life. Family and friends are more adoptive in terms of taking care of and avoiding behavior issues, whereas at the workplace there is often a lack of blood relationships, and the emotional attachment associated with it. In addition, loss of energy and a lack of concentration are also the outcomes of bipolar mood disorders, and they cause job loss for many people. Simply put, mental illness is one of the causes of homelessness in Canada, and it is also evident that mental illnesses are common among emigrants. Therefore, there is a two-way relationship. Statistically, it is evident that there is a 4-fold higher probability of mentally ill people becoming un-

employed, which may lead to homelessness (Oh *et al.*, 2015).

One's mental health is also connected with physical health. Poor mental health leads to poor physical health; it is a simple hypothesis that has been proven by a bulk of research studies. Poor physical health related to mental health leads to exacerbating situations at the workplace and often results in job loss. Job loss for a certain few individuals means homelessness. Routine social interaction and finding and maintaining ways to get a permanent or relatively steady source of income is a challenge for people with mental illness, and this also affects their physical health (Bacciardi *et al.*, 2017).

There is another important attribute and mediating factor between mental illness and homelessness, which is a fear of being homeless. Homelessness is the outcome of a population explosion or an unplanned demographic process. In recent times, as is evident from research, fear and anxiety of being homeless is an important aspect in mental health studies. Many people become mentally ill because they predict that their job or profession is not steady, and they can become homeless at any time. When such stress is exacerbated, it can lead to suicidal ideation as well. This is evident among very few individuals, but it still must be taken into consideration. For the people who had predicted they would become homeless, and they do become homeless, the life stressors are exacerbated. They already have fears and anxieties, and the stress levels are exacerbated because additional stressors in their lives, such as feeling unsafe and social stigma, also start circling around them. This adds to problems, such as isolation and scarcity of food, and for many people, getting help to have enough food is a significant stressor (Fitzpatrick *et al.*, 2007).

The work of M. Pinillo (2020) is significant regarding mental illness and homelessness. Homeless people are highly vulnerable to assaults in Canada. For example, statistics show that 56.9 percent of people who are homeless have been confronted with some type of violence. This number is extremely high compared to the general population. Simply said, homeless individuals are vulnerable to crime. The author found that individuals confronting crime, seeing crimes and being victims are more vulnerable to

mental illness and therefore developing suicidal ideation. However, one attribute that is important is the duration of homelessness. The lengthier it is, the higher the probability of mental illness and suicidality.

S. Fitzpatrick *et al.* (2013) make an important argument. For scholars, homelessness plays a significant role in avoiding social activities, as most individuals cannot bear the burden of social stigma associated with homelessness. Some specific mental illnesses are evident in the case of avoiding social activities due to social stigma resulting from homelessness, and these include cognitive deterioration and depressive symptoms. Statistics reveal that approximately 60% of homeless people exhibit some sort of depressive symptoms. The most common reason among these people (referring to the homeless) is avoidance and withdrawal from societal obligations. The authors suggest a solution of social integration, whereby communal and governmental responsibilities play a crucial role. The more efforts made to integrate homeless people into society, the lower the probability of mental illness and suicidal ideations.

K.J. Hodgson *et al.* (2014) found that depressive symptoms among homeless people are also connected with routine and daily troubles. The most notable of these are meeting food-related needs, a lack of privacy, the overcrowding of stay facilities, and feelings of being unsafe and unwanted. It has been found that individuals confronting these problems are at a 3-fold higher risk of developing suicidal ideation following mental illness.

C.F. Wong *et al.* (2016) found that self-harming behaviors are commonly found among homeless individuals. In England many studies confirmed that homelessness has been one of the causes of deliberate self-harm. R. Eynan *et al.* (2002) investigated different aspects of homelessness contributing to suicidality. In this regard, for example, the duration of the homelessness period was an indicator. The correlation is simple: longer durations of homelessness go along with an increased risk of suicide and related behaviors. The mediating factor was mental illness. If homelessness leads to mental health issues, it can lead to suicidal ideation. Further, the study produced intriguing results in the contexts of gender, homelessness and suicidality.

For example, men are found to be at higher risk of developing risks of suicidal behaviors compared to women. One factor in this connection was the percentage of men being homeless, and for example, there is a higher number of homeless people who are emigrants in Europe. Mental illness was found to be the most important indicator for suicidal ideation.

E. Lau *et al.* (2017) specifically investigates depression, emigration and suicidal ideation. Situations confronted by emigrants are the root cause of mental illnesses that lead to suicidality. Difficulties in life, specifically at the early stage of emigration, are significant. If the duration of difficulties faced is lengthy, there is a higher probability of poor physical and mental health. Poor physical and mental health is strongly correlated with suicidal ideation among new emigrants. The authors conceptualized the emigration stress. Emigration stress includes a broad range of variables. Leaving the family behind exacerbates stress levels. Interacting with new people in the destination country creates new stressors. Loss of social position and having the status of being an emigrant lead to burdensomeness. Being homeless adds to this condition, leading to higher stress levels that often develop into minor or major depression. Both minor and major depression are significant indicators in terms of the development of suicide and related behaviors.

Homelessness is the outcome of financial problems. Without a doubt, financial problems are a key concern for immigrants (Khan *et al.*, 2021, Husna Noor, Naila Hussain, & Maryam, 2024). For most emigrants, financial problems are inevitable. This is one of the reasons for homelessness, and homelessness creates stress, stigma and an inferiority complex, which may lead to suicidality. There is another sort of connection between emigration, homelessness and suicidality. Another indicator is substance use and abuse. The stressors in the lives of emigrants compel them to relieve their stress by using substances, and it is evident from research that emigrants are at risk of substance abuse. The feeling of being alone and away from one's family combined with life without one's own home leads to a feeling of burdensomeness, leading to suicidal ideation.

Linking suicide and related behaviors with homelessness among migrants is a key area of

research for social researchers. In this regard, T. Okamura *et al.* (2014) display that emigrants who are homeless have an increased risk of attempting suicide; this suicidal ideation is as high as 41%. 17% of such people suffer from serious suicide and related behaviors. However, scholars also add other attributes that play a moderating and mediating role when it comes to emigration, suicidality and homelessness. They include the previous history of suicidal thoughts, gender and previous life experiences, such as painful events in life. Gender specifically plays an important role. It is a fact that most emigrants are men, and therefore rates of suicide attempts among men are higher compared to women. Another factor found was the fact that men often remain homeless for longer periods. This is due to the societal response of gendered perceptions leading to relatively quick responses to get women out of poverty and homelessness; whereas men, being masculine, are tough and receive a minimal societal response in similar situations. As with previously mentioned studies, the authors also assert that homelessness leads to suicidal ideations. However, the relationship is not a direct one, as mental illness is the precursor.

C. Lee *et al.* (2017) found that schizophrenia is one of the mentionable mental illnesses found among homeless people, particularly those remaining homeless for 5 years or more. 10 percent of individuals who have been homeless for more than 5 years are reported to have schizophrenia symptoms, which is quite high compared to the general population.

J.H. Hammer *et al.* (2013) assert that Canada's government hasn't been successful in dealing with suicide as a public health issue. Since 1920, suicide has been continuously reported in Canada, and the statistics display the situation getting worse instead of improving. The suicide prevention strategy is there, but it needs to be applied to special populations, such as emigrants, the elderly, individuals with mental illness, etc.

Conclusions

In conclusion, emigrants are one of the social groups most vulnerable to homelessness in Canada. Higher levels of poverty significantly contribute to homelessness among emigrants. Homelessness is very common in Canada among young persons, as many emigrants are young

persons. The percentage of homeless youth is as high as 24% in Calgary. Emigrants are vulnerable to many health-related complications, both physical and psychological. This is because of their socio-economic status. Like homelessness, suicide is a global concern. There is no country that is free from the issue of suicide. However, suicide is relative, and the numbers vary, as do the causes and patterns. There are numerous socio-cultural determinants of suicide in Canada. They range from an individual level to a group level. For emigrants, the situation is the same, and one's personal status and socio-economic status lead to suicidal ideation. For emigrants in Canada, key causes of suicide include low per capita income, unemployment, occupational stress and cyclical fluctuations in income. Such an economic situation among emigrants in Canada is linked with homelessness, and homelessness leads to mental illness. Mental illnesses among emigrants are inevitable facts in Canada. Mental illness among emigrants is the outcome of the socio-economic conditions they deal with, which are poverty, social negation, social stigma, an uneasy life routine, etc. Thus, homelessness creates mental illnesses, and stress, anxiety and depression are culprits for suicide and related behaviors. The synthesis of the review is that there is a three-way relationship: mental illness is common among emigrants and leads to suicidality; homelessness is common among emigrants and leads to suicide and related behavior; therefore, the socio-economic conditions of emigrants can lead to homelessness and mental illness, both of which are associated with suicide and related behaviors.

Conflict of Interest

The author declares no conflict of interest.

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