First Nations Women and Homelessness

A DISCUSSION PAPER AND ANNOTATED BIBLIOGRAPHY
FIRST NATIONS WOMEN AND HOMELESSNESS IN CANADA: A DISCUSSION PAPER
AND ANNOTATED BIBLIOGRAPHY

INTRODUCTION
There are currently 150,000-300,000 homeless people in Canada (Scott, 2007). Aboriginal people are disproportionately represented in the homeless population and are 10 times more likely than non-Aboriginal people to become homeless (McCallum & Isaac, 2011, p. 9). At one point in Sioux Lookout, it was estimated that over 99 per cent of the homeless population was Aboriginal (Native Women’s Association of Canada, 2007). Indeed, a Toronto advocacy group even declared homelessness to be a national disaster as far back as 1998 (Bridgeman, 2006, p. 92).

The purpose of this paper is to provide the reality of urban First Nations homelessness in context, with emphasis on First Nations women. It is important to acknowledge the historical context of homelessness, including the critical link with an individual’s overall health. This paper discusses the links between determinants of health and homelessness, focuses on the significant effect that colonization has had on First Nations woman and communities in Canada, then addresses contemporary issues and concerns surrounding homelessness. The paper concludes with annotations with further information on the complexities of First Nations Peoples and homelessness. This document is not meant to provide an exhaustive list of resources on homelessness; rather, it is a starting point for further discussion on the many ways colonization has impacted First Nations Peoples. It is hoped that highlighting the historical marginalization of First Nations women will lead to a greater understanding of the critical link between health and homelessness.

HOUSING AS A DETERMINANT OF HEALTH
Health must be examined not only in medical terms but also within the broader context. These broader health determinants include but are not limited to income, social supports, level of education, living environment, and employment (Chenier, 1999). For those who are homeless, many of these factors play an important role in their health. The homeless are at high risk of death due to freezing cold weather, health issues related to addictions and substance abuse, and exposure to communicable disease (ibid). The lack of availability for safe, affordable
housing is connected to lack of employment or employability, support services, and access to health care. Lack of adequate housing can lead to “significantly higher rates among Aboriginal people of tuberculosis, pneumonia and other upper and lower respiratory tract infections, gastrointestinal diseases, skin infections, cancer due to second-hand smoking and deaths due to fire” (ibid). Furthermore, racism and language issues may be barriers for many First Nations people’s ability to obtain appropriate health services. The link between health and homelessness is critical, as each negatively influences the other; ill health can predispose First Nations people to homelessness, and homelessness makes First Nations people more susceptible to particular health problems (ibid).

**WHAT IS HOMELESSNESS?**

The concept of homelessness is difficult to describe and quantify. Casavant (1999) believes homelessness cannot be defined due to a general lack of agreement on the term. However, according to Memmott et al. (2003), there are five different categories of homelessness: those dwelling in public spaces; those experiencing transient homelessness; those with spiritual homelessness; those living in overcrowded housing; and individuals or families fleeing from violence (p. iv). Bridgeman (2006) believes homelessness “is a political problem, not a statistical or definitional problem” (p. 88).

**STRUCTURAL AND PERSONAL DIMENSIONS OF HOMELESSNESS**

There are many factors that contribute to homelessness. Bridgeman (2006) suggests that people become homeless for both structural and personal reasons. Structural issues include government policies and lack of affordable housing and social safety nets, whereas personal reasons include trauma, addiction, and illness. In other words, First Nations women and First Nations Peoples in general have been negatively impacted by both assimilatory policies and historical and ongoing traumas that degrade their physical, emotional, mental, and spiritual well-being. Structural and personal issues may be closely linked to the adverse social issues surrounding First Nations Peoples and homelessness in Canada.

Those examining contemporary homelessness and First Nations Peoples must also consider the impact that patriarchy, the Indian Act, discrimination, residential schools, the child welfare system, and violence have had on Aboriginal Peoples—especially First Nations women.
PATRIARCHY AND THE INDIAN ACT

Jacobs and Williams (2008) discuss how patriarchy took its toll within Aboriginal communities during contact with white settlers in the “New World,” as non-Aboriginal leaders refused to negotiate with Aboriginal women. This Western society stance not only marginalized the role of First Nations women but also impacted the social order of certain First Nations communities. Many Aboriginal communities that were matriarchal societies were greatly altered through colonization. Subsequent legislation began to regulate the rights of Aboriginal Peoples and effectively diminished the traditional role of women within their communities. The Indian Act defined an “Indian” as a man, implying that women were non-existent persons who had to conform to European cultural norms and follow the decisions of their husbands (Jacobs & Williams, 2008). Women were not allowed to vote within their communities and many had their rights taken away as a result of this assimilation policy, which began in 1857 with the attempts to “civilize” First Nations Peoples. “Indian” men were therefore given greater rights over “Indian” women through marriage; men could marry a non-Indian (as defined by the Indian Act) while retaining their Indian status, whereas women who married non-Indians lost all rights associated with their community, among other freedoms (Jacobs & Williams, 2008, p. 121-122).

In 1985, the Canadian government enacted Bill C-31, an action meant to correct discriminatory marriage provisions within the Indian Act. However, the Bill ultimately caused further frustration for First Nations communities and discrimination for the women in particular, who were affected by the new legislation. Bill C-31 allowed many individuals to regain status, thus increasing the number of status First Nations people as well as those who wished to move back to their communities—as they were rightfully entitled. Yet, the failure to also increase funding to First Nations communities left them unprepared for the sudden increase of new residents. To further complicate the issue, Bill C-31 caused three separate categories of status people to emerge: those registered as status within the Indian Act, those with both registered status and membership within their respective band, and those with membership who were not entitled to have registered status (Holmes, 1987).

Discrimination also continued to affect those reinstated through the second generation cut-off rule and unstated paternity clause. Methods similar to a math equation were created to calculate Indian status. A status First Nations person could be registered under section 6 (1) or section 6 (2) of the Indian Act. The equation was simply meant to quantify eligibility for status but also
inadvertently created levels of “Indian-ness,” in which reinstated persons were considered to have less power (i.e., fewer rights) associated with or assigned to their status (Native Women’s Association, 2007). The second generation cut-off rule meant that those registered under section 6 (2) needed to have children with a status First Nations person in order for their children to be eligible for status (i.e., 6 (1) + 6 (1) = 6 (1); 6 (1) + 6 (2) = 6 (2); 6 (2) + 0 = loss of status). Furthermore, even if a First Nations woman had children with a status First Nations man, her children were not automatically granted status under the new rules (Native Women’s Association, 1986). For example, if a second generation status First Nations woman under section 6 (2) did not state the father’s paternity (for a variety of personal and complex reasons) upon the birth of her child, the child was automatically considered to be a non-status person. The differential treatment derived from these “second generation cut-off” and “unstated paternity” rules meant that First Nations women and children continued to be alienated from their ancestral communities in addition to the rights that they should have been given as status First Nations persons.

RESIDENTIAL SCHOOLS AND THE CHILD WELFARE SYSTEM
Residential schools, and later the child welfare system, also played a major role in undermining First Nations women’s ability to parent their children and raise healthy families. By 1920, many First Nations women were forced to give up their children to residential schools (Jacobs & Williams, p. 126). The family’s right to parent was taken away and the cultural, spiritual, and linguistic connection that children once had to their home communities was broken. This in turn caused children and their families to develop a sense of shame, especially since children attending residential schools were taught that their aboriginality was considered abnormal. Furthermore, parents ultimately lost their right to raise their families as they deemed fit, although communities did manage to persevere despite the fact that in some communities, all the children had been taken away for “educational” purposes. For all of these reasons, the effects of residential schooling live on because many First Nations children have been unable to access vital life teachings that will be critical in the raising of their own children.

After residential schools were closed, another type of displacement occurred. Disproportionate numbers of First Nations children were entered into the child welfare system (in an era that has come to be known to some as “the Sixties Scoop” or “the Scoop” for short). For example, in 1955 in British Columbia, there were only 29 children in child welfare services; yet by 1965,
during the era of the Scoop, that figure rose to 1,446 (Amnesty International, 2004, p.16). Some women who lost their children to the Scoop were made to feel that they were not good parents. For a variety of reasons, children were taken away on a large scale from Ontario and westward during the 1950s to the early 1980s, which left the affected First Nations women feeling a sense of utter powerlessness (Grantham, 2010).

In a report entitled *What Their Stories Tell Us*, The Native Women's Association of Canada (NWAC) talks about a “cycle of cultural disconnection,” which mainly began because of the impact that the child welfare system had, and still continues to have, on Aboriginal women (NWAC, 2010, p. 35). The term “Sisters in Spirit” (the name of the NWAC unit that wrote the report) reflects the need to raise awareness of the large percentage of Aboriginal women in Canada who have been targeted for racialized, sexualized violence. NWAC estimates that over the past 30 years, more than 582 Aboriginal women have gone missing or been murdered (NWAC, 2010). Furthermore, a link has been made between the missing and murdered women and their involvement with state care (ibid). Also, many of these women’s children are more vulnerable to placement in the child welfare system (NWAC, 2010, p. 35). This continues the cycle of separating parent and child through assimilatory policies and procedures that have targeted Aboriginal women.

**STRATEGIES TO PREVENT HOMELESSNESS AND IMPROVE HEALTH OUTCOMES**

Homelessness is an issue in Canada. Logically, there should be more focus on prevention. Furthermore, policy makers must listen to what the homeless population is saying in order to bring about change and reduce the number of people without housing.

Current strategies used to reduce homelessness in Canada include government initiatives and harm-reduction models. One government-commissioned initiative, At Home/Chez Soi, is said to be the largest study of its kind. Based on a research project carried out in Vancouver, Winnipeg, Toronto, Montreal, and Moncton, it uses a “Housing First” approach to its services. Housing First simply means that individuals who are 18 years or older and meet other project-specific requirements should be able to get into housing even if they have serious mental health issues and/or substance abuse problems. In this model, applicants do not have to go through psychiatric treatment and/or addictions counselling to get housing. In Winnipeg, culturally appropriate services are provided because a large number of homeless people who use the At
Home/Chez Soi project’s services are Aboriginal. Accordingly, the Mental Health Commission of Canada has agreed that the Housing First model is one form of harm reduction with proven positive results (see http://www.mentalhealthcommission.ca/English/Pages/homelessness.aspx for more information).

Megan Dumas (2007) of the Canadian Mental Health Association (CMHA) highlights the successes of innovative, North American, harm-reduction models for housing the homeless. Dumas discusses a number of transitional and permanent housing programs that focus on clients who suffer from mental health and addictions issues. Many facilities accept the client’s potential use of drugs and/or alcohol while simultaneously promoting abstinence. These housing programs accept clients “where they are at in life” and provide the support they need if they wish to stop using drugs and/or alcohol.

FURTHER READING
An annotated bibliography follows to provide more information on contemporary issues relating to First Nations Peoples and homelessness. However, this paper is not meant to reflect all relevant issues or present an exhaustive list of resources on the subject. Rather, it is a starting point for the discussion on First Nations Peoples and homelessness, especially on the historical factors that have acted as barriers to the overall health and well-being of First Nations women.

REFERENCES


This article highlights the changing realities and cultural disruptions of Canada’s Indigenous people living in the North since colonization. Great changes have occurred in Canada’s North through treaties and negotiations. Many Indigenous people are now in positions of power and are able to influence their own governing structures. Nonetheless, homelessness in the North remains an issue since a great proportion of the homeless population is Indigenous. Accordingly, this article describes the differences in quality of life for Indigenous persons compared to non-Indigenous residents, and the barriers to health equity they face. While much of the literature on Indigenous homelessness in Canada focuses on places outside of the North, this resource provides detailed accounts on how the North has been uniquely affected by persisting inequities.


The fifth chapter of this book provides information on the causes of homelessness and also reviews the literature and the many definitions used for homelessness. One of the book’s most important arguments is that in Canada, the most urgent requirement of people in need is finding affordable housing and access prevention programs. The chapter takes an “action now” approach that prioritizes long-term housing solutions and the construction of new social housing units rather than band-aid solutions.


This resource provides a historical overview of social housing policy and how it has affected Aboriginal people both on and off reserve. The paper looks at the politics behind Aboriginal housing policy and the involvement of major funders—including the Department of Indian Affairs (now known as Aboriginal Affairs and Northern Development), the Canadian Mortgage and
Housing Corporation (CMHC), as well as the provinces and municipalities. One of the major arguments is that housing should remain the responsibility of the federal government due to its fiduciary obligation to Aboriginal Peoples. This opposes the federal government’s 1997 push for the distribution of powers to the provinces and territories in administrating social housing. Previous research by the National Aboriginal Housing Authority (NAHA) concluded that there is a need for increased social housing, improvements to existing housing, a great reduction in the homelessness population, and greater assistance for affordable housing for Aboriginal Peoples, with particular emphasis in providing housing for Aboriginal people living with HIV/AIDS.


This article highlights the invisibility of Aboriginal women in Vancouver’s Downtown Eastside and the promotion of their visibility through an annual Valentine’s Day march. This march is held every year to remember the Aboriginal women who live (and who have died) amongst violence and racism, and to redefine representations that racialize and sexualize them. Aboriginal women, as survivors of colonial history, demand a space in the public realm to show their true selves, as opposed to the ways they have been misrepresented and therefore mistreated in the past. Mainstream talk about the Downtown Eastside focuses on the high rates of HIV/AIDS, the medicalization and stigmatization of poverty and addiction, the sensationalization of violence through the media (including images that are locally known “Pain and Wastings”), and the swarming of researchers to examine vulnerable populations. Culhane, however, discusses the same location very differently. She shares her experiences in attending the Valentine’s Day march by painting a verbal picture of people drumming, Elders smudging, prayers being said, and a community gathering. Culhane points out that no individuals are negatively labelled as being cases, poor, homeless, or criminal but rather more positively as grandmother, mother, daughter, and sister who are all worthy of respect and deserving of justice.

Distasio, J., Sylvestre, G., & Mulligan, S. (2005). *Home is where the heart is and right now that is nowhere…: An examination of hidden homelessness among Aboriginal Peoples in prairie cities.* Retrieved from
This extensive report is based on a study of the experiences of Aboriginal people who are vulnerably housed in three prairie cities: Winnipeg, Saskatoon, and Regina. Using key interviews, this document defines hidden homelessness as a less-visible form of homelessness, including the idea of “spiritual homelessness” among Aboriginal people. The report suggests that hidden homelessness is particularly relevant within the Aboriginal context, even though there is a lack of evidence to prove this. The study also finds that the majority of study participants were unemployed and frequently moved in response to extreme poverty and the inability to find permanent, adequate, and affordable housing. It is believed that hidden homelessness is invisible mainly due to social support networks that allow individuals to continue living within their residences. Furthermore, the authors suggest that long-term goals and resources should be established in Aboriginal community organizations that aim to place consumers into permanent housing. Aside from the valuable insights in this document, the project itself is a great example of community-based research that used culturally sensitive and appropriate Aboriginal research methodologies throughout the collection of data and examination of information.


This article begins by discussing the link between homelessness, prostitution, and health. Housing instability on-reserve can motivate First Nations people to move off-reserve, while homelessness seems to be the greatest predictor to vulnerability to prostitution. First Nations Peoples suffer from high rates of violence and racism that greatly impact their health. Indeed, one study found that out of 100 women interviewed who were prostituting in Vancouver (52 per cent of them First Nations women), most had a life-long history of physical and sexual abuse and met the criteria for post-traumatic stress disorder (PTSD). The authors therefore believe that the most successful approach for helping these women would involve a combination of Western-based and traditional healing. The article concludes by urging others to understand the history of colonial violence, sexual abuse, and poverty that has impacted First Nations Peoples, and how these things continue to play a role in the practice of prostitution by some First Nations women.

This informative article provides an excellent narrative on the many historical causes for Aboriginal homelessness in Canada and the latest actions taken by the government to address the situation. Assistance is usually provided in one of two ways: either by taking a “treatment first” approach or prioritizing “housing first.” Leach concludes that one of the best approaches to combating Aboriginal homelessness would be to adopt a “housing first” approach because it is effective and the most economical. This article talks about many issues that relate to Aboriginal Peoples and homelessness, and assesses the current government responses to them.

Leach acknowledges the growing rate of Aboriginal youth compared to the non-Aboriginal population, as well as the differences in education between the Aboriginal and non-Aboriginal populations. The fact that low levels of education are often risk factors for homelessness is noted. It is further noted that many homeless adults on the streets have direct connections to residential schools through the experiences of their families, and that there are an overwhelming number of Aboriginal youth on the streets who have been abused while living in the child welfare system (p. 13).

The author then discusses the positives and negatives of the federal government’s response to homelessness through three initiatives: the National Housing Initiative, the Homeless Partnering Strategy, and the Affordable Housing Initiative. Although these initiatives have recently tried to reach out to community and grassroots organizations, they still require in-kind contributions before funding can be accessed, and do not seem to be adequately serving the needs of Canada’s homeless population.

The article concludes by arguing that the best mechanism for combating homelessness is a housing first approach. A more collaborative approach from all levels of government is also recommended, as well as inclusion of stakeholders, “development of a data base to identify numbers and gaps in services,” and a more culturally appropriate approach to providing services.

This report finds that there is a lack of resources focused on culturally responsive services for Aboriginal homelessness. Information from this paper was based in part on interviews conducted with 22 participants in Winnipeg, Regina, Edmonton, Calgary, Vancouver, Prince Albert, Yorkton, and Prince George. Some of the culturally responsive approaches described in this report seek to establish a community of respect that is free of judgment, and is based upon knowledge of Aboriginal culture and the use of humour.


This position paper is concerned with definitions of homelessness and examining urban homelessness among Indigenous Australians. The authors take issue with current literature and definitions of homelessness. At times, the categories of homelessness are not based on empirical research or are over-simplified and lack an Indigenous perspective. Although there is no empirical evidence to back up this term, one of the most interesting concepts lies in the term “spiritual homelessness.” Spiritual homelessness is a category of homelessness endorsed by the National Indigenous Homelessness Forum. The definition is understood to be “(a) separation from traditional land, (b) separation from family and kinship networks, or (c) a crisis of personal identity wherein one’s understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused” (p. iv).


The title of this article questions whether or not we are truly living in a post-colonial reality. Doherty invokes an emotional reaction to the present lived realities of Indigenous people in Australia, New Zealand, and Canada by presenting a history of the treatment of Indigenous war veterans. The article paints a picture of the life of Frank Paul, a Mi’kmaq man from Elsipogtog, New Brunswick (whose own father was also a war veteran) to showcase the poor treatment he received by police officers and the criminal justice system. This attempt to illustrate the unfair treatment of Indigenous Peoples uses words such as dispossessed, assimilated, isolated, brutalized, and vilified to connect the historical treatment of Indigenous Peoples, the life of Frank Paul, and the socio-economic disparity between Indigenous and non-Indigenous populations.
This paper discusses broad topics such as Indigenous Peoples and homelessness, yet gives specifics around the poor treatment of war veterans and the life of a man who clearly slipped through one of many cracks left behind from our (post?) colonial histories in Canada, Australia, and New Zealand.


Aboriginal people are over-represented in the homeless population in Canada. An example provided within this report states that 60-70 per cent of Winnipeg’s homeless population is Aboriginal. Overall, Aboriginal women are over-represented within the homeless population in comparison to non-Aboriginal women. Aboriginal family violence, end of marriages or relationships that force women to abandon their homes, and youth conflicts with family members are all reasons for Aboriginal women’s homelessness. They may also become homeless due to substance abuse or physical and/or mental illness. Other structural issues may include lack of suitable or affordable housing, and the release of women from prison without enough support for the transition.

Indeed, Aboriginal women caring for children have even greater difficulties finding appropriate services and programs. Many find it difficult to afford payment even for basic necessities because they pay a large part of their income for housing, which often is not able to meet their families’ needs. It is also reported that since a large majority of women are unable to both afford housing and provide for other basic family needs, they are at increased risk of having their children taken by child welfare services.


This report says that support services are enhanced by the use of trauma-informed approaches to service-delivery. In particular, a “No Wrong Door” approach may be especially effective for women who have suffered abuse and also struggle with mental health and/or addictions issues. Although this report focuses on Ontario’s rural Grey and Bruce Counties, its findings could
potentially benefit all First Nations women who need trauma-informed support services. Astonishingly, all study participants had experienced abuse throughout their lives. It was also found that women were not accessing the services they needed and that a coordinated strategy would therefore work best to address the complex, interrelated issues that women experience. The concept of “No Wrong Door” simply means that women searching for help with violence and/or mental health issues will not be redirected to another organization no matter where they initially go to seek help; rather, they will be made to feel and treated as though there is literally no wrong door for them to knock on for assistance, and that with the support of trauma-informed service providers, they will receive the help they need.


This report is based on several arts-informed projects that focused on the lived realities of homeless women and transwomen, including a focus on Aboriginal women and transwomen. These community-based research projects use an arts-based research method, with women with “lived experience” participating as advisors. The study found that participants felt unsafe due to, and continued to be revictimized by, violence in the shelter system. Many felt poverty created a cycle of dependency from which they could not escape. However, despite the many barriers that Aboriginal women face, many are willing to provide social support to other women in need and volunteer their time to organizations that serve them. Transwomen also suffer from marginalization, discrimination, violence, and other forms of abuse, and often do not receive the same treatment that non-transwomen receive in social service organizations. Some recommendations made by project participants focused on the need to have shelters where they can feel safe. Another recommendation was that service providers should understand the specific needs of each and every woman who they assist, including transwomen’s need to access services that are geared for women only. Included in the report was an annotated bibliography with literature on homelessness with particular emphasis on women and transwomen.

This book describes homelessness in a personal way through firsthand accounts by 60 homeless women from across Canada. Although only the eighth chapter is dedicated solely to the Indigenous experience, the book has interrelated themes and stories woven throughout. The heart-wrenching stories of poverty, violence, incest, and resilience against all odds provide a moving account of the hardships homeless women experience, both as children and later in life while living on the streets. Through sharing its subjects’ life experiences, the book personalizes homelessness by shedding light on the lives of women who are normally invisible and marginalized by our society.