PLAN TO END ABORIGINAL HOMELESSNESS IN CALGARY

November 2012

ABORIGINAL STANDING COMMITTEE on housing and homelessness

Front Cover

“Long Distance Healing”

My mother is a traditional medicine woman healer. Her traditional name is woman who stands strong. As far back as I can remember she has always been involved in the healing and doctoring of many people. This one time not so long ago I could hear her on the phone giving guidance and prayer. She is a person with an endless supply of faith and always seems to find a way of sharing her prayer. This painting was inspired by one’s faith and the healing powers beyond boundaries, beyond time and space.

Original Acrylic on Canvas 48” x 24”

Copyright © 2005 Dale Auger, PhD.

Dale Auger (1958 – 2008) Dale Auger, PhD., was a Sakaw Cree from the Bigstone Cree Nation in northern Alberta. He was a highly talented visual artist whose vividly coloured and highly provocative paintings have captured the attention and imagination of many audiences across Canada and throughout the world. The subject of Auger’s paintings has varied over the years; where he once sought to portray Native history. He captured the deeper, more spiritual levels of Native life, particularly the intricate links between Native spirituality and the natural laws of the land.

Dale’s first book, Mwakwa – Talks to the Loon: A Cree Story for Children, illustrated and written in English and Cree by Dale, was published by Heritage House Publishing in 2006.

Dale studied education at the University of Calgary, he graduated with a doctoral degree in 2000.

ABORIGINAL STANDING COMMITTEE on housing and homelessness

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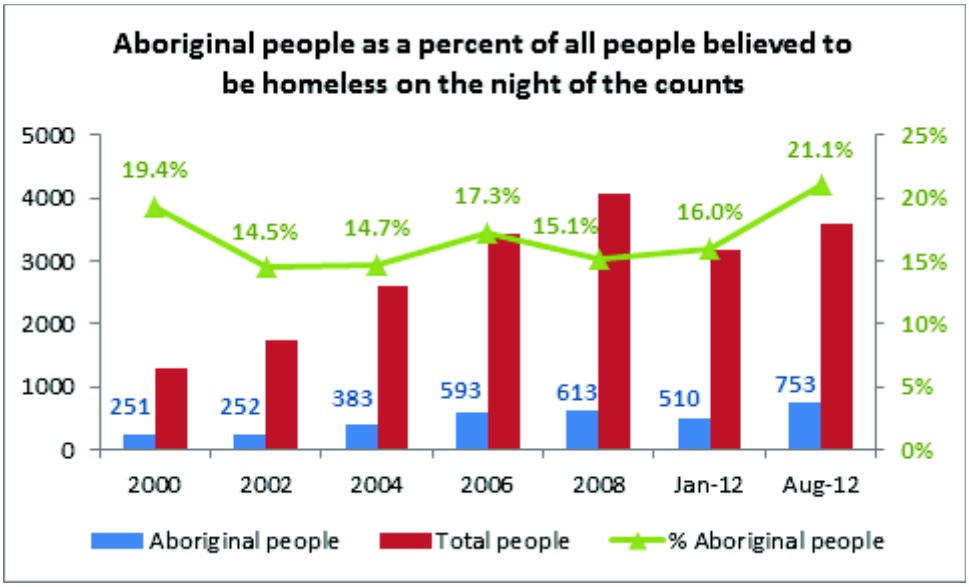
Executive Summary

Aboriginal people are over-represented amongst Calgary's homeless. While great strides have been made to reduce overall homelessness in Calgary, according to Calgary's homeless counts, the numbers of Aboriginal people on our streets and in our emergency shelters has not decreased and may in fact be growing.

Aboriginal homelessness is not the same as homelessness for non-Aboriginal people. Structural determinants associated with colonialism such as the Indian Act, treaty making, residential schools, and the 'Sixties Scoop' have resulted in systemic discrimination and generations of trauma for many Aboriginal people.

There are many healthy and vibrant Aboriginal communities and many Aboriginal people whose experiences growing up have led to healthy, productive relationships and families. The purpose of this Plan however is to examine and discuss the complexity of issues that have led to the unique nature and experience of homelessness for many Aboriginal people we see today, and to articulate creative strategies and solutions to address these experiences.

Focusing on the individual pathways of homelessness alone (addictions, mental and physical health, family violence, etc.) is not adequate if we wish to truly improve the situation for Aboriginal people in Calgary. If it was, the efforts that already exist due to Calgary's 10-Year Plan to End Homelessness would have created a measurable decrease in Aboriginal homelessness as they have for the general homeless population.



The City of Calgary reported that in 2008 15.1% of people enumerated by facilities and service agencies were Aboriginal. This result was extrapolated on the total number of homeless persons enumerated on the night of the count and the total number of Aboriginal people was calculated[i].

Efforts must be made to break historical cycles of trauma within a framework of cultural traditions and practices. Efforts must be made to collaborate with rural community and political leaders to support people as they migrate to Calgary but also to prevent homelessness in the first place.

Sustainable solutions to end homelessness for Aboriginal people must also include targeted and strategic policy and systems change.

This plan is rooted in three primary beliefs: that we can build a continuum of supports across and between our communities that will reduce the numbers of Aboriginal people who are homeless; that we can prevent homelessness before it happens for Aboriginal people and families; and that this must be done within a culturally safe and appropriate framework and with ongoing collaboration, engagement and consultation.

The Aboriginal Standing Committee on Housing and Homelessness' (ASCHH) Plan to End Aboriginal Homelessness in Calgary (the Plan or the Aboriginal Plan) highlights the reasons for the overrepresentation of Aboriginal people in the homeless population in our city and provides a comprehensive plan to eliminate this issue with a focus that considers the unique characteristics and challenges of the Aboriginal population.

The Plan is the result of an active working relationship with many community partners and a series of consultations with a wide range of Aboriginal community members, stakeholders and service providers. The core stakeholders in this process are the Aboriginal people experiencing homelessness, those at-risk of homelessness and Aboriginal people with a history of homelessness. In order to ensure that we 'get it right,' the voice of this core population was heard and is applied to all facets of the Aboriginal Plan. At times, this feedback may conflict with the voice of policy makers, service providers and the wider community but history tells us that this voice –the voice of Aboriginal people who have experienced homelessness or those who are at-risk of homelessness–is *the* voice to be listened to.

The intent is to integrate the Aboriginal Plan into Calgary's larger 10 Year Plan to End Homelessness implementation strategies.

Wider community stakeholders in the Aboriginal Plan include, but are not limited to:

Aboriginal Standing Committee on Housing and Homelessness members
Alberta Human Services
Assembly of First Nations, Alberta
Calgary Action Committee on Housing and Homelessness
Calgary Urban Aboriginal Initiative (CUAI)
City of Calgary, Community Neighborhood Services
City of Calgary, Family and Community Support Services
Métis Nation of Alberta
Treaty 7 Management Corporation

Several months of research was done to support the development of this Plan[ii]. The research included a literature review, a survey and qualitative interviews and focus groups with local service providers and people with lived experience in Calgary.

In all, 22 service providers and 88 people with lived experience provided their input.

The research was done for several reasons:

- ensure the experiences of people who deal with homelessness on a daily basis were foundational to the development of this Plan;
- contextualize the history of Aboriginal people in Canada and the relationship between colonization and homelessness;
- articulate the unique pathways into homelessness experienced by Aboriginal people locally;
- articulate the impact of structural determinants of local Aboriginal peoples homelessness; and
- identify solutions and to articulate them as the goals and strategies found within this Plan.

The most frequently cited pathway into homelessness for all people in Canada is a lack of affordable housing. Some argue that personal factors such as FASD, addictions, poverty, poor health, and/or dysfunctional family relations are the cause of Aboriginal people's homelessness. Other literature states that socio-economic status and the lack of resources on-reserves are also causes. United Native Nations Society (2001) argues that Aboriginal homelessness is rooted in structural factors such as unemployment, low wages or lack of income, loss of housing, colonization, racism, discrimination (systemic or otherwise), patriarchy, cultural and geographic displacement, and the reserve system. The historical introduction of foreign systems such as education, justice, health and child protection have left Aboriginal peoples in a cycle of economic dependency, including high rates of poverty and unemployment.

Predominant to each of these factors in Aboriginal homelessness is the concept of colonization. A strength-based framework that addresses the negative impacts of colonization on Aboriginal peoples is recommended and is foundational to the goals and strategies in this Plan.

Towards implementation of this Plan, there will be broad consultation with strategic policy and planning public sector bodies, including: intergovernmental, International & Aboriginal Relations Alberta, Office of the Federal Interlocutor – Aboriginal Affairs and Northern Development Canada, Alberta Children and Youth Services, Alberta Employment and Immigration, Alberta Justice, Alberta Health and Wellness, Alberta Education, The Government of Canada, local First Nations and other Aboriginal organizations.

The purpose will be to engage key stakeholders in solutions to complex jurisdictional and historical issues, to build relationships with rural community leaders and urban service providers, and to develop collaborative research and policy agendas to identify and find sustainable solutions to root causes.

First Nations Principles of Ownership, Control, Access and Possession (OCAP)[iii]

The research and consultation process undertaken by the ASCHH is aligned with the principles and articles of Ownership, Control, Access and Possession: First Nations Inherent Right to Govern First Nations Data (OCAP) (refer to Appendix E for further details). Developed and disseminated by the First Nations Information Governance Committee (FNIGC), the OCAP provides a framework for research initiatives conducted with Aboriginal people and is related to data ownership, self-governance, collection, analysis and dissemination of information. In 2011, the ASCHH received information from the Alberta First Nations Information Governance Centre (AFNIGC) on the First Nations Principles of OCAP.

The First Nations Principles of OCAP are:

- Ownership – First Nations right to managing community information
- Control – responsibilities of First Nations to the information they manage
- Access – collective access to data
- Possession – capacity to manage own information

A Living Plan

From an Aboriginal worldview, homelessness is not only an issue of housing but the combination of inter-related issues including history, present day systemic and societal perspectives about Aboriginal people, as well as the cultural losses of Aboriginal people in the areas of physical, emotional, mental, and spiritual balance. It is suggested that many of the existing theories related to the cause of homelessness are only beginning to recognize broader systemic factors such as poverty and lack of housing stock on reserves with little consideration given to the cumulative impact government policies have had specifically on Aboriginal peoples.

"There is increasing evidence that more than 140 years of social strategies aimed at the assimilation, segregation, and integration of generations of Aboriginal children into mainstream Eurocentric culture have resulted in personal, familial, community, and national trauma."[iv]

Research consistently points to specific risk factors that are present in both at-risk and homeless populations. These factors include individual and structural factors that can be broadly summarized as:[v]

- an imbalance in the income and housing costs;
- chronic health issues, particularly mental health, disabilities and physical health;
- addictions;
- experiences of abuse and trauma; and
- interaction with public systems, particularly correctional and child intervention services.

At the outset, it must be acknowledged that there are many blind spots in current research about the homelessness experience for Aboriginal people in Calgary and Alberta, including:

- examination of issues specific to vulnerable sub-groups[vi];
- the impact of jurisdictional funding and support issues on homelessness;
- strategies to improve collaboration between rural communities and urban centers where Aboriginal people live;
- strategies to strengthen services for Aboriginal people; and
- identification of government policy priorities that can reduce homelessness for Aboriginal people.

As further research is carried out, these new teachings need to be applied to ongoing implementation developments. For this reason, and to adapt to contextual changes, the Plan to End Aboriginal Homelessness in Calgary is a *living plan.* It recognizes current successful strategies while identifying challenges and milestones. It is also designed to respond to the changing needs of Aboriginal people and service providers in Calgary.

Guiding Principles

The Plan to End Aboriginal Homelessness in Calgary is a purpose built plan; it is an acknowledgement of the past and a pathway for moving forward. The Aboriginal homeless population, when asked what they felt should be guiding principles for the process of ending Aboriginal homelessness, identified the following:[vii]

- Aboriginal people need homes not just housing
- Aboriginal people need to believe they matter and are included
- Aboriginal people are not a homogeneous group
- Aboriginal people are not just a subset of the larger population
- The whole self needs to be addressed when working with Aboriginal people: the physical, emotional, intellectual and the spiritual

The Definition of Aboriginal Homelessness

Self-identifying Aboriginal persons (including First Nations, Métis and Inuit) of any age, situated as a single person or within a family who is lacking a permanent night time residence with appropriate cultural reconnection supports. This includes individuals 'precariously housed' within institutional settings such as jails and prisons, and unstable, unsafe and/or inappropriate child intervention settings.

Further definitions for terminology used in this document are available on page 63.

ABORIGINAL STANDING COMMITTEE on housing and homelessness

The Aboriginal Standing Committee on Housing and Homelessness (ASCHH)

ASCHH GUIDING PRINCIPLES

Vision Statement
Our people enjoy life in our homes

Mission Statement
Creating solutions to Aboriginal homelessness

Operational Mission Statement
To empower urban Aboriginal peoples in Calgary through engagement, leadership and sharing by creating housing and homelessness solutions

Values
Patience, kindness, respect, action, cultural practice, integrity, leadership, compassion, openness, harmony, honesty, sharing, honour, consensus, understanding, commitment, awareness, gentleness, hope, trust, humour, spirituality, community support, inclusiveness, balance

ASCHH Brief History

In January 1996, a forum on homelessness in Calgary was held to discuss the realities and impacts of this social issue. From this, an ad hoc Steering Committee on Homelessness emerged along with an Aboriginal subcommittee to develop an action plan. This Aboriginal subcommittee evolved to become “Opening Doors for Aboriginal People” and was responsible for investigating and evaluating the experiences of the Aboriginal homeless population. In November 1999, interested Aboriginal community members and service providers came together under the auspices of the Calgary Homeless Foundation to form a community-based response to Aboriginal homelessness. The “Opening Doors for Aboriginal People” committee evolved to become the Aboriginal Standing Committee on Housing and Homelessness (ASCHH) and is formally recognized by the Calgary Homeless Foundation and Human Resources Development of Canada as the community entity that is best positioned to address issues of Aboriginal homelessness in Calgary.

The ASCHH was formed to bring a voice to urban Aboriginal peoples who are experiencing, or who are at-risk, of homelessness, and is dedicated to solutions around Aboriginal homelessness.

ASCHH Committee Members have recommended the following components as part of the Plan to End Aboriginal Homelessness:

- Prevention
- Culturally sensitive programs and support
- Cultural training and awareness in the following areas:
  - All levels of government
  - Educational institutions

  - Penal system
  - Agencies who work with Aboriginal people
  - Society-at-large
- Adaption of the Housing First model to better reflect the realities of the Aboriginal family-unit – "community/family living environment"
- Development of relevant and effective Aboriginal-specific models that assist agencies who provide services to Aboriginal peoples
- Increase in Aboriginal peoples working in agencies who provide services to the Aboriginal community

ASCHH Committee Members

Membership on the ASCHH is open to all Aboriginal community members and organizations, as well as non-Aboriginal entities, who are committed to enhancing, improving and supporting the health, wellness and rights of Aboriginal people. Refer to Acknowledgements on page 66 for a list of ASCHH Committee Members.

ASCHH Strategic Plan

In February 2011, the ASCHH Committee officially adopted a three-year Strategic Plan with four primary goals to guide activities until 2014, one of which is to create and oversee the development of the Plan to End Aboriginal Homelessness in Calgary. The ASCHH Strategic Plan is found on the ASCHH website (www.aschh.ca).

ASCHH Recommendations about Aboriginal Homelessness

The ASCHH recommends integrating the following components into any homeless plan involving Aboriginal peoples:

1. To end Aboriginal homelessness and address other housing issues, while understanding cultural competencies and ensuring cultural sensitivities through collaborative community efforts and awareness of cultural identity.
2. Provide subsidies and support services that allow Aboriginal people to obtain, retain and maintain safe and culturally appropriate housing (this allows for not just purchasing but renting and maintenance of housing).
3. Expand and support existing organizations and agencies that provide housing to homeless Aboriginal youth and children.
4. Centralize the intake system to ensure Aboriginal identification is captured and utilized.
5. Establish Aboriginal transition/halfway houses/group homes for Aboriginal youth leaving institutions, like Independent Living Skills homes, or Wellington House, when leaving foster care, Calgary Young Offender Center hospitals, etc.
6. Establish safe, culturally relevant and sensitive discharge plans so no Aboriginal person is discharged into homelessness or unsafe housing.
7. Do not discharge anyone into an unsafe (physically or otherwise) situation.

8. Initiate greater consultation with Aboriginal organizations and agencies in the creation of HMIS (and incorporation of culturally sensitive questions at intake).
9. Talk to, and learn from, the Aboriginal people who have been previously or are currently homeless or have faced housing issues.
10. It is far too subjective to measure success, instead Aboriginal people should have the opportunity to share what they feel is and is not working, best practices and where improvements can be made.
11. Increase competent Aboriginal workforce and treatment facilities with cultural, spiritual and emotional perspectives (harm reduction).
12. Ensure all four levels of government are involved in ensuring Aboriginal inclusion.
13. Create an urban Aboriginal cultural support system/centre with culturally specific wrap-around programs.
14. Aboriginal homelessness cannot just be managed on a case-by-case situation. Prevention should also be a priority (a proactive rather than reactive approach).
15. Provide more opportunities for urban Aboriginal people to earn income and receive education.
16. Allow for more engagement and involvement with stakeholders, leaders, committee members and First Nations communities. This includes discussions around off-reserve funding availability.
17. Educate the community about poverty, homelessness and Aboriginal issues through Alberta-specific workers at community resource centers.
18. Hire more Aboriginal people to work with existing centers.
19. Build a physical “epi-centre”— similar to Thunderbird in Winnipeg or the Anishnabe Health and Wellness Centre in Toronto.
20. Ensure The Calgary Homeless Foundation includes two Aboriginal positions on its Board: one on-reserve member and one off-reserve to ensure a voice.

The Calgary Homeless Foundation (CHF)

Since 1998, the Calgary Homeless Foundation (CHF) has worked to reduce homelessness in Calgary. From 1992 to 2008, Calgary had Canada’s fastest growing homeless population, growing from 447 in 1992 to approximately 3,600 people in 2008[viii]. In 2007, the Calgary Committee to End Homelessness was formed, a community-based, multi-stakeholder, leadership group who issued and selected the CHF to implement Calgary’s 10 Year Plan to End Homelessness. The Plan was based on a 10-year plan model first introduced by the National Alliance to End Homelessness in the U.S. that was successful in reducing homelessness nationwide.

As of 2008, the CHF received a new mandate to work in partnership with the many homeless-serving agencies, private sector, government partners, faith community, other foundations and all Calgarians to end homelessness. The goal of the 10 Year Plan is that by January 29, 2018, an individual or family in January 2018 will not stay in an emergency shelter or sleep outside for no longer than one week before moving into a safe, decent, affordable home with the support needed to sustain it.

CHF Fundamentals

1. Housing First

Traditionally, people experiencing homelessness were expected to address the issues that led to their homelessness, such as mental illness or addictions, before they were housed. With Housing First, the priority is to quickly move people experiencing homelessness into appropriate housing first, and then begin to work on the issues that contributed to their homelessness from the stability and safety of a home. Housing First programs respect client choice, follow a harm reduction approach and see permanent housing as a basic human right.

2. Business Case

Research demonstrates that it costs less to provide appropriate housing and support to a person at-risk of or experiencing homelessness compared with providing that same person with short-term and ongoing emergency institutional responses. Most studies indicate those people with the highest needs incur system costs of $100,000 or more per year. This is two to three times higher than the cost of providing housing and support.

Updated 10 Year Plan to End Homelessness

In 2011, the milestones of Calgary's 10 Year Plan were updated to reflect what has been learned about homelessness in Calgary and to ensure the milestones are measureable.

- By 2014, 1,800 people who are chronically and episodically homeless will obtain and maintain housing
- By 2014, no more than 10% of those served by Housing First programs will return to homelessness
- By December 2014, all individuals who engage in rough sleeping will have access to housing and support options appropriate to their needs
- By 2018, 85% of 2010 emergency shelter beds will be eliminated. At minimum, a 600-bed reduction should be achieved by 2014
- By December 2014, the average length of stay in family emergency shelters will be reduced to 14 days and to seven days by January 29, 2018
- By January 29, 2018, the maximum average stay in an emergency shelter will be reduced to less than seven days. By that point, anyone in an emergency shelter will be rapidly moved into permanent housing

Calgary Homeless Foundation

CHF has identified chronic and episodically homeless, Aboriginal people, youth (up to age 24), families and women as the most vulnerable groups who require tailored interventions[ix].

10 Year Plan public consultation regarding Aboriginal people and homelessness received a number of recommendations, listed below.

- Provide subsidies that permit Aboriginal peoples greater access to housing and childcare.
- Focus on youth and children's services, especially access to education and housing.
- Provide a centralized intake system.
- Establish proper discharge plans for children coming out of foster care.
- Establish proper discharge plans for those coming out of hospital and corrections.

- Seek greater collaboration between service agencies and programs.
- Talk to and learn from people who were homeless and now are successful.
- Address societal causes such as addictions, substance abuse and diabetes that significantly threaten the Aboriginal population.
- Have all three levels of government involved.
- Teach people how to become self-sufficient and help themselves.
- Provide more opportunities for people to earn income and receive education.
- Educate the community about poverty, homelessness and Aboriginal issues.
- Remember that people are more important than programs.

In a Rehousing, Triage and Assessment Survey conducted in 2009 by the Calgary Homeless Foundation[x], 30% of 315 interviewees were Aboriginal. Results showed that in many instances, Aboriginal peoples faced increased and unique barriers to overcoming homelessness, including stereotyping and differing cultural needs. Recognizing this, the CHF will continue to work with ASCHH towards strategic solutions.

Background to Aboriginal Homelessness

Calgary is the epi-centre of homelessness in Alberta, driven by migration, and the labour and rental market.[xi]

- A 2011 study shows that 63% of all shelters used are in Calgary compared with 28% in Edmonton
- Since 1999, Calgary's multi-unit rental stock has shrunk by a third. 29% of rental units have been lost due to demolitions and condominium conversions.[xii]
- Calgary shelter use is highly sensitive to fluctuations in the labour market and migration
- Calgary is seeing a high number of Aboriginal and immigrant families in shelters

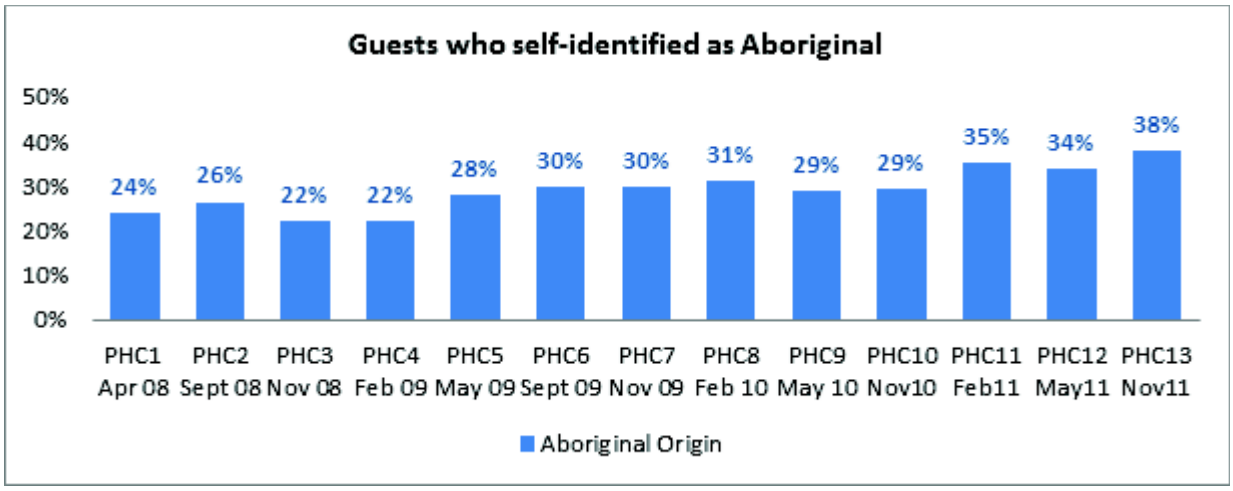
Who are "Aboriginal" People?

"Aboriginal" is a formal term entrenched within the 1982 Canadian Constitution and generally refers to the Indigenous first peoples of the Americas; formally identified in the Constitution as one of the founding nations of Canada although they were largely excluded in its development.[xiii] Collectively "Aboriginal" is the First Nations, Métis, and Inuit populations of Canada although many refer to themselves by their distinct nation (e.g. Blackfoot, Cree, Dene, etc.).

There are currently over 635 recognized First Nations government/bands throughout Canada, a large portion of which can be found in the provinces of British Columbia and Ontario, speaking over thirty languages.[xiv]

Alarming Statistics

Aboriginal homelessness across Canada is disproportionately high compared to mainstream populations. Calgary is no different. In 2006, approximately 3% of all Calgarians were reported as having an Aboriginal identity with a steadily increasing population. At Calgary Project Homeless Connect events the following data was collected: in April 2008 just under 25% self-identified as Aboriginal and by November 2011, this figure jumped to 38%. In August 2012, 21% of all homeless people enumerated on the night of Calgary's Homeless Count were observed to be Aboriginal and 38% of those found sleeping rough were Aboriginal.[xv]



Alarming statistics beg the question "Of all the homeless people, why are so many Aboriginal?"

A growing number of homeless-serving agencies are recognizing that a mainstream approach to providing service is not necessarily effective in working with Aboriginal populations[xvi]. This realization reflects the unique needs, challenges and history experienced by Aboriginal people.

Interviews with Aboriginal homeless, near homeless and recently housed individuals provide valuable insights into worldviews, pathways into and out of homelessness, and structural determinants of homelessness. They also provide valuable information into the issues and unique needs of such Aboriginal sub-populations as: seniors, youth, Métis and the "gay – lesbian - bisexual - transgendered - two-spirited" (GLBTT).[xvii]

Culmination of Individual "Ruptures"[xviii]

"There is a vulnerable Aboriginal population, those with frequent emergency room visits, varied addictions and a heightened exposure to violence, the chronic and frequently homeless Aboriginal peoples all too often written off as and/or relegated to fulfillment of the stereotype of the 'drunken Indian'. But they weren't always like that. They once had a different story and a different potential."[xix]

Social determinants of health are the economic and social conditions in which people live, ultimately shaping the health of individuals, communities and jurisdictions. These determinants directly influence whether individuals stay healthy or become ill, and to an extent, whether a person possesses the physical, social and personal resources to identify and achieve personal aspirations, satisfy needs and cope with their environment.

Homeless Aboriginal populations differ from the homeless non-Aboriginal population in that the "symptoms" or presenting concerns seem to have a greater connection to the intertwining nature of negative social determinants of health.

Social risks or individual "ruptures" including emotional or trauma-based experiences, economic or employment/income loss, and cultural disconnection or loss of meaning should all be considered as presenting factors in Aboriginal homelessness.[xx]

As Turner states:[xxi]

> Historical social policies have affected multiple generations of Aboriginal peoples. The severing of family and community ties – that is, creation of a homeless state – has left a legacy of traumatized individuals who may be unable to function in mainstream society. Left dependent on social institutions, many Aboriginal peoples are unable to address their individual needs. The trauma of separation from family and community – the Aboriginal home – has affected the ability of individuals to achieve balance in their physical, mental, emotional and spiritual wellbeing. When experienced by more than one generation, personal trauma becomes institutionalized within a family. Where multiple families within a community experience similar life events, the community is left without the resources required to effectively address the resultant social consequences.

Many Aboriginal people seem to find themselves in a vicious cycle of: chronic lower education and income levels, higher incidents of poverty and chronic unemployment, a larger population of single parent families, domestic violence, health issues, mental illness, infectious disease, anxiety, depression, substance abuse, high dropout rates, low or no incomes, diabetes, HIV/AIDS, Hepatitis C, tuberculosis and many more compounding conditions.[xxii]

Overall, poverty is mentioned most often in the literature as the biggest precursor to Aboriginal homelessness, with many people chronically "living at the fringes," compounded by drug and alcohol abuse, domestic violence, being a single parent, having children at a young age and living in poor and crowded housing conditions.

The distinct nature of Aboriginal child and family poverty in Canada is rooted in cultural fragmentation, multi-generational effects of residential schools, wardship through the child welfare system and socio-economic marginalization. For reasons none other than 'being Aboriginal', Aboriginal people have, for generations, grown up poor.

Social Exclusion

Poverty and unemployment rates are the highest among Aboriginal people with roots in multi-generational experiences of racism, residential schools, wardship in the child welfare system, and economic and social marginalization from the larger society.[xxiii]

There appears to be a growing relationship between poverty and social exclusion. Social exclusion affects not only Aboriginal people but whole communities, leading to poor health outcomes. Social exclusion is exclusion from:

- civil society due to systemic discrimination;
- social goods such as adequate housing;
- social production including opportunities to participate and contribute fully in society; and
- equal access to adequate and appropriate work and employment.

These four aspects are considered to be social determinants of health. Aboriginal peoples face multiple risks to their wellbeing due to income gaps, two to three times higher unemployment rates combined with discriminatory practices in the workplace, deepening levels and spatial concentration of poverty, increased residential segregation, disproportionate contact with the criminal justice system, and poorer access to health care and bias-free health care practices.[xxiv]

Participants in our focus groups expressed the damage that has been done to Aboriginal peoples as a result of the welfare system and the learned dependency that has resulted. One participant said, “Native men are bred for war, it is in their blood to fight…welfare took that fight away from them.” There was also a sense that the welfare system sustained their poverty as attaining a higher income was actually to your detriment because losing your status as low income means losing your subsidized housing and daycare. An additional barrier to maintaining housing and successfully transitioning out of homelessness was paying past bills and fines acquired and a sense of feeling “stuck” and “unable to [financially] get ahead” in order to build a personal safety net.

In a report evaluating services for homeless Aboriginal people in Ottawa, agencies indicated that Aboriginal clients differed from other clients in a number of ways.[xxv]

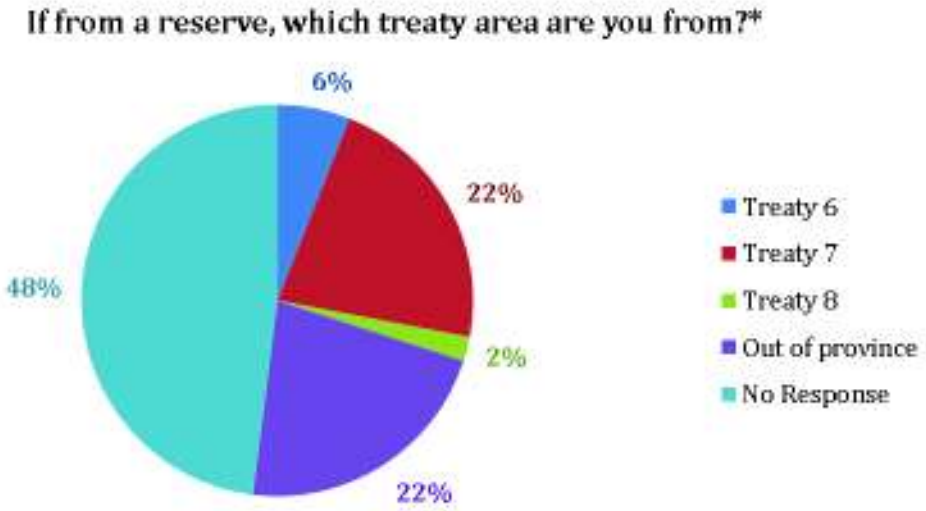
- They tended to be more socially isolated, often preferring to sleep outdoors rather than in an emergency shelter.
- Many have lost their community connections and language identity.
- After incarceration, many have a harder time transitioning to mainstream society.
- Most prefer to congregate together.
- Many often have severe addiction issues and concurrent disorders.
- Many are often in very poor physical health (e.g. HIV/AIDS, liver damage, asthma, degenerative back problems).
- 65-90% reported mental health issues such as schizophrenia, anxiety and depression Special emphasis is needed on gaps in services related to the needs of gay, lesbian, bisexual and transgendered populations.
- Many have experienced multi-generational abuse and/or sexual abuse.
- Many have experienced residential school-related trauma.

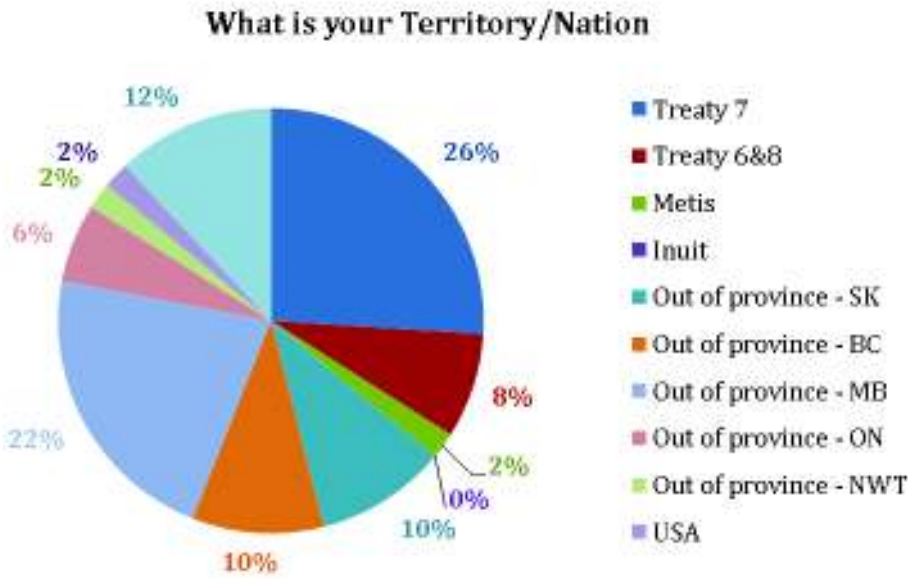
More relevant answers may be found in asking “Why are so many of the Aboriginal population homeless?”

Who are the Aboriginal Homeless?

"If it seems ironic to be homeless in a province rich with natural resources, it must be sardonic to be homeless in a land your ancestors occupied for millennia. To adequately respond to the issue of Aboriginal homelessness, we must first look at where Aboriginal people come from and what their unique histories are".[xxvi]

Homeless Aboriginal people in Calgary come from all over the country. However, the five First Nations reserves that are located within an hour's drive of Calgary, and three within a two hour drive, contribute to the high homeless Aboriginal population.[xxvii] [xxviii] There are Metis people who are homeless in Calgary too. Although there may be a small number of homeless Inuit people in Calgary, the researchers did not meet any during the course of developing this Plan.





Pathways: Elevated and Associated Factors

Aboriginal people are affected by the same general individual risk factors that affect other groups such as:

- poverty and low income;
- mental health issues;
- addictions and substance abuse;
- domestic violence
- incarceration and releases from jail;
- backgrounds of violence and abuse, including childhood sexual abuse; and
- welfare dependency.

These risk factors are compounded by the fact that Aboriginal people experience the above at higher rates than non-Aboriginal people and experience additional unique structural determinants related to colonization. These structural determinants are argued to be related to the:

- Indian Act and Treaty 7;
- Indian Residential schools;
- The Child Welfare System and the “Sixties Scoop.”

Structural Determinants

A historical perspective and understanding about the root causes of Aboriginal homelessness is critical to properly and correctly contextualize contemporary issues.

What is "Colonialism"?

A world of imposed colonialism: the act of altering the natural order and process of Indigenous cultures and people – also referred to as "the white man's burden" is represented thusly as the collective behavior of Europeans towards the 'cultural other.'[xxix] In Canada, the 'cultural other' are people of Aboriginal origin: Inuit, Métis and First Nations. Systems and standards that judged Aboriginal people as "heathen, immoral, backward, primitive objects, incapable, incompetent, lazy and drunk" are still subtly and existentially articulated within the contemporary mainstream.[xxx xxxi] In essence, 'colonialism' refers to the imposition of monarchy and a system of rule that sees the absolute power of one individual over each colony or settlement of that empire. Colonialism was inherently foreign to Aboriginal peoples as each community was sovereign and distinct in itself.

Indian Act and Treaty 7 Territory

The Indian Act has played a central role in creating institutions to shape Aboriginal lives in Canada. It is a Canadian statute enacted in 1876 by the Parliament of Canada that concerns registered Aboriginals, their bands, and the system of First Nations reserves. The Indian Act was brought in under the provisions of Section 91(24) of the Constitution, which provides the Canadian federal government exclusive authority to legislate in relation to "Indians and Lands Reserved for Indians."[xxxii] One of the main elements of the Act that affects all Aboriginal peoples is it legally, but not culturally, defines who is and is not 'Indian.' There were a series of eleven Treaties signed between the Aboriginal peoples and the reigning Monarch of Canada from 1871 to 1921. These Treaties were agreements with the Government of Canada, administered by Canadian Aboriginal law and overseen by the Minister of Aboriginal Affairs and Northern Development.[xxxiii] Once the signing of the Treaties started, the federal government introduced and passed an Act in 1876 (Indian Act) to amend and consolidate previous laws concerning the Aboriginal peoples which essentially turned them into legal wards of the state.[xxxiv]

Aboriginal people of Canada are the only federally mandated people in the country. The Indian Act has been amended many times throughout the years and has mandated, and continues to have authority over select aspects of freedom of movement, language, health, housing, education, child welfare, justice, land, resources, rights, ownership, governance, marriage, voting rights, food access, employment, religion and ceremony.

The Calgary region is located in the geographic area encompassing Treaty 7 First Nations land. Treaty 7 was signed by the Kainai (Bloods), Siksika, Piikani, Tsuu T'ina, and Stoney nations in 1877. This would be the last numbered Treaty signed between the government and the Aboriginal peoples until 1899.[xxxv]

Today, for many First Nations people the Indian Act continues to perpetuate unstable and inequitable programming and delivery of support services, especially to those living off-reserve and in urban communities. Further, the Act is a mechanism that keeps First Nations at a lower social status compared to other Canadians by forcing a differential status, and emphasizing the external control that the State plays in everyday lives. [xxxvi]

Participants in ASCHH interviews felt that racism and discrimination towards Aboriginal people has become systemic and is directly related to this long history of differential treatment and 'segregation' of Aboriginal people whether due to geographic segregation, segregation of rights, and/or segregation of systems such as health care and social supports. All of these can be traced back to the Indian Act. This systemic racism was overwhelmingly discussed as a significant barrier to attaining and maintaining employment. Participants also felt they had experienced discrimination from landlords who refused rental accommodations to Aboriginal peoples based on their ethnicity. A prospective landlord told one participant, "you have your own land, go back to the bush." Experiences of racism also affected service utilization as individuals felt they were looked down upon and stereotyped by front line staff that were rude and belittling towards Aboriginal clients. Participants expressed feeling ashamed and unworthy, and stopped accessing that service as a result.

Experiences of racism and discrimination also had a profound impact on levels of self-esteem and worth among Aboriginal peoples. Participants relayed stories of the stereotypes they felt were imbued onto them as a result of being Aboriginal, such as the 'drunken Indian' which negatively affected their sense of self and, for some, had the result of increased substance use. People felt that they lived with the double burden of stigma, as they were both homeless and Aboriginal.

Calgary service providers say that discrimination is the biggest barrier to ending a person's homelessness, followed by a lack of culturally appropriate supports, a lack of personal supports, inflation and a lack of affordable housing.

Indian Residential Schools

The Royal Commission on Aboriginal Peoples found that residential schools tore Aboriginal people, children, and families apart at their roots. What we see today in many community and family environments is a direct result of residential school experiences. Residential school syndrome or trauma can be seen in individuals, families, communities and across the generations of Aboriginal people who migrate to the cities in pursuit of a better life.[xxxvii]

There is no lack of discussion or awareness in literature of the impacts of the historical trauma of residential schools and the ongoing presence of this trauma in the current needs of Aboriginal people experiencing homelessness. In many research projects, preliminary linkages between the Aboriginal homeless experience and ties to historical and intergenerational trauma is evident. Symptoms of intergenerational trauma are often presented as: addictions; family violence; physical, mental, spiritual, emotional, and sexual abuse; and a loss of culture, language and identity.[xxxviii]

Working from an assimilationist agenda, residential schools within Canada operated for nearly 150 years, between the 1840s and into the 1990s. In 1920, through an alteration of the Indian Act, the federal government made it mandatory for all Inuit and First Nations' children to attend residential schools. Many Métis children also attended these institutions, as they were the only schools available, although they had to pay.[xxxix] The purpose of these schools was to assimilate Aboriginal children and change them from *savages* into *civilized citizens*. Within residential schools, the staff used numerous disciplinary techniques on the children, including: depriving them of food, confining them for days at a time, and lecturing and punishing them for speaking their own languages or talking to their opposite sex siblings. Other abuses reported by survivors of the schools during the Royal Commission on Aboriginal Peoples consultations were brutal

beatings that led to hospitalization, frequent whippings, being, "chained and shackled, bound hand and foot and locked..." within confined spaces, having their heads shaved or their hair closely cropped, and "their faces rubbed in human excrement."[xl] Often, as we are now seeing more and more, there was serious physical, emotional, and sometimes sexual abuse perpetrated against the children.[xli]

In 1988, Alberta closed its last residential school while the last federally run residential school did not close until 1996 in Saskatchewan.

The Medicine Wheels are one example of traditional teachings that were not taught to the over 150,000 Native, Inuit and Métis children who attended the one hundred and thirty church run, government funded[xlii] residential schools in Canada (located in every province and territory from the 19th century through 1996 - except Newfoundland, Prince Edward Island and New Brunswick)[xliii]. It was not only their cultural history that was denied them – they were forbidden contact with family members, their language was forbidden, fundamental beliefs about who they are were shot down and they were taught that their role models (parents, grand-parents, ancestors) were bad, evil, stupid and wrong.[xliv]

Information from a local service provider during the course of this research showed that 84% of the Calgary homeless Aboriginal population attended residential schools or were first generation descendants of someone who attended. Members of the general population, service providers included, often do not truly comprehend the residential school experience and how it can still affect the lives of those who were institutionalized within the system, their children, their children's children and so on. Not only was there little academic learning, but as was later made public, these institutions "were places of emotional, physical and sexual abuse." [xlv] Growing up was an exercise in surviving "emotional, physical and sexual abuse." Estimates of students being sexually abused in one First Nation residential school were 48%-70% of attendees.[xlvi] Survivors later exhibited "the development of a variety of mental health and social problems, and the emergence of a 'residential school syndrome'."[xlvii]

Residential schools, while not a negative experience for all Aboriginal people, had effects that are lasting well into current times. The cultural loss brought by residential school leaves many people feeling disconnected from their community and culture, as well as a shame at being Aboriginal. This translates into many problems, and can manifest in substance abuse problems. As well, the abuse at residential schools has led to abuse being perpetuated in communities against peoples' own children. Further, there are problems associated with parenting skills that have led to problems in people raising their own children. Often, because residential school survivors have no model for parenting, they are unable to parent their own children appropriately, meaning that many children are removed from their homes into the child welfare system and others are left with a legacy of social problems.[xlviii]

The impact of the residential school legacy was a primary theme in this local research. Participants identified the need for counseling and more specifically opportunities for community gathering to speak about the residential school experiences and have stories heard from survivors. The circle of violence and lack of parenting skills that plague many Aboriginal communities was attributed to the residential school experience. Participants shared stories of growing up in abusive homes and "never knowing what the word love meant" because their parents had grown up in environments of abuse and neglect. Culturally appropriate parenting and 'healthy relationships' classes were suggested to begin to break this cycle.

Child Welfare System and the "Sixties Scoop"

Beginning in the 1960s and continuing to the 1970s in what has now become known as the "Sixties Scoop," Aboriginal children were removed en masse from their homes by child welfare agencies and placed in non-Aboriginal homes. Removed to locations often across the country from their homes, children adopted out often became detached from their cultures, their parents and their communities. It has been widely documented that children who were involved in the child welfare system are overrepresented in the homeless population, and, although there is no research to testify to this, there is no reason to believe that this would be any different for Aboriginal children placed in care, especially considering other factors such as disconnection from community and culture.

Though not an "official" policy, the impact of the "Sixties Scoop" highlights the impact of formal/non-formal public policy and attitude that continues to separate and provide differential service options to different groups of Aboriginal people. Current service providers must understand the impact of historic public policy. Decisions made years ago continue to affect communities, families and individuals and are the underlying root causes, or factors that contribute to, Aboriginal homelessness. Discussions with community members and a review of the literature available provided insights into fundamental structural experiences that have had adverse effects on Aboriginal people and on personal perceptions that may subsequently contribute to pathways into or out of homelessness.

Inter-Generational Trauma as a Result of Structural Determinants

The historical trauma Aboriginal peoples experienced in association with governmental colonization and assimilation techniques are not often taught or shared within the public education system or mainstream media. For the most part, neither are the current traumas (e.g. 500 missing or murdered Aboriginal women, death rates and completed suicides). Service providers and members of the general public attending training sessions consistently share that they were not aware of the historic or generational impacts still affecting many Aboriginal peoples, not having received instruction on the topic in their formal education. [xlix] [l]

A study on behavioral changes reports "research has demonstrated connection between emotional abuse and adult depression, suicide, anxiety, dissociation, and drug and alcohol abuse."[li] Some researchers suggest that people use a form of emotional management:

Traumatized people who cannot spontaneously dissociate may attempt to produce similar numbing effects by using alcohol or narcotics…to try to control their hyper-arousal and intrusive symptoms – insomnia, nightmares, irritability and rage outbursts.[lii]

There is definitely a correlation between alcohol/drug use and violence. What happens when the children who were traumatized become parents themselves?

Mothers who are cut off from, or who strongly minimize, past attachment memories and feelings tend to reject their child's need for comfort… Mothers who have unresolved states of mind about childhood attachment experiences and who have difficulties in talking about such experiences in a coherent fashion have been found to show frightening maternal behavior.[liii]

Another often-overlooked trauma experienced by Aboriginal people is "complicated mourning" which can arise from experiencing multiple losses.

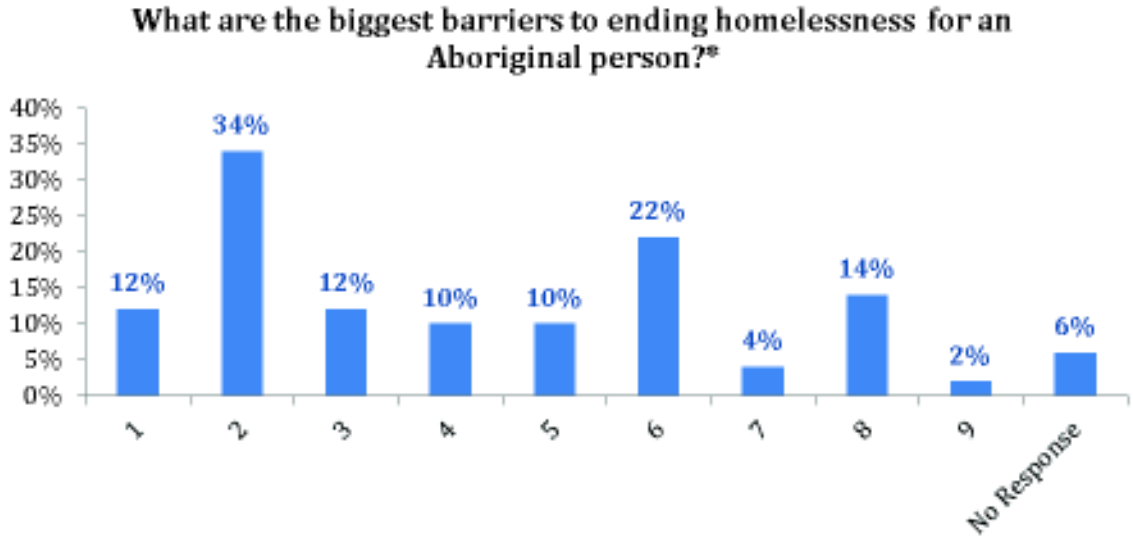
Postponing grief by indefinitely delaying its expression, displacing grief by directing intense feelings elsewhere, replacing grief by prematurely reinvesting feelings in another relationship, minimizing grief through rationalizations, or somaticizing grief by converting feelings to physical symptoms.[liv lv]

This in turn may develop into major depressive episodes, post-traumatic stress disorder, generalized anxiety disorder or panic disorder. Researchers are concluding that "emotional suppression and disconnection caused by generations of induced trauma, shame and disempowerment are a primary cause of the individual, family and community tragedy we see today."[lvi] Tragedies such as violence, addictions, suicide and homelessness become multi-generational and must be addressed using a long-term generational approach rather than an individual, single incident issue.

ASCHH interview participants stressed their difficulties maintaining sobriety when primary issues related to substance abuse had not been explored and addressed. Experiences of accessing treatment programs that were designed for non-Aboriginal people were not successful or appropriate for their needs.

Barriers to Ending Homelessness for Aboriginal People

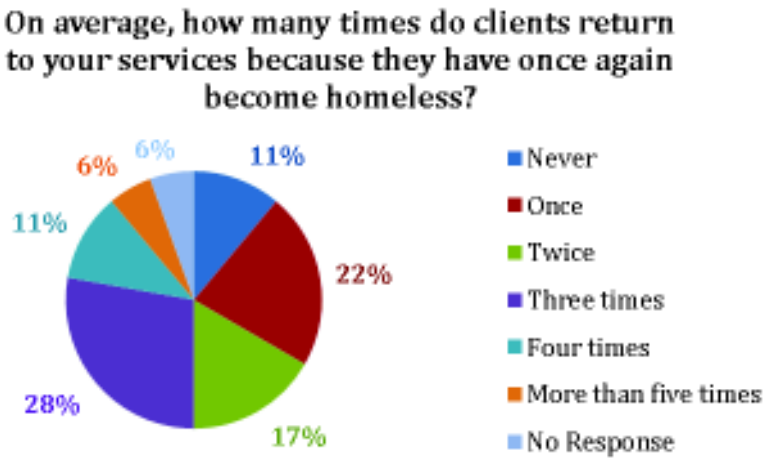
In this research, people with lived experience consistently reported barriers to ending their homelessness that were specifically related to addictions and mental health concerns, trauma, family conflict and lack of income. Several service providers noted the complexity of dealing with inter-generational trauma, systemic issues and a lack of coordination between reserves and urban service providers. Respondents indicated significant challenge in finding housing and support programs designed specifically for Aboriginal people and their complex combination of structural and individual issues.



*Answers are not mutually exclusive

1 = High costs
2 = Discrimination/pre-judgment
3 = Affordable housing
4 = Lack of employment/training
5 = Addictions
6 = Lack of culturally appropriate supports
7 = Trauma
8 = Lack of personal supports
9 = Agency coordination

Repeated Cycles of Homelessness



A return to homelessness is a reality for many people who have received supports to end their homelessness. According to service providers, this occurs for several reasons:

- First and foremost, Aboriginal people are not being properly supported to address multiple and complex needs.
- Supports for co-occurring issues such as addictions and mental health concerns must be grounded in understanding the root causes of issues, specifically, structural issues such as the effects of inter-generational trauma. This is not always happening.
- Cultural supports and programs designed specifically for Aboriginal people need to be expanded and adequately resourced.

Prevention: Who is At-Risk of Homelessness?

Identifying and understanding those at risk of homelessness is complex. Risks for homelessness are similar to pathways into homelessness and are typically understood as a combination of *individual* and *structural* factors[lvii] and the ways in which these factors come together to either elevate or reduce a person's risk. For Aboriginal people, *individual* risk factors are similar to those of non-Aboriginal people: presence of addictions, lack of social supports, mental and/or physical health concerns, and family breakdown and/or violence. However, many of these issues can be traced back to the systemic inequities associated with colonization as previously discussed. Although there are some similarities in *structural* factors as well, such as poverty, high costs and a lack of affordable housing, these are further complicated for Aboriginal people with a lack of culturally appropriate support networks, a lack of information and coordinated systems for new arrivals to urban centres, and systemic discrimination[lviii]. Strategies towards prevention of homelessness for Aboriginal people must consider these as well.

SNAP SHOT OF RISK FACTORS THAT CONTRIBUTE TO HOMELESSNESS[lix]

Poverty

The prevalence of low incomes in the total population in Calgary for Aboriginal people was 50.6% of the poor in 1996, 31.8% in 2001 and 30% in 2002. So there was improvement, but Aboriginal people remain over-represented in low income situations and lower paid occupations. This is reflected in median incomes of $23,899 and average incomes of $31,216 for Aboriginal persons compared with median incomes of $30,542 and average incomes of $47,875 for the non-Aboriginal population.

Family breakdown

In 2006, six in 10 Aboriginal children aged 14 and younger lived with both parents. Compared with their non-Aboriginal peers, Aboriginal children were more likely to live with a lone parent (33% versus 14%) or with their grandparents or other relatives with no parent present (7% versus 1%).

Unemployment rates

The unemployment rate for Aboriginal Calgarians is 7.3% vs. 4% for the total population. For Aboriginal youth 15 to 24 years old, this rate is 12.9% compared with 8.4% for non-Aboriginal youth. Unemployment rates were somewhat higher for women than for men, regardless of the population group.

Housing instability

Almost two-thirds of Calgary's Aboriginal population moved at least once between 2001 and 2006. In a study of the Prairie Provinces, 40% of people reported having moved three or more times in the previous six months[lx].

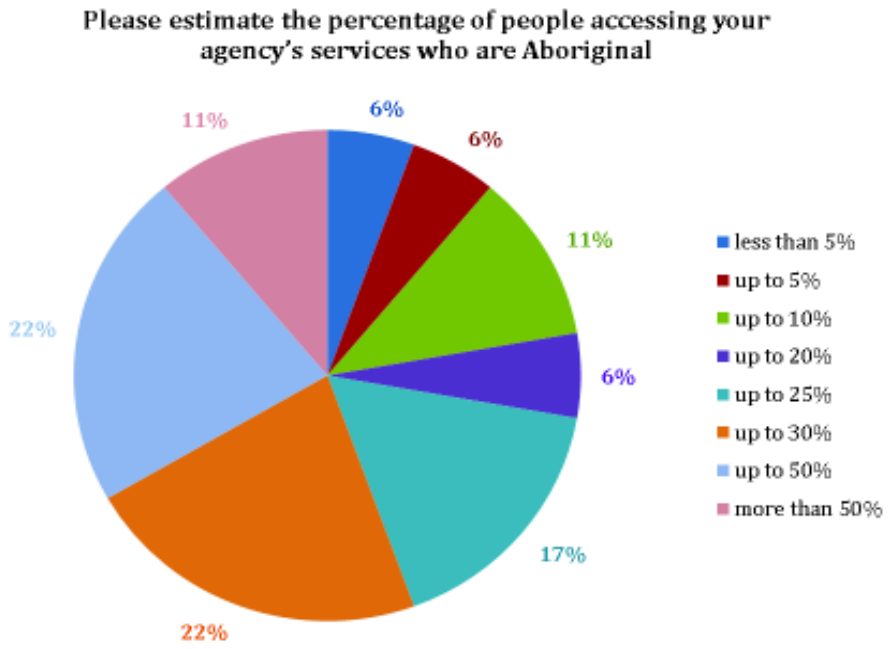
Systems interactions

In Alberta's foster care system, 65% of children are Aboriginal and the incarceration rate amongst Aboriginal adults aged 20-34 was 9.3 times higher than the rate for non-Aboriginal people of the same age. [lxi]

High school completion

Overall, in 2006, Aboriginal youth aged 15 to 24 living in Calgary had lower school attendance rates than their non-Aboriginal counterparts (50% versus 63%).

Why Do We Need a Plan to End Homelessness Specifically for Aboriginal People in Calgary?



During the development and implementation of Calgary's 10 Year Plan, a number of key stakeholders identified that Aboriginal people experiencing homelessness were not having their unique needs met. Ongoing dialogue and consultation determined that a specific plan for ending Aboriginal homelessness was required that:

- reflects the unique history of Aboriginal peoples;
- considers pathways specific to Aboriginal homelessness;
- respects cultural beliefs;
- addresses the diversity of people's needs and wants;
- includes a holistic approach to healing "while understanding cultural competencies and sensitivities through collaborative community efforts and awareness of cultural identity;" and
- acknowledges Aboriginal peoples homelessness is primarily a structural and/or systemic issue.

In the last census, 26,575 people living in the Calgary area identified themselves as Aboriginal; this marks a 21.2% increase in the region's Aboriginal population since the last census.[lxii] Aboriginal people make up the fastest growing segment of the population. Clearly there is an urgent need to develop and implement evidence-based solutions to reduce and prevent homelessness for Aboriginal people.

To this end, ASCHH recognized and incorporated the need to engage in ongoing collaborative and inclusive evidence-based research in order to ensure that the goals and strategies of the Aboriginal Plan reflect:

- the unique pathways into and out of homelessness for Aboriginal people;
- the structural determinants of Aboriginal homelessness including child welfare, residential schools and effects of colonization;
- the perspectives of Elders and youth;
- the voices of Aboriginal people with lived experience; and identified gaps in knowledge and understanding specific to homelessness.

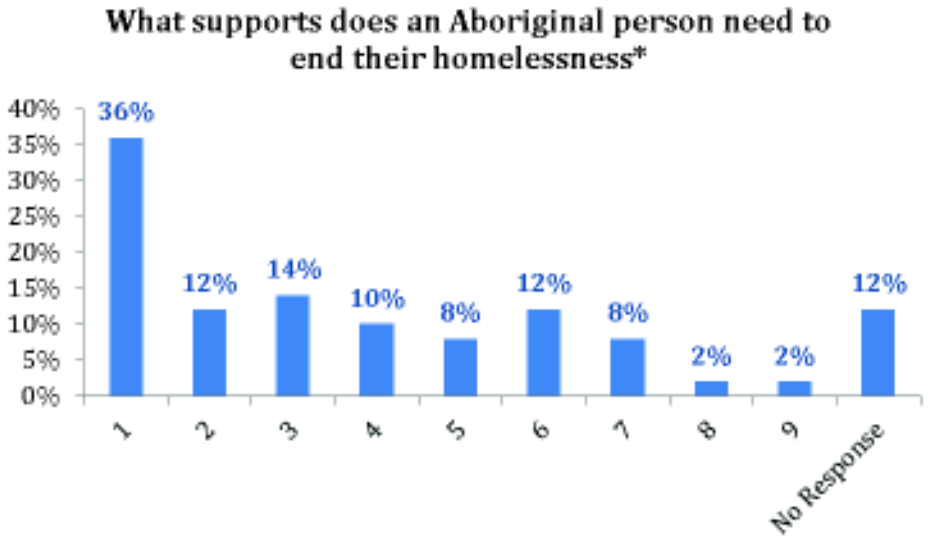
This local research and consultations suggested the primary factors associated with the onset and persistent condition of homelessness results from:

- lack of employment opportunities that are meaningful and provide a living wage;
- lack of affordable housing that is safe, stable and sufficient to meet the needs of individuals and family (large enough to prevent overcrowding);
- high prevalence of addictions and substance abuse;
- low education levels and workplace skills;
- high rates of incarceration with inadequate discharge planning with resulting in being discharged into homelessness and having the added stigma of a criminal record (creating an additional barrier for successful community reintegration);
- histories of violence and abuse;
- family breakdown; and
- reserve conditions.

The variables highlighted above result from the unique life experiences of Aboriginal people and should be understood as interrelated and multi-dimensional. The factors that contribute to Aboriginal homelessness must be contextualized with their experiences as an Aboriginal person and the systemic barriers faced by Aboriginal communities.

What are Major Considerations for Building a Plan to End Aboriginal Homelessness in Calgary?

"Aboriginal homelessness can only be ended when Aboriginal people and Aboriginal service providers are given the necessary tools to heal and help Aboriginal people... It also needs to be an effort that involves everyone in the community" (direct quote, service provider).



*Answers are not mutually exclusive

1 = Cultural supports
2 = Employment/training
3 = Addictions support
4 = Affordable housing/transportation
5 = Understanding/non-judgment
6 = Aboriginal peer workers/employers
7 = Financial
8 = Agency coordination
9 = Administrative supports [lxiii]

Reserves and Urban Migration

Difficult conditions on reserve were a frequent topic of conversation in all of the focus groups conducted. Participants expressed frustration that the general population, and agency staff in particular, are not aware of the reality of conditions on reserves or do not adequately comprehend what it was like to grow up on a reserve; consequently, many agencies are not able to understand or adequately respond to people's needs.

Participants described their experiences of the reserve as very damaging as a result of high incidences of violence, physical and sexual abuse that was never spoken about, high rates of substance abuse (particularly in family units with the result of early substance abuse for youth and learned behaviors), and high rates of death and suicide with very little support to cope.

While many people have positive healthy experiences growing up in their communities, it is clear, that those who struggle in their home communities continue to struggle when they move to urban centers. This was clearly the case with the people experiencing homelessness who were interviewed.

Urban migration from reserve was identified in the research as a primary reason for Aboriginal people becoming homeless as they flee the violence and lack of opportunity related to safe and adequate housing, low education and employment opportunities on-reserve. However once they move to Calgary, many have nowhere to go and no real knowledge of local resources. Individuals spoke of the reserve system as being based on the social service system where everything is just handed to you and many people arrive in the city expecting it will be the same. One woman described the reserves as, “a crisis situation and it’s been that way since we were put on the reserve.” Reserve conditions were described as “third world conditions” and many felt “culture shock” as they attempted to adjust moving from small isolated communities to large urban centers.

Aboriginal Specific Programs

Among service providers, nine out of the16 surveyed offer Aboriginal-specific programs. They range from addiction treatment, violence protection and family/parenting supports. Cultural reconnection supports are also offered to clients including regular access to Elders, and participation in ceremonies, recreation and sweat lodge ceremonies. Outreach and culturally appropriate housing were also noted. While there was a range of Aboriginal programs reported, typically there were only one or two providers for each service. Some programs offer multiple supports and some specialize in only one.

Six service providers who do not offer Aboriginal-specific programs noted the following reasons:

- limited funding;
- limited ability to attract and retain qualified Aboriginal staff to deliver the programs;
- no on-site services but a referral process to another agency for those supports;
- a need for more coordinated referral processes; and
- clients that come from a range of cultural backgrounds, so while most agencies have a range of Aboriginal clients they do not have specific services just for Aboriginal people.

Attendance at Aboriginal Awareness Training

Of 16 respondents, 14 said they had received some type of Aboriginal awareness training in the past. The most common types of training included: regular access to Aboriginal Elders on the worksite, sweat lodge ceremonies, attendance at cultural ceremonies, small group training with an Aboriginal facilitator and funder-required annual Aboriginal awareness training from three to eight hours per year. Only one person reported accessing multiple Aboriginal awareness training opportunities and three reported they did it “because their funder required it.” Only one person indicated they had training in how to properly support Aboriginal people in culturally appropriate ways.

Only one person who reported not having accessed Aboriginal awareness training indicted why that was the case – they stated they did not have access to funding through their organization.

Twelve out of 16 people reported that they require their staff to take Aboriginal awareness training. Of those that don't require it, only two gave reasons as to why not. One stated a lack of funding and the other that they had training booked but not until later in the year.

How does Calgary Compare to Other Western Cities? [lxiv]

- The number of homeless-serving organizations in Calgary was comparable to other cities when population size was considered, and Calgary had a large number of Aboriginal specific organizations.
- Calgary had more advocacy for Aboriginal homeless peoples than some other cities, but limited cultural healing services.
- Several organizations recognized the importance of providing Aboriginal-specific services to meet Aboriginal homeless peoples' needs, but some of these have mandates that restrict these kinds of services.
- The Alberta Friendship Centre of Calgary's Aboriginal Homeless Outreach and Cultural Reconnection program stood out as a collaborative cross-sector initiative offering cultural-specific services for Aboriginal peoples, overall though, there is little focus on Aboriginal-specific services and the acknowledgement of the unique context and needs of Aboriginal homelessness peoples (see page 38 for more details).
- Many participants expressed interest in collaboration but cited the demands placed on their organizational resources through this type of engagement (e.g. funding, staffing and time constraints) as a barrier.
- Calgary had not been impacted in the same way by the recent economic downturn, yet Calgary agency respondents described being underfunded, understaffed and subsequently having limited time to do the additional work they saw as important.
- The general lack of recognition of the importance of Aboriginal leadership and coordination to address the needs of Aboriginal homeless individuals, and Aboriginal homelessness overall, was apparent in both Calgary and other western cities.
- Previous phases of this project indicated that best practices for partnership with Aboriginal organizations include extensive relationship building and endeavours, to mitigate power imbalances among organizations. Thus, while some participants of the Calgary phase of the project noted that they were interested in collaboration, each likely had different assumptions about what collaboration might entail.

A Harm Reduction Approach

In an attempt to address the devastating relationship between drug use and homelessness more effectively, a harm reduction approach integrated with a Housing First concept has been recommended and established in several cities across Canada.[lxv] Fundamental features of harm reduction, specifically its human values, overlap with traditional Aboriginal values such as respect and the importance of links between the community and the individual. A harm reduction approach is both a philosophy and a strategy with a focus on minimizing or reducing the harms associated with drug use rather than eliminating it.[lxvi] [lxvii]

A. **Philosophy**

Harm reduction seeks to minimize or eliminate the adverse health, social and economic consequences of use. It respects the complexity of factors and the rights and responsibilities of the person in making choices and managing change. It recognizes that poverty, social

class, racism, homophobia, social isolation, past trauma, and other social inequities have an impact on people's vulnerability to, and capacity for, effectively dealing with risk taking behavior.

Harm reduction philosophy requires that individuals who are the intended recipients of programs and services be involved in the creation and/or delivery of these services and programs. These programs and services must be offered in a non-judgmental and non-coercive manner.

B. **Strategy development**

Harm reduction strategy involves a pragmatic, multi-disciplinary approach that meets individuals where they are right now. It does not seek to remove individuals from their social, economic and physical environments.

An example of an effective harm reduction facility is Seaton House, a 36-bed homeless shelter for men in downtown Toronto. When the individual shows up for the night, alcohol is stored and returned to them the next morning. Clients are also offered beer or wine under supervised conditions. The managed alcohol program avoids situations where men quickly drink before seeking shelter or sleep outside as to not have to give up their alcohol It also prevents or reduces harm associated with the use of unsafe sources such as rubbing alcohol and/or inhalants.

Calgary Alpha House Society is a local example that utilizes a Housing First, harm reduction approach that respects the client's right to self-determination as they address the impact of alcoholism and addiction. Developing a relationship of trust, staff work with clients on issues of withdrawal management, mental health concerns, treatment and housing needs. The Alpha Encampment Team works directly with rough sleepers in moving clients from the dangers of sleeping outside to independent housing. Their Detox program has worked closely with an Aboriginal Elder to develop an innovative Aboriginal program. The success of this approach is apparent in the fact that within three to six months, 78% of newly housed clients accessed addiction services they had refused prior to housing.[lxviii]

Jurisdictional Coordination – A Unique Conundrum

There are multiple ways in which the federal government has defined Aboriginal people. For Aboriginal people who do not fall under the Indian Act, (Métis, non-Status, and Bill-C31) at the highest policy level, jurisdictional issues and coordination challenges of service delivery to Aboriginal peoples must be acknowledged. In Calgary there exists a great diversity of Aboriginal people, including First Nations, Status, non-Status, Treaty, Bill C-31, Métis and Inuit. There is also considerable movement of people moving to and from reserves.

Jurisdictional 'buck passing' continues to be a problem for Métis, non-Status and Bill C-31 individuals who are in a jurisdictional vacuum with respect to which level of government is responsible for addressing their needs.[lxix] This vacuum is also felt by First Nations individuals who attempt to move into the cities to either find employment, better housing or a host of other life choices, only to find that their housing is no longer supported once they move off-reserve.[lxx]

Service providers noted that many of the Aboriginal clients that access their services do so on a regular basis, often times moving back and forth from the reserves to the City in a 'revolving door' scenario. Reasons for this movement are varied, and include the need to seek out health services,

employment opportunities and housing. Unfortunately with each person's ‘status’ comes differing funding and jurisdictional wrangling about which government is responsible for which payments. The impact is felt most profoundly by those who are in most need of ‘wraparound services’ at the street level.

A Strength-Based Approach

Traditional Supports in Contemporary Times

It is important to realize that despite the effects of structural determinants, the majority of Aboriginal people are not in jail, nor are their lives swamped by addictions, violence and despair. This reality supports two assertions:

1. There are ways that many Aboriginal people were, and are, able to respond to the traumas in their lives and keep "the colonization onslaught from overwhelming them."[lxxi]
2. To survive those challenges "with so much faith, hope, humour and vision intact is… testament to the power of traditional teachings and practices, and the world-view that shaped them."[lxxii]

What is there to do for an Aboriginal person raised away from their traditional sources of knowledge (adopted out of the community, raised in an urban setting or in a community where they could not access traditional Elders or in which their traditional teachings are not validated)? All too many have 'fallen through the cracks' of the current system.

There are knowledgeable, traditional Aboriginal people who share their teachings with various programs, classrooms and organizations. There are also outreach programs that offer insight and participation in traditional teachings and healing practices. A strength-based approach instills a strong sense of belonging and identity, identified as a protective factor in building coping and resiliency skills against the challenges associated with homelessness, near-homelessness or street-involved individuals.

SNAP SHOT OF POSITIVE TRENDS

Adult learning success
Although Aboriginal youth (aged 15 to 24 living in Calgary) had lower school attendance rates than their non-Aboriginal counterparts (50% versus 63%), older Aboriginal adults had school attendance rates that were similar to or *higher* than their non-Aboriginal peers. Nine per cent of Aboriginal adults 35 years of age and older were attending school in 2006, compared with 7% of non-Aboriginal adults in the same age group.[lxxiii]

Employment success for Métis population in Calgary
Despite challenging historical developments, Métis employment rates resemble those of the non-Aboriginal population. In 2006, Métis men and women aged 25 to 54 living in Calgary had employment rates (89.8% and 78%, respectively) closely resembling those of non-Aboriginal men (91.1%) and non-Aboriginal women (79.7%). First Nations men and women had employment rates of 80.5% and 68.7%, respectively.[lxxiv]

Métis working full-time, full-year at similar rates to non-Aboriginal counterparts
Of Métis adults living in Calgary, 44% were working full-time, full-year in 2005. This percentage mirrors that of the non-Aboriginal population (44%). The percentage of Métis women working full-time, full-year (39%) was slightly higher than that of non-Aboriginal women (36%). For Métis men, the percentage of full-time, full-year workers (50%) closely resembled that of non-Aboriginal men (52%). The employment rates of the First Nations population were lower than those of the non-Aboriginal population of Calgary. First Nations women worked full-time, full-year at a rate of 30% in 2005, less than the rate for non-Aboriginal women (36%). The proportion of First Nations men working full time full year was 41%, compared to 52% of their non-Aboriginal counterparts.[lxxv]

An amazing example of early Aboriginal accomplishments and applied teachings is an enormous rock formation a couple hour's drive from Calgary which retired University of Alberta professor Gordon Freeman describes as "a precise 5,000-year-old calendar predating England's Stonehenge and Egypt's pyramids"…which according to Dr. Gordon: "to be the center of a 26-square-kilometre stone 'lacework' that marks the changing seasons and the phases of the moon with greater accuracy than our current calendar."[lxxvi] Some Siksika Nation members[lxxvii] recall attending their ceremonies over half a century ago; others have no idea they exist.[lxxviii]

Local experts, (Calgary's service providers and people with lived experience) told us that the Plan to End Aboriginal Homelessness should build on existing strengths and knowledge of best practices.

Aboriginal Elders

A consistent recommendation emerging from consultations, focus groups and other service sectors that serve Aboriginal people is the involvement of Elders in the planning, implementation and revision of programming and services. Aboriginal people who are on the streets and staying in emergency shelters need access to healthy traditional Aboriginal Elders. Service providers must understand the important role Elders play in stability and resiliency. Elders as counselors can facilitate the healing process through counseling, mentoring, role modeling and traditional supports. Elders must also be involved in case management, in the process of transitioning from the streets/shelter into housing, and/or to provide cultural engagement and cultural teaching.

"Over the years, CCSA has benefited from a strong relationship with Aboriginal people," said Michel Perron, Chief Executive Officer of the Canadian Centre on Substance Abuse (n.d.). "All of us should value the knowledge and best practices our First Nations, Inuit and Métis collaborators can share with us."

CCSA has had an Elders Advisory Council in place since 2008 to bridge the gap between community and research by providing guidance and recommendations related to First Nations, Inuit and Métis peoples of Canada on national substance abuse issues and policy development.

Spiritual & Cultural Guidance and Supports

Ideas put forth included opportunities to reconnect with the land through outings to the country or mountains where individuals would camp, build teepees, sweat, have talking feathers, sing and dance — a way to get "[out of the] hectic and allow the healing to begin."

Access to sweat lodges was identified as necessary in healing by majority of participants. One man who went to a sweat every Friday said:

"My sobriety and spirituality went hand in hand… I didn't know how to ask for help until I learned how to pray" (interview participant).

Agencies and staff who do provide cultural engagement opportunities must also be aware that there are different cultures and spiritualties amongst communities. There is no "pan-Indian culture… not all Aboriginal people pray the same." This can be facilitated through mandatory cultural sensitivity training for service staff to learn cultural appropriateness and the history of Aboriginal peoples in Canada, particularly the legacy of residential schools, the current state of

reserves, colonialism, and Aboriginal cultural traditions and customs. This should be provided to agencies on a regular basis.

Cultural sensitivity and training for service providers should be delivered by instructors with the appropriate traditional and community validations.

Aboriginal peoples must also be educated about their own history:

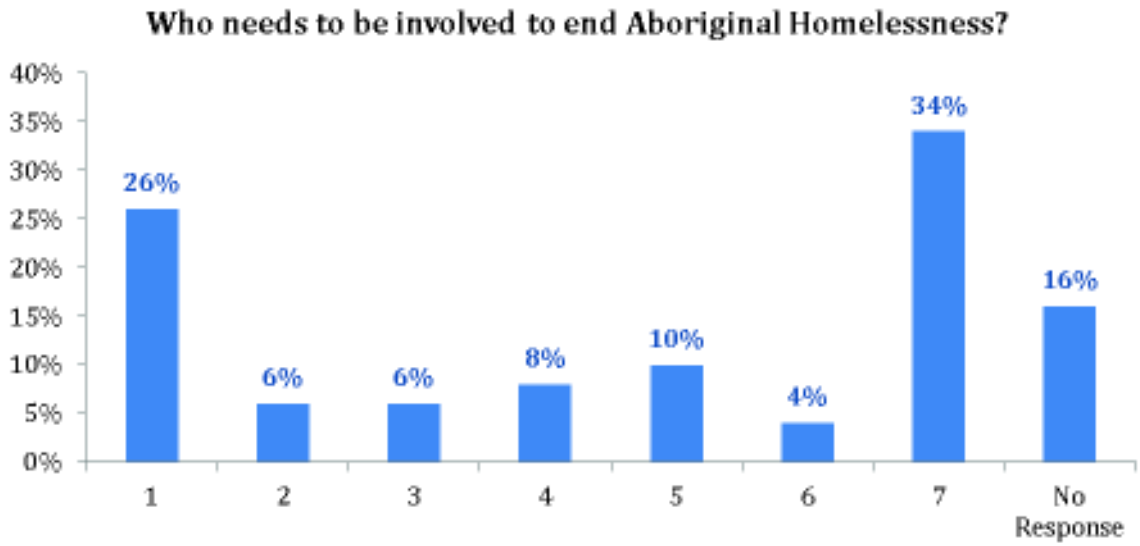
"Our own people need education about the residential school experience and explain how this community experience has impacted each generation and will continue to impact each generation until we heal… we need to know who we were, who we are not, and where we are going" (interview participant).

Aboriginal people must understand and explore the effects of intergenerational trauma:

"Understanding why that anger is inside you and where it comes from… youth are walking around carrying the pain of their ancestors without even knowing it" (interview participant).

Cross-Sector Collaboration

Respondents strongly supported intergovernmental/inter-sectoral collaboration to address jurisdictional and funding issues. This included First Nations and mainstream government bodies, service providers and researchers, but first and foremost must be led by Aboriginal people and communities. A necessary first step includes recognition that responsibility for the issues and solutions for Aboriginal people lies with all of these parties.



1 = Aboriginal people/communities
2 = Service providers
3 = Traditional support
4 = Family/friends
5 = Government
6 = Individuals
7 = Everyone

Specific suggestions included creation of an Aboriginal council of on-reserve and urban leaders to address migration, housing, support issues and jurisdictional challenges. Holistic innovative approaches that include peoples' voices and experiences, ongoing individual support and advocacy with family, community and social systems were highlighted. Increased priority and allocation of funding specifically to increase community capacity to respond to the high numbers of Aboriginal people and their complex needs, specific attention needs to be paid to the high rates of migration back and forth between urban centers and rural communities to understand and react to the high cycling in an out of homelessness that many people encounter.

Collaboration should be extended to front-line service providers to ensure continued dialogue and community meetings to address barriers and needs as they arise and to hear the voices of those who are using services.

A Continuum of Housing Options

Housing options should range from permanent supportive housing to affordable housing. Housing must be able to accommodate singles and families of varying sizes and support needs. Cultural supports should be accessible on-site for those who want them.

Successful housing supports should include:

- a diverse spectrum of housing options (everything from abstinence-based to harm-reduction and allowable on-site substance use);
- affordability;
- person-centered and choice-based options (such as options for people who would like independent living, on-site cultural supports, space to accommodate large families and/or communal living);
- access to Elders and other cultural supports; and
- access to education and training, employment supports as well as training in life skills, healthy relationships, personal safety and setting boundaries.

Expansion of Aboriginal Outreach Workers

As a result of negative experiences at agencies, many Aboriginal people avoid services. However, a constant outreach presence has the potential to build relationships with homeless individuals to promote trust in services and encourage service access and utilization.

Central Hub or "One Stop Shop" Resource Centre

Located in the downtown core it would provide resource information and wrap-around services to homeless Aboriginal people and those at risk of homelessness. Ideas put forth in focus groups included having a community kitchen area, recreational activities, camping trips, daily trips to sweat lodges, a first point of contact for Aboriginal peoples migrating from reserve, mentorship and peer support programs, integration supports and support for culture shock.

Further services would include:

- information about housing, particularly "good landlords" who rent to Aboriginal people;
- employment skills/training and a job posting board;
- life skills training in areas of anger management and handling conflict in the workplace;
- parenting classes to help break the cycle due to legacy of residential schools;

- cooking and nutrition classes;
- budgeting; and
- preparation for independent living.

"We have been conditioned to live where we are… we have no experience of living in a house, how to be responsible and clean and cook… we need to learn those skills" (interview participant).

"Nobody knows how to be a parent. People are parenting the way they were parented in residential schools" (interview participant).

A "one stop shop" would increase service utilization as individuals and families would not have to travel around the city from agency to agency "jumping through hoops." This was a particular concern for families who found it difficult to bring the children with them to a number of appointments throughout the day when only provided with one bus ticket.

Case Planning

Requirements include stable case managers who are Aboriginal and who can empathize with the personal struggles and larger systemic issues an Aboriginal person faces. Case planning should involve cultural reconnection programs and access to Elders, particularly trauma counseling and healing, sweats, smudging and sharing circles. Case managers should also assist in providing education about boundaries as many participants expressed feeling pressure to allow relatives to move in with them, which has led to unsafe living environments and threats of eviction.

Youth Intervention

This is crucial to help prevent the next generation from becoming homeless. Youth need a safe space to go where they have access to mentorship programs for positive social support and role models. It was identified that a central youth "hub" would be beneficial to address this need as it would assist in gang prevention while decreasing criminal activity and substance abuse. This is particularly crucial for youth migrating to urban centres from reserves as they are often fleeing violence and perceive the streets to be safer than their home.

Trauma Counseling

Students attending residential schools were separated from their family, community and cultural supports only to experience emotional, spiritual, physical and sexual assault from those charged with their care and instruction. These untreated traumas contributed to substance abuse and/or challenges of coping with a family member's substance abuse, family breakdown and extensive personal loss. This has contributed to significantly higher incidences of suicides and traumatic death, and traumas that are still prevalent today. Service providers have also identified post-traumatic stress disorder behaviors amongst Aboriginal peoples, which are exacerbated by traumas associated with life on the streets and in homeless shelters.

Individualized Family Supports

Supports should include access to counselors as a way of coping with the unique experiences of family homelessness. One woman said:

"The trauma of walking into a shelter for the first time with your kids, there is so much shame and a sense of failure in listening to your kids say, 'I want to go home" (interview participant).

Parents also expressed the need to talk with counselors about the struggles they are facing with their children, particularly guilt felt over their child's/children's victimization. Parents shared their sense of helplessness and frustration as they watch their children become gang affiliated, involved in the criminal justice system, abuse substances, and often become young parents themselves; feeling unsupported and otherwise unaware of how to break that cycle.

Advocacy and Assistance with Navigating the System

Participants felt routinely victimized by the system because they did not understand it and felt powerless trying to change their current conditions.

Participants discussed the need to have a safe space at agencies and with staff to feel emotional, human and express their anger, frustration, and sense of hopelessness without staff becoming defensive:

*"You get mad because you are dealing with some pretty crazy s*** and then you get blacklisted for being aggressive"* (interview participant).

Support in navigating the different systems people interact with (including the criminal justice system, family services and child welfare) is also critical. Individuals need support and guidance regarding where to go for what services, how to fill out paperwork and applications, and with keeping deadlines and appointments. This is especially critical for individuals/families coming from reserves. This support is needed from Aboriginal people who are familiar with these systems. Participants expressed feeling overwhelmed and frustrated trying to understand and navigate the different systems and would "just give up."

Support staff who help to navigate systemic barriers should also be mindful of how overwhelming the process is and have realistic expectations for clients:

"The system expects you to know certain things, but how are you supposed to know that when you don't have the life skills and you don't understand what is being asked of you, then you feel stupid and you don't go back" (interview participant).

Many individuals expressed frustration when trying to access resources that they did not qualify for because the agency did not classify them as 'homeless.' Staying with family was a barrier for trying to access housing, financial support programs and outreach services because service providers did not consider them homeless and often told them to go and spend a few nights in the shelter and then call the agency back. This is an important consideration particularly in regards to homelessness prevention.

Interview participants talked about a lack of support from service providers and community members once they were housed in Calgary. Participants expressed the sense of isolation and boredom they experienced once they attained housing. This resulted in a number of negative effects including increased substance abuse and having friends from the streets visit, which resulted in eviction for some.

One suggestion was with Children Services and the need for an Aboriginal worker to assist women, particularly young girls, about their rights if their child(ren) has been removed from the home. Mothers feel hopeless to regain custody and often face depression. Regarding child welfare one mother said, "We are judged before we walk through the hospital door to have our

baby." A father shared a story of holding his son in the hospital after he was born and a child welfare worker approached him saying "put that *thing* down."

Assistance is needed in the child welfare system to reduce the incidences of family breakdown and high prevalence of Aboriginal children and youth in foster care who are, at alarming rates, being discharged from government/foster care into homelessness.

Aboriginal People Must Work in the Homeless-Serving Sector

"Our people need to help our people" (interview participant).

More Aboriginal staff are needed at services and shelters who have real knowledge based on their life experiences, not from a workshop, a book or the internet. Participants identified the need for an Aboriginal shelter, as well as an Aboriginal treatment center fully staffed by traditionally trained and educated Aboriginal people.

Aboriginal Treatment Centre

There is an urgent need to address the core issues of why substance abuse exists. "Alcohol and drugs have become a catalyst for what has happened to that person in a lifetime… we need talking circles, mentorship programs and one-on-one counseling with our people" (interview participant).

One interview participant tells of his experience in a treatment center staffed by non-Aboriginal people:

"It was like prison, like residential school again…they have cameras, white staff and no freedom…what we need is support, encouragement, peer support, community support" (interview participant).

Best Practice Case Study: Aboriginal Friendship Centre of Calgary's Aboriginal Homeless Outreach and Cultural Reconnection Program[lxxix]

In 2009, the Aboriginal Friendship Centre of Calgary (AFCC) implemented its Aboriginal Homeless Outreach and Cultural Reconnection Program (AHOCRP) with an overarching goal "to assist homeless Aboriginal people in Calgary to find and maintain appropriate housing, increasing appropriate housing choices for homeless Aboriginal people in Calgary" (AFCC, 2010). A key objective was to provide cultural reconnection for Aboriginal homeless people in Calgary. Through this program, the AFCC worked in partnership with non-Aboriginal agencies to provide services to Aboriginal homeless people, including cultural supports and activities. It also facilitated Aboriginal awareness training for agencies and their staff.

Outreach Services

Outreach services were provided by two outreach workers, who connected with Aboriginal homeless individuals by visiting shelters and other homeless-serving organizations and meeting people on the street. Following intake and the assessment of needs, various support services (e.g. emergency shelter, food bank, social services, long-term housing) were arranged for individuals or families. Outreach workers also assessed interest in cultural activities, providing information on available services and logistics (e.g. location, time, etc.). Follow-up was conducted

as needed, but was impacted by the transient nature of the population as well as capacity of the outreach workers.

Cultural Services

Cultural services provided included visits with Elders, sweat lodges, drumming, beading, and other crafts. They were provided at a variety of locations in the community: some at AFCC itself (located just outside of the central core); some at locations of partnering organizations; and some specific activities (e.g. sweat lodges) were offered on a nearby First Nation reserve. Attendance at activities varied, with Elder visits and sweat lodges being the most popular.

The Aboriginal awareness training offered to homeless-serving organizations and their staff was provided by AFCC leadership and outreach workers. Training sessions varied in length and the content was determined to some degree on the needs of the specific organization, but generally focused on history, treaties, government policies, residential schools, and spirituality. Approximately five organizations had participated in this training at the time the research was conducted. Participants appreciated the training, but were unsure of the impact for Aboriginal homeless peoples.

Successes of the Program

The decision of program organizers to work through mainstream partner organizations serving the homeless was considered a strength of the program, providing access to Aboriginal homeless individuals without duplication of services. The outreach worker role was considered to be an essential component to the successful implementation of the program. Outreach workers were successful in obtaining housing and support services for many clients. Cultural services were valued by both the partnering organizations and the clients themselves, as it began the cultural reconnection for Aboriginal homeless peoples.

Challenges Encountered in the Program

Capacity of the program overall, and in particular the outreach workers, was a major concern. Space and insufficient funding were also concerns. Aboriginal awareness training was deemed important but must be offered more frequently; regular sessions need to be considered, as one session really only serves as an introduction and does not support the frequent staff turnover occurring in organizations. The need for improved data collection and analysis for monitoring and evaluation were also identified.

Case Study Summary

The AHOCRP filled a gap in the context of Calgary services to the homeless. While program evaluation was lacking, observations suggest that the AHOCRP is still needed and could be an important part of building collaborations in the Calgary community. This brief report reflects the nature of program development within a complex environment such as the homeless-serving sector.

The greater part of agency interviews shared that not only do agencies provide some successful programs, there are services and initiatives in existence which can be shared, built upon and duplicated. There also is an openness and willingness to do so[lxxx]. This is a positive demonstration that an end to Aboriginal homelessness is possible, and that the foundations and awareness of its need already exist.

A number of key components were identified for collaboration to be successful.

These include:

- Aboriginal leadership and governance;
- clear articulation of the goals, expectations and resource requirements;
- good communication and coordination;
- funding to support the collaboration;
- appropriate human resources;
- appropriate time for staff to participate in collaboration;
- addressing the lack of capacity within Aboriginal populations;
- more Aboriginal people within the field to provide cultural awareness and sensitivities to clients;
- leadership and coordination;
- partnerships and examination of community mandates;
- investment in policy dialogue;
- cultural continuity and community participation;
- a credible and reputable community perception;
- staffing and volunteer programs;
- effectiveness of service delivery; and
- involvement in evaluation and other research.

Facts: A Statistical Picture of Aboriginal Homelessness

Canada

According to the 2006 Statistics Canada census, the total population of Aboriginal people living in Canada is 1,172,790.[lxxxi]

- First Nations 698,025
- Métis 389,785
- Inuit 50,485

Aboriginal people are over-represented in Canada's homeless population by a factor of about 10 and the Aboriginal homeless rate in Canada has been estimated at about 40%.[lxxxii]
Canadian Social Trends reveals that nearly half (49%) of off-reserve First Nations children under age six live in low-income families, compared with 18% of non-Aboriginal children. Of these low-income First Nations children, 38% had parents/guardians who were "dissatisfied" or "very dissatisfied" with their finances. Similarly, dissatisfaction with housing was over twice as high for those living in low-income families than for those not in low-income families (22% versus 9%). In the same report almost one-third (31%) of Métis children under age six were living in low-income families, compared with 18% of non-Aboriginal children. The percentage of Métis children in low-income families was higher in urban than rural areas, at 36% compared to 20%. About 36% of Métis children living in low-income families had parents/guardians who reported that they were "dissatisfied" or "very dissatisfied" with their finances. Those living in low-income families were also three times as likely to be "dissatisfied" or "very dissatisfied" with their housing situation, at 19% compared to 6%.[lxxxiii]

Alberta

The Province of Alberta has put into place a strategy to end homelessness. Provincially, homelessness falls under the Human Services department. In 2008, in cooperation with the Premier's office, the province announced its Plan for Alberta: Ending Homelessness in 10 Years (Alberta's Plan).The implementation of the plan was to be overseen by a newly created Alberta Secretariat for Action on Homelessness. Developed in consultation with the seven largest cities in the province, the plan was informed by successes and challenges identified by other regional 10 year plans.

Alberta's Plan includes 17 strategies based on seven guiding principles. The majority of these strategies are concerned with improving management of and access to provincially operated systems, as well as providing the necessary supports for localized regional plans.

One unique element of Alberta's Plan is that it identifies eight barriers or causes of homelessness including:[lxxxiv]

- household income not keeping pace with the cost of living;
- high rates of in-migration;
- shortage of affordable housing;
- societal attitudes creating housing challenges;
- homeless-serving agencies under strain;
- lack of coordination in mainstream systems;

- groups with special situations requiring particular attention; and
- regulatory complexity and inefficiency.

The strategies outlined in Alberta's Plan are aimed at alleviating these specific challenges, and the guiding principles describe the spirit in which activities should be undertaken. It is interesting to note that within the Alberta Plan, Aboriginal people are not listed as a "group with special situations" nor are the specific issues they face in achieving housing described under the heading of "societal attitudes creating housing challenges." Despite the fact that Aboriginal people are the most over-represented segment of the homeless population in Alberta, any reference to "Aboriginal" appears in Alberta's Plan only once, further justifying the need for a complimentary, comprehensive plan specific to the needs of Alberta's Aboriginal population.

Calgary

Aboriginal Population Profile

The census metropolitan area of Calgary had an Aboriginal population of 26,575, the second largest Aboriginal population among cities in Alberta and the fifth largest among cities across Canada. Between 2001 and 2006, the overall Aboriginal population in Calgary grew by 26% in the following segments:

- First Nations increased by 15%
- Métis increased by 40%
- Inuit increased by 31%

Métis people form the largest group of Aboriginal citizens numbering 14,770 (56%); First Nations number 10,880 (41%); Inuit number 266 (1%); multiple or other Aboriginal backgrounds number 797 (3%). The median age for an Aboriginal person is 27 years, compared to age 36 for the non-Aboriginal population.

The Statistics Canada low-income cut-off (LICO) indicates that in 2005 almost 28% of Aboriginal people in Calgary were living under the LICO compared with 13% of non-Aboriginals.

Calgary's Point-in-time Count: Summer 2012

Point-in-time counts of people experiencing homelessness were conducted every two years by the City of Calgary from 1992-2008. During this time, homelessness increased on average by 32% every two years[lxxxv]. By 2008, the homeless population had grown to approximately 3,600 people[lxxxvi]. The CHF took over leading the point-in-time counts when the 10 Year Plan was implemented. In 2012 the CHF led a winter count and a summer count. For both, more than 160 volunteers went out on Calgary's streets from 10 p.m. to 1 a.m. to do a street count and short survey with 'rough sleepers'. As well, demographics were collected from emergency shelters, short-term supportive housing programs, jails and hospitals. Winter numbers showed a decrease in homelessness of more than 11%[lxxxvii], on that date in January 2012, 3,190 homeless persons were enumerated. However, the summer count numbers were higher.

The 2012 summer count enumerated 3,576 homeless persons[lxxxviii]. Despite a stop in overall growth, there was an increase in the percentage of Aboriginal people who were homeless.

The following is a summary of results from the summer 2012 count regarding the Aboriginal homeless population.

- Number of homeless Aboriginal people: 753 (21% of 3,576 individuals counted)
- Aboriginal people in emergency shelters: 378 (22% of total in emergency shelters)
- Aboriginal people in short-term housing: 189 (14% of total in short-term housing)
- Aboriginal people in systems (jails and hospitals): 61 (32% of total in systems)
- Aboriginal people sleeping rough: 125 (38% of total people sleeping rough)

Characteristics of Homeless Aboriginal People in Calgary

The following demographics emerged in the 50 surveys conducted by ASCHH towards development of this Plan:[1]

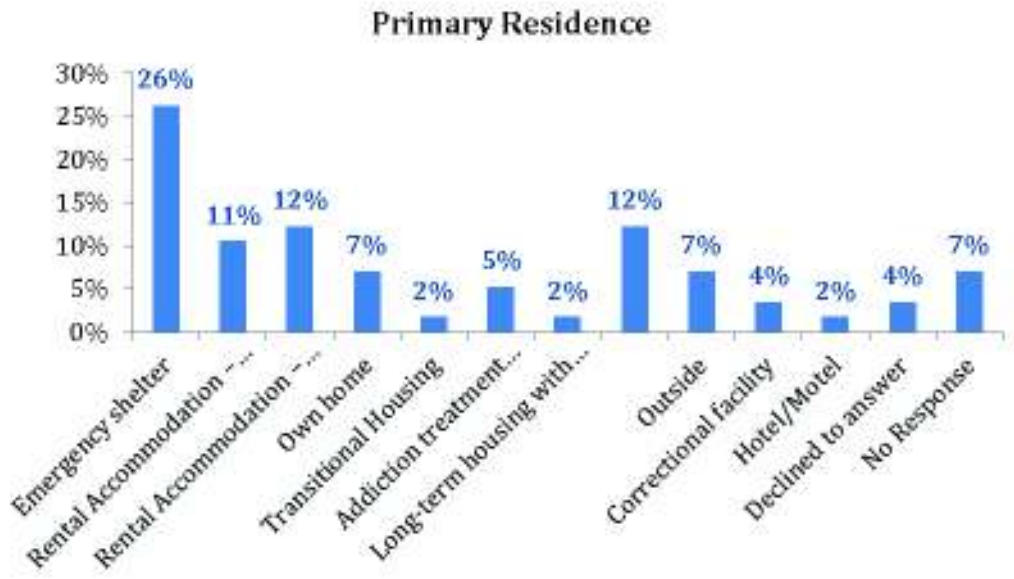
- 66% were male; 30% were female and 2% were two-spirited
- 36% were between the ages of 35-44, 18% were youth (aged 16-24) 14% were aged 45-54 and 14% were aged 55-64
- 70% were First Nations – Status,12% were First nations non-status and 14% were Metis
- 74% of First Nations were Treaty, 3% were non-treaty, 20% were Bill C-31 and 3% did not know
- 64% said they did not come from a reserve community while 32% did
- 26% were Treaty 7, 8% were Treaty 6 and 8, 22% were from Saskatchewan, 10% were from Manitoba and 10% were from British Columbia
- 48% were single, 14% were part of a couple, 22% were the non-head of household in a two-parent family with children, and 4% were primary head of household
- 56% reported having no dependent children, 28% had one or two dependent children, 8% had three or four children, and 2% had five or more children

The survey also provided insight into the following different areas:

Homelessness history

- 26% primarily used emergency shelters and 7% stayed primarily outside
- 12% were couch surfing
- 2% were in short-term housing
- 32% were currently housed

[1] NOTE: percentages will not add up to 100% as not everyone answered every question.

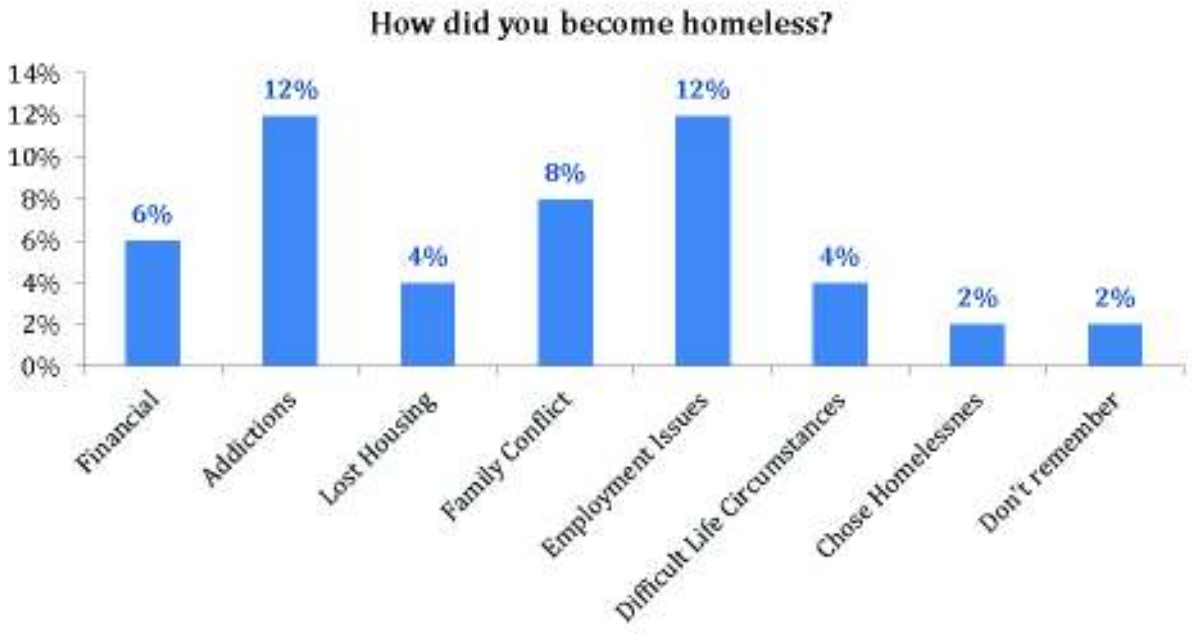


Migration to Calgary

- 42% were born in Calgary or had been living here for at least five years
- 16% had been here for one to four years and 14% has been here for less than one year
- 28% came to Calgary looking for work, 28% came because they had family or knew someone here, and 6% came here for education or training
- 10% had been homeless more than 10 times in their lives and 20% had been homeless for five years or more

Reasons for homelessness

- 12% reported that an addiction was the reason
- 12% said it was due to job loss
- 12% said it was due to family conflict or difficult life circumstances
- 6% said it was due to poverty
- 4% said they had lost their housing



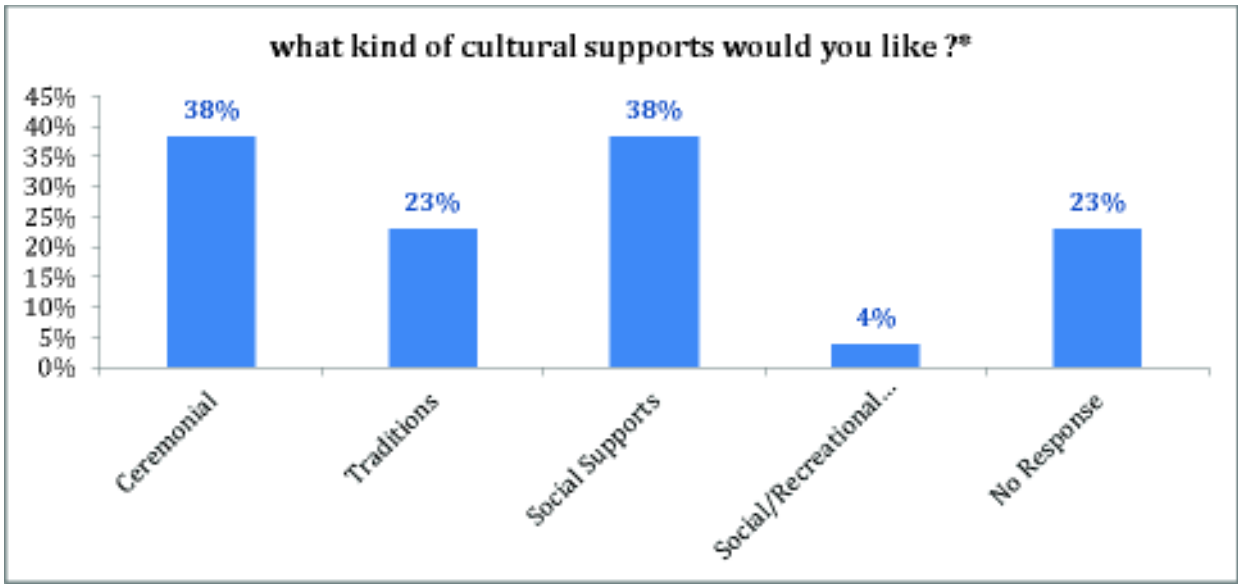
Mainstream services

(48% of people did not respond to the questions specific to service usage, of those that did):

- 4% had accessed detox or addiction treatment
- 4% housing programs
- 8% had accessed multiple programs
- 8% said none of the supports were helpful

Cultural supports

- 4% had accessed cultural supports
- 52% said they were interested in accessing cultural supports
- 38% wished to access ceremonies
- 38% wished for social supports
- 23% would like to be involved in their particular community's traditional practices
- 11% felt they were not ready to access cultural supports
- 22% said they did not want to
- 11% felt cultural supports hadn't helped in the past



*Answers are not mutually exclusive

Vulnerability and systems usage

- 20% reported a chronic physical health condition
- 18% reported a chronic mental health condition
- 44% reported an active addiction
- 26% had been released form a correctional facility in the last 12 months
- 14% had been in a residential treatment facility
- 2% had been released from a mental health facility

Several considerations emerge, first while the majority of people had Treaty Status, 42% or almost half of the people who responded were from outside Alberta. Very few people reported having accessed services while being homeless. Even fewer (4%) reported having accessed cultural support, although 52% said they would like too.

Clearly, solutions to adequately support people must be designed to meet their varying and diverse experiences, wishes and needs.

The ASCHH Plan to End Aboriginal Homelessness in Calgary

WHAT DOES ENDING HOMELESSNESS FOR ABORIGINAL PEOPLE IN CALGARY LOOK LIKE?

- ✓ A comprehensive culturally and socially-relevant Aboriginal Housing Strategy shall be implemented.
- ✓ An Aboriginal person needing to access emergency shelters and/or outreach services will be able to do so without danger or threat of being treated as unworthy of receiving services because they are Aboriginal.
- ✓ Emergency service providers will have received Aboriginal cultural sensitivity training and/or relevant Aboriginal awareness training.
- ✓ There will be a reduction in the number of Aboriginal people entering the homelessness system.
- ✓ There will be a reduction in the overall numbers and relative percentage of Aboriginal homeless youth.
- ✓ Aboriginal people who are at risk of homelessness or who have experienced homelessness are able to be safe, thrive and maintain permanency in independent living situations or have a positive and sustainable family home.
- ✓ The unique needs of street-involved Aboriginal individuals shall be addressed using a harm reduction approach that meets the cultural and emotional needs of this population.
- ✓ The Aboriginal homeless population will be provided services by other properly trained and qualified Aboriginal people.

How will an end to Aboriginal Homelessness be demonstrated and achieved in the Plan?

To ensure that ASCHH meet their primary goal of ending homelessness for Aboriginal people, an absolute measure for obtaining that goal is required. It is important to note that the ASCHH measurements are aligned with Calgary's 10 Year Plan and Calgary's Plan to End Youth Homelessness.

- By January 29, 2018 reduce the average stay in an emergency shelter to less than seven days. By that point, any person in emergency shelter will move into stable, safe and appropriate homes.[lxxxix]
- By 2018, Aboriginal homeless people will not be overrepresented in the homeless population.

ASCHH Themes

- Cultural competencies and continuity
- Rental supports programming
- Existing organizations
- Data research and systems knowledge
- Institutional issues
- Aboriginal inclusion
- Epi-centre Concept or urban support center

FIVE STRATEGIES

The ASCHH Plan to End Aboriginal Homelessness incorporates the four strategies outlined in Calgary's 10 Year Plan to End Homelessness and clarified in the Plan to End Youth Homelessness (Strategy One to Four). A fifth Strategy specific to the Aboriginal community is added.

Strategy One: Prevention and Re-housing
Build a coordinated system to prevent and end Aboriginal Homelessness in Calgary.

Strategy Two: Housing
Develop an adequate number of housing units and supportive homes dedicated to Aboriginal people at-risk of or experiencing homelessness.

Strategy Three: Data and Research
Improve data and systems knowledge and influence public policy regarding the Aboriginal population.

Strategy Four: Non-Profit Sector
Work with the non-profit sector to develop, implement, assess and deliver culturally appropriate services to Aboriginal peoples experiencing or at-risk of homelessness.

Strategy Five: Outreach and Street-Involved Populations
Introduce new approaches that improve success rates for outreach programs working with Aboriginal street-involved populations.

Strategy One: Prevention and Re-housing

Build a coordinated system to prevent and end Aboriginal Homelessness in Calgary.

Goal 1.0 Creation of the Plan to End Aboriginal Homelessness in Calgary

A formal partnership and working relationship between the Calgary Homeless Foundation and the Aboriginal Standing Committee on Housing and Homelessness was created. The CHF has provided funding support and advice to ASCHH during the creation of Calgary's Aboriginal Plan.

As part of the process, Aboriginal community members were invited to attend open call consultations (Community gatherings), a series of focus groups and/or individual discussions. The information these participants shared provided the wealth of information contained in this Plan.

In keeping with primary recommendations regarding the Aboriginal community, any significant revision in strategy will be guided by further consultation and/or ongoing discussion with the target population and relevant service providers. This includes discussions around implementation of the Plan, program and policy development, service provision and resource development.

Outcome 1.0: The Plan to End Aboriginal Homelessness in Calgary will be published and implemented.

Goal 1.1: Prevention of Aboriginal Homelessness

Build system initiatives to prevent Aboriginal homelessness and "establish safe, culturally appropriate outreach and engagement, as well as safe, culturally appropriate discharge plans from public systems."[xc]

Preventing Aboriginal homelessness starts with the identification of pathways into homelessness, discovering interception points (where possible), developing culturally-relative tools to measure needs, and providing appropriate referrals and provision of services. The following elements are key to a prevention system.

A. **Pathways into Aboriginal homelessness**

As identified in the *Plan to End Youth Homelessness in Calgary* "the first step in preventing homelessness is to understand the pathways [people] follow into homelessness." In shelters and homeless programs we see, repeatedly and consistently, Aboriginal people who have:

- a history of family disruption and/or violence (domestic and/or in community);
- experienced multiple traumas in their life (residential school, violence, loss);
- substance abuse (themselves and/or immediate family members);
- high levels of interaction with the criminal justice system, child and youth services, and medical services; and
- high rates of intergenerational poverty and low-level engagement with the education system.

B. **Determine interception points (where possible)**

By working with social service providers, education, criminal justice system, community resource centers, cultural resources and Aboriginal service agencies, more consistent, relevant information can be provided to people seeking to access homeless prevention services. Given this, existing organizations and agencies that provide housing to homeless and near-homeless Aboriginal people should be expanded and supported.

C. **Culturally relative tools to measure needs**

Develop an assessment procedure that takes into account the longstanding and intergenerational effects of residential school trauma, colonization, and complicated grieving processes. This measuring tool will better serve those being assessed in that service providers will have a better understanding of actual needs

D. **Appropriate referral**

Service delivery for the Aboriginal population is often tied to various legal definitions and identifiers. Streamlining the referral process would prevent unnecessary delays in service provision and potentially prevent incidences of homelessness.

E. **Appropriate provision of services**

Working to ensure services are appropriate to Aboriginal people will increase their involvement in their journey/path of healing. Here are some culturally and socially-relevant examples.

- Aboriginal people who attended residential school may be undereducated relative to the number of years they attended and would require assistance with reading, writing and form completion.
- Individuals may be taking life skills and/or upgrading programs when what they really need is counseling supports relative to trauma, co-dependency and/or complex grieving.
- A harm reduction approach that does not remove the individual from their living environment or force them to immediately abstain from drugs and/or alcohol may be more effective than enrolling that person in a treatment center outside of their comfort zone or in recognizing the challenges an individual faces when they "successfully" graduate from an off-site treatment program (and return to their former environment).

F. **Establish safe, culturally appropriate discharge plans**

Work to ensure that no Aboriginal person is discharged in homelessness or unsafe housing. Service providers must develop relevant, culturally sensitive discharge plans from correctional services, child and youth services and Alberta Health Services.

One of the recommendations of ASCHH suggests is to develop an Aboriginal transition/halfway house/group home for Aboriginal youth leaving institutions.[xci] Another recommendation is the creation of an epi-centre or transition house, a model similar to the Thunderbird House in Winnipeg, that supports Aboriginal people transitioning out of institutions and/or between urban and reserve environments.

G. **Ensure that no Aboriginal person is living on or below the low-income poverty line (LICO)**

Statistics Canada uses the concept of low-income cut-off (LICO) to indicate an income threshold below which a family will likely devote a larger share of its income on the necessities of food, shelter and clothing than the average family. In 2005, in Calgary almost three in 10 (28%) Aboriginal people were living under the LICO compared with 13% of non-Aboriginal people. In addition, 37% of Aboriginal children aged 14 years and under in Calgary were living under the LICO compared with 16% of non-Aboriginal children. This set of data is based on the before-tax LICO.

Outcome 1.1: In creating homelessness prevention and rehousing programs, Aboriginal individuals and/or families living on or below LICO should be a main target group for receiving services and holistic supports.

Goal 1.2: Development of appropriate assessment tools relevant to the Aboriginal community

A. **Assessment**

Assessment tools need to capture a true representation of need based on criteria relevant to the Aboriginal experience. Centralized intake system should ensure that Aboriginal identification is captured and utilized.[xcii]

Discussions with service providers gave insights into current assessment tools and existing gaps.

a) There is a concern that Aboriginal individual have been assessed and not identified as priority when, in fact, these are the individuals who fall through the cracks. Appropriate assessment considers the:
   - overall safety and stability of existing housing environment:
   - influence and presence of extended family; and
   - effects of intergenerational trauma on life skills and, capacity to retain housing.

   Outreach workers shared that when other lines of questions are included the test becomes skewed to the needs of a largely Aboriginal audience. The possibility remains to develop a separate assessment tool specific to the Aboriginal community that will capture issues such as mental illness due to trauma, depression and 'residential school syndrome.'

   Within addictions measurements, there are frequently subsequent assessments. It may be beneficial to develop or utilize assessment tools for mental health and wellness, conditions of which are remarkably consistent with Aboriginal peoples and those who have experienced major or consistent trauma in their lives.

Outcome 1.2: Assessment tools that reflect the unique needs and experiences of Aboriginal people will be developed and utilized by service providers.

Goal 1.3: Implement and expand Housing First programs with strong cultural reconnect and cultural continuity components[xciii]

Cultural reconnection, introduction to cultural components or cultural continuity, as well as maintaining ties to home communities and cultural distinctions is identified as strong protective factors in dealing with homelessness and/or at-risk behaviors. Access to cultural activities, ceremony, Aboriginal Elders and other Aboriginal-specific programs within an urban environment helps to mitigate the sociological and socio-economic challenges that many Aboriginal people face.

Organizations with a directed mandate to serve Aboriginal people tend to provide a broader range of services that address all aspects of wellbeing, not just housing. In addition to offering basic housing services, they provide food donations, medical services, life skills, clothing, employment assistance and cultural supports. Relationships with clients are the foundation of their care. This approach is rooted in the belief that Aboriginal homelessness is multifaceted and complex in nature, and not simply just about a lack of shelter.[xciv]

While the Housing First concept addresses the physical and environmental needs of individuals and/or families, the unique sociological, cultural, spiritual and emotional needs of Aboriginal people must be factored into any housing first approach.

A. **Inclusion**

   Include Elders and Aboriginal resource persons in the planning of any Housing First approach and include Aboriginal resource persons in the implementation and delivery of Housing First programs.

B. **Cultural components**

Have Aboriginal planners assist with the development of appropriate and culturally relevant content and approaches specific to each organization.

C. **Cultural reconnection**

A deep understanding of Aboriginal culture and continuity involves acknowledging and integrating cultural customs for each background (e.g. Inuit as opposed to Métis). Programming for cultural reconnection includes ceremony, arts, traditional teachings, imagery, and availability or access to First Nations, Métis or Inuit Elders.

Outcome 1.3: Aboriginal cultural components and approaches are integrated into any Housing First program; Aboriginal planners and community are included in the planning and delivery of housing programs that affect Aboriginal people.

Goal 1.4: Advocacy services that recognize realities of Aboriginal family structure, extended family expectations, rental agencies and private landlords

A. **Recognition of needs**

Recognize the needs of increasing numbers of Aboriginal families moving from rural and reserve communities to Calgary and becoming homeless.

B. **Home life**

Recognize differences in child rearing and shared accommodation with grandparents or relatives.

C. **Education for landlords**

Agency staff provide advocacy for Aboriginal families/individuals and education to landlords regarding extended family occurrences and expectations.

Outcome 1.4: Aboriginal families and individuals are provided culturally and socially appropriate advocacy services that recognizes the cultural and social expectations regarding extended family.

Strategy Two: Housing and Support Strategy

Develop an adequate number of housing units and supportive homes dedicated to Aboriginal people at risk of or experiencing homelessness.

Goal 2.0: A specified percentage of housing units be established or reserved for Aboriginal individuals and families exclusively

To address the challenges of finding safe, stable and long-term housing, the ASCHH supports the following goals:

- Affordable home ownership program
- Private sector affordable rental program
- Specialized and single room occupancy housing;
- Developing of 11,250 new units of affordable housing including 1,200 supportive housing unit and treatment beds

- Providing subsidies and support services that would allow Aboriginal people to obtain, retain and maintain safe and culturally appropriate housing

However, in this support, the ASCHH advocates that an established percentage of these units be reserved for Aboriginal individuals and/or family units exclusively.

In order for the overall success of home ownership and rental programs to become reality, the root causes of poverty must be understood. For Aboriginal people, socio-economic marginalization is a result of the multigenerational policies of the Indian Act and residential schools.[xcv] In addition to the complexity of social and mental health supports, any sustainable housing program must be supported by greater access to education, employment, training initiatives and mentoring programs for the Aboriginal community specifically, ensuring that cultural needs are integrated to retain workers and nurture success. This implies that specialized partnerships and agreements must be developed with education and training institutes, industry, private sector and employment agencies

Outcome 2.0: Aboriginal individuals and families are provided the opportunity for affordable home ownership, access to rental programs, and appropriate supportive housing and treatment beds.

Goal 2.1: Develop an Aboriginal housing support strategy

There is an increasing number of Aboriginal homeless as a result of societal changes and years of policy shifts that have limited growth and, in some cases, reduced housing supply and available income for vulnerable populations.[xcvi]

The Aboriginal perspective must be represented in the development and review of Calgary housing programs. There is a need for programs designed for Aboriginal people to be culturally, socially and economically adapted to more accurately reflect the needs of this population.

A. **Jurisdiction**

Articulate policy areas to end Aboriginal homelessness, addressing jurisdictional gaps

B. **ASCHH inclusion**

Include the ASCHH in the development of any housing program or strategy that directly affects Aboriginal people in Calgary.

C. **CHF Board representation**

ASCHH recommends that the CHF include two Aboriginal positions on its Board; one on-reserve Member and one urban Member to ensure a competent voice.

D. **Funders**

Acknowledge the influence of funders on programming, grant-basis, short time frames, limited flexibility to respond to emergent issues, instability of funding, and possible changed funder priorities that force program content revisions.

- To address an overall revision in funding requirements and criteria, industry and sector level advocacy and lobbying on behalf of Aboriginal organizations and people regarding housing and homelessness initiatives is required to the Ministerial level.

- Provincial government may need to consider establishing an Aboriginal-specific funding process to align with existing federal initiatives.

E. **Best practice framework**

Any Aboriginal housing strategy must include the following components (best practice (framework):[xcvii]

- Cultural competency and safety
- Partnership and relationships between agencies
- Supported Aboriginal governance and coordination of services
- Adequate and equitable funding for Aboriginal specific services
- Ongoing research and evaluation to better respond to needs
- Increased number of Aboriginal staff
- Cultural reconnections
- Outreach and cultural services

F. **Prevention**

Outcome 2.1: The development of a socially and culturally relevant housing support strategy utilizing a holistic approach that considers the socio-economic and sociological experiences of the Aboriginal community, extended family units, root causes of homelessness, needs of at-risk and vulnerable populations and related factors.

Goal 2.2: Pilot Aboriginal Housing First program staffed by trained and qualified Aboriginal people[xcviii]

A. **Organizational supports and stakeholders**

Development and investment in an Aboriginal-specific Housing First program should be supported by the CHF, relevant agencies, stakeholders and governments. The ASCHH, the Aboriginal community and target populations must be involved at every stage of development in order for programming to be effective.

B. **Aboriginal staffing**

Refer to Goal 4.2 regarding an increase in Aboriginal staffing levels. Employ more Aboriginal front-line workers and managers in programs that work with Aboriginal homeless and at-risk populations.

C. **Appropriate social supports**

Ensure that any Housing First programming and policies provide appropriate social supports for Aboriginal clients. Clients tend to have to be re-housed multiple times because root causes of homelessness and required social supports are not considered in housing stability.

D. **Best practices framework**

Refer to Goal 2.0 (e). Any Housing First program must include components of the best practices framework, specifically “increasing the number of Aboriginal staff working with the homeless population. The number of staff must meet the proportion of the population of

Aboriginal homeless peoples and training must be accessible to ensure a qualified Aboriginal workforce to work in the homelessness and housing field.

Appropriate evaluation

Ongoing research and comprehensive evaluation is required to better understand best practices for ending Aboriginal homelessness

Outcome 2.2: The development of an Aboriginal-specific Housing First program meeting identified needs; relevant training of Aboriginal staff to improve access and build sustainable and long-term relationships with clients.

Goal 2.3: Ongoing, long-term and sustainable development of affordable housing options with support appropriate for the vulnerable Aboriginal population[xcix]

A. **Permanent housing and supports**

Permanent housing and supports is a component of the homelessness system for people who have been deemed unable to fully transition into independence. Most individuals will be able to transition into healthy independence and live outside of the homelessness system. A minority of Aboriginal people, however, may be unable to fully transition into independence due to mental health, disability and/or addictions issues. This kind of housing can include: place-based or dispersed housing models, or long-term housing without a time limit for persons experiencing deep disabilities.

While support services are offered and made readily available, the programs do not require participation in these services to remain in the housing. Once in housing, a low demand approach to services is provided to assist clients.

B. **Affordable housing**

Affordable housing is an integral system component dedicated to ensuring that Aboriginal people are not precariously housed due to inappropriately high rents.

C. **Transitional housing and supports**

This program targets Aboriginal people who will eventually have the ability to live independently. Transitional supports are short-term but times are set according to each person's needs.

D. **Rapid re-housing**

In this case, rapid re-housing is an intervention approach that targets primarily Aboriginal women and single mothers and children who are escaping domestic violence (staying in emergency shelter or sleeping outside) for the first time. This is (usually within their first three weeks of the experience, per program limitations, in order to prevent further domestic violence and/or street entrenchment. Services are intended to ensure women and/or women with families are re-housed and safe from domestic violence.

Outcome 2.3: Ongoing and long-term sustainable development of affordable housing options for vulnerable and at-risk Aboriginal populations have a greater chance of reducing homelessness for the long term.

Strategy Three: Data and Research

There is a general lack on information relative to pathways, particularly, pathways out of homelessness for Aboriginal people and a general lack of information on the following Aboriginal populations: youth, seniors, veterans, Métis and GLBTT. Very little is written to specifically include these audiences in the literature reviewed, let alone a treatise on any of them.

There is also a general lack of research data on the effect of migration patterns between reserves and/or settlements and urban centers.

Improve data and systems knowledge and influence public policy regarding the Aboriginal population.

Goal 3.0: Data research and systems knowledge through support from CHF

In order to develop more effective, timely and culturally/socially relevant supports for the Aboriginal homeless, collection of real-time information must be established. This information should focus on (but not be limited to):

- lengths of time an Aboriginal person or family is homeless;
- recidivism rates;
- specific needs and circumstances;
- root causes;
- how people are interacting with established systems of care and programs;
- how effective are interventions and cross-cultural collaborations/referrals; and
- specific demographic and biographical information.

Outcome 3.0: More effective responses to the Aboriginal homeless and at-risk populations resulting in an overall decrease in homelessness and recidivism.

Goal 3.1: Consultation with Aboriginal organizations and agencies in the implementation of the Calgary Homeless Management Information System (HMIS)[c]

It is stated consistently throughout this report that Aboriginal organizations, target populations, Elders and individuals must be involved in every aspect of planning and development on a strategy that directly affects the Aboriginal population in order to accepted and effective.

A. **ASCHH representation**

The ASCHH is recognized as the representative organization in Calgary in dealing with Aboriginal homelessness and will act as the mediator and point of contact in the implementation of the HMIS system.

Policy development

Policy development reflects the requirements of the Structural Determinants.

Outcome 3.1: Aboriginal involvement in the implementation of HMIS ensures the unique needs and perspectives of the Aboriginal community and population is met.

Goal 3.2: Provide real-time data and analysis of trends and needs of Aboriginal Peoples using HMIS.

Analysis of HMIS data will provide better insights into Aboriginal homelessness, including: demographics and, migration patterns.

A. **Involve Aboriginal stakeholders**

ASCHH will ensure that analysis and interpretation regarding Aboriginal homeless and at-risk populations is conducted with the involvement of relevant Aboriginal stakeholders (e.g. target audience, service providers, agencies, Elders, experts, etc.).

ASCHH will ensure that emerging insights and recommendations are developed with the involvement of Aboriginal stakeholders.

Outcome 3.2: Ongoing analysis and interpretation of real-time needs ensure targeted strategies and priorities are developed and revised accordingly for the Aboriginal homeless and at-risk population.

Strategy Four: Non-Profit Sector

Work with non-profit sector to develop, implement, assess and deliver culturally appropriate services to Aboriginal peoples experiencing or are at risk of homelessness.

Cultural continuity is widely considered the cornerstone of addressing the needs of urban Aboriginal homeless people. Cultural safety in policies, procedures and practices is foundational to creation of best practices in Aboriginal homelessness services. In developing cultural safety, partnerships with Aboriginal organizations within and outside of the homelessness sector may be needed and resources are needed to build the relationships that partnerships require. Aboriginal specific funding envelopes can be used more effectively where they exist and can build in partnership development and capacity development within the Aboriginal community where needed.ci

Goal 4.0 Cultural competencies and continuity

Discussions with service providers showed a need to provide comprehensive current and socially/culturally relevant Aboriginal awareness training. The key is to develop modular training to fit into one hour, two hour and half day modules.

A. **Awareness training**

Develop comprehensive Aboriginal awareness training for homeless sector service providers. With the guidance of the ASCHH, the CHF will develop comprehensive Aboriginal awareness training with a specific focus on Aboriginal homelessness to be made available to relevant service providers on an annual basis.

B. **Cross-cultural training**

Enhance cross-cultural training for non-profit agencies and advocate for better public system capacity to meet culturally specific needs of Aboriginal peoples.

C. **Sensitivity training**

Provide sensitivity training for shelter staff to prevent prejudicial behaviors towards GLBTT Aboriginal populations.

D. **Educational campaign**

Initiate an educational campaign to the general public about the Aboriginal population and Aboriginal homelessness.

E. **Elders Advisory Council**

Develop a regular and supported Elders Advisory Council to bridge the gap between community, research and service providers, and to provide guidance and recommendations on issues of housing, culture, substance abuse, policy development, etc.[cii]

Outcome 4.0: Enhanced education and training about Aboriginal people, homelessness, intergenerational causes and complex realities to organizations, front-line workers and the general public will promote greater understanding and willingness to work in collaboration to combat homelessness.

Goal 4.1: An understanding of "Aboriginal" status affecting coordination of services

A. **Jurisdiction issues and Aboriginal status**

Only "Status Indians" are covered under the Indian Act. Métis, non-Status, Bill C-31 and Inuit people do not fall under the Act. Jurisdiction and status establishes which level of funding is available to that individual or family. Regulated government supports may include access to medical, housing, education, social assistance, training or employment supports.

It is important for any organization working with the Aboriginal population to fully understand the rights inherent to different Aboriginal populations, as this may limit or expand specific supports and assistance available to individuals.

Jurisdictional "buck passing" continues to a problem for Métis, non-Status and Bill C-31 individuals who are in a jurisdictional vacuum with respect to which level of government is responsible for addressing their needs. In addition, Status Indians who move off-reserve to Calgary sometimes find they lose supported housing back home, making it difficult to make the transition or to move back if necessary.[ciii]

It is important to fully understand the specific government policies regarding rights and how jurisdiction creates challenges in the coordination of service delivery.

B. **Discharge plans**

Establish safe, culturally and socially appropriate discharge plans from institutions through an awareness and education campaign targeted to managers, service providers and agencies who work with at-risk Aboriginal populations.

Outcome 4.1: Development of teaching module to assist organizations working with Aboriginal people of the political differences of status and rights inherent between First Nations, Inuit, Métis and Bill C-31 individuals; advocacy and education for appropriate discharge from institutions.

Goal 4.2: Increase in Aboriginal Staff

An increased number of Aboriginal staff, front-line workers, advisory and management roles is considered critical to increasing access, successful participation and retention of Aboriginal clients in housing or support programs, regardless of the level of need or emergency.

A. **Appropriate staff levels**

Number of Aboriginal staff must be in direct proportion to the population of Aboriginal homeless people

B. **Accessible and supported training of Aboriginal staff**

Training must be accessible by Aboriginal people to ensure a qualified workforce. This may include developing appropriate partnerships with colleges and training facilities to obtain proper training.

Outcome 4.2: An increase in competent and trained Aboriginal staff, front-line workers and managers in programs that work directly with Aboriginal homeless and at-risk populations.

Strategy Five: Outreach and Street-Involved Populations

Introduce new approaches that improve success rates for outreach programs and in working with Aboriginal street-involved populations, particularly those who are highly vulnerable and typically fall through the gaps.

Goal 5.0: Develop a regional housing and harm reduction policy framework that takes into account existing strategies and responds to real needs within the Aboriginal population

For individuals who have severe and chronic addictions, the provision of stable housing plays a role in managing and decreasing addictions and substance use. It is found that a 'harm reduction' approach is more effective than simply attempting to eliminate drug and substance use or to change a person's living environment (e.g. treatment facility). Effective harm reduction strategies will emerge only with the full engagement of representatives of the Aboriginal community and the population being served. Development of an Aboriginal Housing Support Strategy (refer to Goal 2.1) is an appropriate beginning.

Social support is critical to positive mental health (e.g. number of social relationships, frequency of contact, diversity of supports) and is a pathway through which relationships and privacy is enacted. A lack of social support is a risk factor for mental illness and poor health among the homeless which, in turn, disrupts social networks and leads to social exclusion.[civ]

The central premise of this framework is that access to appropriate housing is a fundamental need and a human right, and therefore, a range of low barrier housing options should be available to meet the diverse needs of the individuals and families needing homes.

A. **Collaboration between existing agencies**

Work in collaboration with existing agencies to enhance Housing First, harm reduction facilities and programs that minimize addiction issues while providing housing supports to street-involved Aboriginal individuals.

B. **Client-centered approach**

Services to homeless residents with mental illness and addictions are most effectively delivered in a context of services adapted to client needs, rather than organized around efficiencies or expertise in service delivery, and require a client-centered approach, low barrier programs and a harm reduction policy.

C. **Low barrier programs**

Programs that do not require clients to be abstinent or in treatment are shown to be more effective as it motivates the person to begin making changes, to retain them in treatment, and minimize attrition and drop-out rates.

D. **Harm reduction**

The reduction of risks and harmful effects associated with substance use and addictive behaviours not only assists the affected person but has a positive impact on urban neighbourhoods where street-level substance use problems are concentrated. Examples are discussed in “A Harm Reduction Approach,”

E. **Housing First**

This is an approach to housing where homeless residents are provided immediate access to a place of their own without requiring treatment or sobriety as a precondition for housing. Residents are supported with treatment options for their recovery and integration into the community.

F. **Emergency housing and safe preventive housing**

Available emergency housing and safe preventive housing availability options for at-risk Aboriginal families and individuals that are not necessarily targeted only to women and children; this includes the elderly, men and youth.

G. **Emphasis on choice**

Client-centered strategies that cater to various subpopulations, each with its own unique needs and challenges, demonstrate higher success rates for recovery and community integration. A one-size-fits-all approach has proven to be unsuccessful.

Outcomes 5.0: There is an increase in self-care, risk management, access to and participation in appropriate treatments, reintegration, and social return on investment (public expenses reduced). The spread of disease (e.g. HIV, hepatitis) is limited and environments improve.

Specific housing projects are supported and developed to address needs of Aboriginal youth, women and at-risk populations. Partnerships and effective working relationships between organizations who provide housing to specific sub-populations are established.

Goal 5.1: Establish safe, culturally appropriate outreach and engagement with street-involved and targeted Aboriginal populations

A. **Gay, lesbian, bisexual, transgendered, transsexual and two-spirited population (GLBTTT)**

- Provide awareness sessions with Elders and youth to teach traditional roles (including two-spirited) and personal validation.

- Provide HIV/AIDS prevention workshops as part of a "wellness" series offered by service providers in shelters so that people taking them don't get ostracized or pegged.
- Set up addiction recovery support groups themed (or at least open/friendly) to GLBTTT individuals (Al-Anon, Ala-Teen, Narcotics-Anonymous).
- Support groups open or friendly to GLBTTT for grief and loss, trauma and those fleeing violence.
- Sensitivity training for shelter staff to help prevent prejudicial behaviours.

B. **Aboriginal youth**

- Support the development of specialized outreach teams to provide support specifically to Aboriginal youth. Involve youth agencies or youth themselves in developing innovative approaches. Outreach can provide a basic assessment of the youth's readiness for intervention services and focus on engaging Aboriginal youth in accessing the shelter system and other outreach programs. The ultimate aim is to get Aboriginal youth out of homelessness as quickly as possible.

Outcome 5.1: Specialized approaches are developed that reflect the actual needs of targeted Aboriginal populations without a blanket approach.

Goal 5.2: Comprehensive training for Aboriginal front-line workers and managers in working with street-involved and entrenched homeless individuals specifically

A. **Appropriate training and staffing**

Specific training must be provided for staff in working with Aboriginal entrenched homeless individuals. Refer to Goal 4.2.

Outcome 5.2: Greater understanding of the unique challenges of street-involved and entrenched homeless individuals ensures a retention of workers and client participation.

Definitions

Aboriginal	Canadian Constitution (1982) referring to individuals of First Nations, Métis or Inuit descent
Aboriginal homelessness	Self-identifying Aboriginal persons (including First Nations, Métis and Inuit) of any age, situated as a single person or within a family who is lacking a permanent nighttime residence with appropriate cultural reconnection supports. This includes individuals 'precariously housed' within institutional settings such as jail, prison, and unstable, unsafe and/or inappropriate child intervention settings.
Absolute homelessness	Individuals living in the street with no physical shelter of their own, including those who spend their nights in emergency shelters
Access	The right to have access to information, data about yourselves and your Nation, wherever it is held. First Nations' communities and organizations have a right to manage and make decisions regarding access to their collective information.
Affordable housing	Housing units which are deemed accessible to people earning a living at or above the poverty line
Bill C-31	Individuals who obtain limited reinstatement of Indian "Status" and membership restored
Child	Individuals under age of 18 years; includes youth unless specifically stated otherwise (*Alberta Child, Youth & Family Enhancement Act*)
Chronically homeless	Have been homeless for a year or more, or have had at least four episodes of homelessness in the past three years; sleeping in a place not meant for human habitation (e.g. living in the streets) and/or in an emergency shelter
Control	Reflects the aspirations and inherent rights to regain control of all aspects of our lives including control of information. This control extends to all aspects of information management including resources, policy development and implementation, review processes, formulation of conceptual frameworks, data management, etc.
Couch-surfing	Frequently sleeping on friends' and/or family's couches on a regular or intermittent basis; moving from one household to another
Elder	Elder individual recognized by the community; keeper of cultural knowledge

Entrenched homeless	Chronically or 'hardcore' homeless individual
Episodically homeless	Several exits and returns to homelessness interspersed with periods of housing; unable to stay housed when there is a need to move and make a transition to housing without returning to homelessness.
First Nations	Refers to Indian peoples of Canada, both Status and non-Status
Harm reduction	A set of practical strategies with the goal of meeting people where they are at, to help them reduce harm associated with engaging in risky behavior; an approach which aims to provide or enhance the skills, knowledge, resources and support that people who use drugs need to be safer and healthier (*Street Works Calgary*).
Homeless	Considered to be those who do not have a permanent residence to which they can return whenever they choose
Housing adequacy	Housing that possesses basic plumbing, hot and cold running water, inside toilets and installed baths or showers; unit needs only regular maintenance or at most minor repairs; includes emergency shelters, transitional housing, social or subsidized housing, formal and informal rentals.
Housing First	Programs that place homeless people directly into permanent housing without the requirement for a transition period. Participation in support services is not required to remain in housing. Once in housing, a low demand approach accommodates a client suffering from alcohol and substance abuse so relapse will not result in client losing housing. Programs have a continued effort to provide case management and to hold housing for clients, even if they leave the program housing for short periods.
Housing suitability	A measure of housing that is crowded; number of persons per room; sensitive to both household size and composition
Indian Status	An individual's legal status as an Indian as defined by the *Indian Act*
Inuit	Aboriginal people who live in Nunavut, Northwest Territories, northern Quebec and northern Labrador
Métis	Individuals of mixed First Nation and European ancestry (e.g. Scottish, French)
Non-Status Indian	An Indian person who is not registered as an "Indian" under the *Indian Act*

Off-reserve	Term used to describe people, services or objects that are not part of a reserve but relate to First Nations
Ownership	Describes the relationship of the First Nation to its cultural knowledge, data and information in all forms. This information is owned collectively by the Nation as an individual owns their personal information. Ownership is distinct from possession as one can own something with the ability to exercise all the rights inherent with that ownership despite not holding possession.
Possession	Mechanism to assert and protect ownership. When First Nations data is in the possession of others (e.g. government, academia, etc.), there is often little to no control over management of data as a result of conflicting policy and legislation (Privacy Act, Statistics Act, Archives Act, Access to Information Act, etc).
Relative homelessness	People living in spaces that do not meet basic health and safety standards including protection from the elements, access to safe water and sanitation, security and personal safety, affordability, access to employment, education and health care, and provision of minimum space to avoid overcrowding.
Reserve	Tract of land, the legal title to which is held by the Crown, set apart for the use and benefit of an Indian band
Sleeping Rough	Sleeping outside
Status Indian	A person who is registered as an Indian under the *Indian Act*
Street involved	Individuals who are near homeless, homeless or under-housed; involved or experimenting and engaging in street-involved activities; identify with street culture and street peer groupings
Transitionally homeless	Short-term homelessness as a result of economic issues and housing costs
Treaty	Formal agreement regarding rights signed between the Crown and/or Canadian federal government with individual communities or treaty areas
Treaty Indian	A Status Indian who belongs to a First Nation that signed a treaty with the Crown
Youth	A child who is 16 years of age or older (*Youth, Child & Family Enhancement Act*)

Acknowledgements

Aboriginal Community Members

As of February 2011, the following organizations were members of the ASCHH Committee:

- Aboriginal Elders
- Aboriginal Friendship Centre of Calgary
- Awo Taan Healing Lodge
- Calgary Aboriginal Urban Affairs Committee
- Calgary Alpha House
- Calgary Homeless Foundation
- Calgary John Howard Society
- Calgary Métis Centre Society
- Calgary Métis Seniors
- Calgary Urban Aboriginal Initiatives
- Calgary Urban Project Society (CUPS) Health and Education Centres
- Canadian Mental Health Association, Calgary Region
- Canadian Red Cross
- Community Action Committee
- Community Futures Treaty Seven
- Community members
- Elbow River Healing Lodge AHS
- Elizabeth Fry Society of Calgary
- Fresh Start Recovery Centre, Keys to Recovery
- Homeless Awareness Calgary
- Inn from the Cold
- McMan Youth Family and Community Services Association
- Métis Calgary Family Services Society
- Native Addictions Service Society
- NeighbourLink Calgary
- Oxford House Foundation of Canada
- Servants Anonymous of Calgary
- Service Canada
- Siksika Nation Housing
- The Alex, Homebase & Pathways to Housing
- Treaty 7 Management Corporation
- Treaty 7 Urban Housing
- Tsuu T'ina Administration
- Tsuu T'ina Nihinasagha (Our House)
- Universal Rehabilitation Service Agency (URSA)
- University of Calgary
- YWCA of Calgary

ABORIGINAL STANDING COMMITTEE on housing and homelessness

Appendices

Appendix A: Community Survey A

Plan to End Aboriginal Homelessness: Community Survey (A)

Please consider the following definitions while completing this survey:
Homeless Persons: Homeless Persons are considered to be those who do not have a permanent residence to which they can return whenever they choose. This includes staying in shelters or with family/friends; living in vehicles; and/or in makeshift/temporary constructs.

Aboriginal Homelessness:

What we consider to be an End to Aboriginal Homelessness

1. Gender: Male Female Transgendered

2. Age:

☐ 16-18 ☐ 19-24 ☐ 25-29 ☐ 30-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65+

3. How do you self identify:

☐ Status Treaty ☐ Status nonTreaty ☐ Bill C-31 Status ☐ Métis ☐ Inuit ☐ non Aboriginal ☐ Other _____

4a. What brought you to Calgary?

☐ Born & Raised ☐ work ☐ education /training ☐ medical /treatment ☐ family ☐ knew someone ☐ justice system ☐Other _____

5a. Are you currently homeless? ☐ Yes ☐ No
If yes, please answer questions 5b-f . If no, go to question 6

5b. If yes, for how long?

☐ Under A week ☐ up to a week ☐ up to two weeks ☐ up to a month ☐ up to 3 months ☐ up to 6 months ☐ up to a year ☐ over a year

5c. Where did you last spend the night:

☐ Shelter ☐ family /friends ☐ street ☐ ☐ ☐ ☐ ☐ ☐

5d. In your opinion, what factor(s) contributed to your being homeless? (check off all that apply)

☐ Loss of Job ☐ no income /funding ☐ rent increased ☐ evicted ☐ not able to work ☐ no work available ☐ something happened ☐ can't afford costs on own

5e. Are you trying to make it back home? ☐ Yes ☐ No
If 'Yes', where is home _____ Please provide a contact _____
If 'No', please continue survey

5f. What would help you in your efforts to not be homeless? (check off all that apply)

☐ Affordable Housing ☐ training /education ☐ steady employment ☐ Addictions treatment ☐ medical coverage ☐ good roommate ☐ traditional Elder

5e. Please list agencies you know of that help homeless/at risk of being homeless Aboriginal people:

5f. Are there any challenges, to your knowledge, in being able to access these services?

6a. Have you previously been homeless? ☐ Yes ☐ No
If yes, please answer questions 6b, c and d. if no, go to question 7

6b. If yes, how many times?

☐ Once ☐ up to 3 times ☐ up to 5 times ☐ up to 10 times ☐ more than 10 times

6c. Please provide an estimate of how long you were previously homeless:

☐ Under A week	☐ up to a week	☐ up to two weeks	☐ up to a month	☐ up to 3 months	☐ up to 6 months	☐ up to a year	☐ over a year

6d. Where did you spend the majority of nights?

☐ Shelter	☐ family /friends	☐ street	☐	☐	☐	☐	☐

6e. if shelter(s), please list the top three you have stayed at:

_____ _____ _____

6f. What helped you to not be homeless?

7a. In your opinion, are you currently at risk of becoming homeless? ☐ Yes ☐ No
If yes, please answer questions 7b, c and d. if no, go to question 8

7b. In your opinion, what would help you to not become homeless?

7c. If you know of any agencies that currently offer that assistance please list them:

7d. In your opinion, are there any potential challenges to accessing that service? ☐ Yes ☐ No
If 'Yes', please list the challenge(s) if 'No', go to question 8

Would you like to be contacted when the study is released? ☐ Yes ☐ No
If 'Yes", please provide information below and thank you for completing our survey. If 'No', thank you for completing our survey.
Name: email: telephone:

ABORIGINAL STANDING COMMITTEE on housing and homelessness

Appendix B: Community Survey B

Plan to End Aboriginal Homelessness: Community Survey (B)

Please consider the following definitions while completing this survey:
Homeless Persons: Homeless Persons are considered to be those who do not have a permanent residence to which they can return whenever they choose. This includes staying in shelters or with family/friends; living in vehicles; and/or in makeshift/temporary constructs.

Aboriginal Homelessness:

What we consider to be an End to Aboriginal Homelessness

Please check the most appropriate response:

4. Gender: ☐ Male ☐ Female ☐ Transgendered

5. Age: ☐ 16-18 ☐ 19-24 ☐ 25-29 ☐ 30-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65+

6. How do you self identify:

☐ Status Treaty ☐ Status non-Treaty ☐ Bill C-31 Status ☐ Métis ☐ Inuit ☐ non Aboriginal ☐ Other _____

4a. What brought you to Calgary?

☐ Born & Raised ☐ Work ☐ Education /training ☐ Family ☐ Medical /treatment ☐ Knew someone ☐ Justice system ☐ Other _____

5a. Have you ever been homeless? Yes No
If yes, please answer questions 5b and c If no, go to question 6

5b. if yes, how many times?

☐ Once ☐ up to 3 times ☐ up to 5 times ☐ up to 10 times ☐ more than 10 times

5c. What organizations/programs were of assistance to you?

6. In your opinion, what situations can contribute to a person becoming homeless?

7. In your opinion, what challenges are there for a homeless Aboriginal person?

8. In your opinion, what programs/services can help an Aboriginal person not be homeless?

9. Please list any agencies you know of who currently offer those programs/services?

10. In your opinion, what supports does an Aboriginal homeless person need?

11. How can we bring an end Aboriginal Homelessness?

12. Who needs to be involved in our efforts to end Aboriginal Homelessness?

Would you like to be contacted when the plan is released? Yes No
If 'Yes", please provide information below and thank you for completing our survey.
Name: Email: Telephone:
If 'No', thank you for completing our survey.

Appendix C: Agency Survey

Plan to End Aboriginal Homelessness: Agency Survey

Please consider the following definitions while completing this survey:
Homeless Persons: Homeless Persons are considered to be those who do not have a permanent residence to which they can return whenever they choose.
This includes staying in shelters or with family/friends; living in vehicles; and/or in makeshift/temporary constructs.

Aboriginal Homelessness:

What we consider to be an End to Aboriginal Homelessness

Please check the most appropriate response:

1. Gender of clients: ☐ Male ☐ Female ☐ Transgendered ☐ Mixed

2. Age: ☐ 16-18 ☐ 19-24 ☐ 25-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65+ ☐ Mixed

3. Please provide an estimate of what percentage of people accessing your agency's services are Aboriginal:

☐ Negligible ☐ up to 5% ☐ up to 10% ☐ up to 1 in 5 ☐ up to 1 in 4 ☐ up to 1 in 3 ☐ up to half ☐over half

4. People accessing services with our agency have self identified as:

☐ Blackfoot ☐ Cree ☐ Ojibwe ☐ Métis ☐ Inuit ☐ Bill C-31 ☐ Other _____

5. What Aboriginal specific programs does your agency provide?

6. What Aboriginal specific training is required by your agency's staff?

10. What Aboriginal specific training is provided for your agency's staff?

11. What is the background/training of the Aboriginal Awareness training you most frequently access?

11. How can we bring an end Aboriginal Homelessness?

12. Who needs to be involved in our efforts to end Aboriginal Homelessness?

Thank you for completing our survey.

Appendix D: Community Consultations (Outline Questions)

Please note that ASCHH interviewers did not strictly follow these questions, or the order of the questions, as each focus group determined the general direction of the discussion/conversation.

These questions were compiled to guide the type of information that was collected at each community consultation.

Q1. What are the biggest barriers to ending an Aboriginal person's homelessness?

Q2. What are the biggest barriers to transitioning an Aboriginal person from the streets/shelter into permanent/supportive housing?

Q3. How do we prevent Aboriginal People from becoming homeless?

Q4. Who needs to be involved and what do we need to do to end Aboriginal Homelessness in Calgary?

Appendix E: OCAP

Ownership, Control, Access and Possession (OCAP)
Canadian Institute of Health Research Guidelines for
Health Research Involving Aboriginal People

OCAP articulates the First Nations ways of knowing about information and recognizes that everything is inter-related. OCAP places “community” at its core with the positioning of the individual in the context of community; meaning, when the focus is on the individual and community, effective cultural and socially relevant approaches, programs, planning, strategy and policy development are possible.

The principles of OCAP are aligned with the Canadian Institute of Health Research (CIHR) “Guidelines for Health Research Involving Aboriginal Peoples.”

Summary of Articles

Article 1
A researcher should understand and respect Aboriginal world views, including responsibilities to the people and culture that flow from being granted access to traditional or sacred knowledge. These should be incorporated into research agreements, to the extent possible. The first principle of these Guidelines is premised on a need for researchers to understand and respect Aboriginal worldviews, particularly when engaging in the sphere of traditional and sacred knowledge, and the corresponding responsibility that possession of such knowledge entails. Researchers should understand the broader senses of accountability in order to understand the responsibility they have when entering into a research relationship with Aboriginal people.

Article 2
A community's jurisdiction over the conduct of research should be understood and respected. This article should be read in the context of the discussion in Section 1.5, which addresses the application of this document. Some Aboriginal communities manage and control matters dealing with health. Where this is the case, a researcher should comply with any by-laws, policies, rules or procedures adopted by the community. For example, an Aboriginal community may have its own Research Ethics Board and/or community research protocols.

Article 3
Communities should be given the option of a participatory-research approach. Genuine research collaboration is developed between researchers and Aboriginal communities when it promotes partnership within a framework of mutual trust and cooperation. Participatory research enables a range of levels and types of community participation while ensuring shared power and decision-making. Such partnerships will help to ensure that research proceeds in a manner that is culturally sensitive, relevant, respectful, responsive, equitable and reciprocal, with regard to the understandings and benefits shared between the research partner(s) and Aboriginal community(ies).

Article 4
A researcher who proposes to carry out research that touches on traditional or sacred knowledge of an Aboriginal community, or on community members as Aboriginal people, should consult the

community leaders to obtain their consent before approaching community members individually. Once community consent has been obtained, the researcher will still need the free, prior and informed consent of the individual participants. A process to obtain the free, prior and informed consents from both the community affected and its individual participants should be undertaken sufficiently in advance of the proposed start of research activities and should take into account the community's own legitimate decision-making processes, regarding all the phases of planning, implementation, monitoring, assessment, evaluation and wind-up of a research project. The requirement for community consent is distinct from the obligation of researchers to obtain individual consent from research participants.

Article 5
Concerns of individual participants and their community regarding anonymity, privacy and confidentiality should be respected, and should be addressed in a research agreement.

The researcher, the individual participants and the community should have a clear prior understanding as to their expectations with regard to the anonymity of the community and of the individuals participating in the research project, and the extent to which research data and results will remain confidential to the researcher. If anonymity is not possible, or if there are necessary limitations to anonymity or confidentiality, these should be clearly communicated.

Article 6
The research agreement should, with the guidance of community knowledge holders, address the use of the community's cultural knowledge and sacred knowledge.

Article 7
Aboriginal people and their communities retain their inherent rights to any cultural knowledge, sacred knowledge, and cultural practices and traditions, which are shared with the researcher. The researcher should also support mechanisms for the protection of such knowledge, practices and traditions. Any research involving Aboriginal people will involve the sharing of some cultural knowledge, practices and/or traditions even when these are not the subjects of the study, as they provide necessary context. The recording of knowledge, practices and traditions in any form (written notes, audio, video, or otherwise) should only be done with explicit per- mission and under mutually-agreed terms that are set out in advance of the research with the guidance of appropriate Elders and knowledge holders. All uses and wider dissemination of cultural knowledge, practices and traditions should also be by permission.

Article 8
Community and individual concerns over, and claims to, intellectual property should be explicitly acknowledged and addressed in the negotiation with the community prior to starting the research project. Expectations regarding intellectual property rights of all parties involved in the research should be stated in the research agreement. Not all information and knowledge can be protected by existing intellectual property laws, given the strict eligibility criteria defining these legal rights. Understanding and communicating what does and does not qualify as intellectual property under current Canadian and international laws is the joint responsibility of the researcher and communities involved. Research with explicit commercial objectives and/or direct or indirect links to the commercial sector should be clearly communicated to all research partners.

Article 9
Research should be of benefit to the community as well as to the researcher. A research project should lead to outcomes that are beneficial to the participating Aboriginal community and/or

individual community members. Benefit sharing vis-à-vis a community should be interpreted from the community's perspective. This may include tangible and intangible benefits, including those arising from altruism.

Article 10
A researcher should support education and training of Aboriginal people in the community, including training in research methods and ethics. Researchers should work to foster capacity building among Aboriginal people to enhance their participation in research projects and improve the overall interactions between Aboriginal governance mechanisms and public educational institutions.

Article 11.1
A researcher has an obligation to learn about, and apply, Aboriginal cultural protocols relevant to the Aboriginal community involved in the research.

Article 11.2
A researcher should, to the extent reasonably possible, translate all publications, reports and other relevant documents into the language of the community.

Article 11.3
A researcher should ensure that there is ongoing, accessible and understandable communication with the community. Aboriginal communities often have cultural protocols involving interactions within the community. It is important that researchers learn about these and respect them. When providing a research project report to the community, the researcher should, at a minimum, provide an executive summary in the language of the community unless the community has expressly waived this. The reports or other communications of results should use language and terminology that are readily understood by the community.

Article 12.1
A researcher should recognize and respect the rights and proprietary interests of individuals and the community in data and biological samples generated or taken in the course of the research.

Article 12.2
Transfer of data and biological samples from one of the original parties to a research agreement, to a third party, requires consent of the other original party(ies).

Article 12.3
Secondary use of data or biological samples requires specific consent from the individual donor and, where appropriate, the community. However, if the research data or biological samples cannot be traced back to the individual donor, then consent for secondary use need not be obtained from the individual. Similarly, if research data or biological samples cannot be traced back to the community, then its consent for secondary use is not required.

Article 12.4
Where the data or biological samples are known to have originated with Aboriginal people, the researcher should consult with the appropriate Aboriginal organizations before initiating secondary use.

Article 12.5
These guidelines set out basic principles for the collection, disclosure, use and transfer of data and biological samples. The details of safeguards protecting the privacy and confidentiality of data and biological samples should be negotiated as part of the research process and specified in a research agreement. Subject to the community's views on traditional or sacred knowledge, co-ownership of data between researchers and communities is recommended because the Aboriginal community and the researcher are both integral to the production of data. If there is to be transfer of data or biological samples to a third party, this should be done only with the consent of the researcher, the individual participants and the community. If the third party is to engage in secondary use of the transferred data or biological samples, then a further consent to that use must be obtained. The consent should address how confidentiality and privacy will be respected. In any case, secondary use of data or biological samples requires new consent unless such use is specifically agreed to in the research agreement. Notwithstanding the above, individuals retain the right to access data about themselves. In cases where the research is a governmental activity, other standards for protecting privacy may apply, flowing, for example, from the Canadian Charter of Rights and Freedoms or privacy legislation.

Article 13
Biological samples should be considered "on loan" to the researcher unless otherwise specified in the research agreement. Subject to the terms of the research agreement with their community, biological samples from Aboriginal participants should be considered "on loan" to the researcher, analogous to a licensing arrangement, and this should be detailed in the research agreement.

Article 14
An Aboriginal community should have an opportunity to participate in the interpretation of data and the review of conclusions drawn from the research to ensure accuracy and cultural sensitivity of interpretation. Research involving Aboriginal people is susceptible to misinterpretation or misrepresentation when information about the group is analyzed without sufficient consideration of other cultural characteristics that make the group distinct. The opportunity for review of research results by the Aboriginal community should be provided before the submission of research findings for publication, to ensure that sensitive information is not inappropriately divulged to the public and that errors are corrected prior to wider dissemination. This should not be construed as the right to block the publication of legitimate findings; rather, it refers to the community's opportunity to contextualize the findings and correct any cultural inaccuracies.

Article 15
An Aboriginal community should, at its discretion, be able to decide how its contributions to the research project should be acknowledged. Community members are entitled to due credit and to participate in the dissemination of results. Publications should recognize the contribution of the community and its members as appropriate, and in conformity with confidentiality agreements.

Appendix F: Identified Agencies Serving Aboriginal People in Calgary

(NOTE: This list is not exhaustive and may be subject to change at any time)

Aboriginal Friendship Centre of Calgary
Alberta Health Services, Elbow River Healing Lodge
Alberta Health Services, Aboriginal Health
Alberta Health Services, Adult Aboriginal Mental Health
Alpha House Society
Aspen Family Services
Boys and Girls Clubs of Calgary, Aboriginal Services
Calgary & Area Child and Family Services
Calgary Board of Education
Calgary Catholic School District
Awo Taan Healing Lodge
Calgary Aboriginal Urban Affairs Committee
Calgary Housing Company
Calgary Métis Seniors
Calgary Urban Aboriginal Initiatives
Calgary Urban Project Society
Calgary Urban Project Society (CUPS) Health and Education Centres
Canadian Mental Health Association, Calgary–Street Outreach & Stabilization Team
Canadian Red Cross
Community Action Committee
Community Futures Treaty Seven
Closer to Home Society
City of Calgary, Community & Neighborhood Services
Distress Centre of Calgary
Elbow River Healing Lodge AHS
Elizabeth Fry Society of Calgary
Families Matter
Fresh Start Recovery Centre, Keys to Recovery
Homeless Awareness Calgary
Hull Child and Family Services
Indian Residential Schools
Inn from the Cold Society
John Howard Society
McMan Youth Family and Community Services Association
Métis Calgary Family Services, Rainbow Lodge Transitional Housing Program
Métis Seniors Association
Métis Centre Society
Métis Urban Housing Corporation

Native Addictions Service Society
Native Counseling Services
NeighbourLink Calgary
Oxford House Foundation of Canada
Pathways Community Services Association
Salvation Army, Centre of Hope/Booth Centre
Servants Anonymous of Calgary
Service Canada
Siksika Nation Housing
Sunrise Native Addictions Services
The Alex Health Centre, Homebase & Pathways to Housing
The Métis Centre
Treaty 7 Management Corporation, Housing
Treaty 7 Urban Housing Indian Housing
Trinity Place Foundation
Universal Rehabilitation Service Agency (URSA)
Universal Society Rehabilitation Service Agency Kootenay Lodge
Urban Society for Aboriginal Youth (USAY)
Wood's Homes, Eagle Moon Lodge
YMCA Calgary, Aboriginal Programs & Services
YWCA of Calgary

Works Cited*

**Citations not cited in Endnotes*

Aboriginal Standing Committee on Housing and Homelessness. (2011). Strategic plan for the Aboriginal Standing Committee on Housing and Homelessness (ASCHH) 2011-2014. Calgary AB: Aboriginal Standing Committee on Housing and Homelessness.

Alberta Education. (2005).Our words, our ways: Teaching First Nations, Métis and Inuit learners. Edmonton AB: Aboriginal Services Branch and Learning and Teaching Resources Branch.

Alberta Secretariat for Action on Homelessness. (2008). A plan for Alberta: Ending homelessness in 10 years. Alberta: Government of Alberta. http://alberta.ca/albertacode/images/AlbertaPlantoEndHomelessness.pdf

Alpha House (2012) Basic principles of harm reduction. Alpha House. http://alphahousecalgary.com/Resource.html

Ani, M. (1994). Yurugu: An African-centred critique of European cultural thought and behavior. Trenton, NJ: Africa World Press.

Assembly of First Nations. (2007). Ownership, control, access and possession: First Nations inherent right to govern First Nations data. Ottawa ON: Assembly of First Nations.

Canadian Centre on Substance Abuse. (n.d.). New approaches help Aboriginal people with addiction and substance abuse. http://www.ccsa.ca/2011%20CCSA%20Documents/2011_ccsa_news_release_Nov_8_en.pdf

City of Calgary. (2009). Overview of Aboriginal homelessness in Calgary: Factors, best practices and recommendations. Calgary AB: City of Calgary, Community and Neighbourhood Services, Social Research Unit.

Menzies, P. (2009). Homeless Aboriginal men: Effects of intergenerational trauma. In Hulchanski, J.D., & Campsie, P., & Chau, S., & Hwang, S., & Paradis, E. (Eds.) Finding home: Policy options for addressing homelessness in Canada. Toronto ON: Cities Centre, University of Toronto.

Miller, J.R. (1996). Shingwauk's visions: A history of native residential schools. Toronto ON: University of Toronto Press.

Native Counseling Services of Alberta. (2000). Community consultation on homelessness report. Edmonton AB: Native Counseling Services of Alberta. http://edmontonhomelessness.ca/aboriginal/consultation.doc

Public Health Agency of Canada. (2004). Social inclusion as a determinant of health. http://www.phac-aspc.gc.ca/ph-sp/oi-ar/03_inclusion-eng.php

Royal Commission on Aboriginal Peoples. (1996). People to people: Nation to nation. Ottawa: Aboriginal Affairs and Northern Development Canada, Government of Canada. http://www.aadnc-aandc.gc.ca/eng/1100100014597/1100100014637

Sider, D. (2005). A sociological analysis of root causes of Aboriginal homelessness in Sioux Lookout, Ontario. Toronto ON: Canadian Race Relations Foundation.

Social Data Research Ltd. (2005). Evaluation of and recommendations for services for the Aboriginal homeless in Ottawa: Prepared for the City of Ottawa community capacity building team for homelessness. Ottawa.

Statistics Canada. (2006). 2006 Aboriginal population profile for Calgary. Ottawa ON: Government of Canada, Social and Aboriginal Statistics Division Analysts. http://www.statcan.gc.ca/pub/89-638-x/2010003/article/11076-eng.htm

Statistics Canada. (2008). Aboriginal Peoples in Canada in 2006: Inuit, Métis and First Nations, 2006 census. Ottawa: Ministry of Industry.

Statistics Canada, (2009). The incarceration of Aboriginal people in adult correctional services. http://www.statcan.gc.ca/start-debut-eng.html

Statistics Canada. (2009a). Canadian social trends: Special edition 2009. Ottawa ON: Ministry of Industry. http://abdc.bc.ca/uploads/file/10%20Links/04%20Data/11-008-XPE%20Special%20edition%202009%20%282%29.pdf

Thurston, W.E., & Oelke, N.D., & Turner, D., & Bird, C. (2011). Final report: Improving housing outcomes for Aboriginal people in Western Canada: National, regional, community and individual perspectives on changing the future of homelessness. Calgary AB: University of Calgary.

Turner, D., et al. (2010). Aboriginal homelessness: Looking for a place to belong. Calgary AB: Aboriginal Friendship Centre of Calgary.

United Native Nations Society. (2001). Aboriginal homelessness in British Columbia. http://www.urbancenter.utoronto.ca/pdfs/elibrary/UNNS_Aboriginal_Homelessn.pdf

Pauly, B., & Reist, D., & Schactman, C., & Belle-Isle, L. (2011). Housing and harm reduction: A policy framework for Greater Victoria. Victoria BC: University of Victoria, Centre for Addictions Research BC. http://carbc.ca/Portals/0/PropertyAgent/558/Files/13/Housing&HR_Vic.pdf

Wente, M. (2000). Urban Aboriginal homelessness in Canada. Toronto ON: Faculty of Social Work, University of Toronto.

Endnotes

[i] City of Calgary Biennial count of homeless persons May 2008. Retrieved from www.calgary.ca

[ii] ASCHH developed and administered an online survey, conducted focus groups and one-on-one interviews with 22 service providers and 88 people with lived experience between November 2011 and January 2012, the statistics and themes from the research are embedded throughout this document

[iii] Assembly of First Nations *OCAP: First Nations Inherent Right to Govern First Nations Data.* 2007.

[iv] Turner, D., et al.

[v] Statistics Canada 2006.

[vi] For instance, the *Plan to end Youth Homelessness in Calgary* states that further research is required about the pathways into Aboriginal Youth homelessness. This research is necessary to help ensure services dedicated to Aboriginal young people (at risk of or experiencing homelessness) will be carried out in consideration of structural factors. The Youth Plan places a special emphasis on increasing supports, awareness and services dedicated to Aboriginal young people at risk of or experiencing homelessness in Calgary. There are many reasons for this special emphasis. As one study points out, "There is a strong link between Aboriginal children growing up with involvement with Child Welfare and becoming homeless as youth." (Structural Determinants as the Cause of harmlessness for Aboriginal Youth, Cyndy Baskin (Ph.D.) School of Social Work, Ryerson University, Ontario). The link between Children and Youth Services' involvement and Aboriginal youth homeless needs to be examined further in an Alberta context. For instance, of all children and young people in Children and youth Services' care in Alberta, 64% were Aboriginal (Government of Alberta, Children and Youth Services Ministry, October 2010). Also according to *Structural Determinants as the Cause of homelessness for Aboriginal Youth,* an emphasis needs to be placed on understanding how structural determinants lead to youth homelessness.

[vii] Adrian Wolfleg, Aboriginal Strategist CHF correspondence, April to June 2010, Calgary, Alberta

[viii] City of Calgary Biennial count of homeless persons May 2008. Retrieved from www.calgary.ca

[ix] Calgary Homeless Foundation (2011) Update to the 10-Year Plan. www.calgaryhomeless.com

[x] Calgary Homeless Foundation, Results from the RTAS, (2009). Unpublished report.

[xi] Calgary Homeless Foundation. "The State of Homelessness in Calgary in 2012" February 3, 2012.

[xii] Calculated using statistics from Steele & Des Rosier, 2009, and CMHC, Canadian Housing Observer and Rental Market Reports for Toronto, Vancouver, and Calgary - available at

website: https://www03.cmhc-schl.gc.ca/b2c/b2c/init.do?language=en); and *Canadian Housing Statistics, 2000*.

[xiii] "Assembly of First Nations – The Story", Assembly of First Nations. http://64.26.129.156/article.asp?id=59

[xiv] Lewis, M. Paul (ed.), 2009. "Ethnologue: Languages of the World", Sixteenth edition. Dallas, Tex.: SIL International. Online version. http://www.ethnologue.com

[xv] Calgary Homeless Foundation. Unpublished data collected at twice yearly PHC events.

[xvi] See note i

[xvii] Adrian Wolfleg, Aboriginal Strategist CHF correspondence, May to August 2010, Calgary, Alberta

[xviii] Turner, D., et al.

[xix] Adrian Wolfleg, Aboriginal Strategist CHF, in conversation with outreach service providers

[xx] Turner, D., et al.

[xxi] Ibid.

[xxii] Ibid.

[xxiii] Sider.

[xxiv] City of Calgary.

[xxv]Social Data Research, p. 4.

[xxvi] Adrian Wolfleg, Aboriginal Strategist CHF correspondence, May to August 2010, Calgary, Alberta

[xxvii] Kainaiwa and Piikani First Nations (previously known as the Blood and Peigan Tribes)

[xxviii] Follow link for a geographic map of Reserve and First Nations names and locations. http://www.aboriginal.alberta.ca/documents/reserves_map-color.pdf

[xxix] Ani, 478-9.

[xxx] Ibid, 167

[xxxi] Comments from an Aboriginal Awareness training session September 2011

[xxxii] "Indian Act". The Canadian Encyclopedia. http://www.thecanadianencyclopedia.com/articles/indian-act

[xxxiii] "Historic Treaties". Aboriginal Affairs and Northern Development Canada. http://www.aadnc-aandc.gc.ca/eng/1100100028574

[xxxiv] "1876–1877: The Indian Act 1876 and Numbered Treaties Six and Seven." Canada in the Making. http://www.canadiana.ca/citm/themes/aboriginals/aboriginals8_e.html

[xxxv] Ibid.

[xxxvi] Menzies; Social Data Research.

[xxxvii] Turner, et al.

[xxxviii] Ibid.

[xxxix] Alberta Education.

[xl] RCAP.

[xli] Miller.

[xlii] CBC News: Stolen Children June 8-21, 2008. http://www.cbc.ca/news/canada/story/2008/05/16/f-faqs-residential-schools.html

[xliii] Alberta had the most with twenty-five schools. If we count various incarnations of the schools, the count goes up to thirty-three. There are over one hundred and fifty additional schools that were not considered residential schools as they did not have a residential component and/or they were run by religious and/or private organizations and not by the federal government

[xliv] Adrian Wolfleg, Aboriginal Strategist CHF correspondence

[xlv] White, Jerry P., et al, Editors, Aboriginal Education: Current Crisis and Future Alternatives, 2009, Thompson Publishing, Inc. Toronto, ON: 19.

[xlvi] Turner, D., et al.

[xlvii] Waldram, J.B., Herring, A., Young, T.K., Aboriginal Health in Canada: Historical, Cultural and Epidemiological. University of Toronto Press, Toronto, 2006: 167.

[xlviii] Wente.

[xlix] The crime of genocide is defined in article II, the provision that sits at the heart of the Convention. Genocide is a crime of intentional destruction of a national, ethnic, racial and religious group, in whole or in part. The Sixth Committee voted to exclude cultural genocide from the scope of the Convention, although it subsequently agreed to an exception to this general rule, allowing "forcible transfer of children from one group to another" as a punishable act. 1948 United Nations convention on the Prevention and Punishment of the Crime of Genocide (CPPCG). http://untreaty.un.org/cod/avl/ha/cppcg/cppcg.html

[l] Adrian Wolfleg, Aboriginal Strategist CHF, correspondence, debrief after Glenbow tour and training session, Calgary Alberta August 2011

[li] Ross, R., 14, quoting Goldsmith & Freyd, footnote 8 supra at pp. 98-9 ("Effects of Emotional Abuse In Family & Work Environments: Awareness For Emotional Abuse" Journal of Emotional Abuse, Vol. 5(1), 2005

[lii] Ibid, p. 14 quoting Herman, J., "Trauma & Recovery: the Aftermath of Violence–From Domestic Abuse to Political Terror." Basic Books, Perseus Book Group, New York, 1992: 52.

[liii] Ibid, p. 11 quoting Jacobs, T., Hibbs, E., Ziegenhain, U. "Maternal Expressed Emotion Related to Attachment Disorganization in Early Childhood" Journal of child Psychology and Psychiatry, Vol 41, No7, 200: 900

[liv] Bruce, Christine A., MA, MDiv, LMFT The Grief Process for Patient, Family and Physician. http://passion4japan.net/ministry/griefrelated_files/TheGriefProcess.pdf

[lv] The National Institute for Trauma and Loss in Children. http://www.tlcinst.org/griefandtrauma.html Accessed October 5, 2011.

[lvi] Ross, R., 16, quoting Goldsmith & Freyd, footnote 8 supra at pp. 98-9 ("Effects of Emotional Abuse In Family & Work Environments: Awareness For Emotional Abuse" Journal of Emotional Abuse, Vol. 5(1), 2005.

[lvii] University of Calgary (2009). *Risks and assets for homelessness prevention* (HART). http://calgaryhomeless.com/

[lviii] Distasio, J., Sylvestre, G. & Mulligan, S. (2005). *Home is where the heart is and right now that is nowhere: An examination of hidden homelessness among Aboriginal peoples in prairie cities*. Winnipeg: Institute of Urban Studies.

[lix] Unless otherwise cited, source is Statistics Canada 2006.

[lx] See note lvii.

[lxi] Government of Alberta (2010) *Gathering today for our Aboriginal children's future.* http://www.child.alberta.ca/home/documents/publications/FinalAlbertaCYS_AboriginalChildrensReportBook.pdf

Statistics Canada 2009.

[lxii] Statistics Canada 2006.

[lxiii] City of Calgary Biennial count of homeless persons May 2008. www.calgary.ca

[lxiv] Thurston, Oelke, Turner, Bird.

[lxv] Pauly, Reist, Schactman, Belle-Isle.

[lxvi] Ibid.

[lxvii] Alpha House.

[lxviii] Ibid

[lxix] Turner, et al.

[lxx] Ibid.

[lxxi] See note xvi

[lxxii] Ibid.

[lxxiii] [lxxiii] Statistics Canada 2006.

[lxxiv] Ibid.

[lxxv] Ibid.

[lxxvi] Megalithic Portal: Majorville Medicine Wheel. http://www.megalithic.co.uk/article.php?sid=22751

[lxxvii] The Indian Reservation in closest proximity to the Historic Sites.

[lxxviii] Adrian Wolfleg, Aboriginal Strategist, Calgary Homeless Foundation

[lxxix] See note lvii

[lxxx] Adrian Wolfleg, Aboriginal Strategist CHF correspondence, April to June, Calgary, Alberta

[lxxxi] Statistics Canada 2008.

[lxxxii] Native Counseling Services of Alberta.

[lxxxiii] Statistics Canada 2009a.

[lxxxiv] Plan for Alberta: Ending Homelessness in 10 Years. Retrieved from: http://alberta.ca/albertacode/images/AlbertaPlantoEndHomelessness.pdf

[lxxxv] City of Calgary Biennial count of homeless persons May 2008. Retrieved from www.calgary.ca

[lxxxvi] The City of Calgary biennial count in 2008 cited 4060 people homeless on that date. However the CHF in consultation with community service providers re-calculated this number to 3601 as it was determined that more than 400 in permanent supportive housing had been enumerated as homeless. See Winter Point-in-time Count: final report www.calgaryhomeless.com

[lxxxvii] Calgary Homeless Foundation (2012) Winter Point-in-time count: Final report. www.calgaryhomeless.com

[lxxxviii] Calgary Homeless Foundation (forthcoming) Summer Point-in-time count.

[lxxxix] In the Plan to End Youth Homelessness—The “seven-day average length of stay in emergency shelters” milestone is intended to ensure that *on average* young people are not experiencing prolonged periods of homelessness in shelters (past seven days). Emphasis needs to be placed on the word “average,” as it is not the intent of this milestone to set time limits on how long young people are eligible to stay in shelter spaces.

[xc] Calgary’s 10-Year Plan to End Homelessness, Update 2011: 22.

[xci] Adrian Wolfleg, Aboriginal Strategist CHF, Notes, ASCHH July 2010 discussion

[xcii] Notes, ASCHH July 2010 discussion

[xciii] See note lxxxviii.

[xciv] See note lvii: 15.

[xcv] Sider.

[xcvi] Shapcott, M. (2009). *Housing, in Social determinants of health: Canadian perspectives*. D. Raphael, Editor. Toronto, ON: Canadian Scholar's Press Inc.: 201-215.

[xcvii] See note lvii: 15.

[xcviii] See note lxxxviii.

[xcix] See note lxxxviii: 26.

[c] Adrian Wolfleg, Aboriginal Strategist CHF, ASCHH July 2010 discussions

[ci] See note lvii: 14.

[cii] The Canadian Centre on Substance Abuse has had an Elders Advisory Council in place since 2008 to bridge the gap in noted areas.

[ciii] Turner, D., et al.

[civ] Thurston, Oelke, Turner, Bird.