



**Community Partner Profile:** Travis Hedwig, Assistant Professor of Health Sciences, University of Alaska Anchorage

Travis is a cultural and medical anthropologist by training and is a faculty member in the Division of Population Health Sciences at the University of Alaska Anchorage. He is interested in applied health research, particularly issues of mental and behavioural health, housing and homelessness, fetal alcohol spectrum disorder and other disabilities, and community health.

**How are you involved in issues related to housing and homelessness?**

My background is in disability studies. I've been working in Alaska for a little over 20 years and I started to see intersections with some of the disability work I was doing and caregiving and the ways in which kinship roles shift as we move through urban and rural landscapes in the North. That led to an opportunity for me to work with the Institute for Circumpolar Health Studies in a large-scale program evaluation of Alaska's first Housing First program. It included one in Anchorage called Karluk Manor and another site in Fairbanks called South Cushman. It really opened my eyes to the problem we have in the North with homelessness, and I became interested in Housing First as one possible solution to address that problem. I don't view it as the be-all-end-all. There are a lot of ways people experience homelessness and there are a lot of different possible responses to it.

We were able to [show a meaningful difference](#) in the lives of people who were offered housing without any preconditions for sobriety or treatment compliance. We were able to show really great changes in everyday state of mind, overall health measures, housing retention, getting people connected with primary healthcare services, starting to build community in ways that offered opportunities for reconciliation.

One of the most touching moments for me was being able to experience four generations of women having conversation in a way that hadn't been done in decades because there had been such profound rupture and disconnection from family and community. The offer of housing for this person was an opportunity to take a step toward treatment and sobriety, and they now had a space to offer up. We sat with a mother, her mother, and her child and grandchild all in one apartment and that just was not possible before.

**What are some of the challenges for housing and homelessness in Alaska?**

One of the biggest challenges is public perception and finding politically neutral ways to discuss homelessness. We have a lot of NIMBYism here. There is still a very strong perception that Housing First is enabling, that homelessness is a choice. A big part of [my work](#) is trying to step into this challenge of public perception, which is difficult in politically challenging times.

As a health professional, I try to lead with the data. Here is what the housing and cost data show, here is what the outcomes data show in terms of retention and reduced reliance on emergency services like jails, sleep-off centres, and emergency healthcare. The good news is that we have data that show that these efforts do make a difference. Part of my role is translating that back to community. Academics need to do a better job translating. I believe we can make meaningful contributions to public discourse that leads to meaningful policy changes to reduce disparities in health inequities around some of our most challenging health issues.

**What are some of the strengths and opportunities in Alaska?**

Our community of service providers is phenomenal, I have to give them all the props. There's a lot of stereotypes about front line workers being so good hearted and working so hard for the betterment of the community, but you really can't overstate that. They're out there doing the work and they really deserve the praise. Academics speak from a place of privilege, from a place of being able to step back and observe, and that's needed, it's just different. So, what gives me hope is the way the provider community steps up, even in some of the most challenging times. Even amid COVID-19, a lot of us have had the opportunity to go home. It inspires me to see communities get together and ask, "what can we do?"

We have a new mayor in Anchorage who wants to do something about this. I think we also need to join hands with the faith community because what I hear from providers is that they're often left out of the conversation but when it's -20° in the winter, our shelter overflow spaces are churches. I need to acknowledge that, and that inspires me.

With the Housing First programs, it's also nice to see the shift in perception over time. It's been open for 10 years now and that was a tough public sell. When the facility first opened, people made signs in protest and hung bottles of vodka and whiskey on the fence outside the facility. Just last week, the Anchorage Daily News [ran a story about Housing First 10 years later](#) and it had so many wonderful anecdotes from people who live there, some of whom have lived there from the beginning. That's a moment of hope.

### **Are there other projects in Alaska related to homelessness that excite you?**

Recently I've been looking at housing insecurity among college students. With Kathi Trawver, a colleague in Social Work at UAA, we piloted a study at UAA where we looked at food and housing insecurity in higher education. The data that came out of the project are disturbing! Around 50% of our sample indicated an experience with housing insecurity as a college student, and the numbers are even more concerning in areas of food insecurity. These aren't people who need to pull themselves up by their bootstraps, there are people doing every possible thing to improve their circumstances.

We recently published a [special issue](#) on food and housing insecurity and homelessness in higher education, and that work served as a springboard for a whole bunch of campus initiatives, like the Hunger and Homelessness Support Network which is now a campus wide entity. We have anthropologists, public health people, social workers, dietetics. They received a grant to expand the food pantry, they've been doing a peanut butter and jelly drive and they do annual fundraisers. During COVID-19 they raised funds for emergency housing services.

This was a small grassroots funding effort, and they were able to provide some small funding for a couple of students during a time of need. I think a lot of us have dreams and visions of that growing and the good news is that we have good outcomes data, we can share qualitative insights from our students. We can also couple that with the results of our survey.

### **What would you like to see from the AHIN Partnership?**

I think the community of practice that is AHIN is such a wellspring of information and I see it becoming a research centre. AHIN is providers and academics, people on the practicing and theoretical side. We can collect the wisdom of the group and engage in some high-level grant writing that would result in AHIN becoming a northern centre of research and practice. It would be great to see more coordinated research, but we can't forget the practice part.

AHIN could be a hub of information for practitioners with targeted workshops, information exchanges, technical assistance, and capacity building for service providers. Particularly in areas of evaluations, grant writing, and PIT counts, while also acknowledgement and reaffirming that those things are often problematic and don't always work in rural and northern areas.