



FEELING HOME: CULTURALLY RESPONSIVE
APPROACHES TO ABORIGINAL HOMELESSNESS

RESEARCH REPORT
JULY 2011

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AUTHORS AND RESEARCHERS: KATIE MCCALLUM & DAVID ISAAC

COMMUNITY REVIEWERS: ANITA DUCHARME, MARIANNE GODLONTON,
MARCEL SWAIN & LOUISE BURNS-MURRAY

COVER PHOTOGRAPHY: DAVID ISAAC

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CENTRE FOR NATIVE
POLICY AND RESEARCH
VANCOUVER, BC
WWW.CNPR.CA

SOCIAL PLANNING AND
RESEARCH COUNCIL OF BC
4445 NORFOLK STREET
BURNABY, BC V5G 0A7

WWW.SPARC.BC.CA
INFO@SPARC.BC.CA
TEL: 604-718-7733

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1. Introduction

This report summarizes the results of a knowledge transfer and research project focused on culturally responsive approaches to Aboriginal homelessness. The project consisted of a series of interviews with community-based service providers and community leaders. Case studies were also completed to highlight culturally responsive approaches to Aboriginal homelessness existent in Western Canada. The objectives were to:

1. Develop knowledge concerning good practices in providing culturally responsive approaches to Aboriginal homelessness in Western Canada;
2. Analyze that knowledge in ways that will make it easily adaptable to new contexts, so it can be incorporated into practice to improve services to homeless individuals and families who are Aboriginal;
3. Translate the knowledge for front line workers in shelters and support service agencies to support changes in practice that will encourage meaningful improvements in the cultural responsiveness of services; and
4. Identify policy issues that are generated by the findings.

The methodology used to achieve the four objectives is described first. The literature review in the next section provides a backdrop of information on homelessness in Canada, the complexities of Aboriginal homelessness, and the theory and practice concerning cultural responsiveness in current service models for Indigenous peoples. An analysis of the major themes that emerged from the interviews with community leaders and service providers is presented in the next section, after which case studies of culturally responsive services are highlighted. The concluding section provides a discussion about policy development issues and recommendations. Research instruments including case study questions and interview guides as well as terms of references documents are made available in the Appendices.

2. Methodologies

The aim of this project is to develop knowledge concerning good practices in providing culturally responsive approaches to Aboriginal homelessness in Western Canada. The components of the case study approach are described below.

Advisory Committee

An Advisory Committee was assembled to support the project. Committee members advised on the scope and content of the project, advised on the development of interview guides and other data collection instruments, brought knowledge of provincial contexts and assisted with the network of information gathering to support the case studies.

Two Advisory Committee meetings were held during the project as well as a round of edits and suggestions to finalize the research report. Members reviewed the proposed project scope and methodological approach at the first meeting. At the second, members discussed the preliminary results of interview analysis and a proposed approach to the design of the case studies. In the place of a final Advisory Committee meeting, which was not possible due to conflicting schedules, the final draft report was circulated for the review of committee members. Responses and suggestions were incorporated accordingly.

Project Activities

Literature Review

A literature review was undertaken to review theory and practice concerning culturally responsive human services for Indigenous people, including a focus on culturally responsive approaches to education, health and social services. To provide context and explain why a culturally responsive approach is necessary, a review of homelessness and Aboriginal homelessness in Canada is included. The review of culturally responsive service delivery looked to examples from Australia and the United States. With the exception of one Australian study, no other resources were identified specific to culturally responsive services for supporting Indigenous persons who are homeless.

Instrument Design

Following a review of the literature, two types of data collection instrument were designed for this project: interview guides for interviews with organizations that support culturally responsive services and case study guides. Both instruments were designed based on the following: findings of the literature review, input from the Advisory Committee members, input of an expert in the field of homelessness research, and design guidelines for exploratory interviewing and qualitative case studies. Interview instruments and case study guides collected mainly qualitative information. The interview instrument was semi-structured, to allow flexibility across the sites. Both interview questions and case study questions are provided in the appendices of this report.

Interviews

Key informant interviews were completed with 22 individual participants. The majority of participants represented service providers in the province's largest urban centres, including Winnipeg, Regina, Edmonton, Calgary, and Vancouver. Representation from smaller or more remote centres was limited, but included Prince Albert and Yorkton, Saskatchewan and Prince George, British Columbia. Larger urban settings made up the majority of sites as that is where the majority of homelessness-related service societies are located.

Two interviewers conducted the interviews and interview participants were asked to confirm their voluntary participation in the project. One of the reasons for conducting interviews was to identify organizations that could be highlighted in case studies.

Case Studies

Case study sites provide a handful of real-life examples of good practices in making homeless services more accessible to Aboriginal peoples. The diversity of practices across Western Canada called for a case study approach that provided flexibility in its design. A case study template that collected quantitative data for comparative analysis would not work for this study. The design implemented worked off the following design logic.

The five following components are especially important in the design of case studies (Yin, 2003).

1) *Study's Question*

What active practices demonstrate good cultural responsiveness to shelter and support services for Aboriginal peoples?

2) *Study's Proposition(s) and Areas for Exploration*

Propositions direct attention to items that should be examined in the scope of the study. Given the explorative nature of this study, areas of focus were identified through previous studies in other fields.

In the fields of education and health, cultural knowledge about a population is utilized in order to better serve the needs of that population. In addition to providing better care by matching services to people's cultural context, values and needs, studies claim to achieve more substantive equality by being inclusive of all in service design. We seek to determine if and how similar accomplishments can be made in programs that serve Aboriginal people who are homeless or precariously housed.

Do culturally responsive programs make homeless-related services more accessible to Aboriginal peoples? And if so, how? This question became the major organizing query for this exploratory study.

3) *Unit of Analysis*

The units of analysis for this project are programs that provide homeless-related services to Aboriginal persons. Challenges in utilizing this as the unit of analysis include:

- Programs provide multiple services, making them difficult to compare;
- Programs are often defined differently by staff, clients and community;
- Programs often overlap with pre-existing services or other programs, making them hard to define; and
- Programs usually operate within the context of an organization or agency.

The next-best unit of analysis is “services”. Services, for example emergency shelters or soup kitchens, are specific activities that are run in different ways across programs and organizations, allowing for comparison. They are more clearly defined. Agencies often produce output measurements attached to each type of service. Despite these benefits, “services” is a limiting unit of analysis in exploratory research focused on revealing good practices.

We were not able to locate any previous research that has been completed on culturally responsive service provision for homeless-related services. By designating programs as the unit of analysis, we avoid false assumptions that certain services work and others are not worth analyzing. By analyzing programs we are better able to account for new and innovative approaches, as well as the organizational and community contexts in which they are operating. For example, programs operating out of an Aboriginal-operated organizational context provides a particularly interesting discussion about the meaning of “culturally responsive” services.

4) Logic Linking Data to Propositions

Data collected for this explorative project was predominantly qualitative. A set of questions was developed to guide the case studies (please see Appendix B). Questions were designed to link directly to answer the guiding exploratory question.

5) Criteria for Interpreting the Findings

Because this case study project shares good practices in an emerging field, the main criteria for interpreting findings is to review what has made services work. There is also a need to compare similarities and differences there are in what, why and how culturally responsive services worked to better serve Aboriginal persons who are homeless.

3. Literature Review

Homelessness is one of the most pressing issues faced by communities across Canada. The harsh effects of homelessness are experienced directly and acutely by the individuals and families who are not securely and/or adequately housed. In addition, the rising social and economic costs of homelessness also affect the health, wealth and integrity of communities (HRSDC, 2008). It is in the best interests of all to find meaningful ways to reduce and eliminate homelessness and mitigate the suffering it causes.

Though the concept of being without secure physical shelter is relatively straightforward, homelessness is an issue positioned at the cross-section of numerous intertwined factors including adequacy of income, health (both mental and physical), substance use, access to education and training, secure employment, social inequity, affordable housing and public safety.

Aboriginal peoples experiencing homelessness face additional barriers including prejudice, racism and disenfranchisement of rights, along with the enduring effects of colonial legacies of forced acculturation and assimilation. Faced with these added challenges, Aboriginal persons are overrepresented in homeless counts across Canada (CMHC, 2006). It is in this context that we explore how service providers can use culturally responsive approaches to working with Aboriginal homeless people in search of safe, stable and appropriate housing.

This literature review addresses three key questions. First, what is the current context of homelessness for Aboriginal peoples in Canada? Second, what characteristics specific to Aboriginal populations make their experiences of homelessness unique? Finally, how can culturally responsive approaches to homelessness be utilized to better serve Aboriginal persons who are homeless? Although homelessness is a focus of increasing concern across Canada, this review focuses on homelessness in Canada's Western provinces.

Homelessness in Canada

Definitions, Numbers and Characteristics

There is no single accepted definition of homelessness. To account for the diversity of experiences of homelessness, HRSDC has identified five types of homelessness: at risk, hidden, street, sheltered and supportively housed. In this study, we employ a broad view to the concept and consider an individual and/or family to be homeless if they are in a position where they do not have an official residence of their own. This includes both those who have no physical shelter as well as those who are temporarily housed in shelters, safe houses, transition houses, friend/family homes or in unofficial/informal dwellings that have no security of tenure.

Understanding home is essential to understand homelessness. The concept of home, “a social, psychological space, not just a house as a physical structure” (Hulchanski et al., 2009), carries different meanings for different people and is strongly affected by emotion, memory and culture. What home means to different Aboriginal peoples is an important part of understanding approaches to Aboriginal homelessness (Oakes, Riewe, Wilde, Edmunds, & Dubois, 2003).

‘Spiritual homelessness’ is a concept drawn from Australian Aboriginal scholarship (Berry, MacKenzie, Briskman, & Ngwenya, 2001; Young & Keys, 1998). Spiritual homelessness is a state arising from separation from traditional land, family and kinship networks, or from a crisis of personal identity where one’s understanding of how one relates to country, family and identity is confused. In a study of Koori Aboriginal peoples experiencing homelessness in Inner-Sydney, Memmott and Chambers (2007) suggest that separation from family and community can have serious effects on mental health. The two basic points of introduction for Koori are where a person is from and which “mob” (traditional Aborigine group or community) they belong to. Homelessness separates people from such essential identifiers. The importance of home in cultural identity formation exemplifies how homelessness is more than a lack of housing.

Homelessness is as challenging to measure as it is to define. Government and non-government agencies attempt to measure levels of homelessness through shelter capacity counts, head counts and surveys. Counts of all types are subject to critique, particularly for undercounting or overlooking hidden homelessness. Because different methodological approaches yield different results, comparing rates of homelessness over time and across cities is problematic. While homeless counts are not perfect systems, they do provide information to help characterize homelessness in Canada. Demographic characteristics of the homeless population vary across cities. Homelessness affects a wide variety of people. Consider these Canadian figures:

- Aboriginal peoples in Canada are more likely to become homeless than their non-Aboriginal counterparts by a factor of 10 (Hwang, 2003).
- Youth aged 16 to 24 are estimated to account for one third of Canada's homeless population. Children account for nearly one in seven users of emergency shelters and transition houses (Laird, 2007).
- Seniors and older adults make up approximately one fifth of the homeless population and this figure is expected to increase (HRSDC, 2008b).
- Young women account for 41% of youth in shelters. This proportion increases as age decreases (Novac, Serge, Eberle & Brown, 2002).
- Nearly one quarter of new Canadians spend more than half their family income on rent, putting them at a higher risk of losing secure housing (CMHC, 2006).

Homelessness is not solely an urban phenomenon. Rural homelessness "is often neglected as it is invisible to the general population and is not consistent with the rural idyll" (Beer et al. 2003, p.5). Opportunities to secure safe and affordable housing are limited in smaller communities characterized by lower incomes, higher unemployment, fewer job opportunities and limited rental housing stock (Skott-Meyhre et al., 2008).

The Housing System

Conceptually, the housing system can be described as a continuum, spanning homelessness, shelter, supportive housing, transitional housing, not for profit and community housing, private sector market housing and mortgage-free ownership (Mawby, 2003). Where a household is located on the continuum is affected by income.

Canada's housing market has a strong international reputation, especially as it maintained relative stability through the 2008-09 collapse of the United States housing market (Bank of Canada, 2010). Critics of Canada's housing system argue that dual housing policies exist. These critics argue that most effort is directed towards improved effectiveness and efficiency of the private housing market to the benefit of owners and higher-end renters, rather than on housing policy that will support homeless people and rural, low-income populations (Hulchanski, 2006). In an analysis of the cracks and weaknesses of Canada's housing system, Pomeroy (2004) identifies the following weaknesses:

- Insufficient quantity and resources for transitional and supportive housing to ease movement out of emergency shelters;
- Insufficient number of low-rent units to help transition from shelter/supportive housing into permanent or semi-permanent rental housing;
- Lack of effective shelter allowances/rental assistance programs;
- Ongoing erosion of affordable housing including loss of rooming houses;
- Ageing/deteriorating rental housing with few incentives for new rental construction or rehabilitation;
- Limited capacity for non-profit agencies to construct new low-rent housing;
- Limited capacity to facilitate access to ownership for many households; &
- Housing not meeting health standards or population demand.

Housing insecurity is a major national concern. In 2007, the Canadian Council on Social Development reported that “almost one quarter of Canadian households – more than 2,700,000 households – are paying too much of their income to keep a roof over their heads.” Housing insecurity foreshadows homelessness and the number of people at risk of losing their home is growing.

Social Costs of Homelessness

Homelessness comes at great cost to society. Though no official cost of homelessness has been calculated, social commentator Gordon Laird estimates that “based on a core, Canada-wide homeless population of 150,000 people, as estimated by the federal government, homelessness costs Canadian taxpayers between \$4.5 and \$6 billion annually, inclusive of health care, criminal justice, social services and emergency shelter costs.” (Laird, 2007).

People who are homeless have high levels of morbidity and mortality and may experience barriers to accessing health care (Hwang, 2003). With a lack of adequate nutrition, hygiene facilities, suitable clothing and a place to safely store and administer medications, along with higher rates of substance abuse and other chronic health conditions, homeless people are at a higher risk for illness and disease. Costly visits to the emergency room are sometimes the only readily available source of health care. Furthermore, without access to secure housing it is more difficult to improve education or training, develop life skills and address substance use and/or mental health issues, thus reducing the ability to transition out of homelessness.

Proponents of a population health approach to housing emphasize the importance of housing as a socio-economic determinant of both individual and societal health (Dunn, Hays, Hulchanski, S. Hwang, & Potvin, 2003). Pomeroy argues that housing has two sets of outcomes, housing outcomes and non-shelter outcomes (2004). Housing outcomes include the quality and location of housing, while non-shelter outcomes include physical and mental health, education, access to services, community involvement and other outcomes. While not all non-shelter outcomes are caused by housing factors, they are influenced by them. From this perspective, housing is more than an end in itself; it is a means to a larger end, “a competitive, prosperous economy with a supportive social infrastructure” (Pomeroy, 2004, 1).

The concept that investment in housing will have a larger societal payback has constituted a primary public policy rationale for increased attention to housing. The large expenditures and political support often required to fund housing solutions, however, challenge the development and implementation of long-term policies and programs.

Homelessness Partnering Strategy

On April 1, 2007 the federal government introduced the Homelessness Partnering Strategy (HPS) with funding of \$269.6 million over two years to prevent and reduce homelessness in Canada (HRSDC, 2008a). The government recently confirmed annual funding of \$134.8 million for the national HPS up to 2014. Using a Housing First approach, the HPS prioritizes secure housing, either traditional or supportive, as key to helping people move out of homelessness. In this model, housing stability is seen as a pre-condition to enhancing people's ability to improve education or training, develop life skills and address substance abuse and physical and mental health issues.

The HPS emphasizes the importance of partnering approaches to address homelessness, where governments, community organizations and partners work collaboratively to pool resources and address multiple issues resulting in and from homelessness. Each designated community is required to conduct an inclusive community planning process led by a Community Advisory Board (CAB) or planning committee. The stakeholders in this group then work together to create a community plan to address homelessness. Local service providers apply for funding to support programs/services that fit priorities and targets identified in community plans.

The HPS has three main initiatives:

- Homelessness Partnership Initiative (HPI);
- Homelessness Accountability Network; and
- Surplus Federal Real Property for Homelessness Initiative.

Of most relevance to the Feeling Home project is the HPI, which includes Aboriginal Communities as one of its four funding components. There are 61 designated communities receiving funding under the HPI, including 21 in Western Canada.

Aboriginal Homelessness

Although accurate counts are difficult to obtain, statistics show that homelessness is more prevalent in the Aboriginal population than the general population. In 2006, Canada Mortgage and Housing Corporation (CMHC) reported that 20.4% of Aboriginal peoples in Canada were in core housing need, which is significantly higher than the non-Aboriginal population's rate of 12.7% (CMHC, 2006). A 2010 CMHC report noted that non-reserve Aboriginal households in severe housing needs were both more prevalent than non-Aboriginal households (6.7% as compared to 5.1%) and also had lower average incomes (\$14,499 as compared to \$16,862) (CMHC 2010).

Within the provinces included in this project, several cities have conducted homeless counts. Most counts utilize a "point-in-time" approach (counting the number of people in shelters and on streets on a single given day). The table below shares results from a selection of counts noting the incidence of Aboriginal individuals in the homeless population. It also shows the Aboriginal population as a per cent of the region's 2006 census population. While counts have methodological challenges (e.g., incomplete accounting of people couch-surfing, living in vehicles, hiding from public view or in and out of homelessness due to changing circumstances), results indicate a concerning overrepresentation of Aboriginal persons in the homeless population. In addition, point-in-time counts provide strong evidence on the minimum number of people who are homeless in the area studied.

Region	Aboriginal Individuals as a % of Homeless	Aboriginal Individuals as a % of Population (2006)
Winnipeg (CMA)	62% (2005)	10%
Regina (CMA)	N/A	9%
Saskatoon (CMA)	46% (2008)	9%
Calgary (CMA)*	15% (2008)	2%
Edmonton (CMA)	38% (2010)	5%
Prince George (CA)	66% (2010)	11%
Metro Vancouver (CMA)	24% (2011)	2%

*Observed to be Aboriginal, as opposed to self-identified.

Further analysis shows disparity between types of homelessness experienced by Aboriginal and non-Aboriginal peoples. Across most counts, Aboriginal peoples are more likely to be absolutely homeless (living on the street) as opposed to staying in a shelter (Edmonton, Vancouver 2005). Some found that Aboriginal women were more likely to be homeless than their non-Aboriginal female counterparts. Prince George's 2010 count found Aboriginal persons more likely to be younger than non-Aboriginal persons. Understanding the reasons for the current state of Aboriginal homelessness in Canada require a review of the circumstances that have resulted in this troubling situation.

Historical Factors Contributing to Aboriginal Homelessness

Urbanization

Literature on Aboriginal homelessness dates back to the 1960s and 1970s, when researchers observed the simultaneous growth of Aboriginal urban populations and the birth of a homeless Aboriginal population. In 1966, the Indian-Eskimo Association of Canada held a conference to examine the difficulties faced by Aboriginal peoples as they migrated to larger urban centres.

Research conducted by the association described a situation where, rather than living in a cycle of welfare dependency on reserve, increasing numbers of Aboriginal peoples were looking for economic opportunity in cities where they met barriers in terms of their levels of education and training, different lifestyles and poor economic circumstances (Indian-Eskimo Association of Canada, 1996).

Disenfranchisement of Rights

Since enactment in 1876, the Indian Act has governed all matters concerning registered Status Indians, including the definition of who has status and who does not. Aboriginal peoples in Canada were not considered citizens until the 1960s, but rather 'wards of the state'.

Under the purview of the federal government, Status Indians were (and still are) provided with some treaty rights, including: housing, the ability to live on reserve, funded post-secondary education and certain non-insured health benefits. Several approaches that focused on assimilation encouraged (or obliged) Aboriginal peoples to give up their rights as Status Indians. Historical examples include the exchange of status for Canadian citizenship, the automatic loss of status if an Aboriginal woman married someone who did not have status (and the subsequent disenfranchisement of status for their children), loss of status for people who joined the military during the two World Wars and relinquishment of status for payment (Sanderson & Howard-Bobiwash, 1997). After decades of living with limited legal rights and receiving benefits and federal support, consequently disenfranchised Aboriginal persons were unable to live on reserve land or access status benefits.

Residential Schools

Residential schools were government sanctioned, mostly church-run schools where Aboriginal children were placed – either with parental permission or not – and educated in the faith, language and culture of Christian colonizers. To reinforce assimilation, children in residential schools were forbidden from speaking their own languages or exercising their spiritual practices and religion. Though residential schools were not a negative experience for all Aboriginal peoples, many children were exposed to serious physical, emotional and/or sexual abuse at the hands of teachers and clergy. The first schools were set up in the 1840s; the last closed its doors in 1996 (AFN).

While it has been almost 15 years since the last school was shut down, the legacy of residential schools still resonates into the present (especially with the current distribution of Residential School Settlement Agreements). During 150 years of mandated assimilation, Aboriginal peoples were actively restricted from sharing their ancestral culture, language, spirituality and community. Many contemporary Aboriginal communities are recovering and re-creating traditions, however, cultural and social disconnection has resulted in an array of challenges. For example, learned abusive behaviours in residential schools have sometimes led to the perpetuation of abuse in communities; adults raised in boarding schools with no reference for parenting face challenges raising their own children; school as a tool of assimilation has propagated mistrust of public education (Wente, 2000). Such factors challenge communities' capacity to support members in growing to their fullest.

The 'Sixties Scoop'

Residential schools and lost status were not the only institutionalized attempts to assimilate Aboriginal children. In the mid-20th century when residential schools succumbed to significant criticism and the system was slowly dismantled, the child welfare system became a “new agent of assimilation and colonization” (Alston-O’Connor, 2010). Concurrently, the Department of Indian Affairs created agreements with provinces to take over responsibility for children’s welfare within provincial agencies (Armitage, 1995). In the 1960s there was a sudden upswing in the number of Aboriginal children removed from their communities by child welfare workers and placed with non-Aboriginal families in Canada and the United States. In 1959, one per cent of all children in care were of Native ancestry. By the end of the 1960s, 30 to 40 percent of native children were in the care of non-Aboriginal families (Fournier & Crey, 1998).

While no quantitative evidence has been provided, some exploratory reports show that individuals who were involved in the child welfare system are overrepresented in the homeless population (Wente, 2000, and Serge et al., 2002). Without cultural supports for Aboriginal children, non-Aboriginal families may have been unaware of how to address issues of racism, prejudice and loss (Sinclair, 2007). The impacts of the Sixties Scoop and other cultural assimilation models is essential to understanding social realities for Aboriginal peoples today. Lessons learnt from this experience emphasize the need for cultural awareness and culturally appropriate practice in providing services and supports with and to Aboriginal peoples.

Contemporary Factors Contributing to Aboriginal Homelessness

Housing

In 1986, the Ottawa Charter for Health Promotion recognized shelter as a basic prerequisite for health (Ottawa Charter for Health Promotion, 1986). Lack of affordability and access to quality housing are factors that contribute to homelessness for all people, but affect Aboriginal peoples in particular ways. Firstly, for many Aboriginal peoples living on reserves, the poor quality and over-crowding of housing is enough to encourage people to leave.

In 2001, Indian and Northern Affairs Canada estimated that only 89,000 housing units were accommodating 97,500 households on reserves. Furthermore, the same study identified that around 44 per cent of existing units required renovations (Auditor General of Canada, 2003). The Community Well-Being Index demonstrates that housing quality has decreased in First Nations and Inuit communities while remaining stable in other Canadian communities. Also, the overall housing score of First Nations and Inuit communities has declined between 2001 and 2006 (Indian and Northern Affairs Canada, 2010). The recent Auditor general's report notes that the shortage of housing has more than doubled over the past eight years, and that more than half of the reserves have drinking water that poses a health hazard (Office of the Auditor General of Canada, 2011; Montreal Gazette, 2011).

Findings from a 2007 report prepared for the BC Office of Housing and Construction Standards show that compared to non-Aboriginal British Columbians, Aboriginal peoples earn less money, spend a higher proportion of earnings on shelter, move more frequently and are more likely to live in crowded households and houses in need of repair. The report also indicated that Aboriginal peoples are less likely to be homeowners and are twice as likely to be in core housing need (Catherine Palmer & Associates Inc., 2007).

Different Experiences of Homelessness

Over the past 15 years, various research reports have shown disproportionate numbers of Aboriginal peoples are found among many homeless sub-groups, including women, youth, families, in urban, rural, remote and northern areas (Callaghan, Farha, & Porter, 2002; Beavis, Klos, Carter, & Douchant, 1997). Among sub-groups, there are often overlapping areas of vulnerability and barriers to transitioning out of homelessness (Paradis, Novac, Sarty, & Hulchanski, 2008).

In a study of family homelessness commissioned by CMHC, it was found that the majority of homeless families are led by single mothers; of these, most were Aboriginal (though findings were different by region) (Kraus & Dowling, 2003). Aboriginal women with children are at a higher risk of homelessness as they are more likely to pay a high portion of their income on housing and basic sustenance (Miko & Thompson, 2004).

The need to find affordable housing often results in the concentration of people in “poorer” neighbourhoods, which are also traditionally downtown neighbourhoods. In Winnipeg, the city with the highest proportion of Aboriginal peoples in Canada, the Aboriginal population is predominantly settled in the downtown core where low-cost housing is concentrated (Distasio & Sylvester, 2004). As with many such neighbourhoods, there are both high rates of poverty and lack of adequate housing as well as a rich history of community involvement and strong social networks. Where there are barriers, there are also strengths.

Rural, Remote and Northern

“People who are homeless in rural America rarely fit the national stereotype. While some are literally homeless, the majority are living in extremely precarious housing situations. They are often moving from one overcrowded, or barely affordable, housing situation to another, often doubling up or tripling up with family or friends.” (Rollinson, 2007)

Homelessness is often hidden in smaller centres for several reasons. Smaller centres may have few or no emergency shelters; in the north, severe winter weather limits sleeping rough. Residents of less populous centres also face housing challenges due to limited housing options and/or new rental construction (Bruce, 2006, VisionLink, 2002). Lack of transport and less service support is also common (Cairns & Hoffart, 2005). Being cut-off from services that may be available in larger cities puts at-risk people in rural communities at a disadvantage.

Multiple Barriers

Individuals with mental health challenges and a co-occurring alcohol or other drug use disorder are believed to be among the most visible and vulnerable of the homeless population (National Health Care for the Homeless, 1998). Though Canadian studies in this area are limited, it is an area of emergent research especially as focus on the connections between mental health and homelessness are further mapped. Findings show that a large share of homeless adults have concurrent challenges (Serge, Goldberg, & Kraus, 2006). For example, in British Columbia it was estimated that about 10 per cent of shelter users had both substance use and mental health issues.

Homeless individuals with concurrent disorders face specific issues such as: “a high risk of suicide; a high lifetime prevalence of injection drug use; high prevalence rates for HIV, hepatitis B and hepatitis C; high rates of contact with the criminal justice system; more isolated and disconnected from social support networks”. The multi-barriered are also likely to remain homeless longer and can face difficulties navigating multiple support systems (Serge, Goldberg, & Kraus, 2006).

Both socio-historical legacies and complex contemporary issues place Aboriginal peoples at a greater risk of becoming homeless. Aboriginal and non-Aboriginal researchers, policy analysts and governments are calling for culturally responsive services that take into account Aboriginal social, historical and cultural contexts.

Opportunities for Change: Culturally Responsive Approaches

Existing Services

There are a range of approaches to reduce homelessness. Preventative efforts include rent supplements to keep people in economic crisis housed and seamless support to people with health, addictions and mental health issues so they can stay housed while receiving services. Prevention requires the availability of adequate, affordable housing to prevent people living in poverty from losing their homes in times of crisis.

Management approaches include emergency services and supports such as drop-in centers and soup kitchens (Gaetz, 2010). Homeless shelters are among the best-known type of management service. Shelters are essentially places where people can go to avoid danger or stay overnight when they have no place else. Some shelters provide other services like a safe environment, counseling, referrals to community agencies, crisis telephone lines, training opportunities or meals, in addition to a bed for the night. Other emergency services that address basic and pressing needs include kitchens, food banks, health clinics, needle exchanges, legal aid, advocacy and support services, emergency assistance, community centres and drop-in centres.

Other approaches focus on helping people transition out of homelessness. Such services include outcomes-based case management, motivational counseling, and supportive, supported and transitional housing programs. “Housing First” approaches, where people are housed immediately and then offered further support, have emerged as key in Canada (i.e. Mental Health Commission of Canada’s At Home/Chez Soi). All approaches - preventative, management and transitional – have strengths and limitations. The three most relevant challenges to providing homeless support services for this report are briefly described below.

Coordinating Service Provision

The structure of the service system differs across regions, however, and the real or perceived disconnect between various types of services is a common issue that may exacerbate the challenges faced by people who are homeless (Gaetz, 2010). Clients must often fit a set of criteria to be eligible for receipt of certain services. People with multiple barriers face greater challenges fitting within service criteria. Also, Aboriginal persons may have access to some services which are designed specifically for the Aboriginal population, but may have to go to several different service centres to receive support for other needs. Ideally, prevention, emergency response and transitional programs would be part of an integrated, coordinated and strategic response to homelessness (Gaetz, 2010).

Consistency and Dependability

Emergency and transitional services are mostly operated by non-profit societies and faith-based agencies. The funds for service organizations come from many sources, often including all levels of government. Critics of current funding systems argue that the federal government has exhibited a pattern of “biannual funding binges... which results in uneven or unsustainable investments in homelessness” (Laird, 2007, p.35). Service providers who struggle to get sustainable operating funds are insecure in their existence, and therefore less capable of being a steady support to their clients.

Cultural Limitations

Aboriginal peoples who are homeless are not accessing services at the same rates as their non-Aboriginal counterparts. The 2008 Metro Vancouver Homelessness Count found the proportion of Aboriginal peoples was lower among the shelter homeless (27% compared to 35% of the non-aboriginal homeless). This finding suggests that Aboriginal peoples who are homeless either avoid shelters, that shelters do not serve this population as well, or that they are under-reported in the sheltered homeless data provided by the shelters.

People have many reasons to avoid homeless shelters if they have a choice, crowding, stigma, safety of self and possessions (including pets), queue waits... the list is long. Why, however, are shelters especially avoided by Aboriginal peoples? While research on the matter is sparse, some Aboriginal service providers openly discuss the mistrust many Aboriginal persons feel in accessing support from faith-based agencies.

In Canadian cities, many shelter services are coordinated through faith-based organizations. In the Canadian context of shelter service, the best established organizations include the Salvation Army, the Union Gospel Mission, Covenant House and other faith-based organizations. Service by faith-based organizations is a legacy of a Canada where support historically came directly from the goodwill of others rather than through public provision (Hulchanski, 2009).

Christian churches have also played powerfully negative roles as agents of colonization and assimilation in the history of Aboriginal peoples. A shocking number of residential school students suffered grievous physical, sexual and mental abuse while attending the largely church-run institutions. As of May 2010, Indian and Northern Affairs Canada (INAC) reported that 16,000 Independent Assessment Process (IAP) applications had been received since 2007. An average of 430 applications were received per month with 91% accepted. The IAP is a "claimant-centred, non-adversarial, out of court process for the resolution of claims of sexual abuse, serious physical abuse and other wrongful acts suffered at Indian Residential Schools" (INAC, 2010). The religious and spiritual beliefs of Aboriginal people in Canada are enormously diverse, however, many connote the church with abuse and disconnection from traditional beliefs.

Menzies, an Canadian Aboriginal therapist, observes that Aboriginal people who struggle daily for survival consistently report a history of traumatic events that have “left an indelible mark on their lives” (2006, p.3). Growing evidence calls for service providers to account for the impact of over 140 years of social strategies aimed at assimilation and the resulting personal, familial and community trauma. It is in this context that we analyze how alternative approaches to service delivery might pave the way for better service provision for Aboriginal peoples who are homeless in Canada.

Culturally Responsive Service Delivery

The theory of cultural responsiveness is common in the fields of education (Gay, 2002) and nursing (Bassendowski & Petrucka, 2010). In education, culturally responsive pedagogy requires educators to comprehend and respect the cultures of students and include this in their teaching (Glynn et al., 2008); “Culturally responsive teaching is defined as using the cultural characteristics, experiences and perspectives of ethnically diverse students as conduits for teaching them more effectively” (Gay, 2002, p.106).

This same concept, the utilization of cultural knowledge about a population in order to better serve their needs, can be applied to other service areas. An agreed upon definition of cultural responsiveness is not yet established in Canada, however a popular definition in social service provision emerged in Australia:

“Cultural responsiveness” in the context of service provision is the active process of seeking to accommodate the service to the client’s cultural context, values and needs. The rationale for this is not only to ensure appropriate and effective service provision, but also to give practical effect to the goals of substantive equality and justice (Armstrong, 2009 p.1 referencing Australian Law Reform Commission, 1992).

A focus is drawn to both what culturally responsive services do (accommodate service to a client’s cultural context, values and needs) and to why culturally responsive practice is important (to provide equal and just access to services). Culturally responsive service provision is founded on providing a matched level of services for all, where everyone is capable of being served in a way that accounts for their culture. In practice, this is a demanding task requiring the reconciliation of “potentially conflicting goals of respecting difference, protecting rights, facilitating equality, and nurturing our shared citizenship” (Armstrong, 2009 referring to Shacher, 2001).

Culturally Responsive Approaches for Indigenous Populations

Culturally Responsive Approaches to Education

Most scholarship on culturally responsive approaches for Indigenous peoples is from the United States or Australia. A large share of that work relates to education. In the U.S., culturally responsive schooling (CRS) for Indigenous youth is an area of ongoing research. Two models dominate Indigenous education in the U.S.: assimilative and culturally responsive (Castagno, 2008). CRS is advocated by many scholars, tribal communities and Indigenous educational leaders (Beaulieu, 2006; Beaulieu, Sparks, & Alonzo, 2005; Demmert, Grissmer, & Towner, 2006; Klump & McNeir, 2005). CRS argues that a “firm grounding in the heritage language and culture indigenous to a particular tribe is a fundamental prerequisite for the development of culturally-healthy students and communities associated with that place, and thus is an essential ingredient for identifying the appropriate qualities and practices associated with culturally-responsive educators, curriculum, and schools” (Alaska Native Knowledge Network, 1998). Essentially, it is schooling that “makes sense” to students who are not members of the dominant social group (Klug & Whitfield, 2003).

Research shows that most Indigenous students have pride in their heritage, language and culture (McCarty, Romero, and Zepeda, 2006) and that students do well when their culture and language are incorporated. The debate is over how to implement CRS; should it structure the overall educational experience and put a premium on local ways of knowing or should it be one strand among the many voices seeking to shape the educational approach? (United States Department of Education, 2001).

Common findings from the numerous case studies of CRS for Indigenous youth include a “grass roots approach”, consistent financial support, and good record keeping of successes and setbacks (Castagno, 2008). One of the most studied cases is the Kamehameha Early Education Program (KEEP), a culturally responsive language arts and math program for Native Hawaiian students. KEEP resulted in higher reading and math achievement for students in Hawaii, but when attempted in a Navajo school did not have similar results. This strengthens the idea that CRS curriculums and pedagogy must be developed with local culture in mind (Lipka & McCarty, 1994). Standards for CRS based on KEEP and other case studies were developed by the Centre for Research on Education, Diversity and Excellence and include connecting content to student lives, dialogue over lectures, engaging and collaborating (Klump & McNeir, 2005).

Culturally Responsive Approaches to Health Care

Culturally responsive health care for Indigenous peoples is another area of well-established scholarship and practice. Practices are being applied across Australia, the United States and Canada. For example, South Australia's Department of Health has made developing a culturally responsive health system one of its key objectives. To accomplish this, actions include (SA Health):

- Establishing an Aboriginal Health Improvement Plan to promote holistic primary health care;
- Including an Aboriginal Health Impact Statement as part of service planning;
- Improving cultural awareness for all health agencies through compliance with a Cultural Respect Framework and Cultural Inclusion Framework; &
- Increasing the Aboriginal health workforce and competency.

Health initiatives in Canada taking a culturally responsive approach include the Métis Health Workers Support Network (a joint partnership between Canada and New Zealand that explores indigenous models of health and culturally responsive health services, metishealthworkers.com) and Vancouver Coastal Health's Aboriginal Health Initiative Program (AHIP), a community based funding program that supports Aboriginal communities to identify and undertake health promotion projects that are culturally meaningful and locally responsive (aboriginalhealthinitiative.vch.ca).

Another example is the Aboriginal Health and Wellness Centre (AHWC) of Winnipeg, a holistic wellness centre that focuses on addressing complex health and wellness issues in a holistic and integrated manner based on traditional Aboriginal principles and beliefs (Hall, 2003). Program activities and services are the result of directions set during ten half-day focus groups in which more than 90 general community members participated. Programs funded by the Manitoba government include traditional healing, medicine wheel awareness, addictions circles and Fetal Alcohol Prevention/ Intervention program. AHWC's Ni-Apin program is highlighted as one of this report's case studies. There are numerous other health and healing centres across Canada that have adopted culturally responsive approaches to helping Aboriginal clients heal.

Culturally Responsive Approaches to Aboriginal Homelessness

Literature on culturally responsive services for Aboriginal and indigenous populations who are homeless is very limited. Forward thinkers in this field include Aboriginal Australian researchers Memmott & Chambers, who conducted a case study of groups of Aboriginal homeless persons in inner city Sydney. Memmott & Chambers (2007) discovered that Aboriginal homeless people did not use the mainstream accommodation services run by major charitable organizations to a great extent. The group of people involved in this project accessed day services such as health clinics and meals and to a certain extent used overnight accommodation facilities, but they did not participate in longer-term accommodation or rehabilitation services. This study recommended that coordinated efforts be introduced to ensure that holistic approaches be developed to assist the Aboriginal homeless population of inner city Sydney. The suggested approach relies heavily on partnerships between existing service providers and agencies and involves the creation of a number of culturally appropriate services, such as a range of accommodation options and drop-in centres.

To provide culturally responsive services requires the development of a cultural knowledge base. In the case of serving Aboriginal peoples, knowledge includes an understanding of cultural values, traditions, communication, learning styles, history and relational patterns. Knowledge needs to go beyond mere awareness or respect and include detailed, local factual information (Gay, 2002). Context and the importance of the local is something all culturally responsive programs have in common.

Economic, cultural and social interference brought on by forced acculturation and assimilation have resulted in disparities that have placed Aboriginal peoples at greater risk of becoming homeless. Culturally responsive approaches that accommodate people's cultural context, values and needs may help make service provision more effective and respectful for Aboriginal peoples who are homeless.

4. Interview Findings

The results of stakeholder interviews have been analyzed to address the three questions that ground this part of the research:

1. What challenges do service providers face in supporting Aboriginal persons who are homeless compared to their non-Aboriginal counterparts?
2. What do culturally responsive approaches to Aboriginal homelessness look like?
3. How can Aboriginal organizations and their allies use culturally responsive approaches to make programs and services better?

Challenges faced by service providers

Starting from a Hard Place

Interview participants affirmed many of the challenges addressed in the literature, the legacy of assimilation and the child welfare system prominent among them. Participants observed that many of the people who slip through the cracks and into homelessness have little earning potential nor financial stability. Participants also noted that those who have a history of trauma are often incapable of the trust required to reach out for help, not even from other Aboriginal communities.

“Poverty, discrimination, addiction... pretty much anything you could talk about for a marginalized group is represented in the Aboriginal population that we see.”

Many of the people interview participants support are marginalized in multiple ways. Participants identified particularly hard to reach groups as those with drug addictions, those involved in the sex trade, the struggling two-spirited and youth.

Certain communities are also facing an increasingly serious problem: solvent use (huffing or ingesting assorted paint and petroleum products, lighter fluid, fast drying glues, certain aerosol sprays and cleaners). Solvent use results in unpredictable behaviour and very serious health impairments including brain damage. It presents a serious challenge for service providers who have few resources to guide treatment.

In Between Homes

“When you are coming from a remote community and you had housing, everything handled – [the stress of] rent tends/ to affect the members.”*

Transition from reserve to city life leaves many Aboriginal persons “in-between”; living without a regular home, security or community. The life skills one needs to live in an urban setting are not fostered in the on reserve setting, participants noted. Skills like accounting, navigating the rental market, filling out and submitting rental applications and getting through the process of securing a lease are not often developed. Furthermore, participants in many communities noted that Aboriginal persons experience discrimination in getting housing. Interview participants saw many service users come for support while struggling though this change from life on reserve to life in the city. Immediately met with the need to find employment to meet the increased cost of living, the stresses of transition are many. So are the opportunities to become homeless.

Lack of awareness was identified by respondents as a principle barrier preventing individuals from accessing services. Without an understanding of what services exist in a new city, how can people reach out for help? Trust is another crucial element in being able to provide for those who resist trusting any formal institutions or organizations they are not familiar with.

Participants identified youth moving to cities for work or school as a sub-group of the homeless population that avoid traditional homeless. A dangerous cycle exists for youth who cannot find or afford decent housing. Unstable housing can prevent youth from completing school or keeping work. Without the necessary training or experience, they cannot find work to pay for stable housing. Youth caught in this cycle may end up couch surfing and spiraling into substance use or gangs. Innovative approaches are necessary when engaging youth.

Women in transition from reserves or in a temporary state of transit are another difficult-to-access sub-group of the Aboriginal homeless. Participants relayed stories of mothers who moved out of their home communities because of overcrowded or unsuitable housing, looking for a better quality of life. Frustrated or embarrassed, some resist reaching out for help if they are unable to keep regular housing for themselves and their families; “Pride—a lot of people don’t want to be known as homeless.”

Being Ready to Heal

The population of people who are homeless is enormously diverse. Service providers strive to serve people with different backgrounds and needs by accommodating everyone “where they are at.” But how to help those who have attached their identity to homelessness and are comfortable living on the streets? The chronically and/or culturally homeless – it is sometimes difficult for support workers to find a way to provide such people with the motivation to get off the streets. Before getting people to access services, one participant explained, people need to want to heal. Another explained that participants in their program required a strong desire to become independent.

How to be Culturally Responsive

Knowing the historical and contemporary challenges faced by Aboriginal peoples is only part of understanding why Aboriginal homelessness is an overly represented problem. This project turns critical attention to how conventional services have failed Aboriginal peoples and what can be done by service providers to make certain their supports are not a further barrier to healing.

In this research, we have used the lens of “cultural responsiveness” to look at how programs are incorporating Aboriginal culture into service delivery. The term was critically viewed by many interview participants who questioned the use of the term as something to aim towards.

“Cultural integrity is different from culturally responsive. Culturally responsive are things that non-Aboriginal organizations do to try to be more appropriate – I don’t see them as ever achieving cultural integrity because they are not owned or operated by an Aboriginal organization. Unless they had hired an Aboriginal staff person who had an extensive cultural knowledge base.”

In the following sections, we have analyzed the results of interviews with support service providers, Aboriginal committee and board members, community leaders and elders.¹ Their responses point to flaws in responding to culture as opposed to embodying culture. Their responses also provide useful guidance on how to be an ally, regardless of cultural background, in the work to end Aboriginal homelessness.

Setting the Context

In describing Aboriginal homelessness in their communities, recurring themes raised by participants included the over-representation of Aboriginal persons in the homeless population, low vacancy rates in rental housing and lack of affordable units of sufficient quality. Specific circumstances differed by city. During cold Saskatchewan months, for instance, people cannot sleep outside so 24-hour “party houses” have cropped up. In Winnipeg, the search for affordable housing concentrates Aboriginal poverty in the North area, a part of the city characterized by substandard housing conditions and safety issues. As a hub city at the intersection of two highways connecting BC’s remote communities, Prince George sees travelers from many nations and bands and has one of the highest rates of Aboriginal homelessness. In talking about how to respond to culture, context is critical.

The number of services available for Aboriginal persons who are homeless varies by city. Participants variously described services as few or many. No matter how many, however, they saw services as taxed. Participants representing rural communities were most unsatisfied with the level of services available. That said, the diversity in type of programs is great. Services mentioned include: native housing (both housing and administration), Aboriginal owned and operated shelters, friendship centres and their many various programs, food security programs including community meals and kitchens, reformatory justice services, both faith based and non-denominational shelters and soup kitchens and individual and group counseling for addictions.

In describing why their program/service/group was formed, interview participants invariably described their work as responding to a need; to shelter people in a time of extreme weather, to support the community’s under-served youth, to help people transition from reserves to cities, to serve as a gathering place, to provide alternatives to mainstream support and to supplement what already existed. All held one motivation in common; to relieve the suffering caused by homelessness.

¹ Several participants spoke from multiple perspectives. All of the interview participants spoke within the boundaries of their experience. Interview results have been analyzed in aggregate to protect the identities of participants.

What do culturally responsive approaches to Aboriginal homelessness look like? Aboriginal programs run by Aboriginal organizations for and with Aboriginal peoples

The best support for Aboriginal peoples at risk of homelessness comes from Aboriginal peoples. Cultural responsiveness is an embodied phenomenon that exists within Aboriginal organizations. Aboriginal peoples are creators of their own solutions. This opinion was held by both Aboriginal and non-Aboriginal respondents. It was most fervently held by Aboriginal-led agencies.

Aboriginal organizations described their approach to incorporating culture as cultural integrity, culturally appropriate, authentic or embedded - but rarely "responsive". Some said they employed no approach other than being themselves.

"We consider ourselves a culturally appropriate organization – my definition of that is that 100% of my staff is Aboriginal, so we have lived experience that is relevant to the work we do, the challenges and the goals of our clients. We all have personal experiences that help us do our jobs better. We have more empathy for our clients."

Aboriginal-led organizations that employ Aboriginal staff are the only services capable of sharing what is described above as lived experience. Based on the impressions of many interview participants (both Aboriginal and non), lived experience is irreplaceable in service provision for Aboriginal peoples who have suffered specific forms of discrimination, trauma and unsafe living conditions.

"Since all the staff are Aboriginal, you are working with an Aboriginal person so you get all the cultural nuances of an individual. No. 1 they don't have to explain themselves, they get that they've been in residential school, they get that they've been with the child welfare system, they get the issue of racism and stigma."

Simply being Aboriginal is not enough. According to the perspectives of several interview participants, strong Aboriginal leadership in the service sector is critical to supporting this approach. Interview participants identified a number of other factors that were necessary to make Aboriginal-run service provision its most effective. Success factors identified include a working model of Aboriginal governance to support the operation of good culturally responsive programs and an ongoing source of funding to ensure programs are stable in their existence. Herein lies the challenge for many Aboriginal (and non-Aboriginal) organizations.

Non-Aboriginal organization's role: Ally in the effort to end Aboriginal homelessness

Many of the largest and best-established homelessness support services are not operated by Aboriginal organizations. Smaller communities may not have an Aboriginal service organization at all. Sometimes an Aboriginal person's specific health needs require support from a specialized health agency. Presuming the best cultural support comes from within the Aboriginal community, how then can non-Aboriginal agencies work to be culturally responsive?

The largest single step a non-Aboriginal organization can make to being culturally responsive is to be an ally in the common fight against the persistent but not inevitable injustice of homelessness. Aboriginal-led or not, all interview participants represented organizations that are working towards this shared goal.

To be an ally requires working, learning and engaging with Aboriginal communities and supporting the development of Aboriginal leaders. Interview participants from non-Aboriginal organizations have been accomplishing this through two principle means: partnering with Aboriginal organizations and by employing Aboriginal staff.

Partnership and coordination across organizations is critical. The majority of participants representing non-Aboriginal organizations had strong connections with local friendship centres, Aboriginal committees, boards or other Aboriginal organizations.

As mentioned, interview participants almost all identified qualified Aboriginal staff as one of the strengths of their programs. Aboriginal staff members bring lived experience and cultural nuance to their work. Culturally responsive non-Aboriginal organizations can work as allies not just by employing Aboriginal staff, but by developing Aboriginal leadership and capacity in the workplace.

How can Aboriginal organizations and their allies use culturally respectful approaches to make programs and services better?

Three main virtues of effective approaches have already been identified:

- 1) Strong leadership by Aboriginal-led organizations in providing services for Aboriginal peoples;
- 2) Learning, dialogue and partnership with Aboriginal organizations will help non-Aboriginal organizations be allies in the fight against the persistent injustice of homelessness; and
- 3) Qualified Aboriginal staff should be employed and nurtured within all homelessness service and support agencies.

In addition to the above, the following approaches were identified by participants as effective approaches to better serve Aboriginal peoples experiencing homelessness.

“When somebody walks through the door we don’t ask them what their income level is, where they are from, whether they are just out of jail or not, we don’t judge anybody.”

Open, respectful, non-judgmental service builds the trust necessary to bring Aboriginal clients to the door, suggest most interview participants. Flexibility was described as one of the most valuable skills in staff members. It was important for staff to flexibly accept that some participants do not have an interest in cultural or spiritual activities, especially when providing opportunities to participate in smudges, sweats, feasts, naming ceremonies, or traditional teachings. Accepting people’s autonomy in deciding their own relationship with traditional culture is just as culturally responsive as making those opportunities available.

One of the simplest and most effective approaches to making people feel welcome is to use a universal Aboriginal greeting, “where you from?”. Particularly in the urban setting where there is a diverse composition of tribal origins, the question transcends personal barriers, exchanges background and creates a rapport.

“The main way to do it is by creating that family support - a home away from home.”

An approach championed by one of the agencies serving youth was “culture as therapy.” This concept sees culture as key to helping increase stability, continuity and a sense of belonging among Aboriginal youth by creating a family environment that is culturally open and accessible. The concept of creating a community within a community was another important notion for some participants. Culturally focused agencies can have a large role to play as connecting points for people who have lost touch with their home communities or their cultural and spiritual background.

“There is one thing we try to promote particularly among our young people, because we’ve seen the power that change can create when you have a sense of identity, a sense of pride and self esteem – it makes everything come together.”

Interview participants frequently raised the importance of supporting individual’s identity and self-esteem in helping them either transition out of homelessness or reduce the risk factors that might send them to the streets. Culture can be an intimate and important aspect of identity. All of the individuals we spoke to emphasized the importance of providing opportunities to gain a connection to culture. As shown in the case studies, cultural activities and programming are extensive in many agencies and can include: smudging and cleansing, elders or traditional healers on staff or on call, ceremonies, feasts, sweat lodges and other events, traditional cooking, arts, cultural and spiritual teaching and storytelling.

“The community needs to respond in a respectful way, knowing [people’s] background and providing the right low barrier environment.”

Understanding Aboriginal culture was identified as an elementary component in establishing trust. Unlike the “understanding” necessary for cultural responsiveness that is referenced in education, interview participants in this project spoke more about knowing cultural ways rather than knowing cultural facts. Understanding the names, histories and politics of local bands is important. It is also critical to understand the historical and contemporary situations that brought the client to the door in the first place, as well as the ways of communicating and living that have evolved in such contexts.

“Humour is very big for us. You can hear the laughter when you come in.”

Laughter and other comforts have helped to make many organizations more welcoming. For service centres, having a sense of fun or family at work was not only important to the clients but also very important for the staff. Staff who feel supported in their jobs are more capable of supporting each other through difficult cases and more capable of making clients feel at home. Having a spacious, living room-like setting for clients to socialize and make friends was also mentioned as greatly beneficial. For those who might feel disconnected from their community, such gathering places become important places to meet one another, bring their families and reconnect in a positive environment.

“Try to help them achieve their goals as best as we can and creatively try to bring other resources to the table.”

Partnership and creativity are two additional elements critical to serving Aboriginal persons who are homeless or precariously housed. As evidenced, traditional service provision is not working for many Aboriginal persons. Creativity is a necessary intervention. Partnering with other resources can be an excellent inspiration. Lu'ma Native Housing Society provides an excellent example of creativity in partnership. Their Community Voice Mail program, the first of its kind in Canada, provides free voice mail to people who are homeless and/or phoneless in crisis and transition. Lu'ma provides 1,200 phone numbers to over 60 service providers of housing, employment, health care and social services in Vancouver. Service providers then offer their clients a Community Voice Mail number. Lu'ma has partnered with four contributors in this program including a telecommunications provider, a credit union, a crown corporation and a local nonprofit funding body.

Further examples of culturally responsive work in action are provided in the case studies. The following four cases highlight the work of both Aboriginal and non-Aboriginal organizations in providing programs to help relieve the suffering of Aboriginal persons who are homeless or precariously housed.

5. Case Studies

The Kootenay Lodge in Calgary, Alberta

Background and Context

Located in the Martindale area of Calgary, the Kootenay Lodge operates to serve homeless Aboriginal adults who live with severe disabilities. Clients come from different walks of life and have widely varying disabilities including brain injuries, developmental disabilities, addictions and Fetal Alcohol Spectrum Disorder (FASD). Many experience more than one disability. While the impacts of brain injury and disability are highly varied, one of the few similarities clients here share, Program Coordinator Marianne Godlonton explains, is that they are all Aboriginal.

Kootenay Lodge was born out of a need to address two core areas of urgent attention identified by The Calgary Foundations' Vital Signs Report: "Support to the Most Vulnerable" and "Support for Aboriginal Communities in Calgary." In 2007, two Calgary newspapers added poignancy to such issues when they published results of a survey of homelessness in Calgary labeling the issue a crisis (Calgary Herald, 2007; Calgary Sun, 2007). Survey results showed twenty-five (25) Aboriginal persons with quadriplegia, paraplegia and amputations were absolutely homeless and another ten (10) to fifteen (15) were living in unsuitable housing (USRA, 2007).

Beryl Kootenay, an advocate for Aboriginal and homeless persons in Calgary, supplied the vision for Kootenay Lodge. In the fall of 2006, after the project was already underway, the Calgary Land Trust, the Calgary Homeless Foundation and the Aboriginal Standing Committee on Housing and Homelessness approached Universal Rehabilitation Service Agency (USRA) to talk about services for Aboriginal peoples with disabilities. These community partners promised operating dollars for program start-up. The Kootenay Lodge was officially formed in 2007.

Kootenay Lodge grew under the support of USRA, a Calgary-based non-profit agency that strives to meet all the needs – however varied and unique – of those with disabilities. USRA operates over ten (10) different programs for developmentally disabled clients and brain injury survivors. USRA has provided services in the Calgary region since 1985.

URSA's mission is to develop and provide opportunity for individuals with disabilities to attain a personal level of achievement and excellence in life. URSA uses a holistic approach to providing programs and services to clients, which entails respecting clients' individual rights, cultures and spirituality. The Kootenay Lodge works as one program within URSA to support Aboriginal persons with disabilities secure an important first step: stable housing.

Culturally Responsive Approaches to Aboriginal Homelessness

Helping Aboriginal persons with disabilities was the intention of Kootenay Lodge from its beginning. URSA was formed on the premise of the social model, and as such included Aboriginal cultures as part of practices from the outset. Spiritual needs are assessed as a component of the intake questionnaire (i.e., spiritual denomination, attends sweats, smudges daily, smudges on special occasions, medicine wheel). Questions are also posed about skills, trades and hobbies and residential school attendance.

Kootenay Lodge is small. Just ten residents live in the lodge at a time, and they work closely with a small team of staff and volunteers. To be eligible for a room at Kootenay Lodge, you must be Aboriginal, living in Calgary with severe physical and emotional disabilities and homeless.² You also have to be an adult (18 to 65) who is prepared to live in a drug and alcohol free home.

What you get from the lodge is a private bedroom in a shared house with wide-ranging support from a House Manager and Assistant Managers, Community Rehabilitation Workers, Caregivers and Volunteers. Kootenay Lodge strives to be like any home; a place where people feel safe and have the security necessary to be themselves and make their own decisions. Though residents are not permitted to drink alcohol or use drugs on site, residents generally do what they want when they want – they are supported but not rigidly programmed. Staff members are there cooking meals, organizing activities and responding to health needs, but residents are welcome to make their own food, take what they want from the kitchen and control their own space.

² Homelessness as defined by Kootenay Lodge means being either a chronic user of shelter, living on the streets, or living in inappropriate housing.

The security of a place to be oneself is a big part of responding to cultural needs. Staff and volunteers at Kootenay Lodge provide a wide variety of activities consistent with Aboriginal traditions and practices. For example, Kootenay Lodge promotes use of cultural medicines, participation in Pow Wows, round dances, sweat lodges, smudging and naming ceremonies, Native arts and crafts, sweetgrass ceremonies and prayers, traditional cooking and feasts. Furthermore, staff supports those who want to take part in specific cultural activities or travel to visit their home communities. Not all residents, however, want to participate in such activities.

Several residents are from outside the province, far away from traditional lands. There are also several who are disconnected from Aboriginal culture and are not interested in reconnecting. For some who have lived for years on the street, what matters more is being somewhere warm and peaceful. Godlonton explains, “Some of our guys have said, ‘I’ve lived on the street. I’ve been freezing cold for 20 years and had nothing, and [now] I get to watch the 1990 re-runs of my favourite t.v. shows’... Sometimes they just want to live, be happy, safe and secure.”

Cultural programming provides residents with opportunities to connect with culture and spirituality, but conversations like the above better depict the Lodge’s culturally responsive approach. Staff knowledgeable about disability, homelessness and Aboriginal culture know how to support residents in whatever promotes peace and healing and that is an important part of responding to cultural needs.

Kootenay Lodge employs both Aboriginal and non-Aboriginal staff who understand the complexities of Aboriginal homelessness and disability. To increase everyone’s knowledge of Aboriginal culture, staff members participate in a day of Aboriginal Awareness training led by local Elders. Kootenay Lodge also connects with local Aboriginal organizations including Elbow River Healing Lodge, Native Counseling Services and Ghost River Rediscovery Friendship Centre.

Despite knowledge, training and partnerships, Godlonton says having Aboriginal staff members is a necessity. The current Manager of the group home is Aboriginal; “she can pick up a lot of stuff that the clients are saying and why they are saying it, even if it isn’t her own language”. Many residents come to Kootenay Lodge with histories of abuse. Some are also unearthing past residential school abuse through the residential school settlement process. Having Aboriginal staff means one less cultural barrier to overcome in the healing process.

Organizational Structure

While Kootenay Lodge is operated by URSA, it is owned by the Calgary Community Land Trust. Individuals are referred to the program through URSA, and undergo a telephone screening and then a face-to-face meeting. Residents must be on Assured Income for the Severely Handicapped and able to pay room and board charges. Upon moving in, a yearly budget is established by the Manager and individual and/or his/her Parent(s)/Guardian(s). Individual Service Plans are established and reviewed once a year and periodically as needed. Depending on the cognitive abilities of residents, significant decisions regarding the care of residents are made with families/guardians, residents and staff as appropriate.

A set of house rules governs activities at Kootenay Lodge. Cultural activities are programmed in three (3) week cycles. Staff members are on site 24 hours a day. Staff members include House Managers and Assistant Managers, Community Rehabilitation Workers/Caregivers, Practicum Students, Overnight Supervisors and Volunteers. Residents also have access to Registered Nurses, Speech Therapists, Occupational Therapists, Physiotherapists, Dietitians and Psychologists/Psychiatrists as necessary through community resources and connections to private practitioners.

Residents' success in the program is monitored after a trial period of up to three (3) months, again at the six-month mark and from then on at the annual anniversary. At these meetings, residents are invited to discuss goal ideas for the short-term, review the Service Agreement and pose questions. Residents (and their families, depending on severity of disability) participate in group home planning meetings once a year.

The short-term goal of the program is to keep Aboriginal adults with disabilities off the street where they face extreme physical, psychological and emotional risks and out of emergency medical or police services. The long-term goal is to provide the support and facilities necessary to assist residents in stabilizing their health, emotional healing, personal skill development and meaningful connection to family, community and employment.

The model employed at Kootenay Lodge has several benefits, including:

- **Long-term housing:** After a trial period of up to 3 months, residents at Kootenay Lodge can stay as long as they want. This provides stability for residents and also helps develop relationships between residents and staff.
- **Flexible support:** Residents who are ready to gain the skills they need to live on their own or in other housing arrangements. At the time of the case study, there was one resident who had been there since opening. Others have moved on to live with friends they met in the lodge or to their own place. Given residents' wide range of disabilities and abilities, flexible support and accommodation is key.
- **Cultural and spiritual activities:** Many cultural and spiritual activities are available. Residents choose when and how they want to participate.
- **Aboriginal staff:** Sharing a similar cultural background, Aboriginal staff are more capable of supporting residents' cultural/spiritual interests.
- **Aboriginal awareness training:** Workshops led by Elders help establish a baseline of cultural understanding among all staff.
- **Individual rights:** Rights are acknowledged, respected and upheld and personal growth is encouraged.
- **Community involvement:** Residents are encouraged to access community resources and reconnect with family and community.

Limitations to the model include:

- **Need for structural support:** Kootenay Lodge could not have grown without the knowledge and structural support of an established community agency like URSA. Dependency, particularly in providing clients access to a health support professionals, is both strength and limitation.

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- **Funding needs:** The Lodge is currently funded through a combination of federal grant money administered by the Calgary Homeless Foundation and leveraged funds from local Nations and the province. Residents also pay for their stay. The Lodge is not a contracted facility funded by a specific organization. They are always seeking funding in an ever-changing setting.
 - **Size:** Kootenay Lodge has only 10 beds and it is therefore limited in how many people it can support. Kootenay Lodge has a wait list. But contacting those on the wait list when a space become available is extremely hard, given the mobility and lack of contact information for homeless individuals.

Links to the Community / Network / Outreach

Access to community resources is a mandated component of URSA's Service Agreement for the Kootenay Lodge. Clients develop links to the community to access medical personnel (i.e. Community Accessible Rehabilitation) and shopping, but also to participate in cultural and spiritual activities as previously mentioned. Connection to community is not just through facilities. Kootenay Lodge staff also accompany residents on trips to visit families and friends on reserves and in Calgary as residents are interested. Staff representatives from Kootenay Lodge also sit at the Aboriginal Standing Committee on Housing and Homelessness.

Lessons Learned

- The incorporation of annual Aboriginal Awareness program for all new employees is a useful way to help increase people's ability to respond respectfully to the needs of Aboriginal individuals.
- A participatory approach needs to be used in developing and providing services geared towards Aboriginal peoples. This will ensure that the issues of concern to those being served are incorporated.

Aboriginal Health and Wellness' Ni-Apin Program in Winnipeg, Manitoba

Background and Context

Based out of the Canadian Pacific Railway Station in the heart of Winnipeg, the Aboriginal Health and Wellness Centre of Winnipeg, Inc. (AHWC) operates the Ni-Apin Program to provide housing and supports to Aboriginal persons who are homeless and suffer from mental health issues and substance use.

AHWC is a community-based, non-profit resource centre that serves the Aboriginal community of Winnipeg. Blending both Traditional and Western approaches, AHWC offers a wide variety of programs and services including, but not limited to: a wellness centre that offers primary health care and health promotion; a children's health program (Abinotci Mino-Awawin); an Aboriginal pre-school program (Head Start); a Fetal Alcohol Syndrome/Effects prevention program; a family program called Mino-Pimatiziiwim (Men's Healthy Living), and; an Indian Residential School program with a Resolution Health Support Worker who provides safety supports and service for residential school claimants. Within the walls of its centrally located heritage facilities, AHWC is a place for people to meet and foster new ideas in education, economic development, social service delivery and training. In place now for over twenty years, AHWC was built on community participation and continues to espouse the value of community consultation in design and delivery of all services.

The Ni-Apin program is AHWC's housing and homelessness service. It provides comprehensive housing and support services to Aboriginal people who are homeless, offering each person holistic support services (housing, counseling, training, health, cultural and economic) to get them back on the road to healing.

Ni-Apin was created out of a need to help resolve the pressing issue homelessness in Winnipeg's Aboriginal community. The city is characterized by a consistently low supply of rental housing. Winnipeg's vacancy rate has hovered around one percent for many years. In 2010, Canada Mortgage and Housing Corporation's fall survey revealed that at 0.8 percent, Winnipeg had the lowest vacancy rate in Canada. As is true across most Canadian cities, Winnipeg's homeless residents are disproportionately Aboriginal.³

Though operating out of AHCWC, the Ni-Apin program is also guided in its work as a service provider site for the national At Home/Chez Soi Homelessness demonstration project. Administered through the Mental Health Commission of Canada, At Home/Chez Soi is a federally funded project running from 2009 to 2013 that investigates homelessness and mental health in five Canadian cities. Sites in Moncton, Montreal, Toronto, Winnipeg and Vancouver each focus on supporting different segments of the homeless population – Winnipeg’s is the urban Aboriginal population.

At Home / Chez Soi project researchers saw a need to design solutions specific to the Aboriginal population, as “Aboriginal people are more at risk of homelessness due to a number of factors, including inadequate housing on reserves, and a lack of culturally appropriate supports.” (Mental Health Commission of Canada, 2011). Ni-Apin is one of three service programs in the “Made in Winnipeg” approach (along with Mount Carmel Clinic and Ma Mawi Wi Chi Itata Centre) to supporting urban Aboriginal persons who are homeless or precariously housed.

At Home / Chez Soi operates on the Housing First model, with the hypothesis that once a person is given a place to live, he or she can then better concentrate on resolving other personal challenges. In Winnipeg, the research is led by departments within the University of Winnipeg and the University of Manitoba. As a project site, Ni-Apin accepts eligible constituents who are randomized into the program by the At Home/ Chez Soi researchers and works with constituents to get them well housed, well nourished, emotionally supported, trained and educated and holistically supported while they rebuild.

The Winnipeg project was launched in November 2009 and since that time the three service providers have taken on over 400 Winnipeggers as project participants, of which over 119 now have homes.

Ni-Apin’s main goals are to house Aboriginal persons who are homeless and suffer from mental health issues and to provide a range of care services (promotion, prevention, intervention, treatment, support and after-care) to promote well being. Its service delivery model embraces Aboriginal values, traditions and beliefs as integral to healing. Services are based on Seven Sacred Teachings – sharing, caring, kindness, humility, trust, honesty and respect.

³ Approximately 75-80% of Winnipeg’s homeless population is Aboriginal (MHCC, 2011).

Culturally Responsive Approach(es) to Aboriginal Homelessness

Ni-Apin is committed to honouring Aboriginal culture down to its roots. It is difficult to identify main characteristics of culturally responsive programming because culture is embedded throughout. All of AHCW was designed in consultation with Winnipeg’s Aboriginal community. In the early 1990s, community forums and Elder Circles were held to determine the priorities of the AHCW. People expressed a need for the best of both Traditional and Western approaches to healing (or “blended services”). Circles and forums also prompted the development of a guiding tool: AHCW’s Medicine Wheel (see Figure 1).

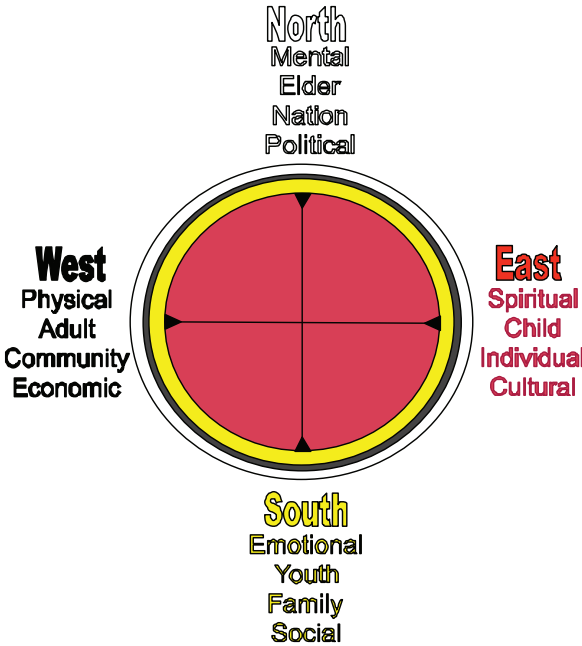


Figure 1: Aboriginal Health and Wellness’ Medicine Wheel

AHCW’s Medicine Wheel sets the context for understanding Ni-Apin’s culturally responsive approach to helping Aboriginal peoples who are homeless. By understanding and integrating the different elements of living, the wheel will “enhance the will to make healthy lifestyle choices” (AHCW, 2011). People can see themselves as already part of the circle and can thus see themselves as capable of transitioning to other stages when they are ready.

Guided by the AHW medicine wheel, the Ni-Apin Service Wheel (Figure 2) lays out each constituent's journey to self-guided health. The four phases of the Service Wheel are symbolized by eagle, mouse, bear and buffalo which respectively stand for new beginnings, self-discovery, testing of will, and wisdom. Elements of the Service Wheel are also interwoven into Ni-Apin's program design. Activities are divided into the four phases/directions. The Medicine Wheel helps ensure that Aboriginal culture and traditional healing translates into all phases of support.

Intake assessments and materials were developed based on the Medicine Wheel, and thus result in holistic assessments. Program staff know about the wheel and program constituents know about the journey. By incorporating Aboriginal culture from the offset, everyone respects the same cultural approach to healing.

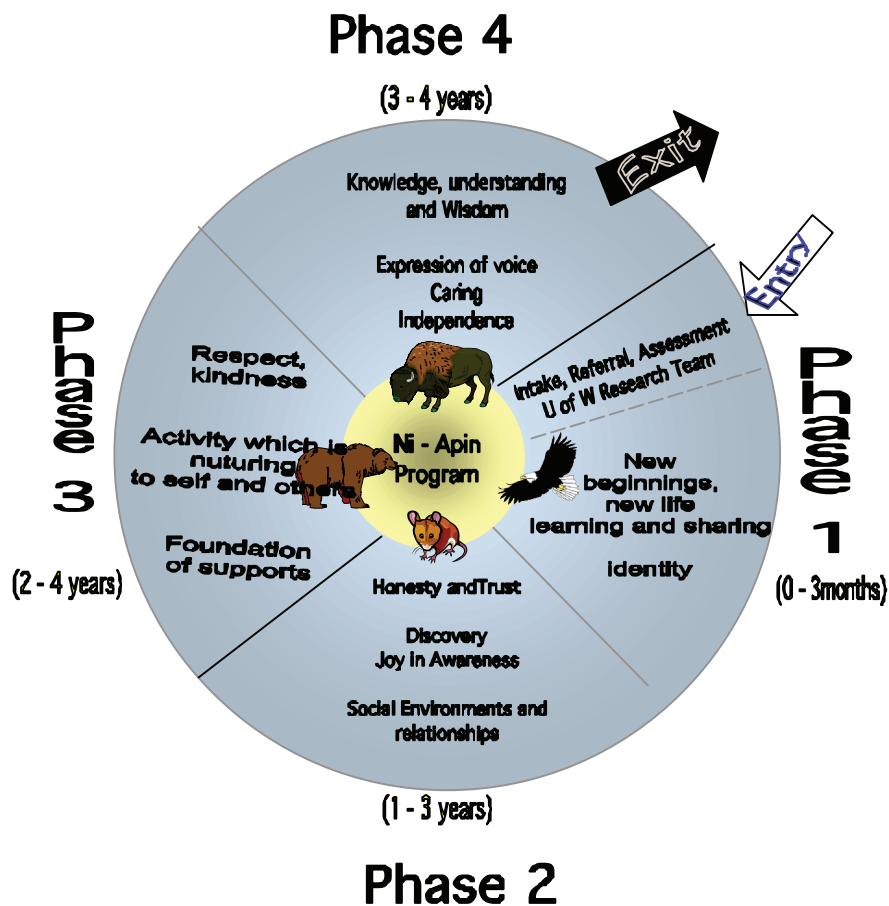


Figure 2: Ni'Apin Program Service Wheel based on AHW's Medicine Wheel

Respect is key to what makes Ni-Apin both a healing and culturally responsive place. All care is guided by ethical practice and services are customized to meet the needs of each constituent, which speaks to the holistic approach to healing. The majority of staff members are Aboriginal, making the task of responding to cultural needs more fluid and natural. Staff members are respectful, approachable and passionate about the work that they perform in helping constituents.

Through use of the medicine wheel, a foundation for culturally responsive service has been built in Ni-Apin, but the program also provides opportunities for program constituents to connect directly through cultural activities. Cultural programming includes traditional teaching circles, sharing circles and cultural retreats outside of Winnipeg where constituents can sweat and feast together. A cultural advisor is available to constituents on a one-to-one basis. The program's drop in centre is a place where constituents can practice art including painting, bead work, jewelry making, weaving and more. The centre features a pool table, large television, resources, computers, public and private phones, and comfortable seating.

After program intake and needs assessment, constituents are given full housing placement and support in either short-term supported housing or long-term market housing. For those in long-term rental housing, staff members work with constituents to get through all stages of the housing process. Staff members locate an apartment, arrange finances, coordinate apartment viewings, lease signing and move in date, arrange for new furnishings to be delivered along with laundered clothes and linens and set up the apartment prior to move in (including a \$300 food gift certificate, shopping lists and a recipe booklet with simple nutritious recipes). Ni-Apin staff also offer "warm referrals" to community services and provide transport and company to help represent constituent's if asked. Many Aboriginal persons face racism and discrimination when interacting with landlords. Staff do their best to erase the multiple barriers that keep many from getting decent housing.

Ni-Apin links constituents to one-to-one counseling to provide extensive care, including home visit services, a drop-in centre, advocacy and addictions counseling and resources. A wide variety of holistic, traditional and contemporary healing resources are made available to constituents, including physicians, nurses, Elders, nutritionists and psychologists at AHWC and in the wider community. Such professionals also provide workshops on dealing with challenges like diabetes or grief and loss.

When it comes to providing for the cultural needs of participants, Ni-Apin takes the perspective that there are no two people alike. Some want to participate in traditional Aboriginal cultural programming, others want none and then others want to participate in all varieties of programming – both traditional and western. Blended services accommodate the constituent’s wishes for using services and respects all constituents’ approaches to healing.

Organizational Structure / Program Model Used

Much of Ni-Apin’s organizational structure is connected to the At Home / Chez Soi program. For instance, program constituents are eligible based on a specific set of criteria outlined by the research project. Also, constituents must be randomly selected to Ni-Apin (or one of the other Winnipeg based programs) by researchers at the local collaborating Universities. Similarly, the Winnipeg At Home / Chez Soi project has set up a database of apartments from which Ni-Apin staff can find housing placements – though a significant challenge now is the limited supply of suitable housing (available listings were filled faster than anticipated). The yearly budget for the program is also set by the amount allocated by the Mental Health Commission of Canada (MHCC). The model is fully funded by the federal government as part of the At Home / Chez Soi study until 2013, at which point the project wraps up. MHCC is working towards making the program sustainable.

Ni-Apin Program activities are organized by a set of “Program Pillars”. Pillars include:

- Program intake;
- Cultural programming;
- Personal development;
- One to one counseling;
- Food security;
- Medical support;
- Support and advocacy;
- Referral services;
- Literacy and education; and
- Pre-employment & employment.

A constituent who is accepted into the program is offered services in each program pillar, and services are extensive. For example, within the personal development pillar, interested constituents participate in a series of life skills courses including literacy, upgrading, advocacy and community relationships. In partnership with Employment and Needs Income Assistance (EIA) and the Centre for Aboriginal Human Resource and Development (CAHRD), Ni-Apin also runs a rewarding work/volunteer program so constituents can gain experience and references. Another interesting activity within the food security pillar is the “Make and Take” program at the drop-in centre kitchen. Here, constituents get involved in menu planning, grocery shopping, cooking and eating together. After the meal, everyone leaves with containers full of leftovers. Numerous staff including counselors, case managers, service directors and the professional health care staff already identified work to support constituents.

The model employed in AHCW’s Ni-Apin program has several benefits, including:

- **Strong guidance and partnerships:** Ni-Apin operates under the guidance of its parent organization the AHCW and with support and guidelines provided by the At Home / Chez Soi demonstration project. Both bodies provide access to persons with ample expertise and direction in what services are provided and how. It also from partnering with the other At Home/Chez Soi service providers in Winnipeg.
- **Funding:** The funding provided through At Home / Chez Soi provides the Ni-Apin program with the support needed to provide comprehensive care to each constituent. The program is thorough in its services for Aboriginal persons who are homeless.
- **Housing First:** The dedication to getting people housed sets the Ni-Apin program at an advantage in its ability to provide subsequent support.
- **Foundations resting on community consultation:** By consulting with the Aboriginal community, AHCW has strong support and recognition.
- **Holistic, blended services:** Constituents have a wide variety of high quality support services available to them through the Ni-Apin program. Both traditional and contemporary health services are available.

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- **Cultural approach to health and healing:** Intake assessments and materials were developed on the Medicine Wheel resulting in holistic assessments and services within an Aboriginal cultural approach

Limitations to the model include:

- **Temporary nature of financial support:** AHCW is able to provide housing and support services because of funding from MHCC, but long-term sustainability is an issue. Since day one, AHCW and the other At Home / Chez Soi service providers in Winnipeg are working diligently towards sustainability planning to keep the services running after 2013, when the demonstration project is complete.
- **Housing stock:** Ni-Apin connects several constituents into rental market housing. This task was aided by a central database that tracks occupancy and vacancy within the housing stock. This is an essential ingredient for support the demanding work and coordination of move ins and outs. At the time of the interview, that listing had nearly dried up. In a city with such low rental vacancy and little new affordable rental housing, how to continue serving the Housing First model?

Links to the Community / Network / Outreach

Community partners are integral to the success of Ni-Apin. The program model is designed to support and advocate for the constituent as well as to connect and refer the constituents where necessary. In connecting people to the services they require in the community, transportation is provided and support workers attend meetings or appointments with the constituent.

The Winnipeg Regional Housing Authority procures landlords and apartment units for the At Home/ Chez Soi Winnipeg project. Ni-Apin also has access to Manitoba Green Retrofit, who is tasked with key management, move in and out apartment inspections and repair services to cover any willful damage by a tenant.

The Canadian Pacific Railway building in which AHCW is located houses 15 other service providers, several of which partner with Ni-Apin. This proximity

to services makes the site a 'one-stop shop' for service users. Partners include the Siloam Mission, Main Street Project, Salvation Army, Anchorage Program, Housing Plus, Manitoba Green Retrofit, Enviro-Clean, SsCOPE (a social enterprise moving company), storage facilities, the Centre for Aboriginal Human Resource and Development (CAHRD), Winnipeg Regional Housing Authority, Employment Insurance and Employment and Needs Income Assurance. This type of work requires lots of support through partnerships, venture capital, and dedicated staff.

Lessons Learned

Factors for success and lessons learned from the Ni-Apin program include:

- AHCW provides services to the Aboriginal community in the City of Winnipeg by Aboriginal employees. This approach is respected by the constituent base.
- In addition to being an Aboriginal-run operation, community consultation and participation is a critical component in designing services that have cultural integrity. Consultation at AHCW happens at every stage of project design and implementation. For example, AHCW consults with the Elder's Circle before an Elder or Cultural Advisor is hired to ensure that reputable caretakers are hired.
- Strong support for the health of Aboriginal people who are homeless involves providing blended services: traditional, contemporary or a blend of both approaches for its constituents.
- The program has many partners, such as movers, furniture warehouse, Employment and Income Assistance, Winnipeg Regional Housing Authority, Manitoba Green Retrofit and others, who have been flexible in their policies to support this venture. Partnerships across many agencies are critical to the success of this community-based program.

Lu'Ma Native Housing Society, Vancouver B.C.

Background and Context

Lu'ma Native Housing Society (hereafter referred to as Lu'ma or the Society) provides clean, comfortable, culturally appropriate and affordable housing for persons of Aboriginal ancestry. It was established in 1980 to deliver housing units under the federal CMHC Urban Native Housing Program. Since its incorporation, Aboriginal culture has been a priority focus in the multitude of programs and services Lu'ma offers. Prior to 1987 it was known as the Vancouver Indian Centre Housing Society before formally adopting its current Coast Salish name – Lu'ma – which translated means “new beginnings.”

In 1993, CMHC stopped developing new housing units under the Urban Native Housing Program. Lu'ma's portfolio and operating agreements were devolved to BC Housing. In order to continue delivering housing units for the Aboriginal community, a new society was incorporated in 1997 known as “Lu'ma Native BCH Housing Society” which facilitated the delivery of housing projects under the Provincial Government programs known as Homes BC and Homeless At Risk Housing Programs offered by BC Housing. These housing programs were not Aboriginal specific; however, Lu'ma successfully negotiated to house only Aboriginal persons directly from its own wait list as opposed to BC Housing's wait list.

Lu'ma has continually adapted its services by using innovative ways in response to the housing needs of the community it serves. Over the course of its mission, Lu'ma has acquired significant physical resources, policies, standards of practice, human resources, and extensive experience with the Aboriginal community.

Notable projects include:

- Host agency for the Federal Homelessness Initiative
- Community Voice Mail
- Aboriginal Patient Lodge (awarded Best Practice in Affordable Housing in Canada by CMHC)
- Aboriginal Mother Centre Project
- Aboriginal Foster Parent Village (under construction)
- Homeless Youth-At-Risk Housing Project

Culturally Responsive Approaches to Aboriginal Homelessness

Lu'ma's grassroots and Aboriginal driven model has resulted in culturally responsive programming. It is evident that Lu'ma recognizes that as a community organization, there is an imperative to provide not just service through delivery, but value in granting a high degree of control and empowerment to the constituency that it serves.

Indigeneity is embedded into Lu'ma's governance structure which ensures that all service provision, including expansion, continues to focus on serving all Aboriginal persons inclusive of status and non-status First Nations, Métis, and Inuit. Lu'ma's staff encourages clients to preserve and practice their own Aboriginal customs and traditions. As well, the majority of its funding is intended for Aboriginal specific programming.

Wherever possible (subject to funding), explains Director Marcel Swain, the Society provides the necessary facility or programming to "strive to provide culturally relevant programs to the community that we serve." For example, culturally based programming is held throughout its various amenity rooms. Examples include hosting health & wellness programming, button blanket making, and in the past it has provided space for the Native Education Centre to provide jewelry making courses. Lu'ma also provides its facilities to outside agencies including diabetics workshops, the Native Education Centre, Psychology of Vision, Urban Heiltsuk Dance Group, Nisga'a Tribal Council and other cultural services such as education, traditional and healing ceremonies, to promote and provide cultural support.

The society's latest housing developments (and the upcoming Aboriginal Children's Village) were designed by Aboriginal architect Patrick Stewart and showcase indigenous west coast style using wood as a central feature. The Aboriginal Patient Lodge includes Aboriginal artwork in common areas, amenity room, and in the many housing units. Lu'ma's offices are an open design concept, allowing an abundance of natural light highlighting the wood and displayed artwork. The organization is well known in the community and has a great client to staff relationship.

Lu'ma also acts as host agency for the Aboriginal Homelessness Initiative, in this context, provides many services specifically to Vancouver's Aboriginal community. These services provide a culturally appropriate link to many supports and services that the society administers.

Examples of these include:

- Vancouver Native Health Society – Getting off the Street and on my Feet
- Circle of Eagles Lodge (Anderson Lodge) – Centre for Aboriginal Women
- Circle of Eagles Lodge Society (Bannock on the Run) – Elders Meals on Wheels
- Healing Our Spirit – Kitchen Project
- Helping Spirit Lodge Society – Second Stage Housing
- Vancouver Aboriginal Transformative Justice Services – Referral Services

Organizational Structure

Lu'ma Native Housing Society's members, Chief Executive Officer and elected volunteer Board of Directors are all of Aboriginal ancestry. The Society is also guided by the Aboriginal Homeless Steering Committee (AHSC), an inclusive group of organizations and Aboriginal community members from across Metro Vancouver who are appointed by the greater Aboriginal community to represent Aboriginal persons on homelessness issues. Through community consultation. The group identifies gaps in Aboriginal homelessness supports, funding criteria priorities and reviews proposal submissions. The AHSC serves as a community forum for ideas, input, comprehensive planning, organizing, research direction and partnering to mitigate poverty.

Benefits to the model employed at Lu'Ma include:

- **Aboriginal governance:** Lu'ma is an Aboriginal community organization run by Aboriginal persons. Just through its existence it is empowering and building capacity in at least a segment of Vancouver's Aboriginal population.
- **Long-term housing:** Lu'ma now manages a housing portfolio of over 300 units. Tenants that are placed in Lu'Ma's housing developments can live there as long as they show an ongoing financial need and are not over or under-housed. Tenants can transfer between units within Lu'Ma's housing portfolio. Lu'Ma also provides long term housing for tenants who qualify for medical reasons, seniors, families and students (all of Aboriginal ancestry).
- **Multiservice delivery:** The society provides central and suitable facilities where counselling information, guidance and referral services are provided and where meetings and educational and recreational activities will be held.
- **Cultural and spiritual activities:** Blessings, smudging and ceremonial activities are central to the cultural activities.
- **Aboriginal staff:** Lu'ma employs qualified Aboriginal staff members. By nature of their Aboriginal identity, they are more capable of relating to their constituents and therefore capable of meeting residents' new and arising cultural/spiritual interests.
- **Individual rights:** Lu'ma prides itself on accommodating families and individuals of low income, the aged and disabled in a non-judgmental and supportive manner.
- **Community involvement:** Residents are encouraged to access community resources and reconnect with family and community.

Limitations to the model include:

- **Funding needs:** Like most non-profit agencies, Lu'ma buffers its financial outlook by raising money through subscriptions, membership, donations and gifts. It is not a contracted facility funded by a specific organization. They are continuously searching for funding.

Links to the Community / Network / Outreach

There are many intangible benefits of fostering linkages to external Aboriginal (or otherwise) organizations that may also provide cultural elements and introduced practices to strengthen the overall positive impact on the client and community. Many of Lu'ma's residents are also affiliated with other Aboriginal and non-Aboriginal organizations therefore making inter-organizational communication necessary. Beyond this, Lu'ma's staff have found it to be essential to partner with community conscious groups, businesses, social service organizations and government to assist in addressing the diverse needs of the Aboriginal community. Much of their work involves working in concert with other agencies such as the Vancouver Aboriginal Child & Family Services, Ministry of Social Services, BC Women's Hospital, etc.

Lessons Learned

- Lu'ma has learned that challenges in funding criteria can sometimes be transformed into opportunities for innovation in programming and partnerships. Lu'Ma has partners with a wide range of community organizations, both Aboriginal and non-Aboriginal, public and private, local and international, to access the funding needed to support their vision.
- Repeated consultation with clients is the most direct way of addressing the cultural and social needs of the community that is served.

My Aunt's Place, YWCA Regina

Background and Context

My Aunt's Place (MAP) is an emergency shelter established in December of 2009 by the Regina YWCA for women and their children in need of temporary shelter while in the process of securing longer term accommodation. MAP deals specifically with women and mothers that are unable to obtain housing and do not have a safe, adequate residence for themselves or their children. Leading up to MAP's creation, Regina was experiencing an unprecedented level of demand for housing – to the point that the YWCA Regina's Kikinaw Women's residence and the Isabel Johnson Shelter were forced to turn away clients.

The YWCA Regina is committed to addressing the housing needs of women and children with the augmented approach to provide a service beyond temporary shelter on an emergency basis. MAP's solution employs the Housing First model. The Housing First model (as discussed earlier in this report) is premised on the assumption to address long term issues that contribute to homelessness, individuals need to have a safe and stable housing environment beyond the temporary housing that shelters and/or treatment centres typically provide. This model graduates the homeless individual directly into their own apartments (if available) while providing the supports to maintain the housing situation.

The three main reasons for MAP outreach client's homelessness:

- Disruption in domestic situation – roommates/partner left or they were asked to leave by parents/roommates/partner (35%)
- Moved to Regina and had no where to stay (25%)
- Evicted (20%)

With respect to the women that encountered a domestic situation or are newly arrived to Regina, it was a common that they never lived on their own or had pay for rent. The life skills and outreach services offered by MAP addresses these gaps; finding housing, signing rental agreements and the expectations of a tenant are introduced.

Clients are given designated jobs in the house and expected to contribute to the day-to-day maintenance of the site. The House Support Worker is responsible for meal planning and meal preparation and works together with clients to design meal plans. By participating, clients develop nutritious food planning skills. MAP staff also provide advocacy and extended support for the clients by way of reference letters to landlords and other community services.

My Aunt's Place strength-based approach responds to issues on an individual basis according to individual needs. MAP also provides support and information regarding the housing market and other referrals that a client may need. MAP works with each woman to address any issues that she identifies as barriers to permanent housing. Furthermore, MAP promotes overall independence and empowerment, in prescribed balance with assistance/guidance in accommodation searching, budgeting and other life skills as required. Although the clients stay is relatively short in duration, MAP aims to provide a support system in advance of the clients departure.

Culturally Responsive Approaches to Aboriginal Homelessness

With roughly 90% of My Aunt's Place clientele being Aboriginal, the programming and content of MAP is inherently represented as such. Members of the staff are Aboriginal, cross cultural training is provided through professional development and cultural activities such as smudging are customary. In explaining the course of its programming, Managing Director of Housing Louise Burns-Murray explains, "My Aunt's Place and its content continue to evolve as per the direction of our women".

As well, women and children at MAP have the opportunity to reconnect with their roots through the resident Elder. The Elder works with clients on a 'as need' basis and in tandem with the Outreach Worker. The Elder holds a regular sharing circle for the women and provides such things as smudging and availability to talk. This is an extended support system for clients who for the most part, have not had this cultural component in their lives since leaving the reserve, or perhaps ever. As an example, there was a death in the community and the clientele were profoundly emotionally impacted. Remedy was sought through the Elder who conducted a healing circle and a feast to honour the person's passing. Considering the high percentage of Aboriginal clients, access to an Elder is an essential component for MAP.

Organizational Structure

MAP's primary funding comes from the Saskatchewan Ministry of Social Services, Urban Aboriginal Strategy and the Homelessness Strategy. All staff positions maintained at MAP operates closely with each other sharing information and plans to ensure level delivery of services to clients. The basic tenets that the YWCA Regina brings to MAP's programs and services are to provide non-judgmental support for women to help them identify and address barriers in their lives.

The staffing roster at MAP includes a Program Manager, Housing Coordinator, Outreach Worker, House Support Worker, Front Line Support Workers, and Aboriginal Elder. As most of the individuals arriving at MAP are First Nations or Métis, the Elder provides support to the individuals as well as to MAP staff.

Currently, the client's route through MAP is:

- Arrival at MAP (may be referred by another agency or by self);
- Interview with MAP staff, usually a front line support worker, to complete intake documents;
- Client settled into MAP accommodations and informed of rules and requirements of staying at MAP (maximum length of stay, house rules and expectations, need to be actively looking for housing, etc.);
- Intake documents are completed including contact information, background and assessment re: housing/support needs. Front line support workers complete an initial housing plan and a goal-setting plan with the client. The goal-setting plan at this stage focuses on very short-term goals (less than 2 months);
- Upon completion of housing/goal-setting plan, a front line support worker begins intense work with client on a daily basis to find housing and provide supports needed. Supports may include contacting Social Services for required financial assistance (completing relevant forms / applications), or other service providers for assistance with required furniture/small items;

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- Elder services are also involved to provide additional support to MAP staff and clients. The Housing Coordinator provides support to the front line support worker and aids directly with hard-to-serve individuals;
 - Five days before the client departs MAP for housing, front line support workers discuss the needs of the individual client for outreach services and forwards the information to the Outreach Worker. The final decision on the need for Outreach Services is a joint decision with Outreach Worker, Housing Coordinator and Program Manager; then
 - If accepted into the Outreach program, an Outreach Worker works with the client for up to a year to identify short and long-term needs related to maintaining housing, including connecting client to community services.

The model employed at My Aunt's Place has several benefits, including:

- **Emergency Shelter Housing:** The availability and barriers to accessing emergency shelter for women in Regina are many. MAP's emergency shelter responds to the need of women, an often under-serviced sub-group of the homeless population.
- **Long-term Housing Readiness:** MAP is successful in priming clients with the skills they need find and maintain housing arrangements.
- **Cultural and spiritual activities:** Beginning with the Elder, several cultural components at MAP are available.
- **Aboriginal awareness training:** Cross-cultural training builds a good baseline of understanding for the staff and improves client relationship outcomes.

Limitations to the model include:

- **Work load for front line staff:** One of the issues that MAP staff have difficulty addressing is work overload. Having one person (the Housing Coordinator) working intensively with 10 to 15 individuals daily is a difficult.

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- **Physical Constraints:** Current rental market conditions indicate a shortage of rental accommodation and low vacancy rates in Regina. MAP can accommodate up to 25 people and still not meet the demand for emergency shelter provision.

Links to the Community / Network / Outreach

MAP deals specifically with women and mothers that are unable to obtain housing and do not have a safe, adequate residence for themselves or their children. As such, they work in concert with the rental/housing sector, medical and other social service providers. MAP works with landlords and community agencies to provide services.

Both the Housing Coordinator and the Outreach Worker have had MAP designated as a referral agent to various organizations such as Blue Mantle, Sleep Country, Food Bank and In Kind Centre which can provide clients with household necessities. Also, MAP arranges for individuals from external community programs to speak to the client in small group settings to introduce their respective programs and services. Information sessions bridge MAP clients with various community resources.

Lessons Learned

- In building a working climate that has an understanding of the clients backgrounds and needs, it is necessary to ensure that staff demonstrate a fine balance between discipline and expectations placed on the client. More specifically, directors at MAP feel it is appropriate to impress rules and boundaries, but at the same time not place unrealistic expectations on residents. As many of the women who come to My Aunt's Place are or have dealt with substance abuse issues in unstructured environments, overemphasis on rules may result in decreased success rates.
- Having a baseline understanding of the cultural background of clients is essential to the work done at My Aunt's Place. As well, learning the factors that contribute to clients' state for being homeless or at-risk is required. Oftentimes, the basic life skills such as accounting and the mechanics of acquiring rental accommodation are overlooked. My Aunt's Place helps address these most essential gaps.

6. Discussion

Three methods were used to collect data for this project: a review of literature, stakeholder/service provider interviews and case studies with service sites. We utilized data from each of these sources to develop an answer to the project's major organizing query:

Do culturally responsive programs make homeless-related services more accessible to Aboriginal peoples? And if so, how?

The review of literature failed to unearth much research on culturally responsive approaches to Aboriginal homelessness. The limited work that was done on increasing access to services for homeless indigenous persons (Memmot & Chambers 2009), pointed to the successful use of holistic approaches, partnerships between existing service providers and the need to develop more culturally-appropriate programs.

Previous studies suggest that Aboriginal peoples who are homeless are not accessing services at the same rates as their non-Aboriginal counterparts. Interview and case study participants in this project represented service organization programs that were busy, over-extended even. What makes these programs accessible?

A lot of what makes a program popular for Aboriginal clients is the same as what makes a program popular for any person experiencing or at risk of homelessness: location, hours of operation, quality and type of services available, good care from personable and qualified staff. What set participating organizations included in this research apart was the focus they placed on rebuilding trusting relationships and providing clients with opportunities to connect with their culture and Indigenous identity.

As discussed, interferences brought on by forced acculturation and assimilation have resulted in disparities that have placed Aboriginal peoples at greater risk of becoming homeless. The same forces have resulted in trauma, painful memories and cultural disconnection, all of which have fractured many people's ability to form trusting relationships with service providers.

Based on the results of case studies and interviews, culture does seem to play a critical role in making services more accessible to Aboriginal peoples. We have suggested, however, that culture's integration falls on a continuum from "culturally responsive" approaches to "cultural integrity" in service delivery. Each organization type can situate themselves on this continuum by critically assessing how their agency and services can integrate and/or embody Aboriginal and Indigenous culture.

Culturally responsive approaches are utilized effectively by mainstream or inclusive organizations that are not exclusively serving Aboriginal clients. The use of culturally responsive approaches positions such organizations in their most important role as allies with Aboriginal persons. Aboriginal-led organizations employing Aboriginal staff members are capable of sharing lived experience and understanding cultural nuances. Aboriginal-led organizations embody indigenous approaches to healing and recovery by being indigenous – as such, only they can achieve integrity in how Aboriginal and Indigenous culture is animated in service design and delivery.

That said, both non-Aboriginal and Aboriginal organizations can use culturally responsive approaches to establish the foundation of trust necessary in their supportive roles. Three of four of the Feeling Home case studies highlight programs that serve Aboriginal persons exclusively. But the fourth, YWCA's My Aunt's Place, was a mainstream organization that had gained the trust necessary to make their services accessible and meaningful for Aboriginal women, while still serving any eligible woman who walked in the door.

Applying culturally responsive approaches is not a cookie cutter solution that can be applied to all mainstream homeless-related service organizations. When thoughtfully developed and applied within communities, however, cultural responsiveness can work powerfully to make service more culturally meaningful and accessible for Aboriginal persons.

7. Conclusions and Recommendations

Recommendations and conclusions advanced in this section are drawn from the results of case studies and interviews across Western Canada. Though participants in this research were from varied backgrounds and provided different services, they all worked towards the same goal: to fight the persistent injustice and suffering of homelessness.

Conclusions and recommendations are organized to reflect three areas that are critical to the development and implementation of culturally responsive services for Aboriginal peoples that are homeless or at risk of homelessness: good research to inform good service provision, proven program and service delivery approaches as well as policy that is supportive of excellent service.

Further Research Directions

Two types of future research directions follow: firstly, areas in which new research is called for and secondly, considerations in how to conduct research about Aboriginal homelessness.

Emergent Research Areas

One issue many sites identified as a challenge, and which none thought was adequately researched or resourced, related to the deliberate inhalation of volatile solvents. The minimal cost, ready availability and mood altering affect of volatile solvents has seen their rise in popularity since the 1970s. These psychoactive substances have clear dangers, particularly relating to unpredictable mood change, acute intoxication, brain damage and other disabling effects. Though the media zeroed in on rampant solvent abuse in the early 1990s, with the release of a video of children in Davis Inlet huffing gasoline, some interview participants identified a lack of resources how to deal with people using solvents (CBC, 1993). Further research is needed to understand how widespread solvent use has become in Canadian communities, who is most at risk of using volatile solvents as mood alterers and what resources are most needed to help solvent abusers heal.

Considerations in Conducting Research about Aboriginal Homelessness

Participatory research approaches are strongly recommended for all research relating to culturally responsive approaches to Aboriginal homelessness. What became clear in conducting this project is the very significant impact of context in understanding what “culturally responsive” meant in each place. Consultation is the first priority in designing and implementing programs that have cultural integrity and are responsive to the needs of the local Aboriginal community. Participatory approaches are the only way to know you are serving the correct needs of a given population and asking the right questions.

There is also a call for the application of indigenous research methodologies that make a difference for the researched. Indigenous research centres and study programs within institutions are growing in number and strength. It is rare that a research report directly effects the lives of Aboriginal people who are homeless, however contributing to the formation of a project can have a fundamental shift in participant’s perceptions of themselves from those being studied to those with research skills and experiences worth sharing (SPARC BC, 2008a,b,c).

Case study design can provide powerful comparative information. In the context of this study, which focused on highlighting good practices across Western Canada, the unit of analysis was broad. Further studies could be undertaken that examine culturally responsive practices in particular services or models. For example, a study comparing Housing First models for Aboriginal peoples or a comparative analysis of culturally responsive shelters could yield results specific to the model or service type.

Program and Service Delivery Recommendations

Aboriginal-run service providers and their non-Aboriginal allies in the common fight against Aboriginal homelessness are characterized by strong leadership and governance, dedicated staff and close community partnerships, and self-reflection. The following sub-sections outline what strategies both Aboriginal and non-Aboriginal organizations can apply to advance these goals. Recommendations are made in the areas of governance and program design, human resources and assessment/evaluation. Recommendations are directed at both government officials and service organizations.

Governance and Program Design

- **Funding:** Service organizations serving Aboriginal persons who are homeless or at risk of homelessness are often haunted by the threat of funding cuts, spend a great deal of time looking for funding, and often lack the security of funding needed to set long term goals or core values. Where models are showing results, grant such organizations secure multi-year funding with straight forward renewal processes.
- **Strategic planning:** Once firm funding is in place, support the development of strategic plans that fit with tenets of the Aboriginal non-profit organization, or make strategic planning a requirement of multi-year core funding models.
- **Flexible design:** Program design cannot prescribe change at a given pace for people who are surviving day by day. Servicing people experiencing homelessness requires a longer continuum of care and flexibility to let people find their own way to heal.
- **Multiple-service delivery models:** People who may have experienced trauma, major life change, discrimination, addiction, disability and other challenges need multiple types of support. The most effective models identified in this report support people in many areas, ranging from life skills training to intensive case management.
- **Make culture visible:** Visible signs of cultural respect are an important part of making Aboriginal persons feel welcomed. Use Aboriginal names, recognize traditional territory in prominent places (signs, business cards, e-mail signatures, etc.)
- **Community-directed governance:** Consult with Aboriginal communities, Elders, leaders in decision making for program design and implementation. Make consultation a necessary component of all decision making. Set up an advisory board, review panels, committees or conversation circle to guide and align program design to priorities in the community and cultural ways of knowing.
- **Aligning philosophy of organization to traditional culture:** Support organizations that embed traditional culture in the organizational philosophy.

People in the Workplace (Human Resources)

- **Staff training:** Train front line workers to take a team based or “allied approach.” Does staff know what a client’s typical day is like? Training needs include detailed contextual information, cultural teachings and an explanation of on and off-reserve supports available for Aboriginal persons in the community. Utilize trainers and Elders from the community to extend the reach of people staff know and trust.
- **Elders and ceremony:** Embed the role of Elders and ceremony in the organizational structure. It is a common denominator in services that work and it is well received.
- **Organizational culture:** Make traditional culture a part of organizational culture. Bring cultural activities into the workplace for staff as well as for clients. The connection between physical, emotional, spiritual and cultural is key to understanding care.
- **Happy lobbies:** Successful models run out of sites with laughter and fun. Happy lobbies help reduce the institutionalized feeling of places and gets away from negative power dynamics sometimes felt in organizational settings. The emotional demands of work in this sector are huge. Sites consistently prioritized their staff as their strength. A good living wage and benefits are critical to keeping staff strong and supported.
- **Human resources support:** Staff and management in non-profits often must “put out fires” and resolve internal issues. Human resources support could help staff focus on helping clients. Given the small size of many service delivery agents, a shared human resources model could work (e.g. one HR staff for multiple service sites).

Evaluating Services and Assessing the Organization's Role in the Community

- **Review, assess and change:** For all homeless support agencies, there is a need to critically assess whether existing services are culturally responsive or have integrity. A review process is necessary to determine what (if any) changes should be made.
- **Culturally responsive evaluation:** Evaluation is now an essential component of most programming. The call for culturally responsive service provision must also be met with support from culturally responsive evaluation and results measurement tools. Traditional approaches to assessing the success of a program will not always accurately capture the way and degree to which culturally responsive services helped an Aboriginal person experiencing homelessness. Funding is often explicitly linked to measurements of success, thus it is critical to design culturally responsive evaluation approaches that are appropriate for assessing culturally responsive services.
- **Cross-pollination:** Partnership between Aboriginal and non-Aboriginal organizations can be fruitful for both parties to broaden access to funding and share existing resources and expertise. Intercultural dialogue “reveals the deep underlying differences between members of a community and aims to identify commonalities through which new understanding and relationships can be formed” (SPARC, 2008d). It is an essential part of being able to reflect on one's role in the community and develop culturally responsive approaches to service delivery.

Policy Matters in Working with Indigenous Communities

Policy makers need to directly involve Indigenous peoples in policy development. As summarized by one participant: “Any organization that has interest in working with Aboriginal peoples should use a participatory approach. This will ensure that things of concern to this population are incorporated.” Aboriginal peoples who are homeless or precariously housed and the people who serve them are those best equipped to review and guide policy on housing and homelessness.

Dependable funding was a challenge continuously raised throughout this project. Research has proven that long term approaches to resolving complex social issues are the most effective. Governments on many levels have taken on long-term plans to address homelessness (for example, the City of Edmonton's 10 year plan to end homelessness). Service providers, however, are still mostly caught up in short-term funding arrangements. The At Home / Chez Soi demonstration project is another example for developing longer-term projects. Public policy on homelessness should be predicated on the belief that long term strategies with clear goals, timelines and appropriate funding are essential to the solution to end homelessness.

The most important funding that participants identified was core funding to stabilize the strongest component of human service work. Regardless of whether homelessness is a continuous social problem, the community capacity developed by sustaining long-term, well-established organizations is tangible. The skills developed in qualified staff members will also be a community asset. Long-term funding for core services goes beyond supporting community services for a handful of years – it invests in community strength for the long term.

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9. Appendices

Appendix A: Stakeholder Interview Questions

Please tell me about yourself, your organization and your role in the organization.

Section A: Background Information

1. Please tell me about Aboriginal homelessness in your community.
2. How would you describe the types of services and/or supports for Aboriginal peoples that are homeless in your community?
3. Please tell me about the people who access the homelessness-related service(s).
 - a. Please tell me about those who do not use the service(s).

Section B: Culturally Responsive Approaches to Aboriginal Homelessness

4. What types of services and/or supports does your organization provide to Aboriginal peoples who are homeless or at risk of homelessness?
5. What prompted the organization to provide these types of support and/or services?
6. How long has your organization provided services/supports for Aboriginal peoples that are homeless?
7. To your knowledge, has the service and/or supports changed significantly over time? If so, how have they changed and why?
8. What do you think are the strengths of your services/supports and what challenges do they face?
9. How is your organization culturally responsive to Aboriginal people who are homeless or at-risk of being homeless?

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10. Do your services and/or supports include Aboriginal culture as one of the focuses of your service delivery? If so, how does your organization do this?
 11. Do you think similar services to yours would work in other communities with Aboriginal peoples that are homeless? Why or why not?
 12. Have you coordinated your services with other organizations in the community on issues around homelessness?
 - a. If yes, what kinds of coordination have occurred?
 - b. If no, what barriers to coordination exist?

Section C: Wrap-Up (ask if relevant and as appropriate)

13. As I mentioned earlier, this project involves case study of services showing good practices in culturally responsive service provision. Your services sound like an interesting example. Would you be willing to include your organization in a case study?

If yes,
 - a. Can you please provide me with any relevant reports, details, documents so I can learn more about your organization?
 - b. Is there anyone else I can interview from the organization?
14. Would you like to receive a copy of the report to comment on?
15. What additional information about Aboriginal homelessness would be helpful in assisting you to provide services/support?
16. Are there any other programs or people that you recommend we contact?

Appendix B: Case Study Questions

Why did Aboriginal culture become a priority focus of your program? In including Aboriginal culture in your service delivery, were you guided by any specific mandate (e.g., mandate of organization or funders)?

How long has Aboriginal culture been a priority in the design and delivery of your program?

In what ways has your focus on Aboriginal culture made your program more accessible and appropriate for Aboriginal people?

What other aspects of your program make it welcoming to people of Aboriginal ancestry (e.g., nice physical environment, client to staff relationship, positive reputation of the organization)?

Do you work with other organizations and groups to make your services inclusive of Aboriginal culture? If so, whom do you work with and how do you work with them?

What are the top 3 factors of success that contribute to your program being inclusive of Aboriginal culture?

What suggestions would you extend to other organizations that are seeking to work with Aboriginal people who are homeless or at risk of experiencing homelessness?

Is there anything else that you would like to share with us that you have not already shared?

Do you have any program/service literature that you would be willing to share that we can use in the development of the case studies?

ABORIGINAL PEOPLES ARE OVER-REPRESENTED IN HOMELESS COUNTS ACROSS WESTERN CANADA BUT UNDER-REPRESENTED AMONG THOSE ACCESSING SHELTER SUPPORTS. THERE IS A GROWING CALL TO DESIGN AND DELIVER HOMELESS SUPPORT SERVICES THAT ARE ACCESSIBLE AND CULTURALLY RESPONSIVE TO ABORIGINAL PERSONS

DRAWING FINDINGS FROM 22 INTERVIEWS AND 4 CASE STUDIES SPANNING WESTERN CANADA, THIS REPORT HIGHLIGHTS EFFECTIVE CULTURALLY RESPONSIVE APPROACHES TO SUPPORTING ABORIGINAL PEOPLES WHO ARE HOMELESS OR AT RISK OF BECOMING SO.

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