

Caryl **PATRICK**

Aboriginal Homelessness in Canada

A Literature Review



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homelessness

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The Homeless Hub is a Canadian Observatory on Homelessness (formerly known as the Canadian Homelessness Research Network) initiative. The goal of this book is to take homelessness research and relevant policy findings to new audiences. This publication constitutes extensive research and has undergone a rigorous peer review process. The COH acknowledges, with thanks, the financial support of the Social Sciences and Humanities Research Council of Canada. The views expressed in this book are those of the COH and/or the author and do not necessarily reflect the views of the Government of Canada.

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Aboriginal Homelessness in Canada

A Literature Review

This book presents a comprehensive review of scholarly literature on the topic of Aboriginal Homelessness in Canada. It answers the following four broad inquiry areas through a review and analysis of current (1988-2012), and primarily academic, literature:

Inquiry Area #1 - Key Concepts: How are the concepts of 'homelessness' and 'home' defined, particularly for the Aboriginal population? Is there a unique meaning of homelessness for Aboriginal Peoples¹?

Inquiry Area #2 - Causes: Why are Aboriginal populations (particularly youth, gender minorities and urban groups) at a disproportionate risk of becoming homeless or over-represented in the Canadian homeless population?

1. There is a challenge in determining the appropriate language that correctly represents the unique and diverse nature of Aboriginal communities in Canada. Through consultation it has been decided to use "Aboriginal Peoples/Communities" to represent the collective nature of Aboriginals in Canada. Additionally, except when referring to a specific group of people, the phrase 'Aboriginal Peoples/Communities' is assumed to collectively represent First Nations communities, Métis and Inuit peoples in Canada. Within each of these sub-categories, it is also recognized that there is great diversity. When the literature referenced only one of the sub-sets then this language was used in the review, rather than assuming the experience translated to all groups of Aboriginal Peoples.

Inquiry Area #3 - Experiences: How do Aboriginal Peoples experience homelessness? What is the range of diversity in their lived experiences?

Inquiry Area #4 - Action: What has been proposed in the areas of homelessness prevention and solutions for Aboriginal Peoples? What is working? What are some new ways authors are conceptualizing these issues?

This literature review also endeavours to highlight gaps and weaknesses that currently exist in the academic literature and suggests future research avenues on this topic.

This review is organized around broad themes that emerged throughout the literature which are reflected in the section headings. There is, however, a significant amount of overlap between sections because many subjects and personal experiences are interrelated and complex.

This literature review has several target audiences. Since it provides an analysis of scholarly material an academic audience is a primary target. This review may also be of value to policy makers, service providers, politicians and community stakeholders because of its emphasis on solutions and pathways forward. Since it is written in plain language, it is also designed to be accessible to the general population. It is the hope of the reviewer that this document is disseminated as widely as possible, as to draw attention to the national Aboriginal homelessness crisis and hopefully inspire action.

The reviewer wishes to acknowledge and thank the following people:

- Dr. Stephen Gaetz, Allyson Marsolais and Tanya Gulliver of the Canadian Observatory on Homelessness (formerly known as the Canadian Homelessness Research Network), who assisted the reviewer throughout the analysis, writing, and editing phases of this review;
- Heather Howard, for her initial comments and guidance on the focus of this review;
- Peter Menzies, for providing an extensive literature list on the topic of Aboriginal homelessness and trauma in April 2011;

- Christine Smillie-Adjarkwa, who authored the document “Aboriginal Youth Homelessness & Mental Health: What does the picture look like in Canada in 2010?” which informed this review in its early stages; and
- Two anonymous reviewers, whose invaluable and insightful comments on the first completed drafts of this review significantly improved its focus, quality, and scope of discussion.

The reviewer would also like to acknowledge that the Canadian Observatory on Homelessness, by way of being located at York University in the City of Toronto, is located within the traditional territory of the Mississaugas of the New Credit First Nation.



<http://www.newcreditfirstnation.com/>

CONTENTS

| | |
|--|-----|
| Preface | 9 |
| 1. Tone, Pathologization and Homogenization | 9 |
| 2. The Role of Historical Trauma in Literature | 12 |
| 3. Biases | 12 |
| Methodology | 15 |
| Introduction and Background | 19 |
| Definitions of Home and Homelessness | 23 |
| Housing On- and Off-Reserve | 29 |
| Youth | 51 |
| Gendered Experiences | 63 |
| Health, Well-Being and Health Care | 79 |
| The Role of Historical Trauma | 93 |
| Critiques and Considerations | 99 |
| 1. From the Reviewer | 99 |
| 2. Identified in the Literature | 104 |
| Future Research Pathways | 105 |
| Bibliography | 109 |

Preface

This document endeavors to provide a comprehensive review of the literature about Aboriginal homelessness in Canada. It summarizes, connects and analyzes the most relevant academic and grey literature on, and related to, this topic that has been produced between 1998-2012 and also includes some key literature published before this period.

There are two central goals of this review: firstly, to arrive at a common understanding of where Aboriginal Peoples (and more broadly, where we as a society) currently stand in regards to Aboriginal homelessness; and secondly, to push the dialogue on this topic forward among a variety of stakeholders. To accomplish the latter, this review highlights gaps and puts forth critiques for the reader to consider – thus leaving the discussion open for new voices and interpretations. This structure is intentional, as the complexity and extensive history of this topic necessitates multi-faceted conversation and ongoing action in order to be effectively addressed. In the case of this review, it is useful for the reader to consider these gaps and critiques (as well as their own questions) as valuable.

The author has identified some issues in this review that must be unpacked in order to better understand its research value. These issues are discussed in the points below.

1. TONE, PATHOLOGIZATION AND HOMOGENIZATION

One of the challenges of conducting research on experiences of poverty and marginalization is that we must focus on some of the most difficult realities

of humanity. These include physical suffering, emotional and sexual abuse, social suffering, economic deprivation and structural injustices. There is, expectedly, a tendency for the writing to adopt a dismal or hopeless tone. The reality is that, within the context of this literature, researchers and authors are approaching their work with more of a focus on what is wrong/bad than what is going well/improving, so it was difficult to avoid this tone throughout this review. However, there are many reasons for hope in regards to the issue of homelessness among Aboriginal Peoples in Canada. A significant portion of the literature reviewed here focuses on what we know will produce positive long-term change and what is *already* moving in the right direction.

It is important to remember that within any overarching historical narrative are unique experiences, understandings and memories.

This review also contains several blanket statements about the plight of Aboriginal Peoples to the degree that readers might believe there was a singular 'Aboriginal history' and would have little optimism as far as the situation improving. It is important to remember that within any overarching historical narrative are unique experiences, understandings and memories. Perhaps even more problematic is the implication that being impoverished, ill or traumatized are somehow natural states for Aboriginal Peoples. This association likely emerges from enduring, negative portrayals contained in popular media. It is sometimes (and presumably unintentionally) reproduced by academics in how they choose to frame their projects and discussions. Therefore, it is crucial to note the Aboriginal community within Canada as a whole is complex, exerts agency and control, and in terms of economic strata occupies upper, middle and lower economic classes. The academic literature frequently fails to acknowledge these facts, and what tends to be presented is the naturalization of Aboriginal poverty and the portrayal of Aboriginal Peoples as passive victims. This is not the reality. Emerging literature actually points to the measurable improvement of Aboriginal well-being and socio-economic status in some areas of Canada over the last 20 years in terms of educational attainment, employment, income and housing (see Wisener et al., 2012; British Columbia Provincial Health Officer, 2009; 2002). These facts must be remembered when reading this review or any other literature discussing homelessness or poverty among Aboriginal Peoples.

In sum, the reviewer made every attempt to avoid homogenizing or pathologizing Aboriginal populations while writing this review. This was most often done by discussing research findings within their own contexts and by using individual experiences to illustrate broader points. This effort was balanced with the need to accurately reflect the overall direction of the existing literature. The issues of pathologization and homogenization are further discussed in the *Critiques and Considerations* section.



To learn more about this painting visit:

<https://www.etsy.com/listing/169441138/>

'OUR HOME AND NATIVE LAND'

BY Jennifer Adomeit

Growing up in Northern British Columbia, I have always been fascinated with the intricate art designs and style of the Northwest Coast First Nations, and as a non-Aboriginal person it took much research and practice to create the original painting. Although the 'map' layout and design of the painting were inspired by my own background in Geography (each province embodies its provincial or territorial animal 'symbol'), the art technique itself is simply a representation of the Northwest Coast Art Style which is utilized by several First Nations in British Columbia (including, but not limited to, the Haida, Tsimshian, and Tlingit First Nations), all of which I find to be extraordinary.

'Our Home and Native Land' was created for a First Nations Art class in which we were given the topic of 'Synchronous Dichotomous'; and, like any form of art, this piece can offer any number of interpretations. However, my intention was this: This 'map' of Canada illustrates the synchronous, intricately connected relationship that First Nations People have with their land. Simultaneously, it demonstrates the dichotomy that First Nations' were (and still are) faced with as the imposition of borders separated them from their land. Canada is home to everyone who is fortunate enough to live here and if we have the courage to listen to our national anthem with a slightly altered perspective we may just learn where our 'Native' land actually came from.

Canadian Provincial & Territorial Animal Symbols

BC: *Spirit Bear*

ALBERTA: *Big Horn Sheep*

SASKATCHEWAN: *White-Tailed Deer*

MANITOBA: *Bison*

ONTARIO: *Common Loon*

QUEBEC: *Snowy Owl*

NEW BRUNSWICK: *Black Capped Chickadee*

NOVA SCOTIA: *Osprey*

PRINCE EDWARD ISLAND: *Blue Jay*

NEWFOUNDLAND: *Caribou (the islands are represented by a salmon tail)*

YUKON: *Raven*

NORTHWEST TERRITORIES: *Polar Bear*

NUNAVUT: *Canadian Inuit Dog*

2. THE ROLE OF HISTORICAL TRAUMA IN LITERATURE

Any discussion on the Aboriginal homelessness crisis must include discussions about history and intergenerational (or ‘historical’) trauma. To adequately understand this current-day crisis, the reader must have a detailed understanding of the ways in which Aboriginal Peoples in Canada have been impacted by their unique relationships with the Government of Canada and associated agencies, Christian churches and mainstream society. These realities offer much in explaining why Aboriginal Peoples are overrepresented among the homeless population and should be essential considerations in any routes forward. Trauma, in particular, has emerged as a central theme in much of the literature on Aboriginal homelessness and many articles about Aboriginal Peoples lead with this discussion to provide a contextual backdrop. However, it is important to keep in mind this is a literature review about homelessness and so it must begin from a place that speaks to this directly.

This explains why the *Role of Historical Trauma* section was placed after the sections that explore Aboriginal homelessness more directly (although the topics of historical trauma is mentioned throughout the document and before this section). Structuring this literature review in any other way would risk it having a prescriptive feel and would compromise its overall focus and intent. One may very well believe the literature about Aboriginal homelessness and housing necessarily lends itself to the conclusion that historical trauma are contributing factors – so much so that they continue to shape this crisis and many of its solutions. But to situate it at the beginning is to remove it from the overall context of the review, providing an explanation before evidence is presented and before the reader has had an opportunity to take in the rest of the information. To summarize, the placement of the *Role of Historical Trauma* section, and the rest of the sections, were done with a great amount of consideration that serves to adhere to the overall purpose of a literature review.

3. BIASES

The vast majority of the reviewed literature is emotionally charged and some of it is also politically biased. It is the opinion of the reviewer that no knowledge is entirely neutral or objective – even one’s choice of topic, discussion points, structure or theoretical lens reveals a great deal about one’s political orientation, background and personal opinions. Therefore, the possibility that some authors have broader agendas cannot be ruled

out. However, the reviewer consciously attempted to maintain the tone and overall message of each of the materials being reviewed. This is why the review may read as politically biased or emotionally charged in some areas. The reviewer takes the position that the topic of Aboriginal homelessness – and poverty in general – is inherently political and this should be acknowledged as an integral part to any productive discussion. The reviewer also acknowledges the fact that, as a person of non-Aboriginal descent and positioned outside of any Aboriginal community, they are an outsider and this review is their own understanding of the Aboriginal homelessness crisis and its accompanying literature.

The topic of Aboriginal homelessness – and poverty in general – is inherently political and this should be acknowledged as an integral part to any productive discussion.

Methodology

This literature review was completed by Caryl Patrick (BSc, MA), a doctoral student in the Social Anthropology Program at York University. Her research interests lie in the areas of Aboriginal health, health care systems, policy and the body, and she has held both research and volunteer (outreach) positions in several Aboriginal-focused organizations. She is of non-Aboriginal descent. Caryl completed this literature review as a graduate assistant of the Canadian Homelessness Research Network.

Literature searches concentrated on homelessness and housing in remote and urban Aboriginal contexts (emphasis on work published from 2000 and on). Academic databases (social sciences, Indigenous/Aboriginal, social work, health and policy), governmental websites and mainstream search engines (e.g. Google, Google Scholar) were searched to find material. Many sources were also found through the reference lists of found literature, including key literature published prior to 2000. Academic literature was prioritized in searches and this material anchors this review. Grey literature (published material from governmental and non-governmental organizations) was used to fill in the gaps and thus create a more accurate picture about this topic. However, this review is not a comprehensive review of grey literature. The following keywords were used in various combinations during the searches:

- Aboriginal
- First Nations
- Métis
- Inuit
- Native
- Indigenous
- Street-involved
- Youth
- Woman/women
- Female
- LGBT/Gay
- Two-spirit

- Homeless/-ness
- Housing
- Affordable
- Poverty
- Reserve
- Off-reserve
- Urban
- Inner-city
- Street
- Citizen/-ship
- Inclusion
- Exclusion
- Belonging
- Migration
- Self-determination
- Culturally-appropriate
- Program
- Policy

Qualitative literature was emphasized during the searching and selection process. This is because the reviewer felt this information was most productive towards remedying the current situation in Canada: people's experiences, perspectives and opinions offered the most appropriate knowledge for this review. However, quantitative data (e.g. population statistics) were included in order to contextualize the qualitative evidence.

It was necessary to establish a cut-off point for literature to be included in this review from the beginning of this project. Because of the complexity of this topic, as well as the multitude of lenses through which authors have chosen to frame it, an appropriate 'cut-off' point is not immediately obvious when sourcing literature about the issue of Aboriginal homelessness. Therefore, the strategy employed was to first only review the titles containing the words 'Aboriginal' *and* 'housing' or 'homeless/ness.' All papers in which the abstracts did not specifically mention these topics within the Canadian context were initially excluded. After this first collection of 'anchor' academic literature was read and assessed for relevance, a second round of academic literature searches took place in a 'snowball' fashion. The resultant tangential academic literature was found through searches or because it was referenced in the anchor literature. It was necessary to include some literature that did not discuss Aboriginal homelessness specifically because:

Aboriginal homelessness is part of the broader issues of homelessness, housing inadequacy and poverty in Canada. The causes of, and solutions to, homelessness are largely structural and must be understood before discussing segments of the population.

- Aboriginal homelessness is part of the broader issues of homelessness, housing inadequacy and poverty in Canada. The causes of, and solutions to, homelessness are largely structural and must be understood before discussing segments of the population.
- Aboriginal homelessness is intricately related to other social and historical factors and exploring these provides a more accurate picture.

- There are a variety of Aboriginal-specific strategies toward healing and moving forward discussed in the literature that are outside of the discussions of homelessness and housing which should be considered within these discussions.
- The broader struggle for self-determination and other forms of political justice for Aboriginal Peoples in Canada must be included in any discussion or publication about improving the socio-economic status and well-being of Aboriginal Peoples in Canada.

A third round of literature searching took place after the tangential academic literature was sourced. This was to include the most relevant grey literature, which included government reports, statistics, and websites, media items, theses/dissertations, and reports published by non-governmental organizations (NGOs – many of them Aboriginal-led). In this round, literature was excluded if it exhibited a great deal of overlap with already sourced academic literature. Finally, the literature collection was finalized (i.e. academic and grey literature were added) based on recommendations from two anonymous reviewers. To summarize the literature sourcing process, material was selected at the reviewers discretion – taking into account both relevance and quality – and was ultimately selected because it spoke directly about or indirectly to the issue of Aboriginal homelessness in Canada.

Introduction and Background

Aboriginal Peoples of Canada are the descendants of the nation's Indigenous groups, who were considered to be the original inhabitants of North America. Comprised of three major groups (First Nations, Métis, and Inuit) Aboriginal Peoples are incredibly diverse with respect to cultural practices, spiritual beliefs, languages and geography (Aboriginal Affairs and Northern Development Canada, 2013a). The most recent national statistics reveal that 1,400,685 people claimed an Aboriginal identity in 2011, which represents 4.3 percent of the total Canadian population (Statistics Canada, 2013).

The term 'First Nations' refers to persons who identify as such and who may or may not be registered under that title in the Indian Act (Peters, 1998). According to the Assembly of First Nations (2013), the First Nations population represents over 50 distinct nations and language groups and is made up of 634 First Nations communities (or 'reserves'). First Nations have had a special relationship with the Canadian Crown since the mid-18th century, when their inherent rights to land and state benefits were manifested in various Treaties – many of which have yet to be realized (Assembly of First Nations, 2013).

The Métis people are descendants of mixed Aboriginal and European ancestry have their own culture, language (Michif), traditional homeland (the Métis Nation Homeland includes Manitoba, Saskatchewan and Alberta, parts of

Ontario, British Columbia, the Northwest Territories and the Northern United States) and sense of nationhood (Métis National Council, 2013). Métis communities originally emerged in the 18th century, during the era of fur trading in west central North America, when First Nations women and European fur traders married, had children and established distinct communities (Métis National Council, 2013). Contemporary Métis populations are largely a product of subsequent intermarriages between Métis people stemming from this era and live across Canada in both urban centres and areas formerly associated with trade routes (Métis National Council, 2013).

The Inuit people are descended from the ancient Thule people, and have occupied parts of Canada's northernmost regions thousands of years before European arrival (Inuit Tapiriit Kanatami, 2013). The traditional Inuit homeland is called Inuit Nunangat, and includes the Arctic and Subarctic regions of Inuvialuit, Nunavut, Nunavik, and Nunatsiavut where the 53 Inuit communities currently live (Aboriginal Affairs and Northern Development Canada, 2013b). Today, the Inuit maintain their unique culture, language, and way of life within Inuit Nunangat, and regularly rely on hunting to provide them with food and clothing. They also incorporate non-traditional technologies and foodstuffs into their daily lives. Family is central to Inuit culture, and large kinship networks are common (Inuit Tapiriit Kanatami, 2013).

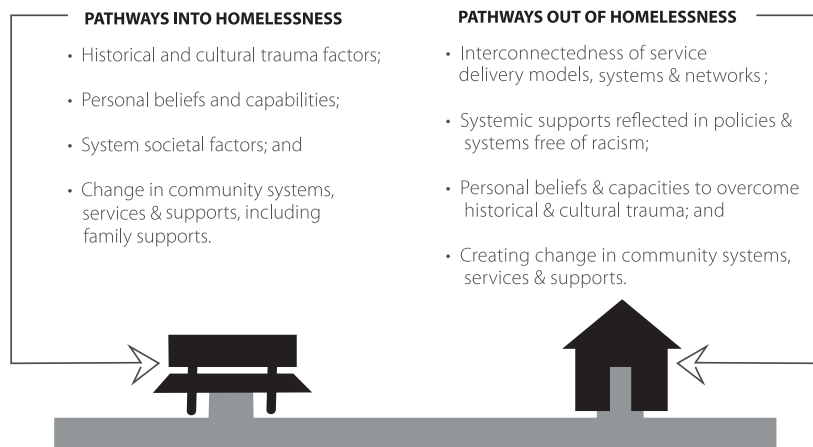
Evidence indicates that, as a population, Aboriginal Peoples are the most materially, socially and spatially deprived ethno-cultural group in Canada. They are also disproportionately homeless and inadequately housed – to such an extreme degree that many have argued for the recognition of Aboriginal-specific homelessness and housing crises. This situation stems from a variety of reasons including the historical dispossession of Aboriginal lands, colonial- and neo-colonial practices of cultural oppression and erosion, intergenerational traumas, systemic racism, governmental policies, the current economy and housing markets.² These have all been cited as contributing factors to the high homelessness rates and generally low socio-economic status of Aboriginal Peoples in Canada today. In fact, some have argued that for as long as this nation has existed, Aboriginal Peoples in Canada have been marginalized both “spatially and imaginatively through the material practices of colonialism and biased modes of representation” (Peters, 2000:45). These realities have played a large part in creating and sustaining

2. See the *Role of Historical Trauma* section for a detailed definition and discussion of this term.

the Aboriginal homelessness crisis. At least one team of scholars characterizes the multilayered discrimination and disadvantage Aboriginal Peoples face as a “legacy of subordination” because of the profoundly destructive effects of colonization (McCall et al., 2009). It is important to acknowledge Aboriginal Peoples experience homelessness and housing issues within a society that carries out routinized and naturalized discrimination against people of Aboriginal descent. It is also crucial to recognize that the concept of ‘home’ is not universal and that homelessness may not simply refer to the state of being without shelter. This is particularly true for Aboriginal Peoples. Being without a place to call home is one of the most severe manifestations of marginalization and deprivation in our society.

The literature on this topic reveals that, despite shared historical and contemporary circumstances, there is no one pathway to becoming homeless or experiencing homelessness for Aboriginal Peoples. This is because homelessness is often the result of a complex interaction of factors at the individual level and at the societal level. Likewise, there is no singular solution to Aboriginal homelessness. An effective starting point through which to view this incredibly complex issue is provided by Bird et al. (2010:10), who conceptualize Aboriginal journeys into and out of homelessness as varied pathways (see Figure 1):

FIGURE 1. PATHWAYS INTO AND OUT OF HOMELESSNESS FOR ABORIGINAL PEOPLES



This review ultimately hopes to reveal some of the positive and productive pathways forward through both insights and examples provided by the existing literature. This review steers its course in the direction of Walker and Barcham's (2010:318) position, as they declare that, "Aboriginal quality of life can be improved only on Aboriginal peoples' own terms and not prepackaged Eurocentric terms."

Definitions of Home and Homelessness

When understanding the issue of Aboriginal homelessness, it may necessary to interrogate the notion of ‘home’ altogether, as the term has different meanings depending on one’s identity and perspective.

Much of the literature on the topic of Aboriginal homelessness acknowledges that this population often has connections, resources, temporary stability or roots in more than one place. Aboriginal Peoples are often mobile between spaces and may travel to and from reserves on a regular basis (Peters & Robillard, 2009; Letkemann, 2004; Skelton, 2002). However, it may not always be productive to make clear ‘urban/reserve’ distinctions for Aboriginal populations, as several First Nation reserves exist within urban zones³ (Aboriginal Affairs and Northern Development Canada, 2008) or resemble urban ghettos (Letkemann, 2004). The lived experiences of homeless Aboriginal Peoples are diverse. Many authors have described the survival strategies, mobility patterns and emotional responses of this population in detail (Berman et al., 2009; Ruttan et al., 2008; Scott, 2007; Bridgman, 2006; Bridgman, 2003). Several scholars have taken the position that the opposite of ‘homelessness’ is not ‘housing,’ but instead ‘home’ to acknowledge a particular set of social relations often linked with notions of family and social support (Klodawsky, 2006; Watson, 1988). This perspective is valuable when imagining solutions to the Aboriginal homelessness epidemic.

3. For example, *Asimakaniseekan Askiy* in Saskatoon, Saskatchewan, which is home to the Muskeg Lake Cree Nation and *Wendake* near Québec City, Québec, which is home to the Huron-Wendat First Nation.

Generally speaking, the definition of ‘homelessness’ has expanded in recent years, as academics and stakeholders have become more aware of the complexities of being without adequate housing. The Canadian Homelessness Research Network (CHRN; now the Canadian Observatory on Homelessness), a national homelessness research and knowledge exchange group and publisher of this review, has developed the ‘Canadian Definition of Homelessness’ as follows:

Homelessness describes the situation of an individual or family without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household’s financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination. Most people do not choose to be homeless, and the experience is generally negative, unpleasant, stressful and distressing (CHRN, 2012:1).

This multi-faceted definition is particularly helpful to understandings of the Aboriginal homelessness emergency, as it takes into account socio-economic marginalization and geographic mobility.

The Canadian Observatory on Homelessness (formerly CHRN) maintains that homelessness can include a variety of living circumstances, broken down into the following categories:

1. **Unsheltered**, or absolutely homeless and living on the streets or in places not intended for human habitation.
2. **Emergency Sheltered**, including those staying in overnight shelters for people who are homeless, as well as shelters for those impacted by family violence.
3. **Provisionally Accommodated**, referring to those whose accommodation is temporary or lacks security of tenure.
4. **At Risk of Homelessness**, referring to people who are not homeless, but whose current economic and/or housing situation is precarious or does not meet public health and safety standards.

They also emphasize that for many, homelessness is not a fixed state but rather a fluid experience because shelter circumstances and options may change dramatically and with frequency (CHRN, 2012). This multi-faceted definition is particularly helpful to understandings of the Aboriginal homelessness emergency, as it takes into account socio-economic marginalization and geographic mobility.

Berman et al. (2009) discuss how Canadian Aboriginal groups have endured the loss of what they have traditionally thought of as 'home,' since involuntary uprooting and displacement from homes or communities continues to be a reality for many. As a consequence, many Aboriginal families and communities have become fragmented, culturally disconnected, and frequently experience the absence of a place to consider 'home.' Thus, it is productive to expand the definition of 'homelessness' to one that takes into account both physical space/amenities and emotional/cultural connections. Related to this, some scholars have prompted us to think about homelessness in new ways. The concept of 'spiritual homelessness' refers to one's separation from traditional lands, family, and kinship networks and has been used to shed light on the lived realities of Indigenous groups in both Canada and Australia (Distasio et al., 2005; Memmott et al., 2003). According to one source, spiritual homelessness is a "crisis of personal identity wherein a person's understanding or knowledge of how they relate to country, family and Aboriginal identity systems is confused or lacking" and can seriously affect one's mental health (Memmott & Chambers, 2010:10).

Menzies (2008) asserts that Aboriginal Peoples in Canada have been robbed of the experience of 'home' because of social policies such as the Indian Act, the residential school system and child welfare legislation. These policies continue to impact the lives of homeless Aboriginal Peoples who commonly feel a profound disconnection from both their individual cultures and mainstream society. Through interviews with Aboriginal homeless men in Toronto, Menzies (2010) found that family disruption (including violence, substance abuse or poverty) in childhood, placement in non-Aboriginal foster/adoptive homes or group care, and the resulting detachment from their communities and respective cultures have devastated generations of Aboriginal Peoples, which led him to argue that such men were without a home (that is, they could be considered 'homeless') from an early age.

Letkemann (2004) points out reserves can be places of contradictory meaning, as they are simultaneously associated with colonialist forced assimilation and perceived as safe havens for cultural preservation. Reserves may also be used as economic 'safety nets' for urban-dwelling First Nations individuals who experience housing or income insecurity (Peters and Robillard, 2009). Movements to and from reserves are usually based on balancing needs for resources, relationships, safety and emotional well-being. One Saskatchewan-based study found that homeless First Nations migrated to a reserve because of insufficient income, loss of housing, or to escape destructive interpersonal relationships in the city. People moved away from

Reserves can be places of contradictory meaning, as they are simultaneously associated with colonialist forced assimilation and perceived as safe havens for cultural preservation.

reserves due to family or partner conflict/abuse, to secure educational or employment opportunities off-reserve, or to enter a correctional or treatment facility (Peters & Robillard, 2009). In sum, movements of homeless First Nations peoples may be voluntary or involuntary and may not always be to a place they would consider ‘home.’

In interviews with Aboriginal teenage girls from Ontario, Berman et al. (2009) found the notion of ‘home’ is more about meeting basic living requirements than being a place where emotional needs are met. These authors contend one’s identity and place in which they exist within are closely connected, and that because of the uprooting and displacement that has occurred in Aboriginal communities, Aboriginal girls’ sense of stability within spaces has been disrupted. They reveal that:

...[Aboriginal] girls exist in marginalized spaces where disconnections from important people and places occur. Barriers that arise from interlocking systems of oppression and other forms of social exclusion, including racism, classism, negative stereotyping, and legacies of colonialism, limit the ability of girls to (re)establish connections and, ultimately, generate dangerous spaces (Berman et al., 2009:422).

In contrast to these findings, Ruttan et al.’s (2008) study involving Aboriginal homeless female youth in Alberta revealed ‘home’ was more dependent on relationships than it was tied to a particular place. Homeless Aboriginal youth in Winnipeg interviewed in Brown et al.’s (2007) study believed ‘home’ should not only be a place to sleep, but somewhere that was safe, nurturing, and stable. These authors advocate for more community-based and community-driven housing, particularly for youth who have been involved in the child welfare system.

The United Native Nations Society supports the creation of an Aboriginal-specific definition of homelessness that incorporates the historical and modern-day effects of colonization.

Layton (2000) contends structural factors that disproportionately impact Aboriginal populations – higher rates of poverty and low availability of affordable housing – drive Aboriginal homelessness. He also believes homelessness is socially constructed insofar as its definition changes to accommodate particular political agendas or cultural stereotypes. The United Native Nations Society (2001) supports the creation of an Aboriginal-specific definition of homelessness that incorporates the historical and modern-day effects of colonization.

It is crucial to recognize being homeless does not simply mean living on the street or in a shelter. Several authors have urged us to consider people who are poorly, dangerously or inadequately housed, or at imminent risk of losing their housing as 'homeless,' to construct a more accurate picture of the Canadian homelessness issue (Peters, 2012; Baskin, 2007; City of Toronto, 2003; United Native Nations Society, 2001; Layton, 2000). To accurately capture the diversity of experiences of being without a home, the term 'concealed homeless' has been used to acknowledge people who are homeless but living in transition homes, jails and detox centres, as well as those who 'couch surf' by perpetually staying with family or friends (Ruttan et al., 2010; Baskin, 2007). Other authors have referred to this phenomenon as 'hidden homelessness' (Peters, 2012; Klodawsky, 2006; Whitzman, 2006). The Toronto Disaster Relief Committee's (1998:2) definition of homelessness may be particularly relevant to Aboriginal Peoples, as they state that "having no place to live means being...exiled from the mainstream patterns of day-to-day life."

Housing On- and Off-Reserve

Aboriginal Peoples experience disproportionate levels of housing inadequacies – both on- and off-reserve – and this reality must be considered a significant issue within the Canadian Aboriginal homelessness crisis. While the topic of housing is not the focus of this review, we must understand both mainstream and reserve housing issues if we are to fully comprehend the issue of Aboriginal homelessness.

As discussed in the *Definitions of Home and Homelessness* section, the term ‘homeless’ encompasses not only ‘sleeping rough,’ but also a variety of situations that amount to inadequate, unsuitable, unaffordable or unstable housing. Monette et al. (2009:42) sum up the current situation: “Aboriginal peoples, who share a common legacy of oppression and resilience, experience some of the worst housing conditions in Canada and have an exceedingly difficult time locating affordable housing.” The problem of housing inadequacy is further complicated by the fact that, as a group, Aboriginal Peoples experience housing issues within a society that carries out systemic racial discrimination (Monette et al., 2009; Walker; 2008). This can constrain their mobility out of poor living situations. Furthermore, literature on the topic of housing reveals that Aboriginal Peoples do not participate in the housing market on equal footing with the rest of Canadians, as the government-imposed reserve system limits their ability to obtain mortgages or home improvement loans. The issue of Aboriginal housing is complex; because of the diversity of the Aboriginal population and multi-faceted nature of disadvantage, it must be addressed with multiple strategies that

engage Aboriginal Peoples (Walker, 2003; Hanselmann, 2001). A variety of ways forward have been proposed in the literature and these are listed at the end of this section.

Lack of plumbing and electricity, poor insulation, toxic mold, substandard construction, lack of major repairs and overcrowding continue to devastate a large proportion of reserves and severely impact the quality of life of residents.

The vast majority (73.4 percent, in 2006) of Aboriginal households live off-reserve (NAHA, 2009). However, reserves continue to be places of residence and personal connection for many Aboriginal Peoples. As of 2006, there were 82,400 Aboriginal (predominantly First Nations⁴) households living on reserves; these households make up 87 percent of reserve-dwelling households (CMHC, 2011). The majority of First Nations reserves exist in a state of tremendous deficiency with respect to both housing and infrastructure (CMHC, 2011; Durbin, 2009; Monette et al., 2009; Statistics Canada, 2008). Lack of plumbing and electricity, poor insulation, toxic mold, substandard construction, lack of major repairs and overcrowding continue to devastate a large proportion of reserves and severely impact the quality of life of residents (Monette et al., 2009; Statistics Canada, 2008; Adelson, 2005). The 2006 Census revealed that over half (53 percent) of on-reserve Aboriginal households were living in homes that did not meet adequacy or suitability standards, meaning these homes either needed major repairs, were crowded, or both (CMHC, 2011). This is a much higher percentage than off-reserve Aboriginal households (22 percent living below the same acceptability standards), or all households in Canada (13 percent living below the same acceptability standards) (CMHC, 2011). One third (33 percent) of the on-reserve Aboriginal households who were living in 'unacceptable' housing (i.e. in terms of condition or size) did not have sufficient income to access acceptable housing. This number increased five percent from 2001 to 2006 and captures the troubling reality that the number of Aboriginal households trapped in substandard on-reserve housing (due to low income) is growing. In addition, Alcantara (2005) reveals that most First Nations bands face a chronic shortage of actual housing units, which may shed light on both overcrowding and migration to urban areas. Monette et al. (2009:42) state that, "the [housing] situation for First Nations peoples living off-reserve and Inuit and Métis people is not much better." On- and off-reserve housing issues cannot be examined in isolation from one another, as they are inextricably linked through history, policies and migration.

Reserve lands have remained property of the federal government, in accordance with the Indian Act that severely limits private home ownership opportunities for First Nations (Durbin, 2009). Since the Crown indicates reserve land is to be used for the benefit of First Nations, individuals are

4. According to Durbin (2009:183), "Métis and Inuit persons do not traditionally live on reserves and are governed by different rules than First Nations."

restricted from having any tenure over land. Sections 28 and 29 of the Indian Act prohibit lending institutions from seizing on-reserve Aboriginal assets in the event of payment default, making it extremely difficult for this population to obtain mortgages or build their own homes (Durbin, 2009). This acts as an enormous disincentive to provide housing loans to Aboriginal Peoples (Alcantara, 2005). As a result, most reserve-dwelling Aboriginal Peoples have no choice but to rent or lease units from the band council which, Alcantara (2005) asserts, tends to lead to a lack of investment in homes and eventual community deterioration. In response to these restrictive policies that put Aboriginal Peoples at a disadvantage in the housing market, Six Nations First Nation has used Certificates of Possession (CPs) to allow members to lawfully possess land tracts on reserves. CPs are then used to obtain home building or improvement loans under two housing programs administered by Six Nations (the Six Nations Revolving Loan Fund and the Bank of Montréal and Royal Bank On-Reserve Housing Loan Programs) (Alcantara, 2005). These programs have demonstrated excellent repayment records and have proven to be successful solutions to overcoming on-reserve housing problems.

Other strategies have been employed to improve the state of reserve housing. Research by Tsuji et al. (2000) reported two educational training programs run in (and initiated by) Fort Albany First Nation, Ontario, were successful at upgrading ‘status quo’⁵ housing within the community. Twelve students, who were members of Fort Albany First Nation, enrolled in mechanical and electrical training programs and trained alongside qualified tradespeople. The Ontario Ministry of Northern Mines and Development funded these programs. The students worked in conjunction with the larger Fort Albany First Nation Retrofit Program which sought to bring status quo housing up to acceptable standards (Tsuji et al., 2000). At the time of publication, 130 status quo houses had been retrofitted (i.e. upgraded electrical and plumbing systems, reconstructed bathrooms and kitchens, and refinished interior surfaces) – an incredible achievement considering there were 198 status quo houses in Fort Albany to begin with *and* it was done on a limited budget (Tsuji et al., 2000). However, this program also provided Fort Albany with other benefits: it provided an educational and training experience for the students (some of whom were likely to be licensed in their respective trades), it provided paid employment for First Nation members, and the

5. Status quo housing refers to substandard housing built on First Nations land built in accordance with the Indian Building Code. The federal government specifies these dwellings, at the minimum, must conform to the Code, which sets minimal building standards. Status quo houses are far below livability standards compared to the rest of Canada (i.e. they usually have no running water, washrooms, proper kitchens or adequate electrical services) (Tsuji et al., 2000).

upgraded housing undoubtedly improves the general health and well-being of the community for the long-term (Tsuji et al., 2000). This program is an excellent example of an Aboriginal-led, reserve-based initiative that works to prevent homelessness and housing inadequacy in multiple ways.

Very few studies have looked at homelessness and housing issues among Métis or Inuit peoples, as most tend to focus on (status) First Nations populations. Peters (2008), however, sheds light on the socio-economic status of Métis populations stating they are disproportionately marginalized and have a lower socio-economic status than non-Aboriginal people, even though they are generally better off than other North American Indigenous populations. It can be suggested these realities may put the Métis people at a higher risk of becoming homeless. The policy approaches to preventing this must be different than those geared towards other Aboriginal groups, as Métis people tend to be scattered throughout cities and not clustered in groups. Consequently, Peters (2008) asserts that neighbourhood-focused strategies will be ineffective at addressing the socio-economic status of Métis people in cities.

Aboriginal populations living in the Arctic and Subarctic regions are experiencing their own homelessness crisis. For example, recent data indicates the Inuit experience overcrowding, housing shortages and housing inadequacies throughout their homeland: Inuit Nunangat. The 2006 Census revealed 31 percent of Inuit peoples were living in overcrowded households, which is down from 43 percent a decade earlier, but still unacceptable and ten times the rate of the non-Aboriginal population (Statistics Canada, 2008). Approximately 28 percent of the Inuit population reported they were living in a home that required major repairs (crucial items such as plumbing or electrical work), which is four times the rate of the non-Aboriginal Canadian population (Statistics Canada, 2008). There are several housing issues specific to the Nunangat-dwelling Inuit population. Firstly, this population relies heavily on (consistently inadequate) social housing because of low employment and low-income rates, which may drive overcrowding in homes (CMHC, 2004). Secondly, transportation costs for building materials and maintenance/operation costs (i.e. electricity, heating, water, wastewater services) are particularly high. This is due to the fact that these communities are located in very remote locations with extreme climates (CMHC, 2004). Thirdly, employment opportunities and skills development in these areas have been limited, which limits the economic resources and chances of upward mobility for this Inuit population (CMHC, 2004). And fourthly, chronic housing needs in the north may result from its rapidly growing population,

according to Tester (2009). Tester's (2006) research report explores many of these issues within the Inuit community of Kinngait, Baffin Island and shows how they are connected to homelessness and inadequate housing.

Abele et al. (2010) discuss how homelessness is a growing concern for the entire northern-dwelling Aboriginal population, as there is virtually no private housing market and living costs are exceptionally high. They reveal that virtually all of visibly homeless people in the Northwest Territories are of Aboriginal descent (specifically: Dene, Inuit, or Métis) – making this an Aboriginal-specific emergency. Indeed, Christensen (2012:419) writes that, "...uneven and fragmented social, institutional, and economic geographies result in a unique landscape of vulnerability to homelessness in the Northwest Territories," and affirms that relatively little attention has been paid to homelessness issues in northern/rural settings. Christensen (2009) explored housing system inadequacy among men in Inuvik and Yellowknife, and revealed that both private and government housing stocks often fail to meet demand, which serves to marginalize individuals at risk of becoming homeless. Housing stock inadequacy and high living costs are not the only drivers of the homelessness issue in the Northwest Territories. Aboriginal unemployment in the Northwest Territories is more than four times that of non-Aboriginals and is considered to be a major contributor to Aboriginal homelessness in the region (Abele et al., 2010).

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In Yellowknife, five percent of the population experienced at least one bout of homelessness in 2008, which was much higher than the corresponding figure of approximately one percent that some other major Canadian cities (Ottawa, Calgary, Halifax, Toronto) experienced (Yellowknife Homelessness Coalition, 2009). This amounted to 936 people experiencing homelessness that year. Falvo's (2011) report on homelessness in Yellowknife revealed the city's emergency shelters are crowded and understaffed, while transitional housing and independent living support units are underfunded (as evidenced by long waitlists) and limited in their abilities to meet the diverse needs of the local homelessness population (i.e. they were unable to offer daytime programming or adequately support those with substance dependency issues). The following points are some of the policy recommendations made by Falvo (2011) for this context: 1) increased accountability and collaboration among government officials and corporate/NGO actors, 2) increased shelter standards (address capacity challenges and lack of staffing), 3) more housing options for the homeless, and 4) a public health response to alcohol and drug use (i.e. promoting managed alcohol and needle exchange programs, respectively).

Off-reserve communities represent some of the largest and fastest growing Aboriginal communities in the country.

Many Canadian cities are characterized by a concentration of Aboriginal Peoples. Contrary to popular beliefs about the spatial distribution of Aboriginal Peoples, the majority (54 percent) of this population lives in urban areas (Statistics Canada, 2008). In fact, off-reserve communities represent some of the largest and fastest growing Aboriginal communities in the country (Kurtz et al., 2008; Walker, 2003). Because most reserves are small and have limited employment opportunities, migration has become necessary for many (Peters, 2001). Although moving from a reserve to a city appears to offer other benefits as well (such as increased access to social, economic, and educational resources), this population, as a whole, has not reached the same levels of socio-economic status and well-being as the rest of the urban population.

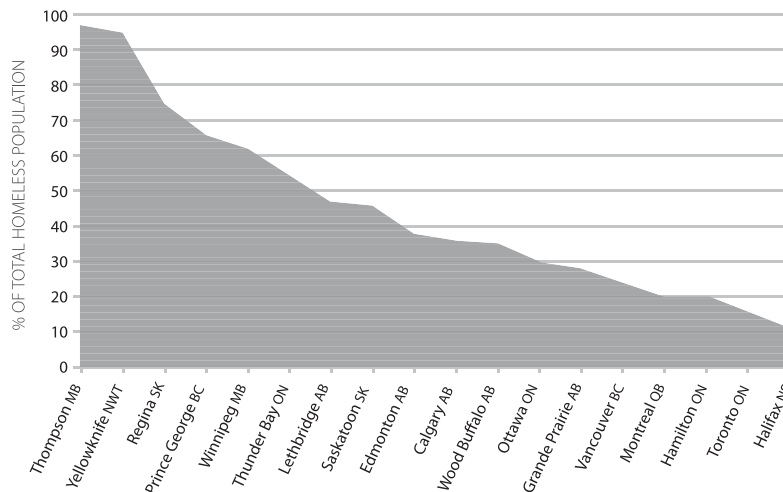
A significant proportion of housing occupied by Aboriginal Peoples in urban areas is inadequate and not affordable, and Aboriginal homelessness in major urban areas ranges is disproportionate. Numerous scholars, activists, and community members have drawn attention to the urban Aboriginal homelessness crisis, particularly in large cities (Peters, 2012; DeVerteuil & Wilson, 2010; Leach, 2010; Distasio et al., 2005; Walker, 2005). In order to address urban Aboriginal homelessness, it is necessary to understand migration patterns, and social and economic realities of urban Aboriginal Peoples, as well as the policy transformations that have affected them.

Researchers have acknowledged that the urban Aboriginal population faces unique social and economic challenges (Walker, 2005; Hanselmann, 2001). Education and training levels for this population are lower, unemployment rates are higher and incomes are lower than those of the non-Aboriginal population (Peters, 2012; Hanselmann, 2001). In addition to economic hardships, Aboriginal Peoples may experience a range of barriers when trying to make a life in cities. These barriers can be viewed as the continuation of centuries of cultural oppression. Aboriginal Peoples also disproportionately suffer from personal disabilities (physical and mental health status, substance abuse) and the effects of interpersonal violence and racism (Peters, 2012; Adelson, 2005). All of these factors put them at a significant disadvantage in the employment and housing markets. When combined with the potential loss of social support networks this increases their likelihood of becoming homeless when moving from reserve to city. However, the urban Aboriginal homelessness crisis is very much a 'macro' issue – that is, it emerges from distinct historical processes, structural causes (cultural, economical), political decisions and neglect. These topics are discussed throughout the review.

Another factor to consider is the ability of Aboriginal Peoples to secure adequate housing in cities – either as renters or owners. Recent research indicates that, “at a national level, urban Aboriginal homeownership and rental rates are lower than those of mainstream Canada, and Aboriginal Peoples tend to present higher core housing needs⁶ and lower income levels” (Belanger et al., 2012a:17). The literature on this topic reveals that Aboriginal Peoples may face economic discrimination in securing adequate and affordable housing. As Walker (2003) points out, the selection processes that include credit history checks to access rent-to-own housing may exclude many Aboriginal Peoples who often lack any credit history.

The following chart illustrates Aboriginal Peoples’ over-representation in urban homeless populations:

FIGURE 2. URBAN ABORIGINAL HOMELESS AS PERCENTAGE OF OVERALL HOMELESS POPULATION IN SELECT CANADIAN CITIES



(reproduced from Belanger et al. 2012 b)

6. The Canada Mortgage and Housing Corporation considers a household to be in core housing need if “its housing falls below at least one of the adequacy, affordability or suitability, standards *and* it would have to spend 30% or more of its total before-tax income to pay the median rent of alternative local housing that is acceptable” (CMHC, 2010:np). For housing to be considered adequate, it must not require any major repairs, according to residents. For housing to be considered affordable, it must cost less than 30% of the total before-tax household income. For housing to be considered suitable, it must contain enough bedrooms for the size and make-up of its residents (CMHC, 2010).

Little information exists on the housing status of urban-dwelling Inuit peoples. One Montréal-based study revealed urban populations of Inuit peoples are increasing in Canada and they are disproportionately homeless (Kishigami, 2008). Urban Aboriginal organizations (the Native Friendship Centre of Montréal and of the Association of Montréal Inuit) were, in this case, essential for the survival of this homeless urban Inuit population. This is because this group does not yet have useful social networks to ease their adaptation to urban living (Kishigami, 2008). Through these organizations and other shelters, Inuit peoples experiencing homelessness in Montréal secured food, clothing, and money. This population was reported to be highly dependent on provincial welfare money and able to receive it without a fixed address (Kishigami, 2008).

Correctional facilities may inadvertently serve as a temporary form of housing for people who are homeless and this fact must be included in the discussion about housing. Aboriginal Peoples are overwhelmingly overrepresented in both federal and provincial corrections systems, making up about three percent of Canada's population but about 20 percent of those serving sentences (Canadian Centre for Justice Statistics, 2005). Brown et al. (2008) reveal incarceration rates have been increasing over the past two decades. The literature has made clear links between homelessness and incarceration: individuals who are homeless are at increased risk for incarceration, and individuals recently released from prison are particularly vulnerable to homelessness (Walsh et al., 2011; Metraux et al., 2007). Residential instability has been established as a risk factor for re-incarceration (Metraux and Culhane 2004), because a criminal record may limit one's economic stability and increase their likelihood of becoming homeless (Brown et al., 2008) and incarceration is sometimes a pathway out of homelessness (Bird et al., 2010) (such populations are not usually included in homelessness counts, making it difficult to obtain an accurate number).

Peters (2006) provides some historical context on the issue of housing and explains how the Canadian federal government has officially been responsible for health and social services for reserve-dwelling First Nations people on reserves, while provinces have this responsibility for First Nations people living off-reserve. The fiduciary responsibility the federal government had to Aboriginal Peoples was also limited to "Registered Indians" (under the Indian Act) and thus excluded non-status Indians, Métis and Inuit from any benefits or protection (Abele & Graham, 2011). Although these policy distinctions have been changing over time, the reserve/off-reserve distinction applied to the Aboriginal population still informs much of the decisions made regarding funding, priorities and subsequent resource allocation.

Throughout the 1950s, 60s, and 70s there was significant movement of Aboriginal Peoples into cities, however, little changed in the way of federal policy. It was assumed moving to cities meant First Nations individuals were actively abandoning their traditional cultures and wished to assimilate with the mainstream (Peters, 2006; Peters, 2002). The federal government's narrow view on what their constitutional responsibilities toward Aboriginal Peoples should be put this population at a significant disadvantage – economically and socially – when they moved off-reserve. By limiting their responsibilities to this population, the government implied “urban areas are places where First Nations rights and identities are not significant” and “First Nations people [are]...people who are living away from places associated with their cultures and histories” (Peters, 2006:318). This effectively stripped urban-dwelling Aboriginal Peoples of any Aboriginal-specific rights and entitlements.

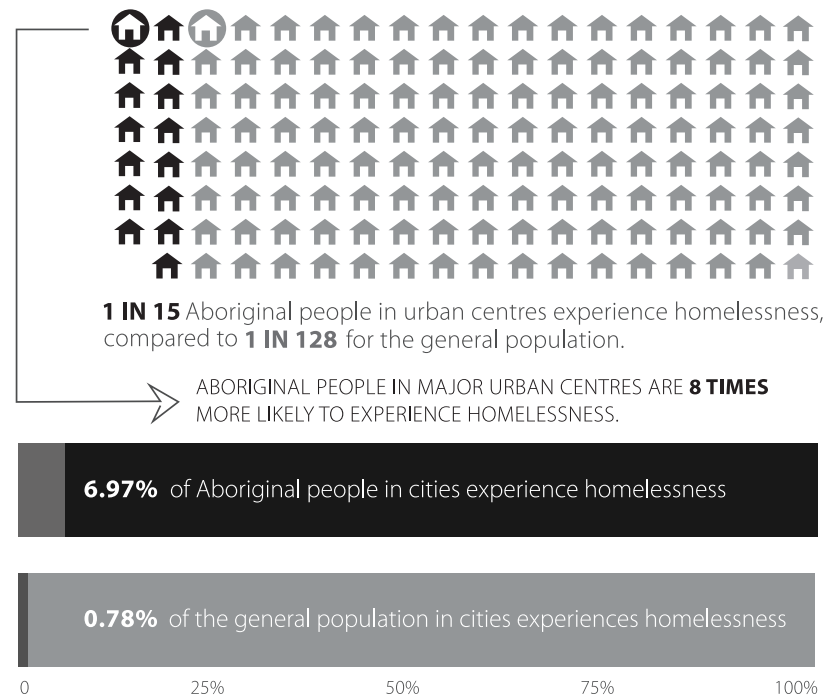
It was assumed moving to cities meant First Nations people were actively abandoning their traditional cultures and wished to assimilate with the mainstream.

Peters (1998) traces this mindset back to British colonial policy adopted in the 1830s, which sought to protect, civilize and assimilate First Nations people. It was assumed their cultures would inevitably disappear with time, and, when this did not happen, “real and imagined geographies” (Peters, 1998:670) that demarcated appropriate places for First Nations people emerged. Central to this policy was the establishment of First Nations reserves – Crown-owned tracks of land set aside for First Nations people, and intended to confine them while facilitating their path to becoming ‘civilized’ by, among other activities, learning agriculture and converting to Christianity (Peters & Robillard, 2009). Thus, the Eurocentric and racist colonial government of the time assumed reserves would eventually disappear. Urban areas were generally hostile to First Nations’ cultures and people, and individuals were excluded from fully participating in city life (Peters, 1998).

The popular imagination still perceives an incompatibility between Aboriginal Peoples and cities (Peters, 2006; Distasio et al., 2005; Peters, 1998). Figure 3 shows the disparity of homelessness amongst Aboriginal Peoples and non-Aboriginal people in cities. This misconception is historically rooted and largely determines the resources available to urban-dwelling Aboriginal Peoples. The field of social geography has made reference to “geographies of poverty” (Peters, 2001) or “geographies of exclusion” (Peters, 1998; as first explored by Sibley, 1995) when explaining the workings of deprivation and marginalization for Aboriginal Peoples through space, and particularly within cities. Other scholars have made reference to these same phenomena through their research findings (Peters, 2012; DeVerteuil & Wilson, 2010; Fiske et al., 2010; Walker & Barcham, 2010; Cardinal, 2006; Klodawsky et al., 2006; Walker, 2006; Walker, 2005; Skelton, 2002; Walker, 2003). Walker (2006) and Andersen and Denis (2003) have argued that “the privileging of nation-

based and land-based models of Aboriginal citizenship, normalized within federal-government discourse, has had the effect of marginalizing urban Aboriginal communities” (Walker, 2006:2345), and may limit the attention given to their citizenship pursuits. It is critical to note Aboriginal Peoples have done a great deal to challenge these real and imagined geographies and are actively defining new places for themselves in Canadian society (Peters, 2000). Aboriginal organizations are also making strong political statements that reveal their position about their rights and entitlements off-reserve. For example, The National Aboriginal Housing Association (2009:5) states, “[we] strongly believe that the federal government’s fiduciary responsibility to Aboriginal persons applies to all Aboriginal persons regardless of whether they live on or off reserve.”

FIGURE 3. URBAN ABORIGINAL HOMELESSNESS IN CANADA



The naturalized racism stemming from the colonial era still influences how Aboriginal Peoples are viewed and treated in urban areas, which may limit their life opportunities (see Fiske et al., 2010; Distasio et al., 2005;

Peters, 2006; 1998). Racial discrimination against Aboriginal Peoples and households continues to complicate their pursuit of adequate and affordable housing. Cohen and Corrado (2004:119) define housing discrimination as “occurring when a person is denied equal access to housing, or full enjoyment of housing, for reasons that are not related to one’s merit as a tenant or homeowner.” Numerous studies have indicated Aboriginal Peoples encounter housing market discrimination as renters, as owners, and as prospective renters or owners (Belanger et al., 2012a; Belanger, 2012b; Brown et al., 2008; Walker, 2008; Belanger 2007; Webster, 2007; Peters, 2006; CMHC, 2005, Cohen & Corrado, 2004; Walker, 2003; Barsh, 1997). For example, a Manitoba-based study by Cohen and Corrado (2004) revealed Aboriginal Peoples were subject to discrimination by a variety of actors who function as gatekeepers to desirable housing, including: landlords, subletting tenants, property managers, real estate agents, community housing agency personnel, government agency personnel and mortgaging agency personnel. Housing discrimination can have a range of effects, including overcrowding, higher rent, fewer options in locations of choice, more frequent moves, negative effects on health, negative effects on education and negative effects on employment (Cohen & Corrado, 2004).

Housing discrimination is defined as “occurring when a person is denied equal access to housing, or full enjoyment of housing, for reasons that are not related to one’s merit as a tenant or homeowner.” (Cohen & Corrado, 2004:119)

DeVerteuil and Wilson (2010:499) assert “discriminatory institutional practices across health, educational, and legal and criminal justice systems” are characteristic of settler societies such as Canada, and works to alienate Indigenous groups. Segregated and marginalized, it may be difficult for urban Aboriginal Peoples to connect with local services. A recent Winnipeg-based study determined non-Aboriginal addiction treatment facilities are failing to provide culturally appropriate services to Aboriginal Peoples and were found to be less effective for this population (DeVerteuil & Wilson, 2010). This finding has strong links to the issue of Aboriginal homelessness, given the associations between addiction and homelessness (as discussed in the *Health, Well-Being and Health Care* section).

Other studies have revealed similar findings. Sadly, Kishigami (2008) discovered that the majority of homeless Inuit people of Montréal avoided using several of the shelters and charitable organizations because they experience discrimination from non-Inuit workers and other people experiencing homelessness. Research by Kurtz et al. (2008) revealed urban Aboriginal women in British Columbia encounter barriers when trying to access health care because of racism and discrimination perpetrated by health care workers. DeVerteuil and Wilson (2010:501) locate the roots of this problem in the following way:

The emergence of an urban Aboriginal service system is not just due to the desire for appropriate services; it is also based in the profound neglect of urban Aboriginals, both legally and politically, by the Canadian federal government, as well as the inability (or unwillingness) of local players – the local state, voluntary sector, and corporate sector – to deal with the influx of Aboriginals to the city.

The literature reveals discrimination and racism stretches beyond service provision or housing markets, and can also influence Aboriginal Peoples' degree of inclusion within urban residential neighbourhoods. Several research articles have made the link between the exclusionary 'NIMBY' (or 'Not In My Backyard') phenomenon and homelessness among Aboriginal Peoples in urban areas (Belanger et al., 2012a; Fiske et al., 2010; Kingfisher, 2007). NIMBYism refers to a response by community members that serves to prevent people or supposedly 'undesirable' facilities (such as public housing, shelters or service facilities) from being located within the community, which serves to further limit Aboriginal Peoples' access to the housing market. NIMBY stems from residents fearing properties will decrease in value and disorderly persons or disruptive activities will jeopardize community harmony and safety.

The idea that Aboriginal Peoples are not 'true' or 'permanent' residents in cities is problematic, and commonly fuels discrimination and exclusionary practices. This presumption of transience or non-belonging may also hinder appropriate responses to the Aboriginal homelessness crisis.

NIMBYism is often fuelled by racist stereotypes and can contribute to creating and sustaining homelessness. Research by Fiske et al. (2010), which was based in a small Canadian prairie city, found First Nations women regularly experienced discrimination, stigmatization, and marginalization in daily life based on both their Aboriginality and gender, which prevented them from fully participating in their communities and exercising their rights as citizens, while restricting their efforts to move into 'desirable' (i.e. perceived as safe) urban communities. The NIMBYism was directed at First Nations women who wished to form a transition home that offers temporary housing and a variety of services to vulnerable First Nations women in a lower-income neighborhood. Aboriginal Peoples were being perceived by many as a threat to community stability and citizen's economic wellbeing. Stigma against Aboriginal Peoples that labels them as addicts and alcoholics, or as violent and sexually amoral, reinforced such ideas. Women were the main targets of these slanderous discourses, as they were blamed for their impoverished status, as well as for their supposedly poor choices in partners who would further contribute to community deterioration (presumably because they were violent, or had drug or alcohol issues). In other instances, community resistance to the First Nations women was based on the perceived incompatibility of Aboriginal Peoples and cities. The idea that Aboriginal Peoples are not 'true' or 'permanent' residents in cities is problematic, and

commonly fuels discrimination and exclusionary practices. This presumption of transience or non-belonging may also hinder appropriate responses to the Aboriginal homelessness crisis.

This is not the first time movements of Aboriginal Peoples have been (officially or unofficially) restricted or excluded from public spaces. In addition to the obvious confinement inherent to the reservation system, the NIMBY phenomenon is also reminiscent of the Pass System of the mid-1880s to 1930s, where Aboriginal Peoples of the Prairies were classified as criminals if they left their reserves without official permission (Fiske et al., 2010; Kirmayer et al., 2003; Barron, 1988). Fiske et al.'s (2010) study demonstrates how popular discourses and stereotypes operate to create real-life barriers for Aboriginal Peoples seeking adequate housing. These destructive forces may limit access to safe accommodation, social services, and life opportunities for people and their family members (Fiske et al., 2010; Kurtz et al., 2008). Similarly, Peters (2006) has drawn attention to the fact that urban Aboriginal women need access to appropriate, affordable housing because they are often discriminated against in the rental housing market.

The discussion about Aboriginal marginalization within urban settings is ongoing within the literature. One study, based in Montréal, rejected the presumption that migration to cities is in itself a marginalizing factor in the lives of Aboriginal women (Jaccoud & Brassard, 2003). Rather, marginalization was seen by the authors to be a lifelong process that begins in childhood and is “rooted in a much broader social context associated with the consequences of...colonization...Marginalization precedes migration into an urban setting” (Jaccoud & Brassard, 2003:143). They found factors such as poverty, non-integration into the conventional job market, involvement in gainful activities that are socially unacceptable or criminal, violence, alcohol, drugs, homelessness, reliance on food banks/shelters, and, most significantly, their personal relationships with people in similar life circumstances tended to concretize their path as marginalized persons (Jaccoud & Brassard, 2003:143). So in this view, the city can isolate women and may contribute to the deterioration of their living conditions, but their lives are more broadly “conditioned by circumstances, actors, events, and problems that are sufficiently characteristic to be considered a defining path...” and are generally beyond their given location (Jaccoud & Brassard, 2003:143). One must also take into account the benefits cities may offer – mainly opportunities for survival and protection (Jaccoud & Brassard, 2003).

Emerging literature on the topic of Aboriginal urban integration discusses how cities can be “spaces of opportunity,” as many cities are making

significant changes to improve the well-being of citizens, and often contain Aboriginal organizations and groups that work towards improving housing and living conditions, promoting capacity building and self-empowerment, and addressing migration issues (Carli, 2012; also see Heritz, 2012 for a discussion on urban Aboriginal self-determination and community building). Other literature discusses urban Aboriginal economic development (Loxley & Wien, 2003; Côté, 2012), which is a topic outside of the scope of this review, but nonetheless recommended as related reading.

Establishing adequate and affordable housing for Aboriginal Peoples, along with creating urban environments supportive to Aboriginal Peoples and their cultures, is extremely important for the younger Aboriginal population because many are urban-born and identify with a common 'Native culture' in cities (Walker, 2003). Some researchers have examined the process of creating urban Aboriginal housing. For instance, Deane et al. (2004) revealed Aboriginal residents living in inner-city Winnipeg and involved with a program that facilitated urban home ownership, felt distant and disconnected from the program for a variety of reasons. Firstly, Aboriginal Peoples sometimes have value orientations and worldviews that are different from those of non-Aboriginal people. Secondly, receiving a 'handout' may be interpreted as demeaning and may be contradictory to the culturally-valued concept of reciprocity. Thirdly, and perhaps most disturbing, Aboriginal Peoples in this study felt the program was "far-fetched, and it [was] not possible for them to achieve the goal of actually owning their own house or having their own property" (Deane et al., 2004:236). This finding most likely reveals the internalization of cultural oppression and erosion of self-worth (discussed in more detail in the *Role of Historical Trauma* section) that is common to many Canadian Aboriginal individuals. Deane et al. (2004) postulate Aboriginal Peoples may withdraw from opportunities for material advancement to avoid indignity and racism, or if they feel they are limited in controlling the outcome (and particularly if such opportunities are offered by non-Aboriginal people). Walker (2005) also found creating community partnerships can be difficult because of the distrust that can exist between mainstream and Aboriginal institutions and service users.

Creating community partnerships can be difficult because of the distrust that can exist between mainstream and Aboriginal institutions and service users.

DeVerteuil and Wilson (2010:501) report, in the face of many structural barriers in Winnipeg, there is a relatively successful network of "Aboriginal-focused and self-governed social services (e.g. health, cultural, youth, addiction treatment and literacy centers, homeless shelters, women's resources) to deal with some of the social problems of the growing urban Aboriginal population." These authors contend this has happened because

of the failures of the federal government, local governments and players, and the corporate sector to effectively support urban-dwelling Aboriginal populations (DeVerteuil & Wilson, 2010). They cite Winnipeg as a “... pioneer among Canadian cities in the establishment of Aboriginal self-governing organizations/institutions” (DeVerteuil & Wilson, 2010:501). Winnipeg Native Friendship Centres – the first one opening in 1959 – were instrumental in supporting Aboriginal migrants in their adjustment to urban life and assisted in the areas of housing, employment, and education (DeVerteuil & Wilson, 2010). Such activities are clearly productive in preventing urban Aboriginal homelessness. However, they do not address many of the structural causes of homelessness (such as poverty, systemic racism, or policy neglect) and, as DeVerteuil and Wilson (2010) point out, are often insufficient in providing a comprehensive range of services (e.g. addictions support). Another critique of the current system has been offered by Walker (2003:106), who notes there appears to be ambiguity about responsibilities as “...no jurisdiction is forced to tackle the more complex and seemingly intractable problems of constitutional responsibility for urban Aboriginal programming.” What he suggests is an institution of “unilateral program precedents that can be pointed to by other jurisdictions later on” (Walker, 2003:106). In short, solutions to the urban Aboriginal homelessness crisis are scattered and lack national vision and legislative backing.

In short, solutions to the urban Aboriginal homelessness crisis are scattered and lack national vision and legislative backing.

Another factor to consider when designing policy, programming or housing models is individuals are not necessarily fixed in one place for a long period of time. For many Aboriginal Peoples, migration between cities and rural, remote or reserve areas is a regular event. There is not a ‘typical’ experience of Aboriginal mobility throughout urban areas, and between cities and reserves, but qualitative studies provide a great deal of information about Aboriginal Peoples’ mobility. As mentioned in the previous section, Peters and Robillard (2009) discovered that in Prince Albert, Saskatchewan, the reserve was a key social and economic ‘safety net’ for urban-dwelling First Nations individuals who were experiencing housing or income insecurity. There are many reasons why a First Nations person may choose to return to a reserve after living in a city and many reasons why they may decide to leave a reserve. These decisions are primarily based on balancing needs for resources, relationships, safety, and emotional well-being. Prior research published by Distasio et al. (2005) and Skelton (2002) in Prairie contexts revealed similar findings.

It must be emphasized that Aboriginal homelessness occurs within the broader context of increasing income inequality and decreasing availability of affordable housing across Canada (Mikkonen & Raphael, 2010). The mayors

of Canada's largest cities first declared homelessness within our country "a national disaster" in 1998 (Layton, 2008). Aboriginal homelessness in major urban zones is also considered a 'national crisis.' Some sources have suggested that Aboriginal homelessness in major urban areas ranges from 20 to 50 percent of the total homeless population (Walker, 2003; Graham & Peters, 2002), while others have reported that the range may be much wider – from 11 to 96 percent (Belanger et al., 2012b). For example, a homelessness survey in Greater Vancouver conducted in 2005 found 30 percent of all homeless participants claimed Aboriginal descent, even though Aboriginal Peoples account for less than 3 percent of the region's total population (Goldberg et al., 2005). A 2008 count by The National Aboriginal Housing Association found Aboriginal representation among the homelessness population in Vancouver was 32 percent (NAHA, 2009); this is consistent with its assertion that Aboriginal homelessness is a growing issue. Aboriginal Peoples as a group are perhaps the worst afflicted by the shortage of affordable housing in Canadian cities (Walker, 2003).

Aboriginal Peoples as a group are perhaps the worst afflicted by the shortage of affordable housing in Canadian cities.

Layton (2008) reports the rise of mass homelessness across Canada in the past two decades can be traced back to the termination of the National Affordable Housing Program and the subsequent affordable housing crisis. Up until 1993, Canada had a successful national housing program that built 650,000 units to house two million people in its near five-decade existence (Layton, 2008). Since then, Skelton (2000) believes we have been in the 'emergent era' of Canada's housing policy history and this era is characterized by a reluctance of governments to get involved in large-scale housing programs. Since 1993, need for affordable housing has drastically outnumbered supply with waiting lists in most big cities averaging five to 10 years long. Taking the lead from the federal government, provinces soon withdrew from social housing and downloaded this responsibility to cities, which for the most part, were overwhelmed and poorly equipped to cope with the enormous demand (Layton, 2008). Large movements of Aboriginal Peoples to cities also coincided with government cutbacks to social housing and related programs in Canada beginning in the 1980s (Peters, 2012). The federal Urban Native Housing (UNH) Program, a Canada Mortgage and Housing Corporation-developed program that provided financial assistance for housing for urban Aboriginal Peoples, was terminated by the federal government in 1993 (NAHA, 2009). In the same year, the federally-funded Rural and Native Housing (RNH) Program, that offered rent geared to income rental housing and mortgage subsidies for homeownership, was also terminated (NAHA, 2009).

The 1990s in Canada were characterized by public sector restructuring and restraint measures, which resulted in federal and provincial governments withdrawing funding for social housing and social assistance for single people. This made life even more difficult for people who were in positions of financial vulnerability and it was at this time homelessness spiked in cities across the country (Abele & Graham, 2011). The cutbacks and restraints of this period affected Aboriginal Peoples and non-Aboriginal people alike. Social programs increasingly became the responsibility of municipal governments and resulted in the emergence of many small non-governmental organizations able to provide services to urban populations in need (Abele & Graham, 2011). As a result of a new model of federal funding of Aboriginal social programs, this era also saw greater opportunities for Aboriginal control of Aboriginal services. In many urban centres, Aboriginal-controlled service organizations that focused on capacity building and direct service provision were established (Abele & Graham, 2011; Abele, 2004). What currently exists in cities to support urban Aboriginal Peoples is largely a result of this era of change.

Since this time, the Government of Canada has made funding commitments toward the housing and well-being of both reserve- and urban-dwelling Aboriginal People. In 1999, the federal government implemented the \$753 million National Homelessness Initiative (NHI; now Homeless Partnering Strategy), which was a three-year program designed alleviate homelessness across the country by funding a range of programs and services for homeless people (Belanger et al., 2012b). Out of this funding, \$59 million was dedicated to addressing urban Aboriginal homelessness (National Aboriginal Housing Association, 2009). In recognition of the ever-escalating urban Aboriginal homelessness crisis in Canada, the federal government renewed the NHI in 2003, allocating \$45 million to the National Homelessness Initiative through the Urban Aboriginal Homelessness (UAH) module (Belanger et al., 2012b; Webster, 2007).

The dedication of homelessness funding for Aboriginal Peoples is viewed as a progressive step by some (Walker, 2003). However, Aboriginal community initiatives have not always been adequately supported by such financial infusions. This fact is particularly difficult in urban centres like Toronto, where the Aboriginal population is in the hundreds of thousands, and does little to change the situation of inadequate on-reserve housing. As Webster (2007) points out, UAH funding intended for Aboriginal shelter clients was often received by non-Aboriginal shelters, which may have limited its impact on

Aboriginal Peoples in need. The National Aboriginal Housing Association (2009) reports that the current funding extension under the Homeless Partnering Strategy (HPS) for 2009-2014 provides \$134.8 million annually, with \$14.6 million directed specifically to Aboriginal need. The HPS aims to prevent and reduce homelessness by providing support directly to 61 designated communities, along with Aboriginal and rural/remote communities.

The federally funded Urban Aboriginal Strategy (UAS), which began in 1998, endeavours to address the widening socio-economic gap between urban-dwelling Aboriginal and non-Aboriginal people through policy improvements and program development (Walker, 2005). The Government of Canada made a commitment to urban Aboriginal communities in the 2012 Budget by renewing the UAS and investing \$27 million over two years (2012-13 and 2013-14) to improve economic opportunities for Aboriginal Peoples living in urban centres (Aboriginal Affairs and Northern Development Canada, 2013). However, Walker (2005:410) feels the problem of the UAS is it “is not based in the evolving Aboriginal rights of self-determination and self-government that are central to contemporary Aboriginality.” Walker (2005:397) defines ‘self-determination’ as “the inherent right of Aboriginal/Indigenous peoples to continue governing their own affairs.” He notes, within Canada, self-determination equates to the right of self-government⁷: administrative authority over the Aboriginal population lies within Aboriginal institutions (Walker, 2005). Walker’s (2006) study of low-cost housing provision in Winnipeg found Aboriginal self-determination was not fully evident in cities, despite the fact that a majority of clients would be Aboriginal. The reality was almost none of the decision-making process took them into account. Many scholars and stakeholders dealing with this issue assert the way forward lies in Aboriginal self-determination (Abele & Graham, 2011; Walker, 2008; Walker, 2006; Walker, 2005; Walker, 2003). Others, such as Crookshanks (2012), claim self-determination may not be fully possible in an urban setting, but believe the concept is productive insofar as it sets a normative goal for ending modern-day colonialism by calling for Aboriginal control over Aboriginal governance. Most scholars in this area of study agree we have a long way to go as a nation in addressing urban Aboriginal homelessness and the discussion about self-determination is seldom omitted. Abele and Graham (2011:171) capture the current policy situation on this topic:

7. In contrast, Crookshanks (2012) contends self-determination amounts to the broader goal of autonomy, while self-government is the political manifestation of this pursuit.

There has never been a comprehensive or coherent policy framework for the federal approach to Aboriginal People living in Canadian cities. Nor has there ever been a full public discussion of urban needs and the realities of Aboriginal life there.

DeVerteuil and Wilson (2010:505) contend “the urban Aboriginal population often finds itself located in a policy vacuum.” The provision of services to the Aboriginal population in Canada is a topic that continues to be debated among federal and provincial governments (DeVerteuil & Wilson, 2010). For a more detailed overview and history of housing policy and Aboriginal Peoples in Canada, refer to the recently published article by Belanger et al. (2012a), and to the National Aboriginal Housing Association’s (2009) report *A Time for Action: A National Plan to Address Aboriginal Housing*.

There have been some urban Aboriginal housing success stories reported by the Canada Mortgage and Housing Corporation (CMHC), who usually provides much of the funding to such projects. One example is Zhaawnong Gamik, a house of Nishnawbe Homes in Toronto, which opened in 2008 and consists of 60 rental units for under-housed and homeless single Aboriginal adults, students and seniors (CMHC, n.d.). It offers affordable housing in an Elder-run culturally appropriate setting that reflects First Nations cultures and assists people in connecting to their community. Notably, the monthly rent paid by residents (an average of \$500) sustains its operating costs. The building of Zhaawnong Gamik was purchased with funding from the CMHC and the Government of Ontario (through the Canada-Ontario Affordable Housing Program). Nishnawbe Homes owns 15 properties with the goal of promoting safe, affordable, and independent living to Aboriginal Peoples who are homeless or at risk of becoming homeless. The CMHC has acknowledged the general lack of subsidized housing and affordable rental properties puts low-income families at risk for homelessness (CMHC, 2005). They also recognize there are insufficient housing options in many Canadian cities (e.g. Edmonton and Winnipeg) for low-income Aboriginal families specifically. Echoing the discussion about culturally appropriate health care services found in the *Health, Well-Being and Health Care* and *Youth* sections, many have argued that what is needed for the inadequately housed urban Aboriginal population is culturally-appropriate affordable housing and associated policies (DeVerteuil & Wilson, 2010; Walker & Barcham, 2010; Walker, 2008; Deane et al., 2004; Walker, 2003). This is “because of the closer

adherence to culturally linked conceptions and aspirations of what a home entails, management styles, and design” (Walker & Barcham, 2010:318).

A promising trend was revealed in the 2006 Census: Aboriginal home ownership is increasing (Statistics Canada, 2008). About 31 percent of on-reserve Aboriginal households reported they owned their home, up from 26 percent a decade earlier (CMHC, 2011). However, these homeownership rates are still far below Canada’s national homeownership rate of 68 percent in the same year (CMHC, 2011). Home ownership is a source of household financial stability and is recognized as a factor in positive community development. Several reports and scholarly publications have advocated for home ownership over rental housing in order to ameliorate Aboriginal homelessness in a long-term, sustainable way, as well as to provide Aboriginal households with more opportunities for financial stability and economic prosperity (Belanger et al., 2012a; 2012b; Fiske et al., 2010; Durbin, 2009; NAHA, 2009).

Another perspective on this issue is provided by Walker (2003:110), who claims a large aspect of the Aboriginal homeless crisis lies in our (neoliberal) cultural values and the public’s subsequently complacent view on the issue:

Canadians, who are driven overwhelmingly by a liberal ideology which proffers that what is good for one is just as good for the other, have an easier time affirming that Aboriginal people experience disproportionate hardship than they do agreeing with the idea that something specific needs to be done to address their needs and aspirations.

Indeed, this common belief in program neutrality and equitable access was revealed in interviews with mainstream housing professionals (Walker, 2003).

The following is a summary of recommendations for ways forward from authors on the subjects of housing and urban integration (reproduced from their original contexts):

- Housing initiatives should be culturally appropriate (Peters, 2012; Leach, 2010; Deane et al., 2004; Walker, 2003; Erasmus & Dussault, 1996).
- Mainstream programs should be more sensitive to the needs and aspirations of Aboriginal Peoples. This includes providing culturally appropriate urban services wherever possible (DeVerteuil & Wilson 2010; Walker 2003).

- Aboriginal Peoples should be involved in every stage of program design, delivery and evaluation (Walker, 2003; Walker, 2005) and should be politically involved – particularly with the development of housing policy (Cardinal, 2006).
- An acute public policy need exists for a broadening of perspectives to include not just on-reserve Aboriginal communities but also urban Aboriginal communities (Hanselmann, 2001).
- A national non-reserve housing strategy needs to be established. Specifically, the Government of Canada and the provincial and territorial governments need to meet fully, in co-operation with Aboriginal Peoples to address the need for adequate housing of Aboriginal Peoples not living on reserves (Belanger et al., 2012a).
- Establish a Housing and Homelessness Secretariat devoted to on-reserve and urban Aboriginal housing and homelessness issues (Belanger et al., 2012a).
- Reinstate and increase funding for new social housing and mortgage subsidies under the CMHC's Aboriginal off-reserve programs (Belanger et al., 2012a).
- More attention needs to be devoted to creating proactive policies to assist with urban Aboriginal homeownership and improving rental opportunities. This is not, by any means, a call for augmented assimilation policies, but rather a call for appropriate ameliorative strategies to assist with urban acclimation and attaining homeownership (Belanger et al., 2012a).
- Provide rental subsidies as a cost-effective option where rental markets exist (Belanger et al., 2012a).
- Public education strategies need to be developed to show the NIMBY phenomenon's negative impact on rental opportunities, and how improved homeownership rates translate into lower public response costs for poverty programming (Belanger et al., 2012a).
- Specific housing strategies should be facilitated that honour Aboriginal desire for self-determination in urban programming (Walker, 2003).

A national non-reserve housing strategy needs to be established. Specifically, the Government of Canada and the provincial and territorial governments need to meet fully, in co-operation with Aboriginal Peoples to address the need for adequate housing of Aboriginal Peoples not living on reserves.

- The urban reality for many Aboriginal Peoples will improve through the pursuit of land claims, treaty negotiations and urban Aboriginal self-governance (Cardinal, 2006; Stewart, 2006; Walker, 2005).
- National policies are needed to aid urban Aboriginal renters and homeowners specifically, which would help ameliorate elevated urban Aboriginal homelessness (Belanger et al., 2012a).
- Recognize culture is a key element in urban sustainability, as it often provides the social support to sustainability by providing mores, ethics and tools required to achieve sustainability (Cardinal, 2006).
- Planners in every sector and jurisdiction that have a role in housing programming should practice some basic principles of Aboriginal engagement when creating new urban low-cost housing policy (Walker, 2003).
- Federal leadership on urban Aboriginal policy issues is desperately needed in Canada, and especially given the unique and changing relationship it has with Aboriginal Peoples (Walker, 2003; Graham & Peters 2002).
- Provincial and municipal governments should improve the Aboriginal accessibility of their programs by instituting means of engaging these communities (Walker, 2003).

Federal leadership on urban Aboriginal policy issues is desperately needed in Canada, and especially given the unique and changing relationship it has with Aboriginal Peoples.

Youth

The term 'youth' is widely used in both academic and grey literature, and those writing about the topic of homelessness among Aboriginal youth have chosen to define it in multiple ways. Generally speaking, youth are classified as children to young adults, usually under the age of 21, but it is important to keep in mind these individuals could also have children of their own, and such definitions are context-dependent. The definitions of 'children', 'adolescent', 'youth', and 'young adult' vary from study to study. In their article about street youth in Canada, Kelly and Caputo (2007) acknowledge some youth programs in Canada are designed for people up to the age of 30; however, the common definition of youth in Canada is from 12 to 24 years of age. In legal contexts, youth usually refers to young people from 12 to 18 years of age (Kelly & Caputo, 2007). Baskin (2007) defines homeless youth as those aged 15 to 24 who lack a permanent stable home – that is, those who are not living with family and not in the care of child protection agencies. In other articles about youth homelessness, Miller et al. (2004) contend the range is generally from 12 to 24 years of age, whereas Matsuba et al. (2008) define it as ages 16 to 30 in the context of programming targeted to the 'at risk youth' category.

When discussing housing needs and mobility of the young Aboriginal population, Clatworthy (2008) considers those aged 0 to 14 to be children, and those aged 15 to 29 to be youth. Thus, an author's definition of 'youth' is very much dependent on what exactly they choose to study and the available participant pool (that is, the classification of a "youth" may be guided by the agency, service, program, or institution on which the research is based).

Literature on this topic often differentiates between homeless Aboriginal youth and 'at-risk' Aboriginal youth, however, few articles define 'at-risk.' Some articles discuss risk factors that may lead to homelessness or characteristics of youth who are at-risk of becoming homeless (e.g. Miller et al., 2004), whereas other articles consider homelessness as a risk factor for engaging in risky behaviour or finding oneself in dangerous or disadvantageous situations (i.e. one's health, well-being, or life is at-risk) (e.g. Matsuba et al., 2008). Articles have failed to reach a consensus on what 'at-risk of becoming homeless' means or how it is determined. In a study that assessed the effectiveness of an employment training program for a predominantly Aboriginal group of at-risk youth, Matsuba et al. (2008) found it helpful to draw on McWhirter et al.'s (1998) definition of 'at-risk youth': those youth who are homeless, have dropped out of school, have a substance addiction and/or have a criminal record, and are therefore facing challenges securing stable employment as youths and possibly as adults. However, Matsuba et al. (2008:17) adjusted the definition of 'at-risk' to align with the program they studied: "an at-risk youth is one who is homeless, is not in mainstream school, is unemployed or underemployed, misuses substances, has been or is in trouble with the law, and/or involved in an unhealthy lifestyle, and who is between 16 and 30 years." As Matsuba et al.'s article demonstrates, the definition of 'at-risk youth' can change depending on the context.

To further complicate this issue, the term 'homeless youth' is often used interchangeably with terms such as 'street-involved youth' (Marshall et al., 2008; Higgitt et al., 2003), 'street youth' (Kelly & Caputo, 2007), 'street children' (Brown et al. 2007), 'curbsiders' (Kelly & Caputo, 2007), 'runaways,' and 'throwaways' (Miller et al., 2004; Higgitt et al., 2003) – all of which have unique meanings and are neither exhaustive nor mutually exclusive (see Kelly and Caputo (2007) and Miller et al. (2004) for more complete discussions about terminology). Several authors and government agencies have differentiated between absolute homelessness (sleeping outside or utilizing emergency forms of housing such as shelters or hostels) and relative homelessness (temporarily or unsuitably housed⁸; may be hidden from official counts if staying with family/friends or in care/correctional facilities; also those who pay too much for their rent relative to their income) (Kelly & Caputo, 2007; CMHC, 2001). In addition, Miller et al. (2004) have identified 'runners' (youth who leave home permanently, with no intention of returning) as different from 'outers' (youth who periodically run away from home as a temporary coping mechanism). Therefore,

8. It is important to note being temporarily or unsuitably housed puts one at risk for "absolute" homelessness.

the Aboriginal homeless youth population (as well the homeless youth population in general) must be thought of as a group with a multitude of unique backgrounds, experiences, resources, skills, and perspectives.

Aboriginal youth are overrepresented in the Canadian homeless population and this crisis has been recognized in a variety of sources, including ones released by agencies of the Government of Canada (Kelly & Caputo, 2007; Higgitt et al., 2003; CMHC, 2001). However, a number of researchers have acknowledged research on these youth is sparse (Berman et al., 2009; Baskin, 2007; Brown et al., 2007). Official statistics paint an incomplete picture of the problem, however, researchers, advocates, and front-line workers alike have declared homelessness among Aboriginal youth is a rapidly escalating national emergency (Raising the Roof, 2009; United Native Nations Society, 2001). For example, Aboriginal youth made up almost 20 percent of the street youth population in Ottawa in 2001, but only 1.5 percent of the entire city's population (CMHC, 2001). The situation in Vancouver was found to be even more dire, with 30 percent of the street youth population being of Aboriginal descent, despite the fact that Aboriginal Peoples made up only 2 percent of Vancouver's total population (Goldberg et al., 2005). It is important to remember homeless urban Aboriginal youth are not a homogeneous population (Brown et al., 2007). Nonetheless, some common themes run through their accounts of life before becoming homeless. Negative experiences in the child welfare system, poverty and inadequate housing in their early years of life, and family histories scarred by colonization and its traumatic effects punctuate many of their stories.

Baskin (2007) points out youth in general run the risk of falling through the cracks of the public service system, as they have outgrown services intended for children but may not be old enough to utilize adult services. As a result, they are left with fewer alternatives to sleeping on the streets. However, Aboriginal youth are at disproportionate risk for becoming homeless for several reasons. First, they are more likely to come from families facing extreme poverty, substandard housing, violence or substance abuse (Peters & Robillard 2009; Brown et al., 2007). In such cases, youths may choose to leave or be forced out of their homes and/or communities, and left with little economic or social supports. Second, it is not uncommon for Aboriginal youth living on reserves to migrate to urban areas in the hopes of finding better economic opportunities or higher education (Peters & Robillard, 2009). In recent years, Canadian urban areas have been characterized by high unemployment rates and a lack of affordable housing – far from an ideal context in which to establish oneself in a new place (Layton, 2008; also see

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Matsuba et al., 2008; Miller et al., 2004). Third, and linked to the previous point, Aboriginal youth are at a major disadvantage in securing well-paying, stable jobs as a large proportion of them (68.5 percent) do not complete high school (Hick, 2007; Erasmus & Dussault, 1996). Fourth, Aboriginal youth are overrepresented in the child welfare system (Brown et al., 2007). They may or may not have had a stable home to begin with, or leave their legally-appointed care (either voluntarily or involuntarily) for a variety of reasons. Farris-Manning and Zandstra (2003) attribute poverty, substance abuse, and inadequate housing to the over-representation of Aboriginal children in care of child welfare agencies. Aboriginal children represent 40 percent of all children in care, despite the fact that Aboriginal Peoples are only four to five percent of the Canadian population (Statistics Canada, 2013).

Aboriginal young people may experience disadvantage and marginalization in unique (and perhaps more devastating) ways than non-Aboriginal youth.

Fifth, Aboriginal young people may experience disadvantage and marginalization in unique (and perhaps more devastating) ways than non-Aboriginal youth, as one study on Aboriginal Peoples concluded “cultural discontinuity and oppression...[are] linked to high rates of depression, alcoholism, suicide, and violence in many communities, with the greatest impact on youth” (Kirmayer et al., 2000:607; also refer to the *Role of Historical Trauma* section for an overview of how trauma impacts young people). Furthermore, Smith et al. (2005) revealed Aboriginal Peoples often internalized the messages of cultural devaluation promoted in residential schools, which had a lasting impact on identity, beliefs, and behaviour. As a consequence, such individuals frequently suffered from low self-esteem and negative identity as an Aboriginal person. This impacted identity and belonging in future generations, as there was an active rejection of Aboriginal identity and a lack of respect for traditional beliefs and practices.

Sixth, the Aboriginal population is the youngest and fastest growing segment in the Canadian population (Human Resources and Skills Development Canada 2013), with Aboriginal youth making up a much higher proportion of the overall Aboriginal population when compared to counterparts in the non-Aboriginal population (28 percent vs. 16.5 percent under 14 years of age; 18.2 percent vs. 12.9 percent aged 15 to 24) (Statistics Canada, 2013). Consequently, demographic data signal there may be a substantially higher rate of youth homelessness within the Aboriginal population in the coming years (Baskin, 2007). This prediction aligns with the research findings of at least one research team who revealed youth of Aboriginal descent are overrepresented within the homeless youth population in several Canadian cities (Klodawsky et al., 2006).

Finally, Aboriginal Peoples are more likely to be born with Fetal Alcohol Spectrum Disorder (FASD). The rate of FASD in Aboriginal communities

can be 10 percent or higher, versus about one percent in the general population (BC Partners for Mental Health and Addictions Information 2008). FASD can result in permanent brain damage, learning disorders, and difficulty controlling one's temper (Public Health Agency of Canada 2005). Youths and adults with FASD are at an increased risk for drug and alcohol problems, can have difficulty keeping jobs, and can get in frequent trouble with the law (Public Health Agency of Canada 2005). These factors can limit one's personal relationships, educational attainment, income and make it more difficult to obtain and maintain adequate housing. In fact, the Public Health Agency of Canada (2005) acknowledges that people with FASD may find themselves homeless because of these factors.

By the time Aboriginal youth find themselves homeless, it is likely that many of them have survived extreme poverty, racism, unsafe or inferior living conditions, pervasive dysfunction or mental health issues in families and communities, disconnection from their birth families and/or child welfare agency placements, violence, sexual abuse or neglect to varying degrees early in life. It is also possible they have endured multiple forms of such traumas (Christensen, 2012; Haskell & Randall, 2009; Trocmé et al., 2004). These factors place them at a great disadvantage both socially and economically as they approach adulthood.

In spite of these extraordinary challenges, Aboriginal youth from a variety of backgrounds have demonstrated incredible resilience and survivorship skills. Researchers have discussed informal peer support and exchange networks that exist among street youth (Baskin, 2007; Miller et al., 2004). Another research team found female Aboriginal (First Nation, Métis, and non-status) youth had profound understandings of structural injustices and they wished to minimize the effects of these being passed to their future children by reconnecting with and actively promoting Aboriginal culture (Ruttan et al., 2008), which could be considered a pathway toward homelessness prevention. Earlier research by Baskin (2007) also found Aboriginal youth attributed their homelessness to structural causes.

In spite of these extraordinary challenges, Aboriginal youth from a variety of backgrounds have demonstrated incredible resilience and survivorship skills.

A key article by Baskin (2007) studied the structural determinants thought to contribute to homelessness among Aboriginal youth in Toronto. This researcher attempted to gain 'insider views' of Aboriginal youth affected by homelessness (that is, youth who are or are at risk of becoming homeless). A strong link was found between growing up in poverty and/or involvement in the child welfare system and becoming homeless as youth. Most of these youth did not have a 'traditional' family according to mainstream standards, did not live with their biological parents, and were negatively affected by

disruptions in their care while growing up (i.e. removed from their families and passed through child welfare agency placements). Many received care from parents who were battling substance addictions, and a great deal witnessed or experienced abuse within their biological families, adoptive homes, foster homes, or group homes. This author challenges common notions of Aboriginal youth homelessness by stating these youth usually have shelter but do not have homes. Baskin (2007:39) explains this phenomenon:

Thanks to Aboriginal agencies that service youth, most of these young people are housed and have access to some health services. However, most struggle with poverty, have not completed high school, are transient, and, in the case of many female youth, are single mothers involved with child welfare who are often concerned that their children will be removed from them. This concern seems to come from a belief in the tendency for social service workers to “blame the victim” [when dealing with Aboriginal clients].

“Generations of Aboriginal children who have been removed from their families by the state have not been exposed to role models that assist in the formation of healthy identities as Aboriginal peoples.”
(Brown et al., 2007:56)

Baskin (2007) and others (Menzies, 2010; 2008; Brown et al., 2007) have noted child welfare agencies have historically been a tool of Aboriginal cultural oppression in Canada, and Baskin (2007) has gone so far as to argue the present-day over-representation of Aboriginal children in the child protection system is a continuation of this unjust colonial legacy. Many Aboriginal children have been deprived of adequate care because well-intentioned Aboriginal child welfare agencies are subject to more general federal and provincial laws and policies, which restrict Aboriginal tribal authority to manage their own affairs (Bennett et al., 2005). Brown et al. (2007:56) add, “generations of Aboriginal children who have been removed from their families by the state have not been exposed to role models that assist in the formation of healthy identities as Aboriginal peoples.”

Unfortunately, homeless youth are often misrepresented as delinquents with a propensity for crime and violence in popular media. In such cases, homelessness is attributed to individual (or ‘micro’) factors such as psychological problems or personality characteristics. This phenomenon is nothing short of victim-blaming, as it individualizes structural problems and depicts these youth as undeserving of empathy or life-improving supports. Scholars have acknowledged structural (or ‘macro’) factors are by far the most influential in determining the health and well-being of at-risk youth (Higgitt et al., 2003). Some research has indicated homeless youth who have suffered physical and/or sexual abuse are more likely to eventually participate

in criminal activities (Miller et al., 2004) – a fact that could translate to disproportionate Aboriginal representation in crime, given their overarching histories of trauma, cultural erosion, and current-day community suffering that stem from the impacts of colonization. In addition, merely surviving dangerous street life is tremendously challenging; youth may engage in violent behaviour to cope or protect themselves (Miller et al., 2004). However, these realities should be contextualized with a socio-economic lens that strives to understand and improve the situation of young people who have been born into severe disadvantage.

The coping and survival strategies of Aboriginal street-involved and at-risk youth have been reported extensively in the literature (Ruttan et al., 2008; Brown et al., 2007; Miller et al., 2004). Strong bonds often develop between street-involved youth, who naturally seek companionship and a sense of community amidst the danger and instability of everyday life (Miller et al., 2004). Several articles go into great detail about the diversity of lived experiences of homeless Aboriginal youth across Canada (Berman et al., 2009; Ruttan et al., 2008; Brown et al., 2007; Miller et al., 2004). Berman et al. (2009) report increasing numbers of Aboriginal girls are experiencing uprooting and dislocation from their homes and communities – a phenomenon thought to be connected to both interpersonal and systemic violence. Aboriginal girls aged 14-19 interviewed in this Southwestern Ontario-based study told stories of transient, unstable home lives characterized by frequent moves, regular violence, neglect, substance abuse, and prolonged poverty. It was common for these girls to report feeling disconnected from their families, culture, or community⁹. Tragically, Aboriginal girls are seven times more likely to commit suicide than non-Aboriginal girls (Statistics Canada, 2000) and there is evidence suggesting exposure to such trauma during the developmental and formative years can have lasting effects into adulthood that can increase one's risk of becoming homeless. Health Canada (2011) reported suicide accounted for over 27 percent of deaths among First Nations youth ages 10-24 between 2001 and 2002.

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and 2002.*

9. Berman et al. (2009) did not specify whether 'family' referred to biological or child welfare families, or to what specific cultures or communities interviewees were referencing. The article states, "inherent in the narratives shared by girls from all three study populations was a profound sense of disconnection from family, culture, or communities. Together, these contributed to a dissonance with respect to space, place, and identity. The girls repeatedly described feelings of 'being different,' of not belonging, of being outside and on the fringes. While they weren't always clear precisely what they were excluded from, there was a strong perception that there was some larger community to which they didn't belong" (Berman et al., 2009:423). In addition, Berman et al. (2009:424) writes, "it was during [the girls'] days, weeks, and months of living on the streets that they began to create a new sense of family and belonging." This may reveal the fluidity of the word "family," as it has different meanings for different people and does not necessarily imply a biological connection. The authors appear to understand the word as whatever its meaning is for the interviewee.

One Winnipeg-based study attempted to identify issues associated with housing for homeless Aboriginal youth who had prior involvement with the child welfare system (Brown et al., 2007). Contrary to popular representations of homeless youth, these youth expressed a desire to be seen as self-sufficient and contributing members of their community, and also revealed they had school and work aspirations. Some even aspired to mentor other youth in reaching their goals in the future. However, this sample of Aboriginal youth also frequently found themselves in short-term living situations and said they urgently required housing that was “safe, nurturing, and long-term,” as well as supportive, stable relationships with family and friends (Brown et al., 2007:56). These findings are consistent with those of previously published research with comparable populations in Calgary and Lethbridge (Miller et al., 2004).

The issue of inadequate housing is further complicated by the reality of dangerous inner-city environments and dysfunctional relationships with landlords. Aboriginal youth in Brown et al.’s (2007) study revealed their personal safety was often threatened by street violence and gang presence. Some discussed how landlords were completely absent, engaged in ‘shady’ deals for rent, or kept dirty or unsafe buildings. These youth were forced to live in such circumstances because of financial constraints – they could not find decent local housing they could afford. Several youth discussed how these situations led to them feeling they had little control over their lives, and resulted in them feeling scared and lonely (Brown et al., 2007). Another youth-focused study that included Aboriginal interviewees found a chronic lack of sleep was one factor that contributed to both depression and exhaustion among homeless youth. The chaotic and dangerous street environment led to feelings of stress and vulnerability (Miller et al., 2004). Aboriginal youth in this study had a particularly difficult time coming up with funds to secure suitable housing (i.e. first month’s rent plus a damage deposit). Consequently, it was common for them to think of their homelessness as a financial issue.

Gender also impacts how Aboriginal youth experience homelessness, as Aboriginal girls are at particular risk of being sexually abused and exploited. The *Gendered Experiences* section discusses this issue in greater detail. A report released by the Canada Mortgage and Housing Corporation (2001) revealed gay and lesbian youth were at risk of becoming homeless because of rejection from their families¹⁰. This group and Aboriginal youth were both more likely to avoid using shelters because they feared discrimination (CMHC, 2001). Therefore, Aboriginal youth who identify as lesbian, gay, bisexual,

10. This source did not specify whether the families were biological, child welfare, or both.

transgender, transsexual, queer, questioning (LGBTTQ) or as ‘Two-Spirit’¹¹ may experience unique and intersecting forms of social suffering if they find themselves homeless.

The health of Aboriginal street youth has also been studied. Through their research on HIV infection among homeless and street-involved youth in Vancouver, Marshall et al. (2008) found Aboriginal youth were disproportionately burdened by HIV infection. Aboriginal youth in their study were more than two and a half times more likely to be infected with HIV than their non-Aboriginal counterparts. Marshall et al. (2008) postulate unsafe sexual activity, sex work, and other unspecified factors – not injection drug use¹² – are the primary transmission routes. Like many other researchers focusing on Aboriginal health and well-being, this research team calls for culturally appropriate and evidence-based approaches to prevent the perpetuation of this epidemic among Aboriginal youth, as well as to provide support to those infected.

Some scholars have chosen to focus on macro-level improvements and suggest focusing on prevention (i.e. through addressing the social and economic conditions of Aboriginal populations), early intervention and bridging the gaps within social institutions will be the most effective ways of protecting youth from homelessness (Higgitt et al., 2003). To address the structural determinants that contribute to Aboriginal youth homelessness, Baskin (2007) draws on the perspectives of her youth participants and advocates for a culturally appropriate framework that addresses forces of colonization in both the past and present. Such an approach would be empowering, as it incorporates Aboriginal cultures, values and history, while utilizing the skills of Aboriginal professionals to deliver services. Baskin (2007) also points

11. ‘Two-Spirit’ refers to the widespread belief in many Aboriginal cultures that some individuals possess both masculine and feminine spirits, which give them unique and respected spiritual and social roles. This term does not necessarily line up with mainstream Euro-Western terms. For example, a transgender Aboriginal person may not think of themselves as Two-Spirit, but some homosexual and bisexual Aboriginal peoples do identify as Two-Spirit (Taylor, 2009).
12. To clarify, Marshall et al. (2008:2) write, “the fact that HIV-infected Aboriginal youth were less likely to report injection drug use and be co-infected with [Hepatitis C virus] suggests that unsafe sexual activity, sex work, and *other unmeasured antecedent factors* may be responsible for a significant proportion of infections” (my emphasis). Here, they acknowledge there may be other reasons to account for the disproportionately high HIV rates among Aboriginal youth, without speculating what those factors may be. Later, they state, “although we recognize that HIV vulnerability among Aboriginal populations is produced through a complex interplay of social, structural, and historical factors such as poverty, cultural oppression, and the multigenerational effects of the residential school system, *we were unable to measure and characterize many of these effects*” (Marshall et al., 2008:4, my emphasis). So again, these authors acknowledge they are not clear about the exact transmission routes in all cases, but the language they use (i.e. “unmeasured”) leaves it open for further investigation.

out child welfare legislation (such as the Child and Family Services Act in Ontario) does not differentiate between neglect and poverty. This may put Aboriginal children and youth at an increased risk for entering the child protection system, and subsequently for becoming homeless, while leaving the structural causes of poverty unexplored. Youth in Baskin's (2007) study had several suggestions for positive change at the policy level to prevent more Aboriginal children from becoming homeless youth:

- More Aboriginal policy makers and changing child welfare legislation (including an Aboriginal Family and Child Services Act, developed by Aboriginal Peoples, that recognizes the impacts of colonization).
- Prevent the penalization of Aboriginal families for being poor by clearly differentiating between poverty and neglect.
- Policy-level recognition of Aboriginal definitions of family, childcare and parenting, including respect for Aboriginal values of collective responsibility for children and communal sharing of resources.
- Facilitate the fostering or adoption of Aboriginal children to Aboriginal families through government funding and appropriate legislation. Place an emphasis on keeping children in their home communities (with family or community members). Make cultural connections mandatory for Aboriginal youth taken into non-Aboriginal families.

Programs that help at-risk youth find work have been shown to be beneficial for Aboriginal participants, thus reducing the likelihood they will become or remain homeless. One study by Matsuba et al. (2008) assessed an employment training program geared towards inner city at-risk youth in British Columbia that also emphasized psychological health (by addressing poor self-esteem, loneliness, and isolation). Psychological well-being is generally acknowledged as a predictor of securing employment. This program was credited for significant improvements in psychological well-being among the predominantly (69 percent) Aboriginal participant pool (Matsuba et al., 2008). These researchers assert "any at-risk youth career development program that hopes to attain any meaningful and long lasting effect needs to address the underlying psycho-socio-emotional struggles that at-risk youth face" (Matsuba et al., 2008:23). In addition, such programs are thought to be particularly relevant for at-risk Aboriginal youth as they help these young people deal with some of the persisting effects of intergenerational trauma

such as substance abuse, anger, and depression – issues that often prevent them from finding and keeping work. These findings are consistent with research by others (Chandler & Lalonde, 2008; Ruttan et al., 2008) that highlight the importance of cultural connections and healthy psycho-social status.

As a result of interviews with a group of homeless and at-risk youth (including those of Aboriginal descent), Miller et al. (2004) put forth four recommendations to improve services geared toward youth:

- Build on the youths' optimism and determination through the development of peer networks.
- Mobilize and support interest in education and employment through contacts with employers.
- Support ties to family, including extended family or families of choice when available.
- Use current living arrangements or create living arrangements which facilitate education and employment.

Obviously, sufficient funding must be provided to develop and sustain such initiatives (Miller et al., 2004). A number of service-providing organizations believe this is the responsibility of the federal government, given the structural nature of historical and contemporary Aboriginal injustices (Miller et al., 2004).

Researchers have noted the challenges faced by these youth – the lack of adequate housing, education, and employment opportunities – severely limit them from obtaining the stability and independence they so greatly desire (Brown et al., 2007; Miller et al., 2004). Furthermore, researchers have argued penalizing that these youth for their involvement in street life will not solve the youth homelessness issue, especially for youth who are products of the child welfare system and may have adapted to utilize 'non-traditional' social and economic resources to meet basic life needs (Brown et al. 2007). Tragically, homeless youths who have been physically or sexually abused are more likely to engage in illegal activities and behave violently, and subsequently face criminalization (Baron and Hartnagel 1998). Brown et al. (2007) emphasize a productive way forward is to fund and develop second stage housing models (i.e. safe, short term, supportive housing) that are based on local community-identified priorities. Such resources reduce the likelihood of youth who exit the child welfare system, especially after the age of 18, experiencing homelessness.

Baskin (2011) describes how the Aboriginal Legal Services of Toronto's (ALST) Community Council has been instrumental in turning around the lives of homeless and criminally-involved Aboriginal youth. The Community Council serves as culturally-relevant alternative to jail and endeavours to provide community healing and foster cultural pride. In addition to providing legal services and allowing offenders to make reparations to the victims of their crimes, it offers housing and schooling assistance, job training, harm-reduction addiction programming, counselling and connections to Aboriginal role-models. Through these activities, the Community Council does much more for Aboriginal Peoples than simply addressing homelessness or crime. It takes a holistic approach in assisting the offender and gets to the roots of why they turned to crime, all with the end goal of community reintegration. It also allows young Aboriginal Peoples who have committed crimes to avoid a criminal record – something that could irreparably damage their futures and economic opportunities – and allows them to reconnect with Aboriginal community members and cultural values. This is seen to significantly reduce the likelihood of becoming repeat offenders, and is a valuable approach in both community-building and Aboriginal autonomy. Thus, this form of “healing justice” (Baskin, 2011) is beneficial to both youth and the community, and should serve as a model for other youth-focused or Aboriginal justice programs.

To summarize, the literature is clear in its advocating for more community-based and community-driven housing, which should be on political agendas and included in community budgets. Other researchers focused on Aboriginal youth homelessness have also highlighted the importance of youth-specific considerations in official policy and budgets. For instance, Klodawsky et al. (2006:420) have stated there is a gap in funding for community organizations that work with homeless youth and suggest a move away from “programming for marginalized youth [that] is problematically geared to narrowly defined employability issues.” Klodawsky et al. (2006) also advocate for more integrated, multiservice agencies to meet youths’ vocational and emotional needs in one place. Such facilities would have to be appropriately located as well – a particular concern for Aboriginal youth who have close interpersonal ties on reserves or in more remote locations. Others recommend an expansion of alternative schooling options, financial supports to education and job training, and a greater emphasis on family counselling in schools and by social service agencies (Miller et al., 2004). Facilities that take a holistic approach to life improvement by simultaneously encouraging self-sufficiency, supporting employment independence, and attending to emotional and spiritual needs were ultimately deemed to be the most promising.

Gendered Experiences

A person's gender and sexual orientation are key factors that influence one's experiences in, and perspectives of, the world. Gender and sexual orientation can also intersect with one's ethnicity and generate a myriad of lived experiences. In some instances, these personal attributes are associated with unjust social and economic disadvantage and societal marginalization. Often this can happen in a 'layered' or 'intersecting' way that can further amplify social disadvantage. Additionally, gender and ethnicity have both been found to be influential determinants of health and well-being (Public Health Agency of Canada, 2012; Whitzman, 2006; Adelson, 2005; Bourassa et al., 2004). The majority of the gender-focused literature on the topic of Aboriginal homelessness discusses females. Perhaps the reason for this is that females bear a disproportionate burden of stigma when mainstream discussions about the causes of poverty and homelessness emerge (Whitzman, 2006; Culhane, 2003; Canadiana, n.d.). Women's suffering is often attributed to their individual "bad choices," which, as Hays (2003) points out, has become a common theme in both policy and individual self-perceptions. Consequently, some scholars have called for an examination of the unique ways women fall into and experience homelessness – a phenomenon referred to as "gendered homelessness" (Klodawsky, 2006; Watson, 1988). Few publications

have focused exclusively on males and homelessness, but those that have concentrated on the subjects of trauma (Menzies, 2009), and housing issues related to involvement with the criminal justice system (Christensen, 2012; Brown et al., 2008).

Aboriginal females of all ages experience a disproportionate burden of housing problems. Research indicates Aboriginal girls and young women are overrepresented in the homeless populations of Canada's cities (Ruttan et al., 2008; Baskin, 2007; Novac et al., 2002), and Aboriginal women are more likely to be 'sleeping rough' (i.e. on the streets) in the centres of big cities than women of other ethnic groups (Whitzman, 2006). While young Aboriginal women experience homelessness in much of the same ways as other homeless individuals do, their background, pathways into homelessness, and reasons for staying homeless can largely be attributed to ongoing and structurally rooted injustices which disproportionately affect Aboriginal Peoples in Canada (Ruttan et al., 2008; Baskin, 2007).

Studies consistently reveal Aboriginal women are disproportionately burdened by poverty and its associated social and health effects.

For Aboriginal women, a unique relationship with the Canadian state through history and up to the present day influences their social standing, treatment, health, well-being and access to vital services. Studies consistently reveal Aboriginal women are disproportionately burdened by poverty and its associated social and health effects (Adelson, 2005). In fact, one research team has argued "the colonial legacy of subordination of Aboriginal people has resulted in a *multiple jeopardy* for Aboriginal women who face individual and institutional discrimination, and disadvantages on the basis of race, gender and class" (Browne & Fiske, 2001:27, emphasis added) – a viewpoint that has been shared by other researchers (Haskell & Randall, 2009; Farley et al., 2005). Tragically, Aboriginal women also face specific and persisting vulnerabilities to sexual exploitation, violence and murder that have become both sensationalized and normalized in mainstream media (Native Women's Association of Canada, 2011; Culhane, 2003). These facts are related to homelessness in complex ways, and will be discussed in the sections below. Age and sexual orientation have also been identified as determinants of disadvantage that intersect with gender and sexuality, as female Aboriginal youth and youth identifying as part of LGBTTQ communities are overrepresented in Canada's homeless youth population (Higgitt et al., 2003; Novac et al., 2002; CMHC, 2001).

The Native Women's Association of Canada (2004) highlights the fact that Aboriginal women living on reserve are at a significant disadvantage in the context of matrimonial law, as the Government of Canada has failed to

provide spouses living on reserves with legal recourse for obtaining interim exclusive possession (a court-ordered agreement allowing one spouse to stay in the family home with a judge deciding one spouse must move out) of the family home. The equivalent is available to all spouses living off-reserve. A woman would require this type of legal intervention to take possession of the family home in the event that she needed to protect herself and any children from domestic violence. Even in cases where women on reserve are able to obtain a restraining order against their spouse under the Criminal Code, they cannot get this order for exclusive possession unless they are the sole person named on a Certificate of Possession (NWAC, 2004). Unfortunately, few First Nations communities have policies that take such issues – which NWAC (2004:10) terms ‘gendered racism’ – into account to assist women in accessing adequate, affordable and safe housing for themselves and their children.

Although First Nations women are diverse with respect to nation of origin, culture, language, sexuality, socio-economic status and life experiences, they share a collective experience of discrimination that stems from the Indian Act of 1876 and has continued in the form of other disadvantageous, neo-colonial government policies persisting to the present day (Peters, 2006). Racist and colonial-minded government processes worked to disrupt traditional Aboriginal gender roles and notions of family beginning with the Indian Act. Culhane (2003) explains how Aboriginal women were displaced from the positions of respect they held when patriarchal European values and structures were forcefully imposed on Aboriginal societies. The Indian Act sought to impose male-dominated political and social systems onto Aboriginal Peoples. It specifically barred Aboriginal women from property rights and made them second-class citizens. Unlike males, women’s Indian status could be stripped depending upon who they married. The Indian Act denied legal status and entitlements to Aboriginal women who married non-Aboriginal men, or those who married Aboriginal men who were non-status or Métis, and consequently prohibited them from living on reserves (Culhane, 2003). Under the Act, such women were also prohibited from treaty rights, as well as from passing their status onto their children (Bourassa et al., 2004). Because of the 1869 Act for the Gradual Enfranchisement of Indians that predated the Indian Act, Aboriginal women were barred from holding positions of political leadership or participating in band politics; their right to vote in band elections was only restored in 1951 (Peters, 1998; Erasmus & Dussault, 1996).

Racist and colonial-minded government processes worked to disrupt traditional Aboriginal gender roles and notions of family beginning with the Indian Act.

The Indian Act was amended in 1985 with the passage of Bill C-31, which allowed for the reinstatement of status for *some* of the women and children who were denied status through the Act. However, Bourassa et al. (2004:26)

All of these 'legal' processes imposed a male-dominated political system on Aboriginal Peoples, which was thoroughly incompatible with Indigenous notions of power, hierarchy and respect.

note, “despite the amendment, long-standing implications of the Indian Act for Aboriginal women in Canada are still evident” as over 25,000 Aboriginal women who lost their status between 1867 and 1985 were forced to leave their communities. Bourassa et al. (2004) highlight this resulted in irreparable damage, as these women and their descendants became increasingly alienated from their cultures and communities. All of these ‘legal’ processes imposed a male-dominated political system on Aboriginal Peoples, which was thoroughly incompatible with Indigenous notions of power, hierarchy and respect. Prior to this, Aboriginal women were held in the highest regard in their communities and homes because they were both the givers of life and the keepers of cultural traditions, practices and customs (Baskin, 2011; NWAC, 2011). Within their communities, Aboriginal women were considered to be uniquely sacred beings, as they had the ability to create new life and, consequently, to form new relationships with the Creator. In addition, women possessed substantial political and economic status in their communities and were often in charge of the land they lived on¹³ (Kurtz et al., 2008). The Aboriginal family unit was based on gender balance and functioned through cooperative structures (Boyer, 2006). All of this changed in the era of colonization. In addition to the harmful effects of official policy, colonizers deliberately destroyed the status of Aboriginal women by popularly characterizing them as ‘drunken,’ ‘dirty,’ ‘easy’ and ‘lazy’ (Kurtz et al. 2008). The pejorative ‘squaw’ has been – and still is – used to derogatorily refer to Aboriginal women (Baskin, 2007). Authors and activists have argued remnants from this degradation continue to fuel Aboriginal women’s oppression and suffering (Kurtz et al., 2008; Boyer, 2006; Culhane, 2003). Colonization effectively silenced Aboriginal women’s voices and created damaging stereotypes that still have an effect on how they are viewed and treated. The *Role of Historical Trauma* section discusses colonization and trauma in greater detail.

Few articles make the connection between history, representation and homelessness among Aboriginal women. However, Ruttan et al.’s (2008) research makes this connection through interviews with homeless female Aboriginal (i.e. First Nation, Métis and non-status) youth in Edmonton. This work sheds light on the pathways into, and lived experiences of, homelessness. These young women discussed how intergenerational trauma disrupted many of their lives, loved ones and communities. Specifically,

13. Aboriginal Elders teach, in pre-contact time, land ownership as we conceive of it today did not exist, while scholars such as Kurtz et al. (2008) refer to Aboriginal women as having been landowners. Other scholars, such as Haig-Brown (2009:4) take the position, “for many Indigenous peoples the concept of land ownership is and was foreign to their ontologies: land is never owned. Rather it is a spiritual and material entity to be treasured and cared for as a relative for all those generations of beings who will follow.”

forced assimilation and subsequent removal of Aboriginal children from birth families, ‘toxic’ (that is, identity-damaging) narratives stemming from residential school experiences, unjust child welfare intervention and current-day structural inequalities for Aboriginal Peoples all contributed to these women’s homelessness (Ruttan et al., 2008). However, subtle processes in daily life also contributed to the severe marginalization of these women. The interviewed women reported being treated in a racialized and sexualized manner by a variety of people: from personal acquaintances to representatives of government service systems (including police officers), which the women viewed as perpetuating historical stereotypes (Ruttan et al., 2008). Sadly, it was found these young Aboriginal women frequently internalized such “toxic narratives of identity” and often did not possess “healthy narratives of opposition,” demonstrating the internalization of discrimination and stigma (Ruttan et al. 2008:47). Other scholars have also recognized the harm racism combined with sexism does to Aboriginal women’s conceptions of identity (Adelson 2005, LaRocque 1994). Some have explored how such forces limit Aboriginal women’s access to services and affordable housing (Fiske et al., 2010; Browne, 2007; Fiske & Browne, 2008; 2006; Peters, 2006; Browne & Fiske, 2001).

In this context, it should be easy to understand how trauma stemming from colonization, economic deprivation, racism, cultural disconnection, family fragmentation, self-stigmatization, erosion of self-esteem, depression and hopelessness all contribute to homelessness among Aboriginal women. In addition, the parallels between the past and present should not be overlooked: the deliberate slander and devaluation of Aboriginal women by men in positions of authority in the present day is frighteningly reminiscent of the actions of many federal Indian agents in the early twentieth century, who openly (and incorrectly) attributed the spread of diseases like tuberculosis to the ‘laziness’ of Aboriginal women as housekeepers (Ruttan et al. 2008). Looking at both the past and present, it can be said that social suffering – which includes homelessness – is both a racialized and gendered phenomenon.

Ruttan et al.’s (2008) study also found young Aboriginal women’s difficulties in maintaining housing was linked to the intergenerational effects of trauma – particularly within their families and home communities (Ruttan et al., 2008). Women were uniquely impacted in these processes, as women of all generations were profoundly affected by the removal of Aboriginal children from their families in order to foster assimilation. These children were either placed in residential schools or entered the child welfare system. Many of these women were, as a consequence, dealing with difficulties in

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physical, social, emotional, and spiritual well-being. The influence of toxic narratives emerging from residential school attendance, overly invasive child welfare intervention, and historical and ongoing systemic inequities were all factors that contributed to participants' homelessness (Ruttan et al., 2008). In addition, these young women were largely deprived of the guidance and support that Aboriginal women had traditionally received throughout womanhood from their mothers, grandmothers and aunts, as older generations were often grappling with addictions, extreme poverty and interpersonal violence (Ruttan et al., 2008). This research found that mothers whose children were taken often dealt with this trauma by falling into substance addiction and other destructive habits that further reduced their chances of being reunited with their children or securing stable housing (Ruttan et al., 2008). A more detailed discussion about pregnant/parenting Aboriginal women with substance misuse problems and child welfare system involvement is contained in Baskin et al. (2012). This research project report examined how the relationships between these women, who often experience homelessness, and those assigned to aspects of their care (drug treatment counsellors and child welfare workers) to can ultimately be improved. Among the many recommendations proposed by Baskin et al. (2012:iv) are the following:

- Understand and implement Aboriginal worldviews particularly regarding the importance of families and communities in the raising of children.
- Respect the complexity of the healing journey and the context from which women begin and travel along their respective journeys. This can include many ups and downs, as the healing process from trauma and substance misuse is not necessarily linear.
- Provide space for mothers to learn healthy parenting according to Aboriginal worldviews and values, which will minimize the risk for child apprehension.
- Explore challenges women have, such as mental health concerns and addictions, the barriers that create difficulty for them to be well, and ways in which mothers can parent within their particular circumstances.
- Educate about and implement anti-oppressive, anti-racist and anti-colonial ways of assisting families.

- Involve Aboriginal mothers in the development and evaluation of programs and services within child welfare and substance misuse treatment.

Several participants were frustrated at deficiencies in the public system, as they revealed government social and housing agencies would only help them to transition from the streets when they were pregnant, even though they had sought help earlier with little success (Ruttan et al., 2008). These women usually become pregnant while on the street and then transition off the streets while pregnant or with a new baby. Since they also have to cope with substance withdrawal, parenting and handling new choices, the birth of a child can be an incredibly stressful time in the lives of both women and their children. Parenting, education, support, and life skills programs with an Aboriginal focus offered by community service agencies (that taught anger management, relationships, finances and Aboriginal cultural values while offering daycare) helped these women a great deal (Ruttan et al., 2008). Reconnecting with culture and redeveloping positive self-identities assisted in creating healthier lifestyles and transitioning out of homelessness (Ruttan et al., 2008). A few participants credited a reconnection to both culture *and* spirituality (i.e. prayer, faith teachings, connecting with God and/or the Creator) to exiting from street life.

The health, well-being, quality of life, and life chances of Aboriginal children are largely determined by those of their parents, and particularly those of their mothers who tend to bear much of the responsibility for childrearing. Several scholars have determined Aboriginal women and children are among the most vulnerable within Canada's population, as they disproportionately suffer the effects of poverty, racism, stigma and gender violence (Adelson, 2005; Culhane, 2003; Wright, 1999). Some Aboriginal women have declared they are at-risk of these assaults on their well-being both within the dominant Euro-Western (i.e. white) culture *and* within the Aboriginal community (Wright, 1999). This latter assertion may be attributed to the internalized stigmas that have been active since the colonial era and adopted by much of society, including Aboriginal Peoples themselves. Connected to this, Syme et al. (2011:4) report, "substance use and mental health problems frequently co-occur among women who are survivors of violence, trauma, and abuse, often in complex, indirect and mutually reinforcing ways." One study estimated 70 percent of street sex workers in the least desirable (i.e. most dangerous and lowest paying) 'tracks' of Vancouver's severely impoverished Downtown Eastside were young Aboriginal women (under age 26) and that most were mothers (Currie et al., 1995) – a phenomenon Culhane

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(2003) has termed a “racialized hierarchy¹⁴.” This is just one example of the gender-based inequality and violence Aboriginal women face. Browne et al. (2000:16) assert among the “most troubling consequences of the colonial legacy in health and social service sectors are the discriminatory judgments leveled against Aboriginal women as mothers.”

To put this crisis into perspective, three times the number of Aboriginal children are currently in state care than at the height of the residential school era.

All of these realities inevitably have an effect on the ability of mothers to parent their children and to provide them with the necessities of life, including adequate housing. The data on Aboriginal children placed into protective care by child welfare agencies (as discussed in the *Youth* section) is both alarming and consistent with what is known about the lives of many Aboriginal women. To put this crisis into perspective, three times the number of Aboriginal children are currently in state care than at the height of the residential school era (Blackstock, 2003). The overrepresentation of Aboriginal youth in protective care is mainly attributed to neglect (that is, failure to provide physical necessities such as shelter, food and clothing, and/or failure to protect them from harm, emotional neglect, or educational neglect) (The National Collaborating Centre for Aboriginal Health, 2010). However, such ‘neglect’ can usually be traced to structural factors and not the personal failings of a parent. Researchers examining neglect among Aboriginal children found families were profoundly affected by poverty, inadequate housing and substance misuse – factors that were generally regarded as beyond the parent’s capacity to control (Trocmé et al., 2005, Trocmé et al., 2006). Substance abuse as a driving factor of both child apprehensions and homelessness is consistent with the extensive literature on intergenerational trauma and coping mechanisms as discussed in the *Role of Historical Trauma and Health, Well-being and Health Care* sections. Recent statistics also indicate Aboriginal families are two to three times more likely to live in public housing or housing that is unsafe or overcrowded than their non-Aboriginal counterparts (National Collaborating Centre for Aboriginal Health, 2010), which may shed further light onto the ‘neglect’ issue and why a disproportionate number of Aboriginal children are removed from their birth families.

Aboriginal child welfare is incredibly sensitive topic, as child welfare laws with assimilationist objectives were enacted by provincial governments in

14. This term encapsulates the reality that, in Vancouver’s sex trade, the selling of sex is subject to a ‘racial’/ethnic hierarchy that puts Aboriginal women at the bottom. Culhane (2003:598) states, “non-Aboriginal women who work on the street have access to somewhat safer and higher-earning areas” and “men who seek out women working in the ‘low track,’ in Vancouver and elsewhere, are buying a license to commit violence, to degrade, and to demean women considered disposable by ‘Johns’ and by society as a whole.”

the past (Blackstock et al., 2004; Kirmayer et al., 2003). Some researchers have argued child welfare is yet another tool used by the state to control Aboriginal Peoples, while failing to address the structural roots of 'child neglect' (Blackstock et al., 2004; Trocmé et al., 2004; Kirmayer et al., 2003). This perspective is shared by many Aboriginal Peoples and activists. Blackstock et al. (2004:2) claim "the misinterpretation of the conditions experienced by Aboriginal families coupled with the misapplication of Euro-Western values, social work pedagogy and practice have resulted in inappropriate mass removals of Aboriginal children and their placement in predominantly non-Aboriginal homes."

Current socio-economic and political realities continue to have an impact on the housing status and general quality of life of many Aboriginal women. Several academic articles have acknowledged Aboriginal women experience the highest rates of poverty when compared to other Canadian women (McCall et al., 2009; Adelson, 2005; Bourassa et al., 2004). Through interviews with Aboriginal women in Vancouver, Culhane (2003) revealed lack of jobs and below-subsistence welfare rates were driving these young women into the sex trade. She connects this phenomenon to BC's political environment:

Material conditions for Aboriginal women in Downtown Eastside Vancouver have worsened considerably [from 2001-2002]. British Columbians elected an extreme right-wing party – ironically named the Liberals – to form the provincial government. Welfare reform policies adopted from the United States have been implemented that have reduced benefits and services to single mothers, unemployed youth, and disabled people (Culhane, 2003:603).

The British Columbia Liberal Party, which does not have a clear poverty reduction plan, continues to be the province's ruling party.¹⁵

Other scholars have drawn attention to the fact that Aboriginal women are in a disadvantageous position in the labour market because they are less likely to have a university education than their non-Aboriginal counterparts (Peters, 2006). Aboriginal women are more likely to have low incomes or be unemployed, are more likely to work lower-tier job positions and are less likely to hold positions in management (Peters, 2006). These factors all reduce their chances at upward mobility and may increase their likelihood of experiencing homelessness. Some people, however, have suggested

15. See details at <http://bcpovertyreduction.ca>.

these realities are changing since the proportion of First Nations people in management have increased in the past decade and there are many examples of First Nations women living in urban areas who have well-paying jobs (Wotherspoon, 2003).

Academics have acknowledged homelessness is a significant risk factor in the sexual exploitation of Aboriginal females in Canada.

Academics have acknowledged homelessness is a significant risk factor in the sexual exploitation of Aboriginal females in Canada (Sikka, 2009; Sethi, 2007; Farley & Lynne, 2005; Gorkoff & Runner, 2003). Because many Aboriginal girls experience extreme forms of poverty, isolation, and abuse, and, at the same time, may not have access to safe and affordable housing, can be forced into exploitative situations to meet basic life needs (i.e. shelter, food, clothing). Not surprisingly, Sethi (2007:61) identified structural factors such as poverty, racism and historical injustices (which subsequently lead to violence, substance abuse and isolation within Aboriginal communities) as major root causes “that affect the safety and well-being of Aboriginal girls and put them at risk of sex trafficking.” In sum, being homeless or living with the ongoing threat of becoming homeless put Aboriginal females at greater risk for sexual exploitation. Tragically, Aboriginal girls as a group have disproportionately high rates of suicide (as discussed in the *Youth* section), which suggests gender is an important consideration when trying to understand the lived experiences of extreme poverty and social exclusion.

One study of homeless youth in Ottawa revealed both Aboriginal youth and female youth had experienced the highest levels of violence than male or non-Aboriginal demographic groups (Klodawsky et al., 2006), suggesting violence is a racialized and gendered phenomenon. Farley et al.’s (2005) research, based on interviews with 100 women selling sex in Vancouver (52 of them claiming First Nations descent), makes a clear link between homelessness and sex work. They found most of these women had experienced lifetimes of violence and were frequently suffering from post-traumatic stress disorder. An astounding 86 percent of women interviewed reported current or past homelessness and housing was listed as one of their most urgent needs (Farley et al., 2005). The researchers concluded, “the overrepresentation of First Nations women in prostitution...reflects not only their poverty, but also their marginalized and devalued status as Canadians” (Farley et al., 2005:256).

There is also a historical dimension to the overrepresentation of Aboriginal women in the sex trade, as Aboriginal women have been routinely objectified and devalued throughout Canada’s history. White male settlers asserted ownership of Aboriginal women in the era of colonization, as *all* women

were deemed to be the legal property of males (Sikka, 2009). During this time, Aboriginal women were also represented as sexually available, morally inferior and sub-human by colonizers (Sikka, 2009). LaRocque (1994:73-74) explains how such ideas became popularized:

A complex of white North American cultural myths, as expressed in literature and popular culture, has perpetuated racist/sexist stereotypes about Aboriginal women. A direct relationship between racist/sexist stereotypes and violence can be seen...in the dehumanizing portrayal of Aboriginal women as 'squaws', which renders all Aboriginal female persons vulnerable to physical, verbal and sexual violence.

To add to this, Razack (2000) revealed society's conflation of "Aboriginal woman" with "prostitute" through an analysis of media reports from the 1800s up to the present day. These facts provide insight into the naturalization of widespread dehumanization of Aboriginal women. Tracing the history of sexualized racism is relevant to the study of Aboriginal homelessness because sexual violence and racism are contributing factors to homelessness among Aboriginal women. It is important to note Aboriginal women have not passively accepted these portrayals, as they continue to mobilize to resist them, while demanding dignity and justice within Canadian society (Culhane, 2003).

Other researchers have looked at the mobility patterns of Aboriginal women. For instance, Skelton (2002) interviewed Aboriginal single mothers aged 29-40 in inner-city Winnipeg to explore the phenomenon of 'chronic moving' – that is, these women had moved at least three times in the last two years (although most women interviewed had moved six to seven times in this period). Their most common reasons for moving were the affordability and size of accommodation. Large families had a very difficult time finding affordable housing (Skelton, 2002). Women sometimes had cultural attachment to certain areas if community centres, places of worship and Aboriginal-specific services existed there (Skelton, 2002). This study also revealed the Aboriginal population regularly faced stigma and racism and some interviewees reported children could be assaulted on the streets, picked on by teachers and harassed by the police. These considerations influenced mothers' housing choices, as they wished to live in areas with a substantial Aboriginal population in order to ensure the safety and well-being of their children (Skelton, 2002). Because of these alienating realities, urban-dwelling Aboriginal women often considered the reservation 'up North' as their home. First Nations women's mobility rates are double those of non-Aboriginal

women – a fact directly related to poor housing conditions and persistent lack of suitable housing (Peters, 2006; Norris & Clatworthy, 2003). Since housing conditions can be linked to unemployment rates and low income, Aboriginal women often face incredible barriers to securing adequate, long-term housing for themselves and their children (Peters, 2006). However, Peters (2006) reveals a considerable number of Aboriginal Peoples – and particularly women – have worked to provide organizations and programs to meet the needs of urban-dwelling Aboriginal Peoples (e.g. women’s resource centres, child care, cultural and social services).

Aboriginal women are incarcerated more than non-Aboriginal women and find themselves overrepresented in prison populations.

Furthermore, Aboriginal women are incarcerated more than non-Aboriginal women and find themselves overrepresented in prison populations (Walsh et al., 2011). They face harsher sentences and lower rates of parole than non-Aboriginals, which is mainly a result of the lack of resources to secure safe, affordable housing and because they lack community supports (i.e. mental health, social support services) when they are released from prison (Walsh et al., 2011; Lambertus, 2007; Currie & Focus Consultants, 2004). Walsh et al. (2011) connect profound disadvantage by social factors and structural inequalities (e.g. overcrowded and inadequate housing, under- and unemployment, poverty, addictions, violence of all forms and limited supports) to Aboriginal women’s overrepresentation in prison and homeless populations. Programs that establish a stronger cultural identity, emphasize Aboriginal spirituality and increase self esteem and feelings of self-worth were listed as best practices toward reducing recidivism and homelessness among Aboriginal women (Walsh et al., 2011). For more details about how homelessness and incarceration are interconnected for Aboriginal women, plus the complete list of best practices to end this group’s incarceration and homelessness, refer to Walsh et al.’s (2011) literature review on this subject.

Very little attention has been paid to the unique experiences of Aboriginal men in the literature on homelessness. One study, however, revealed a great deal of information about the lives of Aboriginal men who had been incarcerated and were struggling with reintegration within a major Canadian prairie city. Brown et al. (2008) discuss how these men were particularly vulnerable to becoming homeless, as their criminal records severely limited their job opportunities and earning opportunities. Government-subsidized housing was not a realistic option because of long waiting lists. This supposed ‘safety net’ was largely inadequate to meet demand (Brown et al., 2008). They often attempted to access affordable housing in the rental market, where they regularly experienced Aboriginal-specific housing discrimination (Brown et al., 2008). Their limited economic means usually meant they

had to settle for less than ideal housing. Such environments were in states of disrepair, overcrowded or contained residents who were dangerous or poor influences, which may set them up for a return to prison (Brown et al., 2008). Men discussed perpetual housing instability: their lives were characterized by multiple moves into environments which never provided them with a place they could call 'home' (e.g. staying with friends/family, rooming houses, undesirable rental units, mandatory corrections-run/funded community living arrangement typically in high-poverty neighbourhoods). The authors advocate for improved transitional support to Aboriginal men leaving institutions, in the form of improved employment/educational opportunities, improved quality of housing and a general recognition that it takes time for people to "de-institutionalize" after release (Brown et al., 2008). Additionally, Christensen's (2012) research revealed Aboriginal men may be banished from their homes/communities following time in prison, leaving them without a crucial housing safety net.

There is a dearth of information about the lives of Aboriginal LGBTTQ and/or Two-Spirit people who experience housing insecurity or absolute homelessness and little is known about the health status and related experiences of this population. In addition, very few sources describe how sexual orientation is related to housing status or poverty for Aboriginal Peoples in Canada. One research team did, however, find that First Nations gay men were more likely to be unstably housed, living in poverty, depressed, to have been sexually abused as children, to have been raped and to have been prostituted than non-Aboriginal gay men (Heath et al., 1999). Another team of researchers drew a comparison between First Nations gay men and First Nations women, since both groups suffer disproportionate levels of poor health and socio-economic status based on non-voluntary sexual/gender identities (Farley et al., 2005). However, this research did not engage in a deeper analysis of this comparison.

As discussed in more depth in the *Health, Well-Being and Health Care* section, one's gender and sexual orientation add another dimension to health and well-being. Gender can impact health in complex ways: males and females often experience the physical and social aspects of health in unique ways. It has been widely reported Aboriginal women suffer from significantly higher rates of mortality, illness and injury than non-Aboriginal women (Kurtz et al., 2008; Adelson, 2005; Dion Stout et al., 2001). In health, the effects of the severe marginalization of Aboriginal women are reflected in the disproportionate burden of illness and disease. Aboriginal women are more likely to suffer from HIV/AIDS, diabetes, heart disease,

hypertension, arthritis, multiple forms of cancer, mental health issues, substance abuse and suicide than non-Aboriginal women (Native Women's Association of Canada, 2013). A report by the Native Women's Association of Canada (2004) links a lack of affordable housing to child apprehension and subsequent suicide among Aboriginal women. They also report Aboriginal women who have physical disabilities encounter enormous barriers to securing adequate housing, as disabled Aboriginal Peoples are more likely to live in substandard housing compared with non-Aboriginal people (Native Women's Association of Canada, 2004). Housing status – both marginal housing and absolute homelessness – is, in many ways, a contributing factor to the poor health status of Aboriginal women (Native Women's Association of Canada, 2013).

Preconceived notions about both Aboriginality and gender can influence health care delivery. For example, Browne (2007) conducted an analysis of the encounters between nurses and First Nations women within a Western Canadian hospital and found stereotypes and assumptions about both Aboriginal Peoples and women shaped clinical interactions. Specifically, discourses and assumptions about culture and gender, as well as perceived differences between Aboriginal and mainstream cultures played a role in these encounters. Browne (2007) attributes this not just to the perspectives of individual nurses, but also to historical realities – mainly common notions about Aboriginal Peoples' problematic and subordinate relationship with the Canadian state. Browne (2007:2160) states, "the power relations within the doctor-patient relationship also influence nurse-patient relations, and these power differentials are magnified when gender, ethnocultural background, and class are considered." Additionally, Fiske and Browne (2008) and Rutman et al. (2000) report racialized prejudicial ideas about Aboriginal women influence health care policies and work to discredit them as a group, which can discourage them from using services that are intended for them. By characterizing Aboriginal women as reckless, addicted, immoral and welfare-dependent, such policies can do more harm than good. They can also prevent Aboriginal women from accessing vital services that may assist them in exiting or avoiding homelessness. Health policies can present a particular problem for Aboriginal women, as some have argued "health policies are regulatory, frequently (if inadvertently) punitive, and often lead to undue scrutiny and surveillance, moral judgment, and racialization of Aboriginal women" (Fiske & Browne, 2008:36).

Even though many Aboriginal Peoples and experts have flagged mental health, HIV/AIDS, addictions and chronic disease as urgent health concerns for the

Aboriginal population, Fiske and Browne (2008:36) argue “it is the singular representation of these health needs as Aboriginal needs by provincial and federal governments and regional health authorities that threatens to mark First Nations women as deviant, passive, and even as the victims of their own culture” – in other words, erroneously blaming ‘Aboriginal culture’ as being a cause of these problems. Other researchers have also acknowledged historical processes of colonization, as well as neo-colonial practices in the present, work to disempower, silence and discredit Aboriginal women and have contributed to the current crisis in Aboriginal women’s health (Kurtz et al., 2008; Boyer, 2006).

Several books (Scott, 2007; Bridgman, 2006; Robertson & Culhane, 2005) offer more detailed accounts of the lived experiences of Aboriginal women and are recommended to gain further insight into the gendered aspects of Aboriginal homelessness. Some research articles are able to shed light on the lives of Aboriginal females’ through in-depth, qualitative interviews. For example, Berman et al. (2009) studied the gendered effects of structural violence and displacement among homeless, Aboriginal and newcomer girls in Canada. They found:

- Homelessness was often naturalized, as being homeless was, to a certain degree, expected and viewed as a logical next step in lives characterized by abuse, marginalization and feelings of rejection.
- Frequent moves negatively impacted personal relationships and stifled network-building.
- Living on the streets was associated with pervasive violence, theft, drug use and physical health problems (sexually transmitted infections, unwanted pregnancy and nutritional deficiencies).
- Many found a new sense of family and belonging while living on the streets; this lifestyle was seen as an escape from things more horrible and afforded them a sense of control.
- Several Aboriginal girls had difficulty maintaining connections with people, especially those on reserve, because of a lack of money and other necessary material resources; this contributed to social isolation.

Health, Well-Being and Health Care

Experiencing homelessness or inadequate housing can significantly impact one's physical, mental, emotional and spiritual health. Such situations can also influence one's sense of well-being and belonging. Housing (quality, location, affordability and appropriateness) has been widely recognized as a powerful determinant of health by researchers from a variety of disciplines (Raphael, 2004; Bryant, 2003; Wilkinson & Marmot, 2003; Krieger & Higgins, 2002). Moreover, it is becoming increasingly common for researchers to consider adequate housing as a requirement in both illness prevention and treatment (Monette et al., 2011; Durbin, 2009; Monette et al., 2009; Adelson, 2005; Hwang, 2001). Housing has been identified as a particularly important social determinant of health for Aboriginal Peoples in the context of widespread housing inadequacy and disproportionate homelessness levels for this group across Canada (Syme et al., 2011; Waldram et al., 2006). Substandard housing has been demonstrated to be a risk factor for poor health, including HIV infection (Monette et al., 2009). In sum, housing is a key quality of life indicator.

Because of its devastating influence on health, homelessness can be classified as a condition that reduces one's length and quality of life. Researchers have argued homelessness reveals larger problems in a person's

Being homeless or unsuitably housed can exacerbate pre-existing medical conditions, make it more difficult to recover from wounds and fractures, impede treatment and recovery and increase the risk of both infectious diseases and mental health issues.

life, including substance abuse, mental health issues, family breakdown, underemployment, low income and racism (Benoit et al., 2003). The health effects of homelessness are well documented by researchers from a variety of disciplines; many have concluded individuals who are homeless or inadequately housed experience disproportionate levels of illness when compared to the general population (Kelly & Caputo, 2007; Adelson, 2005; Frankish et al., 2005; Higgitt et al., 2003; Hwang, 2001). Being homeless or unsuitably housed can exacerbate pre-existing medical conditions, make it more difficult to recover from wounds and fractures, impede treatment and recovery and increase the risk of both infectious diseases and mental health issues (Singer, 2003; Hwang, 2001). Sleep deprivation is also common among the homeless population, which can lead to or exacerbate a variety of medical and psychiatric conditions including heart attacks and depression (Street Health, 2007). But the link between homelessness and health is complex and not necessarily unidirectional – that is, an individual's housing situation can affect their health and well-being, just as a person's health status can impact their housing situation.

There are major differences between the physical health of Aboriginal Peoples and of other Canadians. The Aboriginal population suffers from disproportionately high rates of illness and injury and has higher mortality rates and lower life expectancy. They are also less likely to have access to adequate health services (Kurtz et al., 2008; Adelson, 2005). National data revealed, in 2001, the Registered First Nations population had a lower life expectancy at birth (by 6.6 years for men and 6.5 years for women) than the average Canadian (Health Canada, 2011) and infant mortality rates were estimated to be 1.7 to 4 times that of the general population (Smylie & Adomako, 2009). Aboriginal Peoples are overburdened by chronic, life-threatening diseases, such as diabetes, heart disease, cancer and HIV/AIDS (Health Canada, 2012a; Monette et al., 2011; Kurtz et al., 2008; Adelson, 2005; Bourassa et. al., 2004). Recently, Khan et al. (2011) revealed tuberculosis, a disease typically associated with poverty, is disproportionately high among Aboriginal Peoples living in Toronto. Tuberculosis is a major health problem for First Nations living on-reserve, as well. In 2008, the reported incidence rate for active tuberculosis for First Nations populations living on-reserve in the seven regions of Health Canada's First Nations and Inuit Health Branch was 29.6 times higher than the Canadian-born non-Aboriginal population (26.6 per 100,000) (Health Canada, 2012b). Another recent publication reported Aboriginal Peoples are three times more likely to have Type 2 diabetes (Webster, 2012).

These health disparities have been largely attributed to the social and economic inequities that continue to plague Aboriginal Peoples and communities across the country. Specifically, extreme poverty, pervasive underemployment, social marginalization and poor living conditions – particularly on reserves (i.e. substandard housing, overcrowding, toxic mold, poor sanitation, poor water quality and/or lack of plumbing, food insufficiencies) – can be said to both cause and exacerbate poor health (Monette et al., 2011, Smylie & Adomako, 2009; Kurtz et al., 2008; Waldram et al., 2006; Adelson, 2005). In 1996, the Royal Commission on Aboriginal Peoples report stated most Aboriginal housing in Canada posed an “acute threat to health” (Erasmus and Dussault 1996:372). As Haskell and Randall (2009) point out, over a decade and a half later, not much has changed. Similarly, Tsuji et al. (2000:253) state, “it is illogical that the federal government has recognized a fiduciary responsibility for Aboriginal health but has never acknowledged that the provision of housing was ever a treaty right granted to people of Aboriginal ancestry.”

Mental health, spiritual wellness and addiction are also matters of great concern for the Aboriginal population and can be attributed to both destructive historical factors (discussed in the *Role of Historical Trauma* section) and contemporary structural realities that continue to have damaging effects. For instance, people may use mind-altering substances as a coping mechanism if they have experienced severe stress or trauma. The link between mental health issues and substance addiction is complex: mental health issues can be risk factors for substance use, but problematic substance use can also contribute to the development or worsening of mental health issues (Government of Canada, 2006).

Tragically, Health Canada (2011) reported, in 2001-2002, the First Nations suicide rate was three times higher than that of the general population (27.4 deaths for every 100,000 First Nations people). Suicide among the Inuit is anywhere from six to eleven times that of the general population – one of the highest rates in the world (Government of Canada, 2006). Suicide rates are five to seven times higher for First Nations youth than for their non-Aboriginal counterparts (Health Canada, 2006). These are tremendously disturbing figures, as suicide is commonly indicative of extreme social stress, disempowerment and/or mental health or addiction challenges that have not been adequately addressed. Homelessness has also been found to increase the risk of suicide (Goldstein et al., 2012; Prigerson et al., 2003; Rew et al., 2001). The Government of Canada (2006) offers the following statistics

Suicide among the Inuit is anywhere from six to eleven times that of the general population – one of the highest rates in the world.

about mental health and substance addiction among the First Nations and Inuit peoples:

- First Nations people experience major depression at twice the national average.
- Alcohol use is of great concern to people in First Nations and Inuit communities, as
 - Approximately 75 percent of residents feel alcohol use is a problem in their community.
 - 33 percent indicate that it's a problem in their own family or household.
 - 25 percent say that they have a personal problem with alcohol.

Aboriginal Peoples represent only four to five percent of the Canadian population, but account for approximately eight percent of all prevalent HIV infections and approximately 12 percent of new HIV infections in 2008.

In addition to mental health and addictions issues, the Canadian Aboriginal population is overrepresented in HIV/AIDS rates. Some people have argued that the Aboriginal population is actually in the midst of a population-specific *epidemic* (Public Health Agency of Canada, 2010a; Adelson, 2005). Aboriginal Peoples represent only four to five percent of the Canadian population, but account for approximately eight percent of all prevalent HIV infections and approximately 12 percent of new HIV infections in 2008 (Public Health Agency of Canada, 2010b; Statistics Canada, 2013). HIV is most commonly spread by injection drug use in this population and worryingly, the average age of infection is younger in the Aboriginal community compared to non-Aboriginal people (Health Canada, 2012c). The North American Housing and HIV/AIDS Research Summit (2011) maintains homelessness is both a cause and an effect of HIV infection.

HIV/AIDS is an illness known to disproportionately affect those who are the most marginalized and vulnerable in society because of its connections to poverty, racism, oppression, violence, survival sex and drug addiction. World-renowned AIDS researcher and activist Dr. Paul Farmer has accurately summarized this by stating AIDS is an illness that “moves across the fault lines of society” (Farmer, 2001). Culhane (2003:597) notes “the burden of [HIV/AIDS] is disproportionately borne by those with the least economic and political power.” Haskell and Randall (2009) have argued for the Aboriginal HIV/AIDS crisis to be viewed as part of the legacy of trauma Aboriginal Peoples continue to face. Adelson (2005:S57) states, “HIV/AIDS is a problem of poverty, of under- and un-employment, unstable housing, homelessness, sexual/physical abuse and a concomitant lack of self-worth.

HIV/AIDS is also a problem of injection drug use and all its attendant effects.” Culhane (2003) discusses how ‘Aboriginality’ is itself a risk factor for contracting HIV/AIDS in the context of Vancouver’s impoverished downtown eastside. Marshall et al. (2008) found “Aboriginal ethnicity” was associated with HIV infection among youth in this same geographical area.¹⁶

Aboriginal women are of particular concern in this epidemic, as they are especially vulnerable to poverty and interpersonal violence (which are two risk factors for infection) and have higher rates of injection drug use than non-Aboriginal women (McCall et al., 2009). People living with HIV/AIDS can suffer stigmatization and exclusion from their families and home communities (and from society in general) and subsequently be left with little social support (Syme et al., 2011; McCall et al., 2009; Monette et al., 2009). If these individuals move to urban areas, they may encounter barriers when trying to access supports (such as social assistance, HIV/AIDS organizations, housing) (Monette et al., 2009; Adelson, 2005). For example, many Aboriginal Peoples do not have a health card. Due to high levels of transition and displacement, Aboriginal Peoples are often new to a city and its resources and they may not know how to access supports. Because reserve/rural-dwelling Aboriginal Peoples who migrate to cities are also likely to be younger, they are less likely to have attained adequate education and thus are less employable. This can limit their housing options and may also lead them to engaging in risky practices (e.g. survival sex¹⁷ and/or substance use) that can lead to housing loss (Monette et al., 2009).

Researchers have stressed safe, affordable and appropriate housing is an urgent need for Aboriginal Peoples living with HIV or AIDS (Monette et al., 2009; Monette et al., 2011). One Ontario-based research project conducted in 2007-2008 with people who were connected to a community-based HIV/AIDS service organization found half of the 80 HIV-positive Aboriginal participants claimed to have faced discrimination when trying to secure housing, which was attributed to the following: revealing their source of income, race, employment status, sexual orientation, HIV status and gender (Monette et al., 2009). HIV-positive Aboriginal participants in this study said the inability to pay rent, eviction, release from jail, prison, or hospital,

HIV-positive Aboriginal participants in this study said the inability to pay rent, eviction, release from jail, prison, or hospital, social issues due to HIV and concern for personal safety were the top reasons that led to their recent past episode of homelessness.

16. The research findings of Culhane (2003) and Marshall et al. (2008) do not imply a natural predisposition of Aboriginal peoples to contracting HIV/AIDS. Rather, these findings reveal social factors (mainly poverty and social marginalization) have disproportionately impacted Aboriginal populations in Canada and, as a consequence, have increased their chances of contracting serious or life-limiting infections.

17. Survival sex refers to engaging in sex work in order to obtain basic necessities. This includes not just money but also sex for food, housing, clothing, transportation, drugs or alcohol.

social issues due to HIV and concern for personal safety were the top reasons that led to their recent past episode of homelessness (Monette et al., 2009). In a separate analysis of the same data, Monette et al. (2011) found Aboriginal Peoples who were HIV-positive were more likely to be homeless or unstably housed and more likely to have experienced discrimination when trying to find housing than their Caucasian counterparts. In sum, the Aboriginal HIV/AIDS epidemic can only be understood in the context of other factors that work to marginalize and impoverish this population.

One's gender and sexual orientation add another dimension to understanding health. Not only are there many health issues that are unique to women, but researchers have also made reference to "gendered health concerns" in studies of homeless women, as they experience vulnerability and homeless-related health issues differently than men (Street Health, 2007; Whitzman, 2006). For example, a Toronto-based study carried out in 2007 found one in five homeless women reported being raped or sexually assaulted in the previous year (Street Health, 2007). Other articles report homeless women in North America are at greater risk of abnormal pap smears, STDs and HIV/AIDS (Wenzel et al., 2001; Ensign & Panke, 2002; Weinreb et al., 2002). Pregnancy may further complicate the lives of vulnerable women, as one research team suggested pregnancy was a catalyst for partner abuse and thus a contributing factor to homelessness among women (Weinreb et al., 1995). Homeless women are also at a significantly greater risk than homeless men or women in the general Canadian population for serious depression and other mental health disorders (Mental Health Policy Research Group, 1997).

It is important to understand the intersection of gender, poverty, identity and history when exploring the health of impoverished and homeless Aboriginal women. Researchers have drawn attention to the fact that Aboriginal females disproportionately suffer from the effects of poverty and its associated health effects (Berman et al., 2009; Adelson, 2005; Culhane, 2003). One report revealed Aboriginal women had substantially higher rates of both physical and mental health issues (i.e. mortality, injury, suicide, obesity and chronic disease) than other Canadian women (Dion Stout et al., 2001). Structurally- embedded barriers contribute to the lowered health status of Aboriginal women. Kurtz et al.'s (2008) study of urban-dwelling Aboriginal women in B.C.'s Okanagan Valley found these women often feel silenced and disempowered when they access health services. Unfortunately, such feelings sometimes resulted in them delaying much needed health advice or simply accepting their forced subordinate social positions and not pursuing treatment. As a consequence, these women's health *and* the health

of their families were put at risk. A different study explored improving the care of pregnant and parenting Aboriginal women and found participants wanted to turn around the intergenerational impacts of residential schools (“IGIRS”); pregnancy and child rearing afforded them this opportunity (Smith et al., 2005). These women recognized IGIRS was a root cause of poor health and social conditions that cause poor health. The researchers of this study concluded, “understanding IGIRS as one of the root causes of the inequitable health and social conditions experienced by Aboriginal people has implications for the underlying purpose and rationale of health policy, health programs and the practices of health care providers more generally” (Smith et al., 2005:41).

Those who identify as belonging to the lesbian, gay, bisexual, transgendered, transsexual, queer, questioning (LGBTQT) communities and/or identify as Two-Spirit, are at higher risk for having certain health issues and being socially marginalized. They often face their own sets of barriers in accessing health care and may be more vulnerable to violence and harassment in their daily lives (Street Health, 2007; Cochran et al., 2002). They may engage in self-destructive behaviours or suffer from depression, which one author attributed to difficulties reconciling their identities as Two-Spirit and Aboriginal (Walters et al., 2006), while others have attributed these health concerns to widespread discrimination against those who are not heterosexual, or are a different sex or gender than assigned at birth (Taylor, 2009). Suicide rates among these groups are not known, but the high rates of related risk factors in these populations suggests suicide risk could be greater among Aboriginal Peoples who identify as LGBTQT and/or Two-Spirit than among heterosexual Aboriginal Peoples and factors such as homophobia, social isolation and rejection from loved ones and communities are responsible (National Aboriginal Health Organization, 2012). Consequently, their risk of homelessness is also high (Taylor, 2008).

Scholars from a range of disciplines have discussed how health care services often fail to meet the needs of Aboriginal patients (Syme et al., 2011; Kurtz et al., 2008; Söchting et al., 2007; Adelson, 2005; Smith et al., 2005). The reasons for this are numerous and context-dependent, but can be mostly attributed to judgment or blatant racism on behalf of practitioners, a lack of understanding of Aboriginal worldviews and the complexity (and consequently resource-intensive nature) of Aboriginal trauma. Adelson (2005:S45) provides a more historically-conscious explanation and contends, “despite inadequacies in the health care delivery system and regardless of peoples’ relative access to or use of the biomedical system, the problems are entrenched in the history of relations between Aboriginal Peoples and the nation-state.”

Even if an individual finds a short-term alternative to sleeping on the streets, such as a toxic home environment or in a shelter, their health can still be put at risk. Shelters are often crowded with poor ventilation and house large transient populations. Because of these factors, individuals staying in such facilities can be exposed to tuberculosis or infestations with scabies and lice (Frankish et al., 2005). Bedbug infestations, theft and assault are also commonly reported within shelters. Given the fact that the homeless population has disproportionately high rates of mental health issues and substance abuse issues, one must also consider the psycho-social effects shelters can have on an individual's health and well-being.

Söchting et al. (2007) reveal Aboriginal patients may not receive acceptable care from mental health professionals, as Aboriginal Peoples are regularly viewed as too complicated, unreliable and non-compliant. Discriminatory attitudes of health care workers toward Aboriginal women have also been reported in the literature (Browne et al., 2000). Benoit et al. (2003) identified a gap in the availability of culturally appropriate mental health services for homeless urban Aboriginal women living in Vancouver's downtown eastside who suffer from severe, long-term mental illnesses. Warry (1998) explains Indigenous concepts of healing are usually not recognized in mainstream health care ideology, which is especially problematic considering, historically, government-led colonial practices were responsible for the erosion of Aboriginal medicine and healing systems. Indeed, Adelson (2005) believes non-Aboriginal health care practitioners may be less adept at providing care for Aboriginal patients because they are usually limited by the culture of biomedicine in their understandings and communications. These may all be considered driving factors in the Aboriginal homeless epidemic, as people are denied a meaningful point of contact through which (homelessness-causing) physical and mental health issues are addressed and from which other forms of material and social support can stem.

Warry (1998) explains Indigenous concepts of healing are usually not recognized in mainstream health care ideology, which is especially problematic considering, historically, government-led colonial practices were responsible for the erosion of Aboriginal medicine and healing systems.

Another study found being homeless impeded Aboriginal clients' access to mental health and addictions care (including harm reduction services) in mainstream health facilities (Syme et al., 2011). Aboriginal Peoples can carry the burden of centuries of racism and prejudice, which can combine with illness-related societal stigmas and interfere with people's ability to access and follow through with medical treatments or harm-reduction programs (Syme et al., 2011). Many participants in this study did not trust mainstream health services because they felt marginalized and stigmatized in these and other settings. Such limitations can stem from both service providers and the person in need of treatment, who may unwittingly sabotage even the most promising of therapies. These authors refer to this harmful phenomenon as

‘the intersectionality of disadvantage,’ meaning multiple social and structural disadvantages can overlap to influence situations. Connected to this, Czyzewski (2011) urges policy makers, health practitioners and researchers to consider colonialism as a social determinant of health. Her perspective is captured in the following quote:

The trauma embodied in parents or previous generations negatively impacts people’s lives and mental health today, indicative of colonialism’s interpretation as a generator of certain types of disadvantages and unjust environments, thus capable of determining health. It is for these reasons that it is important to contextualize and speak of colonial policies and the legacies they left behind when speaking about Indigenous mental health, and the health disparities we see when compared to the mainstream population. (Czyzewski, 2011:8)

Authors have pointed out Indigenous concepts of health and healing may differ from mainstream Euro-Western (i.e. biomedical) ones and caution against ethnocentric perceptions when trying to understand Aboriginal health and wellness (Czyzewski, 2011; Adelson, 2005). The biomedical approach focuses on ‘fixing’ the individual affected by illness or injury through clinical encounters that emphasize the ‘practitioner-patient’ relationship (in other words, reinforcing the ‘expert/dominant-passive/compliant’ dynamic). In contrast, Aboriginal concepts of wellness are more holistic and consider the individual as connected to the broader spheres of family, community and the earth (Waldram et al., 2006; Adelson, 2005; Wilson, 2003). The Aboriginal wellness model also encompasses nature and spiritual elements of a person (Adelson, 2005). The hierarchical power relationships that emerge in biomedical-based settings could be viewed as reminiscent of colonial-era domination by Aboriginal patients. It is, therefore, important to acknowledge culturally-specific differences in understandings of health, well-being and healing when attempting to provide health services to Aboriginal Peoples, as definitions of health and well-being are not universal and may be shaped by the memory of historical injustices.

Many authors have advocated for the provision of culturally appropriate, holistic health care services for Aboriginal Peoples in Canada (DeVerteuil & Wilson, 2010; Kurtz et al., 2008; Adelson, 2005; Smith et al., 2005; Bourassa et al., 2004; Benoit et al., 2003; MacMillan et al., 1996). ‘Culturally appropriate’ may have different meanings depending on the context, but it generally refers to “services that create a social environment that observes and

respects the cultural beliefs and practices of the individual receiving services” (Trudeau, 2008:682). When referring to Aboriginal health, culturally appropriate services may mean incorporating language, traditional healers and healing practices, community Elders and a general recognition of the ways in which colonialism has negatively impacted Aboriginal Peoples’ health and lives (DeVerteuil & Wilson, 2010). This is a topic of significant discussion within the literature and authors have differing opinions on both the role of culturally appropriate services and how such services should be designed. For instance, McCallum and Issac (2011:4) take the position that, “there is still an important role for non-Aboriginal organizations to play in supporting culturally responsive approaches to Aboriginal homelessness” – mainly by standing as an ally in the broader fight against the injustice of homelessness.

The ultimate goal of a culturally appropriate service is to make that service accessible, relevant and effective.

The ultimate goal of a culturally appropriate service is to make that service accessible, relevant and effective. The concept of ‘culturally appropriate’ is not limited to the area of health, nor to just Indigenous populations and its tenets can be applied to a variety of service settings. This is of particular importance for those who are homeless, as it may be a crucial first step on the pathway out of homelessness (e.g. through trust-building with practitioners, links to other services, or strengthening personal capacities). In short, Aboriginal Peoples often have unique worldviews and definitions of ‘healing’ – balance and interconnectedness to the world outside the self can be important elements of such perspectives. Aboriginal Peoples also usually prefer to act as agents for their own healing (McCormick and Wong, 2006). It is, however, important to take into account Waldram et al.’s (2006: 296) point, “there is no singular Aboriginal experience, and that many Aboriginal patients find current biomedical services and approaches to be ‘culturally appropriate’ and preferable to so-called traditional services.”

Government of Canada has controlled health services for reserve-dwelling First Nations and Inuit populations since 1876’s enactment of the Indian Act (Smith et al., 2005). Since then, health services have been provided by a centralized body now known as the First Nations and Inuit Health Branch, although many First Nations have gained control over federally-administered on-reserve health services (First Nations and Inuit Health Branch, 2005). The First Nations and Inuit Health Branch also provides some services to status Aboriginal Peoples living off-reserve.¹⁸ Health Canada’s (2005) First Nations,

18. According to their 2011-12 Program Compendium, they support numerous programs and services that may be relevant to homeless or vulnerable individuals, including: mental wellness initiatives (including suicide prevention, substance abuse prevention and treatment and residential schools resolution health support), healthy living (including chronic and communicable disease prevention and management) and a variety of culturally-relevant primary health care services and programs (First Nations and Inuit Health Branch, 2011).

Inuit and Aboriginal Health website states, “Health Canada is committed to closing the health status gap between First Nations people and Inuit and non-Aboriginal Canadians by working together to encourage healthy lifestyles, reduce and prevent diseases and provide health care services.” However, Adelson (2005:S57) points out “the government does not admit that health is an Aboriginal or treaty *right*” (emphasis added). A disturbing article released this year reveals recent funding cuts to Aboriginal health groups threaten the long-term health and well-being of these populations (Webster, 2012). In 2012, Canada’s Conservative government terminated the funding for the following institutes:

- The National Aboriginal Health Organization – developed common health policies for all of its more than 600 Aboriginal groups and a major source of Aboriginal health research data.
- The First Nations Statistical Institute- assisted First Nations in meeting their information needs while working with Statistics Canada to better represent First Nations in the national statistical system.
- The Aboriginal Healing Foundation- An Aboriginal-managed, national, Ottawa-based, not-for-profit private corporation established in 1998 and given a one-time grant of \$350 million by the federal government of Canada as part of Gathering Strength – Canada’s Aboriginal Action Plan. The Foundation was given an eleven-year mandate, ending March 31, 2009, to encourage and support, through research and funding contributions, community-based Aboriginal directed healing initiatives which address the legacy of physical and sexual abuse suffered in Canada’s Indian Residential School System, including inter-generational impacts.
- The National Centre for First Nations Governance- The Centre for First Nations Governance is a non-profit organization that supports First Nations as they develop effective self- governance.

They also cut health grants to the following groups:

- Inuit Tapiriit Kanatami (ITK) – coordinates health policies for Canada’s Inuit population.
- Pauktuutit, Inuit Women of Canada – Pauktuutit is the national non-profit organization representing all Inuit women

in Canada. Its mandate is to foster a greater awareness of the needs of Inuit women, and to encourage their participation in community, regional and national concerns in relation to social, cultural and economic development.

- The Native Women's Association of Canada – works to advance the well-being of Aboriginal women and girls, as well as their families and communities through activism, policy analysis and advocacy.
- The Métis National Council – represents the Métis Nation nationally and internationally. It receives its mandate and direction from the democratically elected leadership of the Métis Nation's governments from Ontario westward. It reflects and moves forward on the desires and aspirations of these Métis governments at the national and international level.
- The Congress of Aboriginal Peoples – The Congress of Aboriginal Peoples (CAP, Congress) is a nationally incorporated umbrella organization that represents the interests of its provincial and territorial affiliate organizations across Canada.
- The National Indian & Inuit Community Health Representatives Organization – is a national not-for-profit charitable organization representing First Nation and Inuit Community Health Representatives in Canada.

These actions are consistent with others carried out by the federal Conservative government: in 2006, they terminated the \$5 billion Kelowna Accord introduced by the Liberal government in 2005 which was designed to improve the lives of Aboriginal Peoples through funding of health, housing and social programs (Webster, 2012). Health policy development is now primarily under the control of federal bureaucrats, most of who are not themselves Aboriginal and whose positions – ironically – have been identified as the perpetrators of Aboriginal inequities for hundreds of years (Webster, 2012). These decisions undermine Aboriginal leadership in the pursuit of reducing health and social disparities of Canadian Aboriginal populations. Experts have suggested the most promising and equitable way forward is to establish (or re-fund) Aboriginal-led health and social programs (Webster, 2012; Adelson, 2005; Smith et al., 2005; Benoit et al., 2003; Erasmus & Dussault, 1996). Aboriginal authority over such programs ensures Aboriginal Peoples' vision for change is incorporated into policy, cultural considerations are respected and the unique needs of individual communities are taken into account. Some have also flagged the lack of integration and coordination

in Aboriginal-gear health care programs and policies as problematic and inefficient (Smith et al., 2005; Adelson, 2005; Romanow, 2002) – yet another reason why change is urgently needed.

The health needs of the Aboriginal population are often not fully understood by those in positions to effect change, whether it be policy makers or health care practitioners. Kurtz et al. (2008) highlight the fact that health initiatives geared toward the Aboriginal population often fail to deal with the structural causes of poverty and social marginalization and, as a consequence, do not often produce significant effects. The upshot of this is health policy and programs may actually reinforce stereotypes of addictions and violence among the populations they seek to help (Smith et al., 2005). Warry (2009:53) makes the connection between colonialism, health and government policy:

In debates about Aboriginal peoples, history is often contested and white-washed. The [Canadian] neo-conservative right relies for its arguments on historical revisionism or denial. They claim that Aboriginal poverty and ill health are the result of the failure of contemporary policies rather than the product of hundreds of years of colonialism and that any moral wrongs occurred as a part of colonial history.

In addition, the provision of relevant health services to Aboriginal Peoples is often impeded because of the dominant view of Aboriginal populations as mainly located on reserves or in rural areas held by Euro-Canadian policy makers (Kurtz et al., 2008).

To summarize, homelessness, like suicide, is one of the most severe consequences of economic deprivation and social marginalization a human being can experience and ultimately demonstrates how Aboriginal Peoples in Canada disproportionately fall through the cracks of our supposedly 'comprehensive' social welfare and 'universal' health care systems. Frighteningly, Culhane's (2003) exploration of Aboriginal marginalization reveals poverty itself has been medicalized in the mainstream as a condition caused by drug addiction or personal failure. This trend effectively obscures the structural causes of poor health and reduced lifespan. Homelessness should be viewed as a symptom of social suffering that is ultimately caused by societal inadequacies and, especially in the case of Aboriginal Peoples, a continuance of historically-rooted oppression. Furthermore, funding cuts to Aboriginal organizations deny Aboriginal Peoples opportunities to improve their lives and health status and can be viewed as counter-productive to improving the Aboriginal homelessness and housing crises.

The Role of Historical Trauma

As mentioned in previous sections, Aboriginal Peoples have experienced a uniquely devastating set of traumas throughout Canada's history and, as a group, continue to be socially and economically marginalized. These factors must be taken into consideration when examining why Aboriginal Peoples are overrepresented in the Canadian homeless population and must also be considered when imagining solutions to this national crisis. In recent years, many researchers have explored the multi-faceted and historically-linked nature of trauma within Aboriginal communities (Czyzewski, 2011; Menzies, 2010; Haskell & Randall, 2009; Menzies, 2009; Denham, 2008; Menzies, 2008; Ruttan et al., 2008; Söchting et al., 2007; Kirmayer et al., 2000; Lederman, 1999).

The devastation to Aboriginal cultures during colonial conquests and European settlement in Canada beginning in the 17th century has had long-term effects on Aboriginal individuals, families and communities. The Government of Canada was officially made 'guardian' of Aboriginal Peoples with the passing of The Indian Act of 1876 and, as a result, the Aboriginal population was relocated onto reserves while children (First Nations, Métis and Inuit) were placed in residential schools run by Christian churches of various denominations (Menzies, 2010). These spatial and 'educational' impositions functioned to dominate Aboriginal Peoples and destroy their respective Indigenous cultures. Aboriginal Peoples were systematically dispossessed from their lands and moved to reserves, which were created to both 'civilize' and segregate the Aboriginal population. This limited their

movements and participation in trading, effectively marginalizing them from the rest of society. The residential school system not only resulted in the loss of language, culture and community for Aboriginal children, but also established spaces in which rampant physical, sexual and psychological abuse took place at the hands of school and church officials. Aboriginal children – literally and symbolically – had their ethnicity and cultures beaten out of them. These experiences are widely acknowledged to be associated with mental health issues¹⁹ and addiction (Syme et al., 2011; Kurtz et al., 2008; Smith et al., 2005). Ruttan et al. (2008) interviewed homeless Aboriginal young women in Edmonton and learned the following about the trauma they endured in residential schools:

- Aboriginal children were often coercively or forcibly removed from their homes and completely out of contact with their parents thereafter.
- They were taught their cultures were wrong and they were dirty, disgusting and inferior.
- They were prohibited from speaking their language; this rule was frequently enforced when children returned home, as adult relatives internalized the logics of cultural oppression.
- Children were taught to obey church leaders without resistance and, consequently, abandon their sense of agency. This process produces adults who are either profoundly disempowered and emotionally detached, or angry and self-destructive (which can result in addiction, self-inflicted abuse and victimization of others).
- Young people were often reared by adults who had themselves experienced abuse within residential schools. Since these adults had been taught abuse was a form of love and an appropriate way to discipline children, the next generation of children was subject to abuse or received care from emotionally detached, traumatized family members.

19. The term 'mental health issues' will be used to encompass 'mental illness,' 'mental health challenges,' 'mental health disorders,' and 'mental health problems' – all of which are used in academic literature. 'Mental health issues' is used in this review to refer to neuropsychiatric disorders, emotional mental disorders, or the absence of mental well-being/wellness. Scholars are engaged in an ongoing dialogue about the most appropriate terminology. It is important to note biomedical definitions and diagnostic methods are not applicable to or accepted by every individual or culture and Aboriginal peoples often have their own understandings and definitions of 'mental health issues' and wellness.

When the majority of residential schools were closed in the 1960s, government child welfare agencies enacted another policy intended to assimilate Aboriginal children by removing them from their homes and adopting/fostering them out to white families – a series of events sometimes referred to as the ‘Sixties Scoop’ (Menzie, 2010; Brown et al., 2007). These processes of forced assimilation – considered cultural genocide by many (Haskell & Randall, 2009; Mitchell & Maracle, 2005; Smith et al., 2005; Neu & Therrien, 2003; Kendall, 2001) – destroyed family units and have been profoundly traumatic to Aboriginal Peoples. The imposition of these systems and the government’s failure to fulfill treaty obligations (which were intended to recognize Aboriginal Peoples’ rights to land and well-being) has resulted in overwhelming poverty, health problems and population decline for Canadian Aboriginal populations (Waldram et al., 2006). However, the marginalization of present-day Aboriginal Peoples is also a reflection of modern political and social structures within Canada. Native peoples are consistently targets of systemic racism and neglect by governmental agencies and within civil society, which can also be extremely traumatic (Baskin, 2007; Waldram et al., 2006; Adelson, 2005; Mitchell & Maracle, 2005).

Traumatic events are exacerbated by a “widespread social denial about [them] and an evasion of a sense of social responsibility for effecting the kind of political, social and economic change required to remedy this situation” (Haskell & Randall, 2009:50). A number of researchers have acknowledged Aboriginal Peoples also experience stigma from racist stereotypes that persist within mainstream Canadian society (Haskell & Randall, 2009; Brown et al., 2008; Ruttan et al., 2008; Adelson et al., 2005). These stereotypes blame and pathologize survivors, while punishing people for their coping methods, which may involve psychoactive substance use. Ruttan et al. (2008) note this stigma can be turned inward so Aboriginal individuals internalize rejections of themselves, their community and their culture. This may also lead to forms of ‘lateral violence,’ in which Aboriginal Peoples abuse their own family or community members. Some researchers have gone so far as to consider the persistent stigma and ‘everyday forms of racism’²⁰ Aboriginal citizens face as a continuation of colonialism (Syme et al., 2011; Doherty, 2010; McCall et al., 2009), as they carry with them the “burden of history” in their day-to-day interactions (Furniss, 1999).

20. ‘Everyday forms of racism’ are embedded forms of racism that operate through language and common understandings in everyday life. In contrast to overt (or obvious) forms of racism such as racial slurs, ‘everyday forms of racism’ are subtle, naturalized and rarely questioned (Lund, 2006; de la Torre, 1999).

Scholars who have acknowledged the multiple, collective and ongoing traumas experienced by Aboriginal populations have described them using the following terms: ‘intergenerational trauma’ (Czyzewski, 2011; McCall et al., 2009; Menzies, 2008; 2009; 2010; Mitchell & Maracle, 2005), ‘historical trauma’ (Denham, 2008; Evans-Campbell, 2008; Haskell & Randall, 2009; Brave Heart, 2003; 1999), ‘intergenerational impacts of residential schools (IGIRS)’ (Smith et al., 2005), ‘transgenerational trauma’ (Walsh et al., 2011), ‘complex trauma’ (Söchting et al., 2007) and ‘complex post-traumatic stress’ (Haskell and Randall 2009). These terms all speak to the impact of past injustices against Aboriginal populations. Generally speaking, traumatic events can destabilize one’s basic sense of trust and security and can be particularly damaging if they happen in the first few (developmental) years of life. Future relationships are often affected because the traumatized person is left to deal with feelings of abandonment, alienation and disconnection into adulthood (Herman, 1992). Aboriginal populations have suffered disproportionate amounts of physical, psychological and sexual abuse – all experiences that can violate interpersonal boundaries and may result in emotional disengagement from life. This may make it difficult to function as a family member, income earner, or citizen and can therefore increase the likelihood of becoming homeless.

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Aboriginal therapist and scholar, Peter Menzies, has made the link between intergenerational trauma and homelessness among Canadian Aboriginal Peoples. He cautions against pathologizing the individual and urges us to understand intergenerational trauma as existing along four realms: the individual, the family, the community and the nation (Menzies, 2010, Menzies, 2009). Thus, according to both Menzies (2010) and Haskell and Randall (2009), people who have experienced intergenerational trauma may:

- Lack of a sense of belonging within a family, community, culture, or nation.
- Be unable to sustain personal or intimate relationships.
- Have low self-esteem, depression, or tendencies toward self-harm or suicidality.
- Develop dysfunctional coping mechanisms such as substance abuse, hyper-sexuality, hyperactivity, aggression, sensation seeking or isolation.
- Be involved with the mental health or criminal justice system.

- Have a limited education and employment history.
- Experience an absence of meaning and hope.

Menzies (2010) also contends there are broader, macro-traumas that have been inflicted upon the Aboriginal population and may contribute to homelessness, including:

- The popularization of negative Aboriginal stereotypes through the mainstream media.
- Social policies that perpetuate ‘colonialization’ of Aboriginal Peoples at individual, family and community levels.
- A lack of support for holistic programs and services targeting Aboriginal needs.
- A lack of support for community self-determination.

In spite of these realities, many service providers have remarked on the resilience of Aboriginal clients who have experienced intergenerational trauma. In some cases, Aboriginal Peoples who have survived such abuse overcome their history and become “better and stronger persons,” leading some authors to label this phenomenon “post-traumatic growth” (McCormick & Wong, 2006:518). These authors report this resiliency can sometimes be attributed to several Aboriginal-specific cultural and spiritual factors that facilitate healing. These elements can invoke empowerment, cleansing, balance and belonging (McCormick & Wong, 2006). Very often, Aboriginal Peoples have a different way of seeing the world and defining ‘healing’ – balance and interconnectedness to the world outside the self are important elements of this perspective. Additionally, Aboriginal Peoples often prefer to act as agents for their own healing (McCormick & Wong, 2006). There are important practical implications to this knowledge, as service providers should understand this worldview in order to provide culturally appropriate and effective services. Such services may prevent Aboriginal Peoples from becoming homeless or serve as critical connection points in coming out of homelessness. Menzies contends solutions to Aboriginal homelessness must extend beyond assisting individuals in securing housing or meeting other personal needs. Rather, “the response also requires a holistic approach that reconstructs the links between the individual, family, community, and Aboriginal nation” (Menzies, 2008:47).

Critiques and Considerations

Many scholars, including the reviewer, have made critiques or put forth considerations about the body of literature that currently exists on the topic of Aboriginal homelessness in Canada. They are summarized in this section.

1. FROM THE REVIEWER

- The vast majority of research studies and reports remain distinctly apolitical, which is alarming considering the politicized nature of this subject. Most fail to address the structural aspects of Canadian society and culture that create and maintain homelessness, and prefer to focus strictly on micro-level (i.e. front-line or 'band-aid') interventions. In the opinion of the reviewer the issues revealed in this review cannot be meaningfully changed without academics and key stakeholders declaring (and acting on) a clear position that also takes into account colonial and neo-colonial relationships between Aboriginal Peoples and governments/society.
- Many academic sources fail to identify key details that would be necessary to fully understand Aboriginal homelessness and also be crucial to practical applications/ways forward (e.g. details of programs and policies, following up in a long-term way with research participants, funding requirements, concrete solutions).

- For example, Syme et al. (2011:7) write, “Attention to multiple disadvantaged social statuses is important to identifying the root causes of health disparities and to designing effective interventions.”
 - A report by Jim Ward Associates (2008) is a good example of a resource that provides a detailed breakdown of the funding and services required to ameliorate Aboriginal homelessness in one city (Toronto). Another good example is the National Aboriginal Housing Association’s (2009) Plan for Action, which provides detailed cost estimates for both one-time grants and ongoing subsidies required to support national targets toward addressing Aboriginal housing needs.
- Often, the language and discourse employed naturalizes current realities and may unintentionally replicate colonial relationships. That is, there is a danger in repeatedly associating concepts (i.e. Aboriginal = poor, homeless, traumatized, sick) because it becomes hard to imagine the situation in any other way. These accounts may have a desensitizing effect and may also naturalize the paternalistic interventions imposed (and so often fail) to assist this population. Such perspectives also have a tendency to overlook survivorship skills and resilience.
 - A good example of an *exception* to this is provided by Berman et al. (2009:422) who state that, “[Aboriginal] girls who have experienced uprooting and displacement exist as bodies marked by gender, race, and class, moving through liminal spaces, seeking connections and reconnections... However, it is here that they also learn new ways of being, connecting, and belonging. Their lives [are shaped by] interlocking structures of domination. Through these structures, they strive to develop a sense of self that is strong and resilient, that fosters a sense of agency, and that can counter the hopelessness, despair, and pessimism that often seem so pervasive”.
- Very little academic literature was found that explores the lived experiences of homelessness among Aboriginal men as a distinct group (e.g. exploring unique experiences of residential schooling and physical, sexual, emotional abuse; men’s physical and mental health issues; men and families). Men are

usually discussed as overwhelmingly absent from women or over-represented in the criminal justice system.

- Little research has been published on the successes of Aboriginal women in overcoming homelessness, poverty, addiction or surviving trauma. Aboriginal women are usually slotted into the following categories: mothers (usually entangled with child welfare agencies), drug addicts and sex workers. A more balanced picture is required and would be more productive moving forward.
- Very little academic literature was found that explores the lived experiences of homelessness among Aboriginal Peoples who belong to the LGBTTTQ community and/or identify as Two-Spirit, which is problematic considering that the literature suggests these populations may be disproportionately affected by discrimination, stigma and isolation.
- The Canadian Aboriginal population tends to be homogenized in the majority of academic literature and it is often unclear which Aboriginal group is being researched or discussed.²¹ Distinct cultural and community differences within the Aboriginal population may be obscured because of this. The Aboriginal population is assumed to have all experienced colonization and assimilation the same way, to have a connection to 'Aboriginal culture' and 'the reserve' in some capacity and to be necessarily receptive to external intervention from government agencies. The term 'Aboriginal culture' is itself problematic, as many Aboriginal cultures exist. A heteronormative bias also exists in most qualitative research and recommendations. These issues may limit the production of effective policy or targeted interventions.
 - For example, Monette et al. (2009:41) conclude, "Our findings indicate that *all Aboriginal people* are coping with severe health and social stresses that threaten their health" [emphasis added].

The Canadian Aboriginal population tends to be homogenized in the majority of academic literature and it is often unclear which Aboriginal group is being researched or discussed.

However and related to the last point, four research articles have attempted to address this homogenization within their writing and they are to be considered examples for work involving Aboriginal Peoples.

21. It should be noted that often, particularly in large urban centres, a number of Aboriginal Nations may deliberately represent themselves together in a 'homogenized' or 'pan-Indigenous' way. This is done to strengthen political mobilization and to call attention to issues that impact the Aboriginal population in Canada on a wider scale.

- Example #1: “Although I employ the category ‘First Nations women’ I do not mean to suggest that they constitute a homogeneous group. Many First Nations women call themselves by their nation of origin – Cree, Gwitchin, Tsimshian, etc. – and emphasize the cultural differences among them” (Peters, 1998:665).
- Example #2: Syme et al. (2011:6) assert it is important to note “although residential schooling was not uniformly negative for all people, its overall impact has been devastating.”
- Example #3: Haskell and Randall (2009:69) claim “while generalizations are useful to understand the contours of the phenomenon of historical trauma, they should not obscure particularities and diversity in Aboriginal experiences of it.”
- Example #4: DeVerteuil and Wilson (2010:500) touch on the issue of homogenization of the Aboriginal population in healing approaches: “We are careful not to assume that all Aboriginal peoples desire treatment programs that combine contemporary approaches with traditional healing practices, especially considering the impact of colonization (i.e. separation from land, culture and language). Even though not all Aboriginal peoples may embrace traditional approaches to healing, it may be relevant and effective for some. Furthermore, it has been demonstrated that the re-introduction of traditional practices can be an effective part of healing for Aboriginal populations.
- Many scholars and government agencies do not acknowledge the agency of Aboriginal Peoples – particularly in the areas of self-determination and developing culturally-appropriate services and housing. The perspectives and aspirations of Aboriginal actors are too often excluded or made peripheral, which is both ethically and practically problematic.
 - This is in line with Monette et al. (2009:43) who take the position that, “Aboriginal self-determination has historically been unrecognized in research related to Aboriginal communities.”

- Heritz's (2010:1) position is also related to this: "statistics on Aboriginal marginalization...avoid, for the most part, a discussion of urban Aboriginal politics generally, and of self-determination specifically."
- As touched on in the *Definitions of Home and Homelessness* and *Youth* sections, scholars and stakeholders have yet to reach a consensus on the definition of 'homelessness' and what 'at risk of becoming homeless' means, particularly for the Aboriginal population. The reviewer contends Aboriginal-specific understandings must be developed and should be recognized by both academic and service-providing communities.
- Literature revealed there appears to be a lack of coordination of services available to Aboriginal Peoples facing homelessness. They exist within a fragmented and chronically underfunded system.
- A great number of academics and stakeholders have expertly identified a variety of issues related to, and solutions to, Aboriginal homelessness, but fail to act (more specifically, to engage in knowledge dissemination activities or activism to apply the insights they present).
- Some literature fails to capture Aboriginal perspectives on the issues of homelessness, housing and more broadly, poverty. Current debates, disagreements, or processes occurring within or between Aboriginal groups are missing.
- A great deal of valuable information exists on the topic of Aboriginal homelessness, but it is not available in a comprehensive accessible way or singular location. Providing plain language information in a centralized manner can more effectively compile the range of viewpoints on this issue and may better support action in this area.
- Unfortunately, only one article about Aboriginal youth (Baskin, 2007) identified racism as a specific factor placing youth at-risk for homelessness. However, literature speaking more broadly about the entire Aboriginal population does include this as a factor that impacts family and economic opportunities. Racism and its effects should be a major topic in research with Aboriginal youth, as it can impact identity, self-esteem and life opportunities.

2. IDENTIFIED IN THE LITERATURE

- Monette et al. (2009:43) offer a broad critique about the research that has been conducted on Aboriginal groups: “while Aboriginal communities are, in general, a highly researched group, much of the work that has been done has effectively reproduced the colonial relations experienced between Aboriginal Peoples and other peoples living in Canada.”
- Ruttan et al. (2008:47) argue for a balanced approach when conceptualizing Aboriginal issues: “While showing respect for... resilience, the reality of social inequities must not be minimized, especially given the history of Aboriginal women within Canada.”
- Kishigami (2008:73) suggests an immediate and culturally-appropriate intervention to improve the lives of homeless Inuit people living in Montréal: “An Inuit community centre, where information and food can be shared, should be established in Montréal to change the present situation of homeless Inuit.”
- Stout (2010) claims the sex and gender differences linked to mental health are often overlooked in research papers and official reports. Stout (2010:2) states “the lack of gender-based analysis in research, programs, and policies for women’s mental health has been a continued concern for feminist scholars. Much of the research on mental health has neglected to account for sex and gender differences.”
- In regards to the social aspects of illness, Monette et al. (2011:218) feel “standard measures of health may not capture the experiences and circumstances of Aboriginal peoples, such as the need to consider the collective experience of social suffering, which may limit our ability to understand the implications of, or put into context, the social and economic circumstances of Aboriginal peoples with HIV.”
- Whitzman (2006:392) points out a major issue in providing health care to homeless populations: “Given the frequent recurrence of these themes in the literature, almost every report on health services for homeless people stresses the importance of integrating health services in order to reduce barriers to access and provide continuous and coordinated prevention-orientated health services. However, there is no agreement about the meaning of the term ‘integrated’. In [a] review of the literature, integration was defined in at least four ways: (1) interagency coordination, (2) co-location of services, (3) case management approaches and (4) holistic health.”

Future Research Pathways

Based on the assessment of the literature, the reviewer proposes the following points as directions for future research on the topic of Aboriginal homelessness. The goal here is to help move the dialogue along by suggesting how this topic of study/action can progress.

- There should be research that focuses on good practices and success stories. This would move away from pathologizing the Aboriginal population, an endemic problem within much of the existing literature.
- Good research should be up-front with declaring the biases (e.g. political) and backgrounds of authors – whatever they may be. Acknowledging one's positionality is commonly practiced in academia and should be practiced by all in the future, particularly in research involving Aboriginal Peoples, where there is a (understandable) history of distrust of both academics and governments. If researchers endeavour to remain 'neutral,' they should make a statement about what 'neutrality' means to them, or where they see themselves situated in the production of knowledge.
- More voices from Aboriginal Peoples need to be present in the academic literature, but also in government reports that tend to quantify Aboriginal population in statistical terms, which offer limited information of this issue or possible solutions.

- More voices from policy-makers and politicians need to be included in new literature on this topic. They represent a significant portion of decision-makers (in terms of funding priorities), but are largely absent from the academic literature. Perhaps researchers need to become politically involved in their chosen research causes or at least make applied contributions to their respective fields by way of informing decision-makers and stakeholders.
- There is great importance in both multi-disciplinary approaches (which academics already practice a great deal) and collaboration across professions – that is, academic collaborations with those working at the ground level. There also have to be concrete plans about the dissemination of academic and on-the-ground knowledge, as there is a lot of valuable information in existence not being acted upon or that is difficult to find.
- The general public's attitudes about Aboriginal Peoples need to be understood and addressed, as popular opinions impact political decisions, directions and leadership. It is unacceptable that racism and discrimination continue to permeate Canadian society, so understanding and changing popular opinions would have an impact on the solutions proposed to address Aboriginal homelessness and poverty.

The following are future research pathways put forth by various authors:

- Additional research is required to determine why, Métis and Non-Status Indians are more likely to become homeowners than Status Indians and Inuit (Belanger et al., 2012a).
- Explore the socio-economic reasons leading to core housing need for both urban Aboriginal renters and homeowners (Belanger et al., 2012a).
- A national study is required to explore the impacts of the NIMBY phenomenon on rental opportunities and the related influence over urban Aboriginal homeless rates (Belanger et al., 2012).
- Focus on homeless Aboriginal Peoples' unique situation, needs and wants (Bird et al., 2010).

- Directly involve Aboriginal Peoples in the research process (Bird et al., 2010).
- Ensure research also includes a prevention focus (Bird et al., 2010).
- Approach Aboriginal homelessness from an Aboriginal perspective that considers both the physical and spiritual needs of an individual in prevention and intervention strategies (Bird et al., 2010).
- A research gap was identified by Peters (2012:335), who asserts “hidden homeless people represent a high need population. Yet the existing emphasis in academic research on absolute homelessness means that the specific needs for services of hidden homeless people have not been adequately documented.”

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This book presents a comprehensive review of scholarly literature on the topic of Aboriginal Homelessness in Canada. It answers four broad inquiry areas – Key Concepts, Causes, Experiences and Action – through a review and analysis of current literature.

This literature review also endeavours to highlight gaps and weaknesses that currently exist in the academic literature and suggests future research avenues on this topic.

This review is organized around broad themes that emerged throughout the literature which are reflected in the section headings. There is, however, a significant amount of overlap between sections because many subjects and personal experiences are interrelated and complex.

This literature review has several target audiences. Since it provides an analysis of scholarly material an academic audience is a primary target. This review may also be of value to policy makers, service providers, politicians and community stakeholders because of its emphasis on solutions and pathways forward. Since it is written in plain language, it is also designed to be accessible to the general population. It is the hope of the reviewer that this document is disseminated as widely as possible, as to draw attention to the national Aboriginal homelessness crisis and hopefully inspire action.

