



Literature Review of Indigenous Case Management and Housing Models

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Introduction

Homelessness and inadequate housing conditions disproportionately affect Indigenous populations in Canada. According to 2006 Canadian Housing Mortgage Corporation data, the National Aboriginal Housing Association (NAHA) estimates that more than one-third of Canada's Indigenous population lives in inadequate, unsuitable, or unaffordable housing, compared to 18% of non-Indigenous populations (Belanger, Weasel Head, & Awosoga, 2012). In 2006, Canada Census revealed that roughly 54% of the national Indigenous population lived in cities, with 73.4% living off-reserve (Belanger et al., 2012). National rates of urban Indigenous house ownership and rental rates are also lower than that of mainstream Canada, and rates of urban Indigenous homelessness are "conspicuously high" amongst the national homeless population (Belanger et al., 2012, p. 32).

The Aboriginal Standing Committee on Housing and Homelessness (2012) states that from an Indigenous worldview, homelessness is not only an issue of adequate housing, but is rather "the combination of inter-related issues including history, present day systemic and societal perspectives about [Indigenous] people, as well as the cultural losses of [Indigenous] people in the areas of physical, emotional, mental, and spiritual balance" (p. 4). Numerous factors contributing to Indigenous homelessness have been identified, including residential schools, territorial displacement, social marginalization and isolation, and systemic barriers to employment and education (Thurston & Mason, 2010; Leach, 2010).

The Calgary Recovery Services Task Force (2017) recommends that "given the unique experiences of Indigenous people, and the ongoing and historical intergenerational trauma and impacts of colonization they experience, [...] approaches to health and housing need to be more responsive and relevant for Indigenous individuals" (p. 20). The Calgary Recovery Services Task Force (2017) advocates that both harm reduction and trauma-informed practices be incorporated into Indigenous housing models to provide a person-centred approach to Indigenous homelessness.

Ensuring adequate, affordable housing for urban Indigenous populations has been identified as "an important first step in ending these inequalities" (Belanger et al., 2012, p. 35). Belanger et al. (2012) suggest that such approaches must: (1) attend to the whole person and all of their varied needs; and (2) understand and incorporate Indigenous history and cultural practices. The following outlines several approaches to Indigenous housing and case management models identified in existing literature, thus identifying considerations and best practices for future models that may be developed.

Methods

A comprehensive scan of the literature was conducted to identify existing best practices for Indigenous housing and case management models. Literature based on Canadian and international practices were reviewed to ensure that a well-rounded understanding of existing practices was developed. Academic articles and grey literature were both incorporated in the literature review to identify the perspectives of academics along with governmental and non-governmental agencies.

Indigenous Housing Models

Current Gaps and Barriers

Belanger et al. (2012) identify that current housing practices are inadequately addressing Indigenous housing concerns. The reasons for this are complex, such as a lack of understanding of Indigenous populations' experiences and history that hinder inter-agency collaboration, systemic discrimination and racism, NIMBYism, and lack of community consultation (Crookshanks & Edmonton Aboriginal Seniors Centre, 2016; Gaetz, Scott, & Gulliver, 2013; Milligan, Phillips, Easthope, Liu, & Memmott, 2011; Thurston, Oelke, Turner, & Bird, 2011). In order to improve housing for Indigenous populations, a Conference Board of Canada (2016) report identifies that "a full spectrum of housing options and related services" must be implemented, thus providing services that meet the diverse needs of Canada's Indigenous populations (p. 29).

Belanger et al. (2012) cite the three conditions that housing must meet: adequacy, suitability, and affordability. However, in addition to the basic premises that comprise adequate housing, Gaetz et al. (2013) suggest that it is imperative that existing discrimination and racism are addressed. Housing is much more than just the physical structure as Fien et al. (2008) suggest that suitable housing must meet clients' cultural, health, and social needs, while also taking into account opportunities for economic development and employment. Further, when considering the development of Indigenous housing models, the Aboriginal Standing Committee on Housing and Homelessness (2012) identifies that models across the housing spectrum must be developed to ensure that clients can access diverse housing that meets their needs.

A report from the Calgary Urban Aboriginal Initiative (2000) highlights findings from a multi-stage consultation process with Indigenous community members,¹ frontline workers, and stakeholders to inform and address needs and barriers currently being faced by Indigenous communities. In this report, discrimination, racism, waitlists, and lack of cultural awareness were all recognized as housing barriers that Indigenous individuals face. In order to address the housing crisis currently facing many Indigenous communities, each of these barriers must be considered and addressed.

¹ Elders were positioned as key figures in this process.

Indigenous Approach

There is a consensus across the literature that self-governance, self-determination, and autonomy of Indigenous communities are critical to the success of Indigenous housing models. For instance, Greig, Henderson, Wiebe, & Taylor (2015) advocate that Indigenous organizations should manage Indigenous housing. Further, Crookshanks & Edmonton Aboriginal Seniors Centre (2016) identified that housing must be “designed, owned, and managed” by Indigenous individuals in order to be considered under Indigenous control (p. 15). Facilitating self-determination will ensure that individuals’ experiences, needs, perspectives, and goals are central to housing development (Crookshanks & Edmonton Aboriginal Seniors Centre, 2016). It is essential that Indigenous communities and organizations are not only involved in housing development, but are also leading the process; Milligan et al. (2011) identified that “absence, inappropriateness and tokenism of opportunities for participation in service delivery and policy processes” created frustration in the community (p. 92). Brant (2000) highlights that many communities have a willingness to develop and support housing programs themselves. As the importance of Indigenous autonomy, self-governance, and self-determination over housing are acknowledged across the literature, these should be considered when addressing the Indigenous housing crisis.

The literature also suggests that housing models must consider and accommodate diversity across and among Indigenous groups so as not to adopt a “pan-Indian” approach (Aboriginal Standing Committee on Housing and Homelessness, 2012, p. For instance, feedback from Indigenous participants identified that First Nations, Inuit, and Métis communities all have different needs and should have more control over their own housing (The Conference Board of Canada, 2016). Similarly, the Calgary Recovery Services Task Force (2017) identified that because “there are many different Indigenous cultures that may have different perspectives,” housing models must take into account the differences across Indigenous groups (p. 21). Greig et al. (2015) advocate that as there are many demographics that have different housing needs, consultation must be implemented to develop appropriate housing solutions.

Housing Layout and Accessibility

Crookshanks & Edmonton Aboriginal Seniors Centre (2016) identify, in general, affordability and accessibility must be taken into account when developing Indigenous Housing Models, particularly for seniors. They suggest when addressing accessibility, it is important to consider individuals’ abilities to access transit, food, health care, family, and community supports.

The literature also identifies several features that are important to consider when constructing and planning Indigenous housing models. One of the overarching themes that many articles focus on is accommodating large families and extended family. For instance, a report by the Canada Mortgage and Housing Corporation (2005) suggests that open floor plans and outdoor spaces such as smokehouses and sheds can better support traditional activities like ceremonies and feasts at which large groups of people tend to gather together. Further, Fien et al. (2008) suggest that overcrowded housing in many Indigenous communities can be addressed by

considering the locations and sizes of bedrooms, cooking areas, and washrooms. Doing so would improve physical and spiritual liveability of the homes and reduce wear and tear over time. This is also an important consideration when ensuring that individuals have the means and support to engage in spiritual practices, such as building sweatlodges and having open fires to mourn family members who have passed away (Craig & Hamilton, 2014). Finally, McCallum & Isaac (2011) identify The Aboriginal Patient Lodge at the Lu'Ma Native Housing Society in Vancouver, British Columbia as having incorporated cultural art into housing units and common areas. While it is important to consider the overarching structural design of the houses, McCallum & Isaac (2011) identify that design and details such as the inclusion of Indigenous artwork must be considered in order to ensure that housing models are both functional and have a sense of connectedness to Indigenous culture.

Best Practices

Staffing

Much of the literature identifies hiring Indigenous staff as critical to developing successful housing models. Thurston et al. (2011) identified that Indigenous staff “share common experiences rooted in their treatment by people and institutions of the dominant culture, however, and in the similarities in how their communities adapted to these they can provide important insights for committees and services” (p. 58). Milligan et al. (2011) identified that hiring Indigenous staff is an essential element of providing culturally-appropriate services. This is further supported by McCallum & Isaac (2011), who identified that Indigenous staff members can better relate to Indigenous clients both spiritually and culturally. By hiring Indigenous staff, it has been suggested that clients have “one less cultural barrier to overcome in the healing process”(McCallum & Isaac, 2011, p. 37).

Ensuring that staff have received training to improve cultural awareness and understanding is an essential element of Indigenous housing programs (McCallum & Isaac, 2011; Thurston et al., 2011). Homeward Trust, an Edmonton-based homeless-serving organization, exemplifies this as Gaetz et al. (2013) identify that the organization provides training and workshops to educate staff on issues including residential schools, colonization and decolonization, the Sixties Scoop, and Indigenous diversity. Further, all staff in programs funded by the Calgary Homeless Foundation are required to attend annual Indigenous training sessions (Gaetz et al., 2013). However, as emphasized by The Aboriginal Standing Committee on Housing and Homelessness (2012), it is essential that training is accessible for Indigenous populations to ensure that those most suited to work within Indigenous housing models are able to access training courses and sessions.

Hiring Indigenous staff presents unique challenges. Milligan et al. (2011) identified that Indigenous workers who are supporting clients within their community may face tension between their work and family/community obligations. Thus, while it is essential to integrate Indigenous hiring practices into future housing models, appropriate supports must be developed to support individuals facing tensions from working within their own communities.

Trauma-Informed Practices

Bodor, Chewka, Smith-Windsor, Conley, & Pereira, (2011) state that trauma-informed practices must be incorporated into Indigenous housing models to help individuals heal from the impacts of intergenerational trauma. The Calgary Recovery Services Task Force (2017) similarly recommends that in order to better support homeless populations, trauma-informed practices must be scaled up to support Indigenous individuals who have experienced personal and intergenerational trauma. Further, Gaetz et al. (2013) identify that there is a trauma component that has been integrated into programs across Calgary that support individuals suffering from intergenerational trauma to better address the impacts of colonialism and residential schools. Schiff & Schiff (2010) identify that, as many women fear losing their children to Child Protective Services, housing models and configurations must aim to “minimize trauma and anxiety resulting from the fear of child welfare intrusion (p. 72).” Further, surveillance may be re-traumatizing for Indigenous individuals. As such, housing models must be structured so as not to reinforce feelings of surveillance and oppression (Schiff & Schiff, 2010). As identified in the Aboriginal Standing Committee on Housing and Homelessness report (2012), Indigenous individuals feel “routinely victimized by the system” and feel “powerless trying to change their current conditions,” (p. 37). Thus, empowerment and person-centered models of care must be emphasized to acknowledge experiences of trauma and to prevent re-traumatization.

Spiritual and Cultural Practices

Much of the literature identifies cultural reconnection as a strategy that provides individuals struggling with housing and homelessness with cultural grounding and connectedness. For instance, Thurston et al. (2011) identified that cultural reconnection improves the well-being and success of Indigenous individuals experiencing homelessness. This is further supported by McCallum & Isaac (2011), who suggest that culturally responsive approaches are “more effective and respectful” for Indigenous people experiencing homelessness (p. 25). When implementing Indigenous housing models in urban areas, it has been suggested that a building rooted in Indigenous values provides cultural continuity (Craig & Hamilton, 2014). As Craig & Hamilton (2014) identify the importance of individuals being able to “bring their own culture into their homes,” it is essential that housing models foster cultural reconnection (p. 19). McCallum & Isaac (2011) suggest that culturally-responsive service delivery “must also be met with support from culturally responsive evaluation and results measurement tools” (p. 66). In addition to integrating cultural reconnection into housing models, appropriate evaluation tools will better measure program success.

The literature identifies many cultural practices and ceremonies that can be integrated into Indigenous housing models. For instance, the Calgary Recovery Services Task Force (2017) recommends that spaces be provided to support ceremonies and traditional practices. The literature suggests that Indigenous programming is wide-ranging and may include or facilitate access to ceremonies, Elders, smudging, traditional crafting, healing circles, and sweatlodges

(Bodor et al., 2011; Schiff & Schiff, 2010). The Aboriginal Standing Committee on Housing and Homelessness (2012) emphasize the role that sweatlodges play in individuals' healing, which was further supplemented by lived experiences. For instance, one interview participant identifies the benefit of connecting to spirituality through attending sweats by stating "I didn't know how to ask for help until I learned how to pray" (p. 33). Further, in order to ensure that appropriate cultural programming is developed, Bodor et al. (2011) suggest that resources, time, and space must all be considered. This may include working with both male and female elders to provide gender-specific, trauma-informed healing practices and providing clients with the resources they need (e.g., tobacco and cloth offerings) to engage with an elder.

While cultural reconnection has been found to be an integral element to developing Indigenous housing models, Gaetz et al. (2013) identify that not everyone will want to engage in cultural practices because they have had negative experiences in the past or do not have a cultural connection. This suggests that a person-centered approach should be taken, thus ensuring that individuals are able to engage in cultural practices to the extent and level that they wish to be engaged.

In addition to cultural reconnection, the literature suggests that Indigenous housing models also foster connections among individuals. For instance, Greig et al. (2015) acknowledge that Indigenous housing organizations "advocate that housing be about community, not just units" (p. 37). Likewise, Bodor et al. (2011) identify that Indigenous individuals involved in Housing First programs are "strongly driven towards a sense of connection" (p. 85). Indigenous housing cooperatives have been successful in developing connections between individuals as Craig & Hamilton (2014) suggest that Indigenous housing cooperatives allow individuals to support one another. Alongside the development of housing practices that foster cultural reconnection, the literature suggests that fostering connections between Indigenous participants is instrumental to their well-being and success.

Healing Models and Practices

Healing is an integral part of developing Indigenous-based housing models. The Calgary Recovery Services Task Force (2017) recommended that a harm reduction approach be taken to address Indigenous homelessness in order to "adhere to a person-centered approach and [to] begin to create safer spaces for individuals to pursue recovery in their own way" (p. 20). Also reflecting the importance of a person-centered approach, McCallum & Isaac (2011) identify that multiple-service delivery models are important to address the diverse needs of individuals accessing housing programs, such as trauma, addiction, and discrimination. Further, Bodor et al. (2011) emphasize that holistic interventions must be integrated into every layer of housing organizations in order to address mental, spiritual, physical, and emotional wellness.

Government-Level Approach

The root causes of housing gaps and barriers for Indigenous populations cannot be solved through only organizational initiatives, but must be accompanied by change at the level of non-Indigenous-led governments. This is supported by Thistle (2017), who suggests that “racism and discrimination aimed at Indigenous peoples are firmly entrenched in Canadian society, producing impenetrable systemic and societal barriers, such as a lack of affordable and appropriate housing, insufficient and culturally inappropriate health and education services, [and] irrelevant and inadequate employment opportunities” (p. 7). In order to provide culturally-appropriate housing, McCallum & Isaac (2011) suggest that consultation with Indigenous elders and community members is an integral part of decision-making. Through implementing community consultation practices and developing policies that eliminate discrimination at a governmental level, Indigenous housing models will be able to flourish and will promote the success of Indigenous communities on a much broader, Canada-wide scale.

Policies and Procedures

In order to support Indigenous ways of knowing and cultural reconnection, recommendations are made across the literature that suggest that these should be reinforced with formalized policies and practices. For instance, McCallum & Isaac (2011) identify that the use of Indigenous names and recognition in the workplace are integral parts of cultural visibility as “visible signs of cultural respect are an important part of making Aboriginal persons feel welcomed” (p. 64).

Craig & Hamilton (2014) highlight a policy at the Native Intertribal Housing in London, Ontario that allows visitors to stay with clients for 30 days without having to register. This allows individuals the flexibility to embrace an Indigenous household model, as opposed to reinforcing the Westernized expectations of family and household structures. This, as suggested by Crookshanks & Edmonton Aboriginal Seniors Centre (2016), will ensure that housing models are “free from power systems that allow building managers or landlords to persecute tenants for allowing their grandchildren to visit or having a relative stay with them” (p. 26). Milligan et al. (2011) emphasize that those with lived experience identify the importance of using face-to-face communication as opposed to only formal written communication. This supports a person-centred model of care as it provides flexibility to clients and ensures that individuals’ diverse needs can be adequately met.

Indigenous Case Management Models

According to the Mental Health Commission of Canada (2012), to allow Indigenous individuals to heal, there must be “access to a full continuum of culturally safe mental health services” (p. 11). The Western approach that is currently in place has continuously failed to meet the needs of Indigenous peoples because of a lack of understanding of cultural healing and knowledge. Researchers and practitioners suggest that the best way to aid Indigenous populations in healing is to restore traditional healing practices that incorporate Indigenous knowledge (Marsh, Coholic, Cote-Meek & Najavits, 2015). The need for Indigenous case management is evident as Bell’s (2016) research identifies that almost all Indigenous participants interviewed experienced “difficulties with transitioning from one service to another or from one service to the home or community” (p. 32). Thus, considering best practices and current needs of Indigenous populations is critical to developing appropriate and meaningful services.

The Blended Approach

There is a lack of literature that identifies best practices for solely Indigenous-focused case management. Rather, the literature focuses on culturally blended approaches that incorporate both Western and Indigenous knowledge as it is believed that culturally blended approaches will increase the utilization of mental health services and will decrease dropout rates in healing programs. It is suggested that the approach will advocate for improved access to services, alongside strengthening the relationship between Indigenous practitioners and non-Indigenous practitioners. However, the lack of Indigenous-based models is indicative of the current gap in the literature as the blended approaches identified below will not meet the needs of Indigenous people as well as those rooted solely in Indigenous methodology. While there are elements of the current blended approach that may prove to be successful for Indigenous populations, further work needs to be done to address this lack of Indigenous-based best practices. Existing blended approaches are reviewed and highlighted below, thus emphasizing the lack of current Indigenous models.

Marsh et al. (2015) identified that *two-eyed seeing* is an approach that blends both Western and Indigenous approaches by “learning to see from one eye with the strengths of Indigenous knowledge and ways of knowing, and from the other eye with the strengths of Western knowledge and ways of knowing” (p. 2). This approach was first discovered by an Indigenous spiritual leader and healer, who emphasized communities collectively coming together, connecting and holding hands just as the various species of trees do through their roots. *Two-eyed seeing* specifically works to develop a sense of identity in those suffering from intergeneration trauma by focusing on inclusion, trust, respect, collaboration and cultural respect (Marsh et al., 2015).

Two-eyed seeing is currently used by practitioners and incorporates various Indigenous methods, such as sweat ceremonies, drumming, and sharing circles, to connect cultural identity with healing to create a holistic healing approach (Marsh et al., 2015). It is believed that

incorporating such methods and using a holistic approach in dealing with intergenerational trauma “ensures that care is culturally relevant but also encourages connection to the community” (Marsh et al., 2015, p. 3).

Another approach identified in the literature is the *Seeking Safety* counselling program. The goal of this program is to “increase the coping skills of participants with the goal of reducing the chance of relapse by emphasizing values such as respect, care, integration, and healing of self” (Marsh et al., 2015, p. 6). Currently the program has been successfully used by other minority populations and can be easily translated into various languages. The approach is unique from traditional Western approaches as it strays away from the medical model towards a spiritual focus. The approach further separates itself from the Western approach by discussing topics collectively such as safety, cultural continuity, language, and teachings about intergenerational trauma. Further, it takes a holistic approach to addressing trauma and addiction simultaneously by including the mind, body, spirit, and self-awareness. *Seeking Safety* has been proven effective and is supported by multiple professional entities. While not solely Indigenous-based, Marsh et al. (2015) identify that it is convergent with Indigenous models insofar as it emphasizes a holistic approach and focuses on respect, healing, and cultural continuity. However, these practices continue to reinforce the role of Westernized practices in Indigenous healing. Moving forward, case management practices that are based solely on Indigenous principles will best support decolonization efforts and the autonomy of Indigenous communities.

Existing literature identifies several elements that should be included in Indigenous programming and case management. For instance, a report written by the Urban Society for Aboriginal Youth, YMCA Calgary, and the University of Calgary (2012) concluded from several papers that Indigenous worldviews and “holistic interventions that integrate community and culture” are of great importance (p. 12). Such interventions can include healing focused on empowerment and independence, learning from elders, and using identity to facilitate political engagement (Urban Society for Aboriginal Youth et al., 2012). Further, the Aboriginal Child, Family, and Community Care State Secretariat (2017) identify several core principles that should be incorporated into Indigenous case management. At a client-level, these practices include incorporating consultation with both maternal and paternal family members, allowing young people to live with their family and within their communities, and ensuring that there is a connection kept with birth communities through the inclusion of cultural support plans. On a higher level, it is suggested that collaboration between and across governmental agencies and non-governmental agencies be facilitated, while also ensuring that Indigenous individuals and communities are autonomous and directly involved in decision-making. Each of these principles are suggested to improve and indigenize case management practices and policies to better meet the needs of Indigenous populations.

Needs and Gaps

In addition to the recommended practices in the literature, the literature identifies several needs that must be met. These are important to consider when developing future case-

management models. The overarching theme highlighted across the literature is the impact of intergenerational trauma and colonization. This is emphasized in the Calgary Recovery Services Task Force (2017) report, which identifies that the devastation caused by cultural assimilation policies continue to negatively impact Indigenous communities' health and well-being. For instance, Urban Society for Aboriginal Youth et al. (2012) identify that intergenerational trauma has been found to impact the social and health inequalities that Indigenous people are facing. Additionally, Brave Heart (2003) identifies the relationship between trauma, PTSD, and substance use. Further, a report by the Mental Health Commission of Canada (2012) identifies that the child welfare system and residential schools have led to concerns regarding suicide, mental health, and addiction in Indigenous communities. Similarly, as identified by Klinik Community Health Centre (2013), "lack of knowledge and understanding about the impact of trauma can get in the way of services providing the most effective care and intervention" (p. 6). When developing Indigenous case management models, these health and social concerns must be considered to ensure that clients' needs are adequately met and that the lasting, detrimental impacts of colonization across generations are addressed.

The Aboriginal Standing Committee on Housing and Homelessness (2012) suggests that support with system navigation must also be considered when developing Indigenous approaches to care. For instance, the report suggests that Indigenous individuals moving into urban centres from reserves may require support navigating the complex systems that they are facing. Further, the Calgary Urban Aboriginal Initiative (2000) identified that across many areas of service provision, "overarching themes in every domain were discrimination, systemic racism, and prejudice" (p. 35). Through implementing patient advocacy into case management approaches, it is suggested by Bell (2016) that clients would be better able to navigate various health and social services, which are often complex and confusing. For instance, one participant identified that "*an advocate to help me get into housing would be good - so I'm not judged....and we're eased in...*" (Bell, 2016, p. 33).

There are also several gaps in case management practices that are identified in the literature, which provide further guidance regarding practices that should be rectified. For instance, the Mental Health Commission of Canada (2012) suggests that service providers should receive cultural training to ensure that they are providing culturally-appropriate services. Alternatively, Urban Society for Aboriginal Youth et al. (2012) suggest hiring Indigenous staff members, which would further connect individuals with culturally-relevant case management. This is supported by the Aboriginal Standing Committee on Housing and Homelessness' report (2012), in which a participant suggests that "our people need to help our people" (p. 38). Further, Bell (2016) advocates that individuals with lived experiences must be incorporated into service delivery models. However, it is important to consider the context in which this hiring occurs, as the Calgary Urban Aboriginal Initiative (2000) identifies the importance of not tokenizing Indigenous staff. Rather, they want to "work with employers to identify and dismantle barriers and systemic discrimination," improving the workplace and supporting Indigenous clients with lived experience (Calgary Urban Aboriginal Initiative, 2000, p. 36).

Further, as the Mental Health Commission of Canada (2012) identifies that Indigenous populations continue to face challenges accessing mental health services, those developing Indigenous case management models could consider integrating elements of service navigation into practices to better assist those navigating the mental health system. Results from Bell's (2016) Indigenous Patient Journey suggest that placing service providers in community-based organizations would better help clients navigating various services. This is essential as many participants "expressed frustration with being sent to the wrong service, the wrong location or being given the wrong date and time to access a support service" (p. 15).

Research conducted by the Calgary Urban Aboriginal Initiative (2000) identified that community service providers expressed concern about "systemic discrimination, lack of community involvement in policy, programme planning and institutional change; lack of cross-cultural training; and lack of Aboriginal role models in all systems at all levels of service" (p. 42). Each of these must be considered when developing case management models in order to ensure that provided services are meaningful and empowering for both clients and staff.

Synthesis

The following highlights the overarching principles that the literature recommended should be integrated into Indigenous housing and case management models. This will provide an overview of policies and procedures that can be considered when developing new models to meet the needs of Indigenous populations.

1. Increase in Indigenous staffing and cross-cultural training to ensure that services provided are culturally appropriate and are responsive to the cultural needs of clients.
2. Indigenous ways of knowing are made central to ensure that values and principles of Indigenous spirituality are respected and embraced.
3. Incorporation of cultural practices to foster cultural reconnection and decolonization, both of which serve to reduce barriers to housing that currently exist. This will also allow individuals to reconnect to their traditional roots and will allow individuals to engage in Indigenous healing practices.
4. Revised housing and case management policies with an emphasis on autonomy and self-governance of Indigenous communities. This will allow Indigenous communities and organizations to develop practices that best represent the needs of the population they are serving.

Moving forward, diversity of Indigenous populations must be considered in order to ensure that a one-size-fits-all approach is not taken. This will provide services that focus on flexibility and adaptability that, in turn, will better serve the dynamic needs of Indigenous populations over time.

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