

**FINAL
REPORT**

**Improving Housing Outcomes for
Aboriginal People in Western Canada:
National, regional, community and individual
perspectives on
changing the future of homelessness**

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IMPROVING HOUSING OUTCOMES FOR ABORIGINAL PEOPLE IN WESTERN CANADA

Executive Summary

In 2010/2011 a study was undertaken in four Western provinces with organizations providing services addressing homelessness among Aboriginal peoples. The research was conducted from Calgary, but included organizations in seven census metropolitan areas across the western provinces: Winnipeg, Saskatoon, Regina, Calgary, Edmonton, Vancouver, and Victoria. The intent of the study was to identify the most effective policies, procedures, and practices for working with Aboriginal peoples who experience homelessness. The study was conducted in four phases. Phase 1 was the creation of a database of organizations that provided housing services to Aboriginal people. In Phase 2, the policies, procedures, and practices that were currently used by these organizations in serving homeless people were described. Phase 3 provided case studies of organizations viewed by their peers as effective in serving Aboriginal people who are homeless and/or that were identified in interviews in Phase 2. In Phase 4, a study of the capacity for organizations in an urban setting, specifically Calgary, to collaborate on an initiative to improve housing outcomes for Aboriginal people was conducted. Creation of a framework for best practices in ending Aboriginal homelessness was the final step.

OBJECTIVES OF THE PROJECT

1. Describe current policies and procedures and the resulting practices of housing services in large Western Canadian Census Metropolitan Areas (CMA, as defined by Statistics Canada) as they pertain to Aboriginal peoples who are homeless;
2. Identify examples of best practices in Western Canadian CMAs;
3. Assess the strengths of current policies, procedures, and practices in services in Calgary as they pertain to meeting the housing needs of Aboriginal people who are homeless;
4. Determine the opportunities for collaboration among community partners and funding agencies to implement positive changes in current policies, procedures, and practices in Calgary;
5. Identify services and organizations that have the most potential to benefit from interventions that promote cultural safety in the delivery of services to the Aboriginal homeless people;
6. Evaluate the short term success of cultural safety development in promoting positive changes in policies, procedures, and practices in select services and organizations; and
7. Produce guidelines for the collaborative development of Aboriginal housing service best practices and cultural safety programs for urban settings.

In Phase 1, the final database contained 194 organizations and included 29 types of information about each organization under four headings: organization information; housing services and programs provided; populations served; and size of program. Advocacy for and referral of clients was offered by the majority of organizations and a similar proportion of respondents in each city reported providing shelter, transitional housing, and long term housing services. Saskatoon and Winnipeg were the only cities that reported that about a third of organizations offer Aboriginal cultural healing with other cities, particularly Calgary and Victoria, significantly below this level. Most do not have specific services for Aboriginal people despite many reporting very high levels of Aboriginal clients. This may be a reflection of the fact that few organizations were governed or staffed by Aboriginal people; those that were, had more culturally specific programmes and services directed to this segment of the homeless population.

In Phase 2, 42 organizations were interviewed to determine service trends and practices.

KEY FINDINGS FROM PHASES 1 AND 2

Funding was a primary concern.

The most common concern cited was funding. Participants expressed a range of funding concerns including conflicts in specialized funding streams.

Aboriginal people are overrepresented in the homeless population.

Non-aboriginal participants in each city noted that a large proportion of the homeless population is Aboriginal; they estimated that on average 48% of people they serve are of Aboriginal descent. Meanwhile, participants from Aboriginal organizations estimate that between 80-99% of the people they serve are Aboriginal. Different social structures and problems create increased homelessness among Aboriginal people and barriers to exiting homelessness.

Policies influence whether there is a comprehensive approach and a continuum of services.

Among participants, 95% identified that homeless people have diverse needs above and beyond permanent shelter. Organizations cite needs such as health care, emotional and skill based education, addictions support, mentorship, and empowerment as key factors in exiting the cycle of homelessness. For Aboriginal peoples, cultural continuity is part of holistic healing and cultural safety in services helps ensure access. Concern was expressed that approaches directed solely towards housing may overlook the significance of the myriad needs of homeless people and that the Housing First model may be being misapplied to the detriment of offering the needed support services. It was noted by many participants that a client-centred approach ensures that the needs of individual homeless people are met.

Services were varied in respect to policies on such things as addictive behaviours, duration of service, and type of housing provided. Service provision was generally identified as stemming from either low or high barrier practices, with low having few restrictions or admission criteria and high having strict guidelines for acceptance of homeless people. While low barrier service was viewed as necessary for parts of the homeless population, restrictions are imposed by values, governmental or funding regulations, capacity or other resource constraints. Organizations that provide higher barrier services maintain partnerships to support the population segments that they cannot serve. Referrals were a commonly reported approach to filling gaps in services.

Lack of support for certain initiatives, inability to meet organizational goals due to funding gaps, short-term project funding, a lack of concern for continuity in programming and staff, and excessive resource consumption to participate in granting processes and fundraising were reported outcomes of funding strategies. Yet some participants noted that diversified funding, support from granting agencies through training, flexibility in reporting and sharing of knowledge were more positive emergent trends.

Specialization and local structures seem to limit partnership development.

Participants overwhelmingly supported the value and need for partnerships between organizations. Relationships are based on referral systems, functions of governments, developed in response to funding, used to build collective resources, and established between organizations that serve different groups of the homeless population. However, the community of homelessness service providers appears to be largely isolated within local structures and specializations. Many organizations reported being bound by mandates that specifically serve one sub-group within the homeless population. They receive specific funding, access to a localized spectrum of partners and resources, and focus expertise on one type within a broad continuum of services. Skills, resources, and programs are specifically matched to provide these specialized services often for a target population. These organizations or programs often operate in isolation of others who service the general homeless population. Surprisingly, in light of the statistics, very few non-Aboriginal organizations offer services specific to Aboriginal needs, suggesting this has not been an issue of funders. Programming is more likely to be structured for a specific group based on demographics or health issues.

Cross-cultural collaboration among service providers is hindered by multiple barriers.

Participants from both Aboriginal and non-Aboriginal organizations identified the barriers to partnership development as also limiting cross-cultural collaboration. Other specific barriers include misunderstanding, racism, and disagreements over jurisdiction over solutions among levels of government. Outcomes from cross-cultural partnerships are most successful when they are embarked upon for the purposes of both relationship building and organizational success. Effective cross-cultural partnerships take a significant amount of time to develop and involve partnership development work, in addition to meeting the client service needs that drive them.

Organizations primarily worked in regional silos.

While participants overwhelmingly identified partnership as a key success factor, only about half of participants could name organizations in their region that were recognized for innovative work; and only a third of those were deemed to be effective. Fewer still were able to provide input regarding effective organizations in other regions or cities, and many who did, did not provide accurate names of those organizations. This conclusion is also supported by other data in this study that suggested the need for collaboration, and to encourage the use of best practices and the sharing of knowledge.

Aboriginal organizations have unique resources for approaching Aboriginal homelessness.

Cultural reconnection was seen as an important component of well-being and success for Aboriginal homeless peoples. Participants from Aboriginal organizations utilized cultural capacity and relationship building to strengthen programming through their understanding of the conditions of homelessness and the experiences of being Aboriginal. Trust building and peer mentoring, practices that are widely acknowledged to be effective in service provision, were two examples of practices that were reported in Aboriginal organizations to meet specific cultural needs.

Cultural safety is not well understood or utilized, particularly in regards to Aboriginal peoples.

While some participants talked about the value of culture in programs for Aboriginal people, participants from non-Aboriginal organizations tended to focus on superficial cultural engagement, such as, attending public events organized for Aboriginal peoples, making crafts, or providing an Elder for a weekly visit. Cultural practices for Aboriginal peoples were also interpreted as part of a homogenous multiculturalism effort that included Aboriginal peoples with other ethnocultural populations. These approaches reflect a lack of cultural safety policies and a deficient understanding of the role of cultural identity. Recognition of the need for cultural awareness training for staff was, however, apparent.

Evaluation was an underutilized tool.

Evaluation was not often conducted, and when it was, participants did not always see the fit between the type of measures required by funders, and the measures they felt would be most meaningful to understanding the effectiveness of their services. They also noted that evaluation for funders often takes a great deal of time and resources to complete. Participants explained that follow-up with clients is rare, because other activities take priority due to a lack of time and resources. Many participants still expressed interest in improving evaluation methods and in utilizing feedback through analysis and study of their organizations and the homeless field.

Organizations had few access points for research and other information.

Service providers noted that research, publications, and manuals about effective service are either non-existent or primarily unavailable; participants expressed a great interest in this type of information as well as a desire for guidance and support.

In Phase 2 we asked participants to name organizations within their city, province or from the Western provinces, that, in their opinion, exemplify best practices in ending Aboriginal homelessness. For Phase 3 six organizations were selected for more in-depth case studies of policies, procedures, and practices. These organizations were chosen to represent the four provinces based on recommendations from within their region as well as using analysis of data collected in Phases 1 and 2. Two representatives from each organization were interviewed about their organization's policies, procedures, and practices and documents were reviewed.

The case studies revealed that organizations successful in providing services to Aboriginal people were similar in that there was integration of a mandate to serve the well-being of the overall Aboriginal community as well as to provide the specific services that were provided to the homeless. Also, partnership was central to that broader mandate as well as providing adequate services to clients. The organizations established credibility in the homelessness serving sector and the Aboriginal communities by providing solid programs, being flexible in response to community needs, having clear staffing and volunteer policies, being involved in policy dialogues and research and evaluation, and providing cultural safety and cultural continuity.

Using the data and information garnered in Phases 1 to 3, Phase 4 was conducted to explore the capacity for collaboration on Aboriginal homelessness in an urban context, specifically Calgary. We did not have the resources to do the same in the other cities. A selection of Calgary homeless serving organizations

were contacted regarding the willingness and capacity to collaborate over the long-term. Each urban setting is different and the capacity to address Aboriginal homelessness may vary by factors, such as, availability of leadership, roles of funders, number of services available, or trends in the homeless populations.

OBSERVATIONS ABOUT CALGARY CAPACITY

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

The final product is a framework that can be adapted in any city to address the provision of service to Aboriginal peoples (see p. 15). It represents the best practices for development of policies and procedures that will lead to positive outcomes for Aboriginal peoples and the organizations providing the services.

CONCLUSION

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

This project provided the first attempt to provide an extensive overview of organizations that offer services and programs to homeless populations, with a particular focus on Aboriginal populations, and to identify what barriers and challenges they face. But, more importantly, the project identified existing success stories, and used the information gathered from organizations seen by their peers and their clients as providing effective services, to create a framework for improving service delivery to Aboriginal peoples, service delivery that is culturally safe and effective for Aboriginal people.

THE BEST PRACTICE FRAMEWORK

Component of Best Practice	Activities
1. Cultural safety is foundational for all organizations and staff to provide respectful and appropriate services for Aboriginal peoples	<ul style="list-style-type: none"> • Cultural competency is essential • Cultural safety must occur at all levels of the system for homelessness people (e.g., organizational, leadership, and staff) (Oelke, 2010) • A culturally safe environment is required to ensure respect for Aboriginal peoples
2. Partnership and relationship building is critical in fostering a collaborative process to address the many needs of Aboriginal homeless peoples & create cultural safety	<ul style="list-style-type: none"> • Collaboration between non-Aboriginal organizations and non-Aboriginal and Aboriginal organizations is essential • Supports for collaboration are necessary including funding, human resources, and time
3. Aboriginal governance and coordination of homelessness services needs to be supported	<ul style="list-style-type: none"> • Currently there is a lack of recognition for the need for Aboriginal leadership in the homelessness and housing field • Given the gross over representation of Aboriginal peoples among the homeless population, Aboriginal leadership is essential • Aboriginal leadership is essential to begin to address the root causes of homelessness
4. Adequate and equitable funding is required for Aboriginal specific services	<ul style="list-style-type: none"> • Western provinces may need to consider the establishment of an Aboriginal specific funding process to align with the existing federal initiative
5. Research and evaluation is required to better understand best practices for Aboriginal homelessness	<ul style="list-style-type: none"> • Opportunities for research need to be explored • Partnerships for research should be developed between Aboriginal community organizations and academic researchers • Ethical principles for research with Aboriginal peoples must be incorporated (CIHR, 2007; Schnarch, 2004) • Appropriate data collection systems are required by homeless and housing services • Evaluation approaches should incorporate Aboriginal worldviews (Small & Bodor, n.d.)
6. Increased number of Aboriginal staff working with the homeless population	<ul style="list-style-type: none"> • Number of staff must meet the proportion of the population of Aboriginal homeless peoples • Training must be accessible to ensure a qualified Aboriginal workforce to work in the homelessness and housing field
7. Cultural reconnection is the cornerstone of addressing the needs of Aboriginal homeless peoples	<ul style="list-style-type: none"> • Outreach and cultural services should be key components of Aboriginal specific programming for the homeless

Introduction to Study

In 2010 a study was undertaken in four Western provinces with organizations providing services addressing homelessness among Aboriginal peoples. The research was conducted from Calgary, but included organizations in seven census metropolitan areas across the western provinces: Winnipeg, Saskatoon, Regina, Calgary, Edmonton, Vancouver, and Victoria. The intent of the study was to identify the most effective policies, procedures, and practices for working with Aboriginal peoples who experience homelessness (see [Appendix 1](#) for definitions of terms used in this report). The study was conducted in four phases. Phase 1 was the creation of a database of organizations that provided housing services to Aboriginal people. In Phase 2, the policies, procedures, and practices that were currently used by these organizations in serving homeless people were described. Phase 3 provided case studies of organizations viewed as effective in serving Aboriginal people who are homeless. In Phase 4, a study of the capacity for organizations in an urban setting, specifically Calgary, to collaborate on an initiative to improve housing outcomes for Aboriginal people was conducted. Creation of a framework for best practices in ending Aboriginal homelessness was the final step.

APPROACH TO RESEARCH

The lack of focus on Aboriginal needs within research on homelessness is a concern to Aboriginal people and their partners. The research described in this project was undertaken as a part of a program of research begun in Calgary, Alberta and directed at the greater inclusion of Aboriginal peoples in services to end homelessness.

This program of research considers current practices used in Aboriginal service provision with respect to homelessness, as well as an analysis of which of these are most effective; thus the research is being

conducted at a systems rather than an individual level. Methodological decisions related to this project reflect awareness and respect for Aboriginal knowledge gathering protocols including Ownership, Control, Access and Possession (OCAP) (First Nations Centre, 2007), but also a consideration of the most effective communication methods for employees of organizations, given that they exist in a largely Western cultural context with many resource constraints.

Conceptual Framework

The conceptual framework for this study is a belief that social inequities are a priority that must be addressed within the purview of population health. Homelessness is a social inequity faced by Aboriginal people that is embedded within a history of colonialism and oppression, the effects of which are still felt today. A concern shared by Aboriginal and feminist health advocates and scholars has been the tendency of policies to treat health and social problems as individual rather than collectively based, and therefore, to ignore the social nature of many issues (Scott, Thurston & Crow, 2002).

The study of populations differs from the study of an aggregate of individuals in important ways. We learn different things if we assume that individuals are part of groups (Rock, 2003). Furthermore, we must examine the categories used to describe both individuals and populations as, by their nature, these “categories exclude” and define both the problem and, therefore, its solutions (Rock, 2003, p.133). Following Rock’s position on diabetes, we believe that homelessness is not a lifestyle problem in the sense of individual choice, but it develops in the face of “power - or, more specifically, the various ways in which capacity develops and is exercised” (p.133). Power inequities that are experienced by Aboriginal populations in Western Canada create a lack of choice and lead to homelessness.

Following Bacchi (1999), we maintain that every policy either explicitly or implicitly provides a view on the causes of the issue or problem that it is meant to address. Policies may be public policies, such as, legislation or municipal by-laws, or operational policies and regulations formed by governmental or non-governmental organizations. Further, there are no policy vacuums; in other words, the absence of a written policy is a policy decision.

The evaluation of policies or programs that are intended to result in social change, structural changes that address social justice and inequity, or changes in “social practices of social agents including their relationships”, requires careful attention to the assumptions embedded in the interventions about how change occurs (Thurston & Potvin, 2003, p.455). Bacchi’s (1999) approach to policy analysis assumes that underlying political positions and interests are in play with proposed solutions. The assumption that more and better information about a problem may lead to better solutions is not always founded in practice. This assessment of the role of information is consistent with the realistic model of program evaluation (Pawson & Tilley, 1997).

The CIHR Institute for Aboriginal Peoples’ Health, Guidelines for Research with Aboriginal People, calls for evidence of practices such as receiving community approval. The National Aboriginal Health Organization promotes the principles of Ownership, Control, Access and Possession (OCAP) (First Nations Centre, 2007). In this project, we adhered to these principles; however, in an urban setting where many communities are represented, adherence was not always straightforward. Drawing on the work of Smylie, Kaplan-Myrth and McShane (2009), we addressed issues of “project governance, community expectations and benefits, ownership, control, access, possession of information, and dissemination of project results” (p.438), and worked with an Aboriginal community partner organization and Elders to formulate decisions.

Research Process

The origins of this project lay in collaborative interest between a group of University of Calgary scholars and the Aboriginal Friendship Centre of Calgary (AFCC). Staff at the AFCC became interested in research to improve outcomes for Aboriginal people who are homeless, and began working with the University of Calgary to develop a relationship and partnership within which research could occur. Through regular meetings, and the sharing of priorities and interests, a strong relationship integral to the ability to carry out work within the Aboriginal community, was established. Keeping each other informed has been a priority of the partnership (Bird et al., 2010). The requirements of contract research, including tight time-lines, sometimes put pressure on collaborations, as AFCC had other programs and partnerships and critically important decisions that often had to take priority over discussing research.

The beginning of the program of research was directed at creation of a local research agenda. A gathering was hosted in March 2010 to discuss the local program environment and a research agenda on Aboriginal homelessness. Stakeholders included members of Aboriginal communities and homeless serving agencies, as well as policy makers, health professionals, Elders, and homeless people who discussed the service situation in Calgary and what research was needed. Participants provided feedback about the direction the research should take, methodological concerns, and the scope of the topics to be studied as is part of a participatory process of gathering knowledge and undertaking new work (Bird et al., 2010). The report clearly demonstrates the need for specific studies in the areas of racism, family, services and supports, community, and creating change (Bird et al., 2010). The study described in this report addresses services and supports and is directed at a change agenda.

Leaders at the AFCC indicated that hosting a ceremonial Sweat Lodge to properly begin the

research partnership would be beneficial to the overall implementation of the first project. The Project Coordinator from AFCC invited the U of C Research Team members to attend the Sweat Lodge and Lloyd Ewenin, the Elder who hosted the Sweat, educated the participants from a Traditional Knowledge perspective regarding the important work that was going to be undertaken. During the Ceremony, he informed all attendees that through our work we would need to be mindful of the people who could be helped, and that with a sincere heart and mind we could possibly influence changes for Aboriginal homeless people. He encouraged the participants to incorporate this perspective throughout their work, and to always be mindful of the people the project was intended to aid. Whenever possible research staff were hired who had an understanding of Aboriginal culture so that the research process would be informed by this knowledge. The same Elder was asked to consult on the processes of the project reported here. All research projects were reviewed and monitored by the Conjoint Health Research Ethics Board of the University of Calgary.

GOAL & OBJECTIVES OF THE RESEARCH

The project goal was to increase the number of Aboriginal people who are successfully housed and able to maintain housing in Calgary by improving the delivery of housing services for Aboriginal people who are homeless and housing insecure. While the focus was on Calgary, the research team expected that other cities would be able to use this research towards a similar goal for their city.

The objectives of the project were to:

1. Describe current policies and procedures and the resulting practices of housing services in large Western Canadian Census Metropolitan Areas as they pertain to Aboriginal peoples who are homeless;
2. Identify examples of best practices in Western Canadian Census Metropolitan Areas;

3. Assess the strengths of current policies, procedures and practices in services in Calgary as they pertain to meeting the housing needs of Aboriginal people who are homeless;
4. Determine the opportunities for collaboration among community partners and funding agencies to implement positive changes in current policies, procedures and practices in Calgary;
5. Identify services and organizations that have the most potential to benefit from interventions that promote cultural safety in the delivery of services to the Aboriginal homeless people;
6. Evaluate the short term success of cultural safety development in promoting positive changes in policies, procedures and practices in select services and organizations; and
7. Produce guidelines for the collaborative development of Aboriginal housing service best practices and cultural safety programs for urban settings.

DESIGN

To achieve the goal and objectives we proposed a mixed methods design that combined several data collection procedures and four phases of research. The data include both quantitative and qualitative primary and secondary data that are integrated into a fuller understanding of the context of Aboriginal homelessness prevention. While this report marks one end of the project, knowledge exchange will play an important role in meeting the goal of improving access to housing among Aboriginal peoples.

In the next chapters, we provide a description of the methods of data collection and analysis in each of the four phases.

Phase 1: Patterns of Service in Western Cities

While some cities and organizations have developed regional lists of housing services for Aboriginal people that have been disseminated to clients or networks, we found that none of these lists was used broadly or uniformly across any Census Metropolitan Areas (CMAs, as defined by Statistics Canada) or province when this project was being proposed. In other words, no agreed upon list of services existed in any province, particularly with clarity as to whether Aboriginal clients were welcomed. Therefore, the project began with the development of a database of organizations providing housing services or services to the homeless that included Aboriginal people in each of seven CMAs in four Western provinces: Winnipeg in Manitoba; Regina and Saskatoon in Saskatchewan; Edmonton and Calgary in Alberta; and Vancouver and Victoria in British Columbia. In Vancouver we decided to focus on Vancouver and North Vancouver rather than the Greater Vancouver area because these were the most accessible areas for Aboriginal peoples and for feasibility reasons. In this report we will use the terms city and CMA interchangeably.

The goal of Phase 1 was to create a sampling frame of organizations that directly provided any type of housing, subsidized and affordable housing management, supportive housing for individuals with mental health problems and/or disabilities, addiction and rehabilitation facilities, and safe homes and shelters for various populations and that included Aboriginal people in the services provided. Organizations that provided referrals for housing and specific advocacy for housing/homeless issues were also included. The database does not include organizations that serve homeless people as part of their client base but which do not have housing as a primary concern (e.g., organizations offering employment services).

An internet search and a review of lists provided by government, housing agencies or others, yielded the majority of the agencies. This preliminary list was then circulated for verification in each city. A city-specific letter was sent to each organization on the list, along with a copy of the current list for that city, requesting revisions, additions, and other feedback (see [Appendix 2](#)).

The database was populated with information gained through organization web sites and follow-up phone calls. Specifically, we sought 29 types of information under four headings: organization information; housing services and programs provided; populations served; and size of program (see [Appendix 3](#)). Twenty-seven organizations were removed from the list because they did not serve Aboriginal peoples, the focus was not homeless people (e.g., student housing), or we could not contact them, suggesting they may no longer exist. The number of organizations removed was relatively even across cities and the largest reason for exclusion was that homelessness was not a focus.

PROVINCIAL & CMA VARIATIONS IN DEMOGRAPHICS

The four provinces included in this study have very different histories and many geographic and political differences that must be considered when making comparisons between cities. As [Table 1](#) indicates, the total population of each province differs significantly, and the absolute number of people who self-identify as Aboriginal peoples varies by 50,000.

A recent Environics Institute (2010) report noted that today more than half of Aboriginal peoples live in urban areas including the CMAs and smaller cities and towns. Past research has focused on First Nation experiences, that is, peoples living on land designated

to them by the Canadian government. The Environics report concluded:

The nature of the urban Aboriginal community varies from city to city. Aboriginal communities in urban areas are not simply transplanted non-urban communities. The importance to urban Aboriginal peoples of particular community ties (e.g., family, neighbours, other Aboriginal peoples, Aboriginal services and organizations, etc.) differs somewhat across cities, suggesting their sense of identity and community is shaped by features of the particular city around them (p.8).

We would add that the features of the city are also shaped by the Aboriginal peoples and their historic and present relations with the non-Aboriginal peoples (Kirmayer, Tait & Simpson, 2009). Therefore, what one sees in a city is reflective of relationships that have developed over time, and as such, generalizations about the experiences of Aboriginal peoples in urban areas are no more acceptable than past generalizations about rural Aboriginal peoples.

Within CMAs included in this study, according to 2006 census data, the city with the highest percent of Aboriginal people was Winnipeg, followed by Saskatoon and Regina, each with populations near 10% (Table 2). Edmonton’s urban Aboriginal population made up 5% of the region’s total population, while the Aboriginal populations of Victoria, Calgary, and Vancouver were all less than 4% of those city’s totals. Census Canada notes that these population totals should be used with caution, as Aboriginal populations are particularly subject to under-reporting, due to transience, homelessness, and the proximity of reserves to urban areas, and the movement that occurs between them. As further illustrated by the change in density when only segments of Greater Vancouver are included, the point is that governments have varying perspectives on the size of the Aboriginal populations within their jurisdictions. In addition, it is worth noting that the last census was five years ago and regional variation may exist in movement between urban and rural areas.

Table 1. Populations by Province

	Manitoba	Saskatchewan	Alberta	British Columbia
Total Population of Province	1,133,515	953,850	3,256,355	4,074,385
Aboriginal Population of Province	175,395	141,890	188,365	196,075
Percent of Population of Aboriginal Descent	15.5%	14.9%	5.8%	4.8%

Table 2. Populations of Census Metropolitan Areas (CMA)

	Winnipeg	Regina	Saskatoon	Calgary	Edmonton	Vancouver	Victoria
Population of CMA	686,035	192,435	230,855	1,070,295	1,024,825	2,097,960	325,060
Aboriginal Population of CMA	68,385	17,105	21,535	26,575	52,100	40,310	10,905
Percent of Population of Aboriginal Descent	10.0%	8.9%	9.3%	2.5%	5.1%	1.9% ¹ 6.5% ²	3.4%

1) Greater Vancouver

2) Proportion in Vancouver and North Vancouver (population ~600,000)

GOVERNANCE & GOVERNMENT FOR ABORIGINAL PEOPLES

Generally non-Aboriginal people are quite ill-informed about the history and diversity of Aboriginal peoples in Canada and rely on a few stereotypes to guide their thinking. Aboriginal peoples have maintained independence and self-government since the arrival of Europeans to what is now called Canada. They were always diverse peoples from East to West and within the Western provinces. After the formation of the Dominion of Canada, the government saw treaties as a means of formalizing the governance relationships (McCormack, 2011). The history of treaty relations is long and includes a mixture of positive and negative outcomes for Aboriginal peoples. There is also a range of governance relationships and models across the Western provinces. We cannot do justice to these here, and the reader is urged to explore this subject in more depth when the opportunity arises.

It is important to note that many First Nations relate to their Federal counterparts in Treaty rights, not to municipal governments, and there are “jurisdictional” issues that problematize the relations of First Nations peoples to their urban neighbours. Two critical issues are self-government and unsettled land claims. Also noteworthy is the responsibility of Indian and Northern Affairs Canada to provide health care to First Nations peoples, though health care provision to other residents of Canada is a provincial mandate.

In Manitoba there are seven Treaties with First Nations (1 to 6, and 10) and five First Nations that did not sign any Treaty. There are 63 bands of First Nations people. There are five inter-tribal associations of First Nations people, and seven Tribal Councils. The Manitoba Métis Federation operates provincially, with seven regional offices. There are two other province wide associations of Métis people.

In Saskatchewan, First Nations are included in Treaties 4, 5, 6, 8 and 10, overlapping with

Manitoba and Alberta. Supporting the work of the 75 First Nations within Saskatchewan are ten tribal councils. Six additional organizations with multi-tribal affiliation also operate within the province (e.g., the Saskatoon Tribal Council provides many services within Saskatoon). The Métis Nation in Saskatchewan operates a central organization, with 12 regional bodies that each has several satellite offices. There are also eight Métis groups that are united by purpose rather than region, with focuses ranging from economic issues to education.

In Alberta, there are 48 First Nations recognized by the federal and provincial governments. Four Treaties cover the Alberta landmass, but generally it is Treaties 6, 7 and 8 that are germane to the Aboriginal peoples of Alberta. A First Nations community may or may not belong to one of ten tribal or regional organizations that represent individual Nations that belong to the same ethnic group or treaty region. For example, the Treaty 7 Management Corporation represents the seven nations that signed and are administered according to Treaty 7. Additionally, there are five community organizations which represent First Nation communities that are not recognized by the federal or provincial governments. There are eight Métis settlements under a single General Council, as well as the Métis Nation, which operates offices across Alberta through six regional associations.

In British Columbia there are two First Nation Treaty Governments; these are considered modern Treaties, and were signed in the last 20 years. There are 201 First Nations in the province, and 72 First Nations affiliations, including 31 treaty offices, and 41 Tribal Councils and multi-tribal groups. There are 38 Métis Nations, alternatively titled Associations and Societies, as well as seven regional divisions each with its own Métis employment office, and 15 multi-nation cultural or social societies.

Finally, there are numerous Friendship Centres, which operate under a national body and serve all

self-identified Aboriginal peoples. The Centres have played a major role in the development of urban relations and the history of urban Aboriginal peoples. Friendship Centres maintain provincial organizations as well as entities in cities and towns in each province and territory. The National Association of Friendship Centres provides a network across Canada:

The National Association of Friendship Centres (NAFC) is a network of 117 Friendship Centres and seven Provincial/Territorial Associations (PTA's) nationwide that provide culturally enhanced programs and services to urban Aboriginal people. Aboriginal Friendship Centres have over fifty years of experience providing essential services to First Nations, Métis and Inuit people living in urban and surrounding areas. Aboriginal Friendship Centres are Canada's most significant off-reserve urban based Aboriginal infrastructures.

The mission of the NAFC is to improve the quality of life for Aboriginal peoples in an urban environment by supporting self-determined activities which encourage equal access to, and participation in, Canadian Society; and which respect and strengthen the increasing emphasis on Aboriginal cultural distinctiveness. (NAFC, 2011)

HOMELESSNESS INITIATIVES SPONSORED BY GOVERNMENT

The Western provinces also differ in what has been undertaken in relation to addressing the issue of homelessness in the urban centres, and Aboriginal homelessness in particular. It is beyond the scope of this project to adequately describe and analyze all of the government initiatives in the four provinces, however, we offer a very brief overview to highlight the diversity of approach.

Alberta. In the 2010/2011 fiscal year, the Alberta Government committed \$100 million to homelessness initiatives. Calgary received \$19.14

million through the Calgary Homeless Foundation, Edmonton received \$13.5 million through Homeward Trust, and the remaining \$67.36 million was distributed to other municipalities or retained by the provincial government for emerging issues. The province does not stipulate that any percentage of this money be spent directly addressing homelessness for Aboriginal people.

British Columbia. The British Columbia government spent \$562 million on homelessness in the 2010/2011 fiscal year, largely through its British Columbia Housing organization. Also supported were four primary initiatives: Emergency Shelter Program, Homeless Outreach Program, Shelter Aid for Elderly Renters Program, and Rental Assistance Program. British Columbia Housing maintains an Aboriginal specific housing program, but provincial dollars are not specifically earmarked for Aboriginal homelessness initiatives.

Manitoba. In April 2010, the Manitoba government announced a \$950 million budget for poverty reduction that included Homeworks, a housing first strategy. The government's Department of Housing and Community Development is tasked with providing affordable housing and neighbourhood revitalization across the province. This department manages the Manitoba Housing department, which offers four main housing programs. Specific initiatives earmarked for Aboriginal homelessness were not identified in our search.

Saskatchewan. The government of Saskatchewan operates several housing programs that deliver front line service through the Saskatchewan Housing Corporation (SHC). The SHC's 2010 operating plan was to spend \$253,739 on the provision of housing, the development of affordable housing units, growth of housing stock in northern regions, and support for repairs and renovations of current housing stock. Specific initiatives earmarked for Aboriginal homelessness were not identified in our search.

Canada. Federally the department of Human Resources and Skills Development (Canada) funds homelessness alleviation programs. A division of this department, the Homelessness Partnering Strategy (HPS), has a budget of \$134.8 million yearly until 2014. There are 61 communities across Canada that are eligible for HPS dollars, largely in urban centres. The HPS acknowledges that Aboriginal people are especially vulnerable to homelessness.

RESEARCH ON HOMELESSNESS

The CMAs vary by the amount of research that is conducted regarding homelessness. The National Housing Research Committee (NHRC) website reports that research is generally conducted across cities by government and non-government organizations, is often linked to local ten year plans to end homelessness and local development plans or legislation, with expertise sought from a variety of sources (NHRC, 2010). We counted the total number of reports per CMA recorded by the NHRC and also coded whether four types of reports were available (Yes or No) ([Table 3](#)). As indicated in the table, Calgary representatives report by far the most research activity and Victoria no such activity.

Table 3. Type of Research Report Available from Each CMA

	Winnipeg	Regina	Saskatoon	Calgary	Edmonton	Vancouver	Victoria
Housing Data	Yes	Yes	Yes	Yes	Yes		
Sustainable Housing/ Development	Yes	Yes		Yes	Yes	Yes	
Distinct Needs	Yes		Yes	Yes		Yes	
Homeless Issues		Yes	Yes	Yes	Yes	Yes	
Total Number	5	10	5	100+	7	17	

RESULTS OF PHASE 1

The final database contained 194 organizations and included 29 types of information under 4 headings: organization information; housing services and programs provided; populations served; and size of program (see [Appendix 3](#)).

As indicated by [Table 4](#) the number of housing services identified in each city that reached Aboriginal people was not predicted by the size of the population of the city nor by the size of the Aboriginal population of the city.

Services Offered by Organizations

Respondents reported on whether any of five types of services were offered by their organizations ([Table 5](#)). Advocacy for and referral of clients was offered by the majority of respondents (79%), although those in Regina were significantly less likely to report this. A similar proportion of respondents in each city reported providing shelter, transitional housing, and long-term housing services; however, three cities had more than 50% that offered long-term housing and three had less than 50%.

Saskatoon and Winnipeg were the only cities where about one third of organizations offered Aboriginal cultural healing. Other cities, particularly Calgary and Victoria, were significantly below this level.

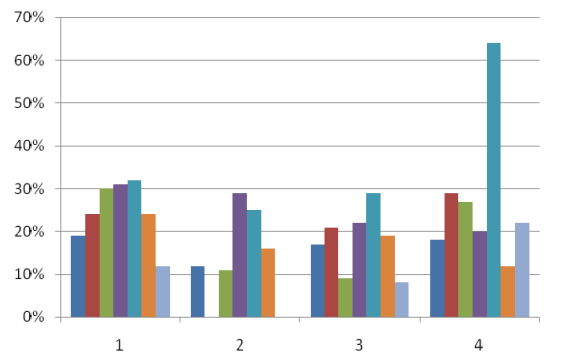
Specific Services for Aboriginal Peoples

When asked if the organization was specifically for Aboriginal peoples, the majority (77%) said no, and this was similar across cities ([Table 6](#)). Winnipeg had the most Aboriginal specific services but the differences between cities were not statistically significant. Referring again to [Table 5](#), Calgary, Regina, and Victoria had the highest number of services per 100,000 Aboriginal people, but only Calgary led in the number that were Aboriginal specific.

[Figure 1](#) shows that Aboriginal specific advocacy or referral, transitional housing, or long-term housing were more common than Aboriginal specific shelter services overall, and there was variability among cities in the patterns of distributions of services; for example, the proportion of Advocacy and Referral services was not consistently linked to that of Long-term Housing.

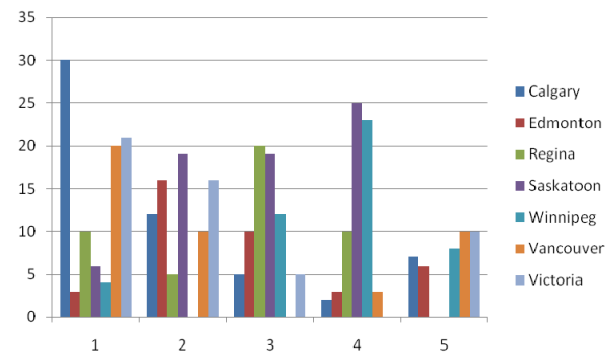
The mix of Aboriginal and non-Aboriginal clients was reflected in the reports by organizations of what proportion of their clientele were Aboriginal. Calgary and Vancouver were more likely to have services where less than 25% of their client population was Aboriginal ([Figure 2](#)). All the cities had less than 10% of organizations that served only Aboriginal people (95-100%).

Figure 1. Proportion of Aboriginal Specific Services by Type of Service and City



Note: 1=Advocacy & Referral; 2=Shelter; 3=Transitional Housing; 4=Long-term Housing

Figure 2. Proportion of Aboriginal Clients Reported Served by Organizations by City



Note: 1=0-25%; 2=26-50%; 3=51-75%; 4=76-99%; 5=100%

Table 4. Number of Services per City, Services per Population and per Aboriginal Population

	Number of Services and Percentage of Total	Services Per 100,000 Population of City	Services Per 100,000 Aboriginal Population of City
Calgary	43 (22%)	4.01	16.18
Edmonton	31 (16%)	3.02	5.95
Regina	20 (10%)	10.39	11.69
Saskatoon	16 (8%)	6.93	7.43
Winnipeg	26 (13%)	3.79	3.80
Vancouver	39 (20%)	6.26	9.68
Victoria	19 (10%)	5.84	17.42
Total	194 (100%)	4.67	8.19

Table 5. Types of Housing Services Offered by Organizations by City

	Winnipeg	Regina	Saskatoon	Calgary	Edmonton	Vancouver	Victoria	Total
Advocacy or Referral	19 73%	10 50%	13 81%	36 84%	26 84%	33 85%	16 84%	153 ¹ 79%
Shelter	12 46%	9 45%	7 44%	16 37%	10 33%	19 49%	9 47%	82 ² 42%
Transitional Housing	14 54%	11 55%	9 56%	24 56%	14 47%	16 41%	13 68%	101 ³ 52%
Long-term Housing	11 42%	11 55%	10 62%	17 40%	14 47%	24 62%	9 47%	96 ⁴ 50%
Aboriginal Cultural Healing	9 35%	6 30%	6 38%	9 21%	9 30%	10 26%	3 16%	52 ⁵ 27%

1) Chi Square 19.062, df=12, p=.087

3) Chi Square 11.625, df=12, p=.476

5) Chi Square 20.913, df=12, p=.052

2) Chi Square 9.494, df=12, p=.660

4) Chi Square 12.371, df=12, p=.416

Table 6. Proportion of Aboriginal Specific Services by City

	Winnipeg	Regina	Saskatoon	Calgary	Edmonton	Vancouver	Victoria	Total
Number of Aboriginal Specific Services & Proportion of Total for City	10 38%	4 20%	4 25%	9 21%	7 23%	8 20%	2 10%	44 23%
Proportion of All Western Aboriginal Specific Services in Each City	10 23%	4 9%	4 9%	9 20%	7 16%	8 18%	2 4%	44 100%

Chi Square 5.604, df=6, p=.469

Governance of Services

Few of the organizations (n=36) were governed by Aboriginal peoples ([Table 7](#)); and, the majority (72%) were non-governmental organizations (NGOs).

Governance and whether specific programs for Aboriginal peoples were offered were statistically related ([Table 8](#)). The majority (64%) of organizations with Aboriginal specific programs were NGOs governed by Aboriginal peoples. The next largest percentage (21%), were non-Aboriginal NGOs and this generally held true across cities, except in BC cities which had no Aboriginal NGOs.

[Table 9](#) shows that whether or not Aboriginal cultural healing services were provided to people depended heavily on whether the service was governed by Aboriginal people, but [Table 10](#) shows that whether cultural healing services were provided was not related to what other services were provided.

Table 7. Type of Organizational Governance by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
Aboriginal NGO	8 19%	6 19%	3 15%	3 19%	8 31%	6 15%	2 11%	36 19%
Band Council	0	0	0	1 6%	1 4%	0	0	2 1%
Non-Aboriginal NGO	32 74%	23 74%	13 65%	11 69%	15 58%	30 77%	16 84%	140 72%
Federal Government	2 5%	0	0	0	0	0	0	2 1%
Provincial Government	0	1 3%	3 15%	1 6%	2 8%	3 8%	1 5%	11 6%
Municipal Government	1 2%	1 3%	1 5%	0	0	0	0	3 2%
Total	43 100%	31 100%	20 100%	16 100%	26 100%	39 100%	19 100%	194 100%

Table 8. Relationship between Aboriginal Specific Services and Governance Structure by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
Aboriginal NGO	8 89%	5 72%	3 75%	4 100%	7 70%	0	0	27 64%
Non-Aboriginal NGO	0	2 29%	0	0	0	7 88%	0	9 21%
Federal, Provincial or Municipal Government	1 11%	0	1 25%	0	1 10%	1 12%	0	4 10%
Aboriginal Government	0	0	0	0	2 20%	0	0	2 5%
Total	9 100%	7 100%	4 100%	4 100%	10 100%	8 100%	0	42 ¹ 100%

Chi Square 163.859, df=3, p=.000

1) 2 missing cases

Table 9. Provision of Cultural Healing Services by Governance Structure

Governance Structure	Cultural Healing Services Provided			Total
	Yes	No	Not Applicable	
Aboriginal NGO	25 69%	11 31%	0	36 100%
Non-Aboriginal NGO	26 19%	106 76%	8 6%	140 100%
Federal, Provincial or Municipal Government	0	15 94%	1 6%	16 100%
Aboriginal Government	1 50%	1 50%	0	2 100%
Total	52 27%	133 69%	9 5%	194 100%

Chi Square 39.426, df=6, p=.000

Table 10. Provision of Cultural Healing Services by Other Services Provided

Other Services	Cultural Healing Services Provided			Total
	Yes	No	Not Applicable	
Long-term Housing	18 35%	75 78%	3 3%	96 ¹ 100%
Advocacy or Referral	51 34%	93 61%	8 5%	152 ² 100%
Transitional Housing	38 38%	60 59%	3 3%	101 ³ 100%
Shelter	29 35%	47 57%	6 7%	82 ⁴ 100%

1) Chi Square 8.354, df=4, p=.079

2) Chi Square 19.963, df=4, p=.001

3) Chi Square 12.677, df=4, p=.013

4) Chi Square 10.240, df=4, p=.037

Sub-populations Served

Respondents were asked if the organization served women, men, female children and teens, male children and teens, families, and seniors. [Table 11](#) shows variability for all sub-populations among the cities, although none of these comparisons were significantly different.

The ability to access certain housing services by sub-populations varies among cities within the same provinces and among cities across provinces, so that, for instance, men have better access to shelter services in Vancouver than in Victoria or Calgary, whereas women have similar access in the cities except for Regina ([Table 12](#), [Table 13](#), [Table 14](#)).

Respondents were also asked if there was a specific focus to the services offered and there was a mix of responses so these were grouped to be as similar as possible, although we lost some specificity by doing so. As [Table 15](#) shows, the majority served the general population and had no stated special focus. Services to abused women make up the largest number of specialized services and have formed a separate service sector in many cities.

Table 11. Sub-populations Served by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
Women	35 81%	20 64%	15 75%	14 88%	22 85%	34 87%	15 79%	155 ¹ 80%
Men	29 64%	19 61%	13 65%	13 81%	13 50%	32 82%	12 63%	131 ² 67%
Male Teens or Children	30 70%	24 77%	16 80%	13 81%	18 69%	27 69%	12 63%	140 ³ 72%
Female Teens or Children	29 67%	24 77%	16 80%	12 75%	18 69%	27 69%	12 63%	138 ⁴ 71%
Families	22 51%	21 68%	12 60%	11 69%	18 69%	22 56%	10 53%	116 ⁵ 60%
Seniors	31 72%	22 71%	3 65%	4 88%	23 88%	23 82%	15 79%	121 ⁶ 62%

1) Chi Square 7.159, df=6, p=.306

2) Chi Square 9.542, df=6, p=.145

3) Chi Square 2.864, df=6, p=.826

4) Chi Square 2.467, df=6, p=.872

5) Chi Square 4.235, df=6, p=.645

6) Chi Square 6.427, df=6, p=.37

Table 12. Provision of Shelter Services to Sub-populations by City

	Shelter						
	Number and Percent within Those Providing Shelter						
	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria
Women	12 75%	7 100%	5 56%	6 86%	9 75%	14 74%	7 79%
Men	7 44%	5 50%	4 44%	4 57%	4 33%	12 63%	5 56%
Male Teens or Children	12 75%	8 80%	7 78%	6 86%	7 58%	14 74%	6 67%
Female Teens or Children	11 69%	8 80%	6 67%	6 86%	7 58%	14 74%	6 67%
Families	7 44%	6 60%	5 56%	5 71%	7 58%	9 47%	5 56%
Seniors	12 75%	7 70%	7 79%	6 86%	9 75%	14 74%	7 78%

Table 13. Provision of Transitional Housing Services to Sub-populations by City

	Transitional Housing						
	Number and Percent within those Providing Transitional Housing						
	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria
Women	17 71%	7 50%	6 54%	7 78%	13 93%	14 88%	10 77%
Men	14 58%	8 57%	4 36%	6 67%	5 36%	11 69%	7 54%
Male Teens or Children	14 58%	11 79%	8 73%	7 78%	9 56%	8 62%	8 62%
Female Teens or Children	14 58%	11 79%	8 73%	6 67%	8 57%	9 78%	8 62%
Families	8 33%	8 57%	5 46%	5 56%	9 64%	6 38%	7 54%
Seniors	15 62%	7 50%	7 64%	7 78%	12 86%	13 81%	10 77%

Table 14. Provision of Long-term Housing Services to Sub-populations by City

	Long-term Housing						
	Number and Percent within those Providing Long-term Housing						
	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria
Women	13 76%	9 64%	9 82%	9 90%	10 91%	23 96%	8 89%
Men	14 82%	9 64%	9 82%	10 100%	8 73%	22 92%	8 89%
Male Teens or Children	9 53%	11 79%	9 82%	8 80%	9 82%	16 67%	5 56%
Female Teens or Children	9 53%	11 79%	9 82%	7 70%	9 82%	16 67%	5 56%
Families	6 35%	9 64%	8 73%	7 70%	9 82%	14 58%	5 56%
Seniors	12 71%	10 71%	8 73%	9 90%	11 100%	21 88%	9 100%

Table 15. Focus of Service by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
General Population	21 49%	19 61%	13 65%	10 62%	10 38%	22 56%	9 47%	104 54%
Chronic Homeless	1 2%	0	0	0	0	1 3%	0	2 1%
Families	2 5%	2 6%	1 5%	2 12%	3 12%	4 10%	2 10%	16 8%
Abused Women	6 14%	3 10%	3 15%	2 12%	6 23%	3 8%	3 16%	26 13%
Addictions & Post-Addiction	5 12%	2 6%	0	0	1 4%	1 3%	2 10%	11 6%
Mental Health, Disability	7 16%	3 10%	1 5%	0	2 8%	4 10%	1 5%	18 9%
Pregnant Teens & Moms	0	0	1 5%	0	1 4%	0	2 10%	4 2%
Crime Rehabilitation	1 2%	1 3%	0	1 6%	1 4%	2 5%	0	6 3%
Youth Crime Rehabilitation	0	0	1 5%	1 6%	0	0	0	2 1%
Aboriginal Child Welfare	0	1 3%	0	0	0	0	0	1 1%
Manage Off-reserve Applications	0	0	0	0	1 4%	2 5%	0	3 2%
Abused Seniors	0	0	0	0	1 4%	0	0	1 1%
Total	43 100%	31 100%	20 100%	16 100%	26 100%	39 100%	19 100%	194 100%

Note: Column percentages may not actually total 100 due to rounding.

Size of Organizations

Alberta and British Columbia were more likely to have very large (1000 to 5000+) organizations than Saskatchewan and Manitoba ([Table 16](#)). Not Applicable (NA) may apply to advocacy and referral organizations and those that only have transitional and long-term housing. The proportion of NA was similar across cities. Regina and Saskatoon, however, were more likely than Calgary or Victoria to report large numbers of units or apartments ([Table 17](#)).

[Table 18](#) provides another perspective on the size of organizations, the number of staff employed. In keeping with the data on number of beds Regina, Saskatoon and Winnipeg show more organizations with lower staffing levels.

In reporting the number of clients served, [Table 19](#) shows a similar pattern across cities as expected from the number of beds and of staff as described above.

Table 16. Number of Beds Managed by Organizations by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
0-25	5 12%	2 6%	4 20%	0	8 31%	7 18%	7 37%	33 17%
26-50	6 14%	3 10%	1 5%	5 31%	3 12%	4 10%	1 5%	23 12%
51-100	1 2%	4 13%	2 10%	1 6%	2 8%	3 8%	0	13 7%
101-200	4 9%	2 6%	0	0	0	6 15%	2 10%	14 7%
201+	4 9%	1 3%	1 5%	0	1 3%	1 3%	0	8 4%
DK	1 2%	1 3%	0	0	0	0	0	2 1%
NA	17 40%	12 39%	7 35%	9 56%	9 35%	13 33%	8 42%	75 39%
Missing	5 12%	6 19%	5 25%	1 6%	3 12%	5 13%	1 5%	26 13%
Total	43 100%	31 100%	20 100%	16 100%	26 100%	39 100%	19 100%	194 100%

DK= don't know; NA = not applicable

Table 17. Number of Units or Apartments Managed by Organizations by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
0-50	12 28%	6 19%	4 20%	5 31%	8 31%	6 15%	9 47%	50 26%
51-100	3 7%	4 13%	1 5%	2 12%	1 4%	3 8%	0	14 7%
101-200	0	2 6%	2 10%	0	0	3 8%	1 5%	8 4%
201+	4 9%	4 13%	2 10%	2 12%	6 23%	11 28%	2 10%	31 16%
DK	1 2%	0	0	0	0	0	0	1 1%
NA	15 35%	7 23%	5 26%	5 31%	6 23%	12 31%	7 37%	57 29%
Missing	8 19%	8 26%	6 30%	2 12%	5 19%	4 10%	0	33 17%
Total	43 100%	31 100%	20 100%	16 100%	26 100%	39 100%	19 100%	194 100%

DK= don't know; NA = not applicable

Table 18. Number of Organizational Staff per Service by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
0-25	11 26%	8 26%	6 30%	7 44%	11 42%	13 33%	7 37%	63 33%
26-50	8 19%	2 6%	2 10%	3 19%	4 15%	5 13%	2 10%	26 14%
51-100	6 14%	4 13%	1 5%	2 12%	3 12%	1 3%	1 5%	18 9%
101-200	3 7%	1 3%	1 5%	0	0	4 10%	2 10%	11 6%
201+	2 5%	3 10%	1 5%	0	0	3 8%	0	9 5%
DK	1 2%	0	0	0	0	2 5%	1 5%	4 2%
NA	0	0	2 10%	0	0	0	1 5%	3 2%
Missing	12 28%	13 42%	7 35%	4 25%	8 31%	11 28%	5 26%	59 31%
Total	43 100%	31 100%	20 100%	16 100%	26 100%	39 100%	19 100%	194 100%

DK= don't know; NA = not applicable

Table 19. Number of Clients Served per Organization by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
0-100	5 11%	1 3%	5 25%	2 12%	8 31%	3 8%	3 16%	27 14%
101-500	9 21%	6 19%	3 15%	2 12%	1 4%	5 13%	3 16%	29 15%
501-1000	3 7%	2 6%	1 5%	2 12%	1 4%	0	0	9 5%
1001-5000	1 2%	3 10%	0	1 6%	1 4%	8 20%	0	14 7%
5001+	5 12%	2 6%	0	1 6%	3 12%	5 13%	0	16 8%
DK	5 12%	4 13%	3 15%	4 25%	4 15%	3 8%	8 42%	31 16%
NA	3 7%	3 10%	0	1 6%	0	3 8%	0	10 5%
Missing	12 28%	10 32%	8 40%	3 19%	8 31%	12 31%	5 26%	58 30%
Total	43 100%	31 100%	20 100%	16 100%	26 100%	39 100%	19 100%	194 100%

DK= don't know; NA = not applicable

CONCLUSIONS

Patterns of services delivered to the homeless in the four Western provinces studied varied in general and for Aboriginal people in particular. There appear to have been different policy environments over time in the provinces and the seven cities. While this resulted in about equal numbers of organizations per city being dropped because Aboriginal people were not served at all, Calgary and Vancouver were more likely to have services that saw few Aboriginal people, suggesting there may be more exclusion in those cities. Regina, Saskatoon and Vancouver had the most homelessness services per 100,000 population – whether this was due to a larger problem of homelessness, a larger response to homelessness, different policies in service provision, or a combination of all of these was beyond the scope of this study. Neither the size of the population of the city nor the size of the Aboriginal population in each city could be used to predict the number of housing services identified as serving Aboriginal peoples in that city. Winnipeg had the greatest number of Aboriginal specific services which suggests greater influence by Aboriginal peoples and more receptivity by policy makers. The absence of Aboriginal specific services in other cities speaks to a continued policy of assimilation, as does grouping Aboriginal people under a broad multi-culturalism framework.

Different distributions of types of housing services have evolved and whether these have Aboriginal specific services also varies. More research would be needed to identify an ideal mix of services (e.g., shelters, long-term housing, and support services); however, the general absence of cultural healing services is remarkable. Much research into Aboriginal wellbeing stresses the importance of such services but this message appears to have reached only Aboriginal peoples themselves as provision of these supports was strongly linked to Aboriginal governance of services.

Shelter services developed for women leaving interpersonal violence first appeared in Canada in the early 1970's. Provincial networks of women's shelters have existed in many provinces for years. In 2010, a national network of women's shelters was created. Through these networks the shelters have shared policies, program models, education work, and lobbying. The lack of connection among services revealed in the next chapter suggests that current efforts to strengthen networks among homelessness serving agencies may be helpful. The shelters serving abused women are not included in all descriptions of the homelessness serving sector, perhaps in part because they are so well organized separately. Homelessness for women, however, cannot be addressed without considering the contributions of this sector. The sector, has models for successfully housing multiple families, and in Calgary, for instance, the Brenda Stafford Society has built a multi-use housing complex that includes second-stage and long-term affordable housing for women leaving temporary shelters, retail space, and condominiums. The facility opened in 2011 so the status as a best practice is not established.

To aid in further understanding the statistics from Phase 1, a random sample of organizations was taken from the database created for Phase 1 for more in-depth study in Phase 2 of this project. The next chapter outlines the results from the interviews conducted with representatives from the 42 selected organizations about the challenges and the services they provide.

Phase 2: Seeking Best Practices

From the database developed in Phase 1, a stratified and random sample of 20% of the organizations was selected for more in-depth study. As many of the organizations listed in the database provided multiple types of service, the research team decided that selecting across population served, rather than type of service would provide ample representation of type, but the small number of youth and senior services required additional attention. Thus, the sample was stratified according to three categories: children and youth, seniors, and other populations. The database contained fewer senior specific organizations than any other demographic, so while 20% of youth and general organizations were selected, 50% of senior’s organizations were chosen for participation. At least three attempts were made to contact a representative from the selected organization for an interview. If an organization declined participation (either directly or by not

responding to our requests) another record was randomly selected from the remaining organizations in the appropriate category.

This method resulted in an overall sample of 33%, with Regina having slightly less and Edmonton slightly more representation in the final sample of 64 organizations ([Table 20](#)). After the interviewing was completed, however, Edmonton, Regina and Saskatoon were most responsive and Winnipeg and Victoria were least.

In total, representatives of 42 organizations participated in interviews that consisted of eight semi-structured open ended questions ([Appendix 4](#)). Interviews were transcribed verbatim and entered into NVivo8© for analysis. Responses were coded, categories of codes were created, and these were subsequently classified into themes.

Table 20. Response Rate in Phase 2 by City

	Calgary	Edmonton	Regina	Saskatoon	Winnipeg	Vancouver	Victoria	Total
Total Sample Phase 1	43	31	20	16	26	39	19	194
Sample Phase 2	12	12	5	5	9	14	7	64
Percent of Phase 1	28%	39%	25%	31%	35%	36%	37%	33%
Participants	8	10	4	4	4	9	3	42
Response Rate	67%	83%	80%	80%	44%	64%	43%	66%

RESULTS OF PHASE 2

The Service Continuum

The results of the interviews validated the results of Chapter Two in showing that within the homeless serving sector there are a variety of organizations that range in governance model, size, and type of service provided. Also, the policy environment shapes what services are available: decisions that determine the types of service delivered are most commonly shaped by available funding, organizational values and ethics, and internal resource availability (e.g., capacity and expertise).

The participants articulated seven core types of operations within the homeless serving sector that relate to each other on a continuum of services provided for housing homeless people:

1. *Work to place people into houses in urban communities*

These organizations often own the houses, or provide subsidies or advocacy for individuals looking for housing. They may provide some type of supportive living arrangement while people gather the skills and resources they need to maintain housing on their own.

2. *Provide long-term placements in care facilities*

This type of housing service is often designed specifically for seniors or other populations with a higher level of needs and unlikely to be able to maintain their own independent living arrangements.

3. *Provide emergency service only, including shelters and short-term rental programs*

4. *Provide case management and referrals to other organizations offering services to homeless populations*

5. *More comprehensive models of service*

These provide temporary or permanent housing along with a support network in the community and formal supports from additional peripheral services. These peripheral services do not only address housing, rather they provide support services to ensure people can sustain housing (e.g., employment services, counselling, etc.).

6. *Diverse networks outside of front-line service delivery that include committees made up of a variety of representatives (e.g., NGOs, community members, government representatives, academics) that engage in the issues of homelessness from a prevention or policy perspective*
7. *Funders and others that provide financial resources*

Some funding agencies also focus on training, administrative support, and access to networks.

Some organizations focus on a single component of the homeless service continuum, while others provide a range of services. Larger organizations often have several branches, each with its own service mandate and purpose.

Participants recognized that those who were homeless did not only have a need for shelter, but rather, a multiplicity of needs that would affect their well-being and ability to exit homelessness permanently. Many participants described how their organization provided peripheral services in an effort to meet the complex needs of individuals. Activities ranged from collecting food and clothing donations, to offering programs that assisted in daily functioning (e.g., daycare, transportation) or teaching individuals a variety of life skills. If the agency was unable to provide these additional services, an individual would be referred to another organization to access services that potentially could meet their needs. Such services were also offered to promote more positive long-term outcomes aimed at preventing a person from re-entering homelessness. All participants expressed that attention to the need for these additional services, and understanding that the condition of homelessness was complex and pathways to sustained housing required attention to health and social needs, education, employment, and other skills, was a standard of the homelessness sector. The ability of the homeless individual to receive support services beyond housing was noted to be strongly linked to their future outcomes.

Programs offering basically the same service may differ in the amount of time an individual or family can receive service. Rent subsidies offered by some long-term mainstream housing programs are available for a year or less, while other programs providing long-term housing in a care facility often serve residents indefinitely. Specialized shelters often have limits on the length of time an individual can receive service, while other shelters accept residents every time they request service, provided space is available. Some shelters have limits on the hours individuals can remain in the facility, with many closing during the daytime, while other shelters provide a *homelike* setting. Some services provide programs when shelters are closed, to ensure a continuum of care; for example, intake for a detox program begins when the shelter program closes for the day. Other programs, such as referral-based services, open drop-in facilities where homeless individuals can access some direct services (e.g., cleaning facilities, phones, and internet) and referrals to others:

We have community services that deliver supports on site in the resource center or drop-in centre, and they have a membership of approximately a thousand people serving up to 150 a day. The drop-in centre offers onsite support, affordable meals, advocacy, and they also work through outreach with homeless and near homeless people in the downtown area...basically to support clients with mental health issues and they take referrals and self-referrals. They basically have kind of an open door policy. (participant 65)

Several participants stated time limitations, though necessary (due to capacity, funding, and program design), limit effectiveness. In general, it was perceived that within programs where individuals stay in a residence for a set amount of time, the longer their stay the higher their chances of meeting success. “We definitely see successes...when families come in and the longer they stay, we can definitely evaluate the change in their attitude and the change in their confidence and the change in their determination to

make things work” (participant 59). However, in cases where residents are allowed to remain in programs indefinitely, very little turn-over exists and accessibility is therefore limited. People recognized that a great deal of resources were needed to maintain housing and service for the people who were accepted by long-stay programs.

Organizational Governance & Structure

Participants reported that organizations have a variety of governance structures. Although Canadian and provincial laws dictate some regulations concerning the provision of homeless services, these do not specifically address internal organizational structures. Non-profit or non-government organizations (NGOs) that wish to be registered as a charity and have the ability to receipt charitable gifts are required by federal law to, among other things, have Boards of Directors, keep lists of board members and members at large, and keep minutes of meetings including committee meetings (Burke-Robertson & Man, 2011). Therefore, differences in governance structures are influenced by various regulations, mandates of organizations, the culture of the homeless serving community, experience, funding sources, and less by homeless people themselves.

When asked about governance, the majority of participants reported having a board of directors, executive directors, and program managers as the general decision-making structures within their organizations. Participants confirmed their boards played a varied role in policy and finance, but rarely engaged in program-level decisions. It was also common for organizations to have boards that were appointed by municipal governments. Ten percent of participants stated they maintain roles for Aboriginal peoples on their boards, as these members bring unique perspectives, represent the community being served, and provide important input based on their skills and experience. Notably, Aboriginal specific organizations have boards composed of all or mostly Aboriginal peoples. These members are seen to represent the Aboriginal populations in their urban centre.

Despite differences in governance structures, participants indicated similar concerns and experiences in organizational development. Common themes included lack of funding, hiring and retention of staff, funding for staff training, and issues with board and decision-making structures. Aboriginal specific organizations encountered additional issues such as the degree to which the NGO was rooted in western culture, the qualifications of staff and Elders, expertise, and capacity to serve the Aboriginal homeless population.

Discussion of the need for Aboriginal leadership to address homelessness of Aboriginal peoples was for the most part absent from the discussions with participants. Participants may not have been prompted to discuss leadership beyond organizational leadership, or they may not have felt comfortable suggesting the importance of Aboriginal leadership to address this issue, or they simply did not see the importance. Only one participant referenced it:

...for me I think Aboriginal leadership is key and I think that when you're looking at, at your homeless question...initiative, I think it's imperative that you have Aboriginal leadership and partnerships and I think they would need to get their Aboriginal leadership in place first...and then get them to start forming partnerships to work together towards relieving homelessness. (participant 61)

Zero Tolerance versus Harm Reduction

Philosophical and ideological positions are behind organizational policies, the way they operate, and the types of services they provide. Two extremes result from ideologies –zero tolerance for certain behaviour and harm reduction. The majority of organizations' policies reportedly fell somewhere between these two opposing positions, rather than at either extreme. The closer an organization's position to an extreme, the more likely their programs reflected those values. Thus, while each participant spoke in terms of respect and understanding of the population they served, this respect took different forms.

Participants reported organizations choosing to offer some programs over others because of specific values of the organization or assumptions about well-being. Some (e.g., faith based service providers) suggested that being homeless reflects a lapse in morals not seen in other more mainstream lifestyles. They expressed intense concern for homeless people, but also placed them lower on a hierarchy of moral and social standing and the approach to service was more paternalistic. In some instances, service providers expressed assumptions that substance abuse, addictions, and transience were serious individual pathologies and the organization's policies and practices were described in terms of correcting *poor behaviour*. A more paternalistic perspective was manifested in zero tolerance policies, complex internal security, and very specific selection procedures.

Our shelter, when you're talking about Aboriginal youth, a lot of them have addiction problems and our mandate is abstinence and so it's a fairly high barrier shelter and we're pretty strict about no drugs or alcohol in the building. So I would say one thing that they do need, a low barrier shelter, and would we do that if we had the funding? Mmm, perhaps. I'm not so sure. (participant 16)

Meanwhile, other participants described organizational policy that supported the autonomy of individuals and their ability to make free choices and incorporated the principles of harm reduction, external security measures, and broad intake criteria in their policies and procedures. These participants often stated that the assumption that all aspects of homeless lifestyles are pathologies is value laden and reported avoiding such assumptions in their organizations and services delivered. The high degree of acceptance by some organizations of clients and their circumstances was illustrated in the following participant's description of the work:

Everyone here has an addiction of some sort and they are all still actively using. We don't rehab

here. We don't supply any kind of support as far as that is concerned. We will and we can access rehab facilities for the [service users] if that's what they choose but we accept them for who they are, addictions and all...As long as they need us, they can be here. (participant 11)

Participants from organizations with high barrier services described optimal success rates due to candidate selection, safety, capacity, and values. Participants from organizations with lower barrier services primarily cited ethical positions, rather than outcomes, as the major motivation for policies. Participants working with higher barrier policies and practices engage in partnerships to assist individuals who cannot be accommodated through their own service, recognize the diverse needs of people who are homeless, and acknowledge the effectiveness of lower barrier structures for some individuals. Participants from organizations with lower barrier service were less inclined to note the need for higher barrier services; instead they pointed out how harm reduction models are increasingly used throughout the social service sector, and how they promote autonomy and personal development.

Meanwhile, other participants argued that some level of guidance, rooted in prescriptive practice, is necessary in helping homeless people as some may be incapable of making healthy decisions for themselves as a result of education, health, or other reasons. Routines and rules were seen as necessary as a teaching tool or to protect their health.

They need to be told when to stop drinking. They need to be told to go have a shower. They have no concept of what it's like to have to pay a bill, what it's like to have to cook for themselves or any of that and so it's a population that really is limited as to their abilities. (participant 11)

Organizations that maintained a balance between these opposing points of view were seen by some to be more flexible to the needs of clients.

Housing First Policies

Implementation of Housing First models appears to have been done inconsistently and to have raised concerns. Housing First has been described as “a client centered approach which holds to the belief that before someone can break the cycle of homelessness, a safe and secure home is necessary, with support services readily available.” Housing First places priority on providing affordable, safe and permanent housing quickly, with minimal requirements beyond a standard lease agreement. This specific model is used in addressing homelessness and housing in several western Canadian provinces. Questions about Housing First were not directly asked of participants, but several participants provided information about provincial or local policies during interviews. Most often, two divergent viewpoints were shared. The first position was that Housing First is an effective model supporting increased collaboration inside the homelessness sector, and among organizations providing different supports to homeless people. This was noted to improve access to training, information about best practices, and community feedback:

So what it does is it ensures that all of the staff and the Housing First teams are, even though they are from different agencies, provided with consistent training. That means that everybody's on the same page. (participant 137)

The second position was that operationalization of the Housing First model detracts attention from the support services people require to maintain housing. Often clients need to be re-housed through programs a number of times, as currently root causes of homelessness are not addressed as support services are not put in place as specified by the model. Organizational representatives from both positions argued the premise of Housing First policies is positive; individuals should have access to housing regardless of any condition, behaviour, or social status. Yet some also noted that the inherent assumption all individuals can be independently housed may be flawed:

The Housing First model [is used] here and while it has worked for some, I'm not a big believer in it because their philosophy that everybody can be housed is inaccurate. The [people] that we house here, this is the best they've had in a long time and it's the best they're probably ever going to have because they just simply are not capable of living on their own. (participant 11)

Housing Availability, Location, & Quality

An issue closely related to the Housing First model is the availability of appropriate housing. The lack of vacancies and availability was a major concern noted by all participants housing individuals and families in units not owned and governed by Aboriginal peoples. Women's organizations often cited that moving out of abusive relationships caused homelessness for women and their families along with a loss of supports (i.e., local social networks and resources). For Aboriginal women, this could be particularly problematic as they moved from rural to urban settings. Women from communities with few social services, such as affordable housing, may be forced to find housing in areas far outside their home region.

There's political issues too if they come off the Reserve. Then, you know, if the women, when they leave the Reserve and all the stuff is still there or they used to live on the Reserve, and because these are sort of smaller communities in general, that's where people really do know each other quite well, [so] confidentiality is a problem and safety in general is a real problem. (participant 164)

Organizations that work with people in the justice system or work to house people with addictions expressed a need for affordable housing away from areas laden with crime, drugs, and alcohol.

...a lot of our residents struggle with trying to find an affordable place to live and when you're coming out with addictions and when you've been in trouble with the law, really you don't want to be living in the hood. The location is just too much.

It's better to be in a better area of town in a place that you're comfortable in, a place that's safe that you don't have to worry about people breaking in or bed bugs or mould. (participant 148)

Mainstream Organizations' Responses to Aboriginal Peoples

This project was mainly concerned with services and best practices for Aboriginal peoples who experience homelessness. Several participants indicated they offer (either directly or through referrals) some level of Aboriginal cultural programming. The majority of participants acknowledged Aboriginal specific services in homeless serving organizations are limited, consisting of single events or small programs. Participants cited attending events such as Pow Wows, providing access to Elders, and smudging as ways that Aboriginal culture is used to promote well-being for clients. When asked whether an organization has specific policies or practices for working with Aboriginal individuals who are homeless, the participants largely replied they treated people as individuals and used an approach of universal standards. Universal standards were often described as treating each individual with respect, offering non-judgmental and accessible service (within the bounds of the organization's mandate, such as serving people from a specific demographic), and providing for the self-identified individual needs of each person: "Any of the frontline work we do in any of our programs is very much focused on the needs and desires of the client...so we come from where a client is at, so we have nothing that's specific to working with Aboriginals (participant 142)."

Other non-Aboriginal participants indicated they do not have a specific policy but suggested they see the importance of taking a different approach to working with Aboriginal individuals. Aboriginal, and some non-Aboriginal, participants explained a need to consider the unique contextual factors of Aboriginal homeless peoples. They suggested addressing Aboriginal homelessness should be entrenched in appropriate cultural practices and being attentive to

the whole person and all their needs. This enables them to connect the person to the most appropriate resources that would help address their issues. This does not sound different from the client-centred approach suggested by those supporting universal standards; however, it requires knowledge of the context of Aboriginal peoples' lives, including the impacts of racism, residential schools, loss of freedom, jurisdictional wrangling by governments, and so on, which so called universal approaches often overlook. Though not specifically mandated to work with Aboriginal homeless people, these organizations serve a higher proportion of Aboriginal people and their recognition of the need for Aboriginal positive policies and practices was rooted in their experience. Some participants also suggested Aboriginal homeless people would be best served through a single comprehensive service.

Two primary issues were discussed in reference to program accessibility: time spent in programs and access protocols for clients. Such restrictions have significant impact for Aboriginal homeless people who, as noted, become homeless due to complex multifaceted issues and have difficulty fitting into Western program models and bureaucratic systems.

Time limitations are seen to be more difficult for Aboriginal homeless people who may need more time to recover and/or more opportunities to access a particular type of service. Restrictions on program use based on time, either spent within programs or broadly within an organization, have significant impacts on Aboriginal homeless people trying to access services and on the Aboriginal organizations trying to collaborate with mainstream organizations to provide services.

Participants from organizations that provide special services (in terms of type of housing offered or sub-population served [e.g., women with families, seniors, people without mental health issues or addictions, people with specific addictions or illnesses]) maintained candidate selection is integral

to supporting success rates mandated by legislation or funders. Selecting candidates that have the highest potential for success was described as the most prudent use of precious resources. Restrictions on access to services, whether based on attributes of an individual or personal resources (e.g., proof of identification, status card, health care card), is especially problematic for Aboriginal peoples who often have multiple concerns besides homelessness.

Organizations with an Aboriginal Focus

Organizations with a specific mandate to serve Aboriginal peoples were less common and tended to provide a broader range of services for clients. These included services that addressed all aspects of well-being (i.e., physical, emotional, mental, spiritual, and cultural). In addition to offering basic housing services, they provided access to food donations, medical services, grooming and clothing, and employment assistance. Relationships with clients were the foundation of their care:

...and part of that might mean that, you know we might have a family in crisis living in our affordable housing units so we have the support services in place to help them so, that might be you know, trying to help them access child care. It might be taking them to the Food Bank, all these types of services, because we really believe you can't just provide housing. It has to be the whole spectrum because it's why so many of our people end up homeless...so we really believe the key to good housing outcomes for Aboriginal people is to have the support services in place. (participant 61).

These organizations tended to recognize the importance of having explicit policies and practices to connect or reconnect individuals to Aboriginal culture as a source of healing.

Attending to the varied needs of individuals, and understanding Aboriginal history and culture, are key components of an approach to caring for Aboriginal homeless peoples. These approaches are rooted in a

belief that the cause of homelessness is multifaceted in nature, not simply a lack of shelter.

The Influence of Funders

No matter how or why fundraising was conducted by an organization, all participants agreed fundraising comprised a significant portion of their work and it was time and resource consuming. Several people cited fundraising as a primary function of their organization. The amount of work required in fundraising, including public engagement, was seen as a hindrance to building programs for homeless people. Several participants suggested the difficulties in resource acquisition imposed on organizations were not money well spent:

...we don't seem to have much choice given political climate in this country. We're always going with hat in hand and trying to get what we can and I don't think that's any different, Aboriginal organization or non-Aboriginal organization. That's just sort of social reality that this country sits in. Which is unfortunate.
(participant 67)

There was consensus among participants that there was a lack of sufficient funding to provide all the programs necessary for changing lives or ending homelessness. The participants, however, tended to focus on the role of the homelessness serving sector in managing homelessness, rather than asking if funding needed also to be targeted to primary prevention.

The majority of organizations reported securing operations funding through grants from government sources or local funding organizations. Grants were negotiated on a regular basis. Participants suggested the short time frames, limited flexibility, and unpredictability of government funding contributed to myriad funding challenges. As funding priorities often changed, so was programming also required to change in order to be eligible: "Now, over the last ten years, [our] focus has shifted somewhat and a lot of it has to do with the funding that is available" (participant 70).

Many participants described the impact of funding targeted to address priorities. Some participants felt pressure to adapt their mandates to the interest of funders and to develop programming to meet demographic or specific needs. Some participants suggested this pressure was good and rigorous regulations around funding were needed to support the adoption of best practices and the utilization of research in program planning, which would potentially improve overall service provision. This would also assist organizations in not having to develop their own practices; instead they could adopt the best practices available. Yet other participants indicated frustration with such a system, as programs designed through bottom up planning, experiences, and the input of people using the service were then overridden and pre-empted by funding mandates. As one participant explained:

In my program, our funder basically kind of sets the standard. Our program, the program I manage, is kind of more like a franchise than an actual standard, [it's] here's some money, here's the goals, make it happen. (participant 86)

[We] have quite diversified funding so we don't rely just on the [government] which is a good thing for those programs because, some programs will be ending, that have just specifically [government] funding. (participant 76)

As funding decreased from some government programs, and increased from others, some organizations were left with difficulties in managing their budgets. Several participants noted services they felt were important to provide, yet conceded priorities often limited serving the people that exhibited the highest need. Thus, providing shelter, food, or clothing became the organization's primary task.

Participants also reported that receiving government funding within the inflexibility of the bureaucratic system posed a major barrier to the ability to react to emergent issues on the streets:

We are not heavily funded by government, which has its up sides and down sides. The down side obviously is that it means we have to raise an awful lot of money. The up side, however, is that we have flexibility in our programming so we see a trend on the street and we don't have to wait for a contract to be up before we can modify our programs. We don't have to make our programs fit into the little boxes that get you that funding so we can respond immediately. (participant 33)

While ownership of internally managed and regulated facilities was noted as an ideal situation for organizations providing short and long-term care, it came with challenges. Among organizations that owned buildings, maintenance was reported to be a significant and ongoing concern. Organizations that owned property recognized that the maintenance of buildings was crucial in sustaining their investment, and the irony of funding constraints allowing capital investments but not upkeep was not lost on participants with buildings in need of refurbishment.

They don't look at the facts of, okay one building is 20 years old. It's a total wood structure and there's a lot of things that start breaking down... You've got stairs that are starting to rot. You've got things like that. Like they don't take those things into consideration. They just blanket the funding... [funding agencies are] very rigid and anything out of the ordinary is like pulling teeth. It's absolutely like pulling teeth. I mean even to get one to come out and take a look and then finally say 'yeah you're right. These stairs do need to be done and there isn't money in your budget' and you know six months later the e-mails are still going back and forth. In the meantime the stairs are still rotting. You know that kind of thing and the red tape behind some things like that is really bad. (participant 26)

The system of funding also seemed to stifle innovation. Most participants said they invested in those programs that were strategic and sustainable.

Funders were seen as reluctant to expend dollars on new and innovative programming so such initiatives were not offered. Some participants described funding that promoted the development of new programs, but at the same time restricted dollars needed to maintain current initiatives:

...what they will fund are sort of the additional pilot programs around it [an established structure or program] so if we brought in a substance abuse counsellor and these are the targets, and this was what the outputs would be, and then these are the set goals, and this is what the outcomes that we're hoping to achieve. I can sell that and get somebody excited about [it] and then rather than taking the revenue that the agencies brought in from rentals or whatever else and funding that position, I can fund the maintenance of the building. (participant 160)

Although participants indicated the majority of funds come from government or other granting sources, most also do public fundraising. Creative strategies were used in order to fill gaps in program funding, to ensure an organization's autonomy, or to maintain a relationship with a specific partner (e.g., a faith-based organization). Organizations looked to partnerships, where both agencies utilized their own internal capacity in exchange for that of the other, in order to generate additional resources or funds. One method that was cited for gathering funds was to subsidize housing for some individuals who were previously homeless, or at risk of becoming homeless, through buildings that also collected rent for some units at market price. Finally, organizations launched funding campaigns based on public interest using radio events, letter writing campaigns, or publicized requests for items. Some organizations requested individuals using their services contributed in some way, either through volunteering in the organization, or through paying a portion of their earnings (though conventional work or bottle picking) to the organization. This practice was described by participants as supporting and affirming the value of the people served:

...when they are working, they are responsible for paying twenty five percent of what they're making towards their room and board which most of them are very glad to do. It's a real lift for them...they make coffee, they help do dishes, they sweep floors, they'll wash tables, they'll wash windows, they'll do pretty much whatever is asked of them because they do consider it their home and they're contributing in one way or another. (participant 11)

Funds designated for Aboriginal specific services have so far created more concern about how they are being used than evidence of success in addressing Aboriginal homelessness. Several non-Aboriginal organizations that serve a high portion of Aboriginal people were unaware of the existence of funding for Aboriginal services. Meanwhile, Aboriginal organizations noted that non-Aboriginal organizations sometimes employ means, perceived by them to be unethical, in order to gain access to Aboriginal specific funding. There appeared to be little consensus over who would be the most appropriate recipients of Aboriginal specific funding. Several participants did note the benefit of Aboriginal specific funding is that funders and policy-makers may have recognized the unique issues and needs within the Aboriginal community around homelessness and housing and may also have acknowledged that more effective approaches to addressing homelessness for this population are needed.

One participant explained the process of applying for a grant is often more difficult for Aboriginal organizations that may not have the capacity to match non-Aboriginal organizations in skills such as proposal writing. Aboriginal organizations are at a disadvantage when attempting to communicate their vision to funding agencies that require proposals be written in very specific terms – terms that do not allow for the specific needs of Aboriginal homeless people to be addressed.

This top down approach of funders and policy-makers is particularly frustrating for participants from

Aboriginal organizations. Several participants noted policies and practices in homeless serving agencies should not mirror historic (top-down) interactions between Aboriginal people and governments. Some participants suggested funding bodies that directly engage community members at various levels for input into decisions, programs, and policy are much more effective in working collaboratively to address the needs of Aboriginal homeless peoples.

Participants reflected a strong sense of public accountability as well as a passion for ending homelessness. Participants from organizations that received funding from private donors expressed a concern that funds be spent appropriately (e.g., value for money), conveying a high level of respect for individual donors. Participants from organizations that rely primarily on public donations (14% of participants stated they operate all or part of their programs through public donations) declared that the generosity of donors is often “overwhelming.” Due to limited funds and funding opportunities, participants work at monitoring budgets and conserving spending. The concern for utilizing dollars in an effective way was rooted in the desire to maximize both efficiency and accountability to donors and funders.

Prevention of Homelessness

Participants were not asked directly about the causes of homelessness so those who discussed the reasons people become homeless did in the context of other discussions. While several participants described addictions, types of abuse, mental health, gang activity, and exploitation as reasons why people become homeless, few discussed the root causes of these phenomena. All of these are issues that are usually seen as individual level problems requiring individual level services. People from organizations that served specific demographic groups were articulate about causes that most affected their population. For example, women's services were more likely to discuss abuse and violence, while people from youth serving organizations spoke more about abandonment by family members. Only

organizations that acknowledged the need for Aboriginal specific services were able to identify macro or systemic level causes of homelessness, such as, residential schools, intergenerational trauma, ongoing effects of colonialism, racism, and discrimination imposed by policies of assimilation that have resulted in inequities in social resources to maintain the health of Aboriginal populations.

Participants were not directly asked about the causes of homelessness, but they were asked about the activities their organization undertook to end homelessness. None of the participants indicated their work actively contributed to alleviating the root causes in any significant way. One action reported was committee work; 21% of participants mentioned involvement in local committees. Some sent representatives to committees to end homelessness or networking committees that often included work to end homelessness, but it was clear that addressing root causes of homelessness was not a major focus of these committees. A few participants spoke to system level advocacy, which addressed issues like housing standards and lack of affordable housing. The majority of homeless serving organizations did not describe in their visions or mandates addressing the roots of homelessness.

Partnership & Collaboration

The participants stressed that they viewed partnerships or collaborations as imperative to service delivery to assist individuals in exiting the cycle of homelessness. Participants' responses suggested a broad definition of collaboration including: working with partners on interagency committees; providing simple referrals for clients to other organizations; engaging in joint funding arrangements; and using joint programming. The types of organizations that form partnerships varied; participants indicated they maintain partnerships with government sectors (both Aboriginal and non-Aboriginal), faith-based organizations, for-profit organizations, academic institutions, established coalitions, health services, artists and artisans, national and international bodies,

politicians, volunteers, police, corrections services, and other bodies. Organizations that operated detox facilities, that promoted health improvement, or that worked with seniors and other specialized population groups, maintained partnerships with the healthcare system, or with individual healthcare service providers. Some organizations used partnerships to develop a continuum of care for those they served or to provide support for transition periods where their program ended and access to other programs began (e.g., when an individual leaves a detox program, when youth became adults). Partnerships were established to increase capacity and provide a more comprehensive service not attainable with the resources of only one organization. The majority of participants said that their organizations engaged in partnerships to fill gaps in their own service and to meet the needs of individuals they serve.

...local partnerships, specific in our programming, we look at what other people are doing and where we can partner...we're always in for partnerships instead of duplicating services or something already existing to say 'hey, is there an opportunity for us to work together?'. (participant 21)

Some participants defined partnerships as comprehensive collaborative strategies, others as shared funding, and others as working together on a project basis. Most commonly, however, the simple referral exchange was viewed as constituting a partnership between organizations. Referrals as a method of capitalizing on others' expertise were used especially in organizations that did not have an Aboriginal focus: "I think because we had more individuals that were of Aboriginal descent, we utilized more outside referrals, like we had more Elder action around the house" (participant 160). Partnerships were based on formal agreements, informal relationships, or some combination of the two. While nearly every participant (95%) agreed collaboration was a best practice for working in the homeless serving community, they were less clear on their own organization's partnership activities.

Although the vast majority of participants understood the benefit of partnerships to their service, rarely were client outcomes or preferences noted as improved. Knowledge about how partnerships work for homeless people was often absent because partnerships were solely determined based on the need to fill gaps and build capacity necessary to run programs in organizations. There were two exceptions to this. The first was the use of community supports (informal networks, grassroots associations, families, or self-advocacy organizations) as they promoted autonomy and less dependence on social services. The second was in Community Residential Facilities (halfway houses), where the goal of the program was to develop supports across various networks and services in order to enable the individual to exit the facility with options for long-term assistance. Providing supports at multiple agencies throughout a community was perceived to create a safety net and to support housing retention.

The availability and allocation of specialized funding forced organizations to work together formally or informally. Nineteen percent of participants indicated they engage in partnerships to meet the requirements of funders. Other participants indicated they develop or divide programs in order to secure more funding. Although some directives within the homeless sector support partnerships, several participants cited social and governmental structures that promoted competition rather than cooperation as creating barriers to working together. Participants cited frustration with competitive funding methods; they argued that a cap on funding for specific issues or regions promoted antagonism between organizations, which led to conflict, and ultimately impacting people who were homeless.

It gets difficult in a climate where people are having to compete because we don't even know where the contracts are going to be, don't know if there's going to be enough service to go around. (participant 76)

If everybody is competing for the same dollars, you

can't operate all that effectively. I think partnerships are an economic necessity. (participant 33)

Some participants viewed providing referrals as passing off work, thus putting a negative spin on the most common practice of *partnership* reported here:

...you don't want to be passing off work to other people. That's kind of the way that lots of people see it. So we need to get past that and realize that we're all kind of doing the same work but there are other agencies that we can refer to. (participant 13)

Another participant implied a competitive environment led organizations to only partner when they were very different.

Partnerships, in our experience, work best when the expertise of each group is acknowledged and there's real respect for it so there's no overlap, there's no, 'Well we can do that better, or we can do that differently and we would do that this way.' What we really want to do is find ways to complement each other by offering different things into the partnership...and so our best partnerships are those types of arrangements. (participant 54)

There was little evidence of collaboration and partnership with members of the homeless community (providers and clients) for community consultation and joint planning of initiatives to address homelessness. Only a few participants discussed the importance of active participation of the urban Aboriginal population in determining strategies and programs and the delivery of the same. It was most often Aboriginal organizations that recognized the importance of having the Aboriginal population participate in service planning and delivery, noting the importance of community engagement.

Engaging the community allows organizations to use capacity within the Aboriginal community to benefit homeless people. It also permits agencies to borrow the capacity of others without necessarily

reciprocating support. The practice of depending on the Aboriginal community to provide specialized services to individuals within non-Aboriginal organizations increases the pressure on Aboriginal organizations and structures to provide cultural connections. The capacity to develop cultural strength was something that Aboriginal organizations are assumed to have, and thus able to offer others.

Working in partnership with Aboriginal and non-Aboriginal organizations posed many challenges for organizations. Participants from both Aboriginal specific and non-Aboriginal organizations described multiple barriers in working across cultures. At a systems level, these barriers were seen in partnership development and working across jurisdictions and locations (specifically with First Nations Reserves). Differences in terminology and discourses between participants of different cultures were noted in this phase of the study. The practice of collaboration was described by non-Aboriginal organizations in largely formal and professional terms. Collaboration between Aboriginal and non-Aboriginal organizations was viewed as a particularly difficult process; a lack of information often characterized the primary barrier to developing relationships between Aboriginal and non-Aboriginal organizations.

Participants from Aboriginal organizations noted it was often difficult to establish partnerships with non-Aboriginal organizations because of racism, and fear. “You know it’s very difficult for Indian organizations to get proper partnerships in the city and I’m hoping that’ll change. I kind of think it’s due to the discrimination” (participant 84). Participants from Aboriginal organizations described differences in social and cultural norms that prevent effective collaboration, such as conceptions of time, and adherence to structures and processes that are considered by some in Aboriginal communities to be ineffective. A general lack of knowledge of the history and experiences of Aboriginal peoples among non-Aboriginals was also noted as a barrier to collaboration as well as effective service. There was

also a concern about engaging Aboriginal people and organizations in a way that respected their traditions, particularly in the engagement of Elders where specific protocols should be used.

Meanwhile non-Aboriginal participants (from non-Aboriginal organizations) explained challenges in working with Aboriginal organizations, such as failure to meet agreed upon expectations, a lack of understanding of systems, and a perceived difficulty in gaining access to the community. The main tenets of effective collaboration are relationship building and a participatory approach. Participants who discussed unsuccessful attempts at collaboration demonstrated that the structure of the partnership was determined by the non-Aboriginal organization, that it was defined in terms of specific outcomes, and that it was embarked upon to meet a clearly defined need. Participants who discussed successful partnerships and engagements with Aboriginal communities indicated strong relational development, based on multi-faceted outcomes and embarked upon in the spirit of long-term collaboration rather than with one goal in mind.

I find that, in general, having a good understanding of how things are done, the pace can be slower, I just think a program designed specifically with cultural issues in mind that specifically address [Aboriginal people’s] needs and the way they filter things, the way you have to share information, the fact that you need more time and more support to reach your goals...and having an understanding of how the structure of the Reserve works[s], how the power structure is kind of inherent to being there... (participant 164)

There was evidence that relationship building is part of a symbolic reconciliation as well as a trust building exercise. In such a process of partnership development, there is an implicit assumption that non-Aboriginal people will learn to adapt their approaches to accommodate Aboriginal world views, so that the resulting collaboration is one that

addresses power dynamics and is structured in ways respecting the different cultures represented by service clientele.

The Capacity to Provide Cultural Safety

When asked about the type of service they offered and specifically about the supports they provided for Aboriginal people, many participants indicated that their policies are *universal*, that relationship building is a major focus, and noted that a multiplicity of needs require attention. The interactions between service providers and individual homeless people, therefore, represented a significant portion of the discussions in interviews. Relationship building appeared to be integral to staff effectively assisting individuals accessing services and/or programs. Specifically, elements of trust, safety, and comfort, were repeatedly cited as routes to facilitate homeless peoples' identifying and addressing issues contributing to their current situation of homelessness. This was seen by some as particularly important for individuals who had developed a general mistrust of people (e.g., Aboriginal homeless individuals, homeless youth, and individuals who experienced various types of abuse). What was missing was a link to the concept of a culturally safe organization, where Aboriginal peoples felt comfortable, welcomed, and supported. Such a place was described well by one participant:

The Aboriginal shelter has become a safe haven for our clientele that we deal with on a regular basis. The [local physical structure] has become like a strong monument of where, when clientele show up to rest and get downtime and get nutritious meals at our place...they don't need to worry, once they've passed to our facility, they can actually relax. When they have to leave at 10 in the morning and all the resources and everything that they need to be in touch with for the most part, is heading back into the downtown area, and that's for them, it's like leaving their safety net of like, 'oh, once I pass that symbolic boundary', that as soon as they get to the other

side they're like, 'okay, well now I've got to go back and do my little safety mode and I've got to watch where I'm going, watch what I'm doing' type of thing. (participant 69)

Participants were asked to describe how services for Aboriginal homeless people could be offered in different ways. Participants did not use the term cultural safety when discussing what was needed for Aboriginal clients, rather terms such as cultural sensitivity and awareness were used both by Aboriginal and non-Aboriginal organizations. Essentially, there were three types of discussion around culture. There were those individuals who suggested that culture was just another demographic characteristic of individuals; therefore, they treated everyone the same, regardless of their ethnic background. These same individuals spoke about Aboriginal peoples in context of other ethnocultural groups (e.g., Asians, Indo-Canadians) and the multicultural agenda. It was explained that an organization did not do something specific for Aboriginal people, because it would need to do the same for other cultural groups.

I think it is with any visible minority too. We see a lot of Asian people here in our drop in center. We see a lot of people who are stigmatized in their cultures, especially because of mental illness, so it's a real focus for us to make sure that we are being culturally sensitive to people. There's a high number of Aboriginal people [that] live in this area so they're just part of the community... so for us, cultural sensitivity is basically based on treating everybody you know with compassion and reducing the stigma and finding out what the appropriate service for them is. (participant 68)

Other participants talked about culture as the practices that distinguished one group from another. These participants in mainstream organizations said they worked to connect people to Aboriginal organizations or Aboriginal workers so that they could assist and support their participation in various

cultural activities. Thirty-six percent of participants suggested cultural training was a useful tool that people working with homeless populations should have, but it is not clear that they were referring to a deeper knowledge of how culture shapes every practice. It appears they thought that by understanding the peculiarities of Aboriginal *culture* they would be sensitive. Participants noted that even though they understood the importance of culture (understood as activities) in wellness for Aboriginal people, they were unsure how to provide it, and faced challenges in developing relationships in order to bridge gaps in their level of understanding and service offered. Some organizations developed training workshops facilitated by Aboriginal organizations, others depended on partnerships to address training needs, and others noted the need for greater training opportunities in their community.

A few discussed culture in terms of a part of everyday life and cultural safety in the sense of the importance of understanding the historical and cultural experiences of Aboriginal peoples and the need for a shared understanding among clients and staff to build the important healing relationships. Cultural connection and reconnection were seen as important for Aboriginal people to build a bridge to wellness. Connection to Elders and cultural activities promoted identity for Aboriginal peoples and a sense of belonging to the community that could help them heal. Cultural connection was often built into the organizations' programming. Some participants saw Aboriginal peoples' connections to their rural reserve communities and noted that the transition between reserves and urban communities appeared to be a vulnerable point for Aboriginal people. Those that noted this, however, were often non-Aboriginal and uninformed about relevant policies. They believed that the tribal governments could easily implement comprehensive social change; some supposed that Band governments should be providing more support for ending urban homelessness, and questioned why this was not occurring. Of course, in some cities this is happening after a great deal of work.

Some participants recognized that when individuals believe an organization is culturally safe for homeless people, the services they offer have a better chance of being accepted by clients and clients have a better chance of exiting the homelessness cycle. Clients need to develop a trusting relationship with each organization they visit. Given the focus on partnership to deliver needed services due to lack of resources and specialization of services, people who are homeless are required to learn to utilize different organizations and trust many different people. This is especially problematic for Aboriginal people who face additional discrimination from the general public and do not find many places that reflect their Aboriginal culture in addition to the culture of homelessness.

Given the focus of the study one might have expected that staffing by people of Aboriginal identity would be a major point of discussion. Given the importance of one-to-one work with individuals and of relationship building it is perhaps not surprising that a great deal of attention was reportedly afforded to hiring decisions and training in the homeless serving community. However, the main discussions around staffing were not addressed to the needs of Aboriginal peoples. Although no questions on staff retention, training, or hiring were directly posed to participants, 62% discussed human resource issues. Commonly cited issues included: under-qualified staff; lack of alignment with values in homelessness approaches; and a poor fit with the organizational culture. Participants noted there are often values attached to specific mandates and policies, such as allowing residents to engage in their addictions, or zero tolerance of addictions, that dictated an individual's suitability to work with a particular organization. These issues limited the supply of qualified workers employed at any particular organization. Salary structures and the impact of funding cycles were seen as additional threats to staffing.

Lack of staff continuity was seen to have a significant impact on the homeless people served. Due to differences in policy between funding streams,

individuals working at different organizations sometimes received vastly different compensation for similar work. Year-to-year funding agreements, grants, and other unstable financial sources were an additional limiting factor for organizations that lost competent workers because of job security fears:

...there's a real negative impact on young people when they build these positive and trusting relationships with people and after a year, there's always that question about whether or not that person is still going to be here, whether or not that program is still going to be here... Not, only do employees start getting kind of like, "Oh, it's going to happen," but you see the kids kind of wondering and they're very, very vocal about their concerns and losing projects and losing programming and losing staff. (participant 21)

Several participants, however, did indicate their organizations prioritized hiring reflective of the population being served. For the majority of organizations, this required trying to maintain a significant percentage of staff that self-identified as Aboriginal. Many participants also said their organization chose to hire Aboriginal people specifically because it was believed they were better at accommodating the needs of Aboriginal people and there were often conflicts in hiring non-Aboriginal people to work with Aboriginal homeless people:

Sometimes First Nations' people, they don't want to access information from a white person. They don't feel comfortable and why should they? They have been raped by the dominant part of society since the 1800s...if we want to talk more recent history, with the residential schools, 1996 was the last one that closed...A lot of the barriers are language, whether that means they don't speak English or they aren't comfortable because they've been looked down [on]. Secondly it could be a stigma, right? It's just the feelings of discrimination, even if it's not there at that moment. (participant 53)

It makes a huge difference I have to say for our clients, it really does. For example, our housekeeper, she would be just one of our many Aboriginal staff, but she's a really good example because even from that standpoint we'll often have women in our detox who are Aboriginal and I will see [the housekeeper] sitting down you know on a bed or whatever talking to an individual because they feel like they can connect with her even though she's not in a counselling capacity, she's also support person. (participant 137)

Having even one Aboriginal individual within an organization was reported to build trust and accessibility for homeless Aboriginal peoples:

...with that small community we tend to have a different form of communication with one another, so since working here, I've been building a different stream of networking, so within the community the word has gotten out that I'm here in this position and some referrals are being sent from Native organizations or communities to access some of the resources here. (participant 53)

While it was a common assumption by non-Aboriginal individuals that a single Aboriginal person could accommodate an entire organization's need for Aboriginal cultural support, this was a concern among Aboriginal participants. Such a policy was seen to create a strain on the Aboriginal staff person and perceptions of tokenism or exploitation in the broader Aboriginal community. Participants who identified as Aboriginal noted the complications in becoming the Aboriginal worker: "I know that that's a big concern in the community as well, you might have 300 workers at one shelter but why is there only one Aboriginal worker? They can't do all of it" (participant 45). The presence of Aboriginal people within an organization was sometimes perceived as a form of exploitation, as it was often necessary to maintain Aboriginal staff to provide Aboriginal specific programming in order to receive funding from Aboriginal specific streams. Participants cited concerns over the potential that non-

Aboriginal organizations received money from Aboriginal funding sources, awarded based on the presence of a single staff member who might not even work directly with people who were homeless.

Among participants, 33% indicated that diverse or representative hiring was an organizational concern. Some organizations, both Aboriginal and non-Aboriginal, recognized the existence of special skills Aboriginal employees brought by virtue of being members of their communities. These skills were highly valued and used in programming.

Well it's part of the tool kit...I mean we have people on staff who are pipe carriers. We can call on a range of cultural resources that are outside the agency because some of our staff have personal connections. But as an organization, as a practice as an organization, it's something we very much encourage for those links to be developed because it's critical to the success in many cases to retaining housing. (participant 131)

The most widely mentioned tool was community contacts and networks; organizations rely on Aboriginal people within their organizations for expertise on Aboriginal issues, for connections within Aboriginal communities, for outreach, and for marketing of programs and services. Aboriginal people working in organizations were often cited as using personal contacts to provide support for homeless individuals: "Sometimes it's an actual support, sometimes it really varies. I mean ideally they would leave with natural supports in their community that aren't paid staff right, so any time there's an opportunity to make that happen, we certainly will try" (participant 2). This process of outreach and support was described as being well aligned with Aboriginal approaches, such as developing relationships with clients, sharing stories and information, and focusing on community well-being. The ability of Aboriginal workers to connect homeless people to community-oriented supports was most often mentioned by non-Aboriginal participants.

Non-Aboriginal organizations cited challenges in hiring and retaining staff, as well as in securing funds for the hiring of individuals whose mandate was to provide support services to Aboriginal people. Meanwhile, Aboriginal organizations identified similar difficulties in hiring, noting the demand for highly academically trained Aboriginal people outweighed the supply.

Interest in increased use of Aboriginal models for both organizational governance and programs appeared to be growing among Aboriginal organizations. Many participants indicated they have been looking to traditional concepts to alter business practices to be more supportive of Aboriginal needs. This movement, while growing, is still small within the overall context of the homeless serving sector. Although Aboriginal organizations are starting to recognize the need for structural change to systems that reflect their own culture, non-Aboriginal organizations are not participating in this trend.

Few Best Practices & Little Evaluation Research

Participants were asked directly for examples of best practices within or outside their region. Few were able to provide examples. About half the participants (52%) were able to demonstrate knowledge of local organizations and 31 participants discussed specific practices or policies that made other organizations' services effective. When participants did explain what made other organizations successful, for the most part they saw effective programs in terms of effective individuals or program leaders: "I'm not sure [what creates effectiveness], she's just got a good reputation, she keeps her buildings full and she's getting people off the street" (participant 138). Other reasons attributed to success included having access to more resources, being well established over a long period of time, and having a low barrier service or addressing a specific common regional issue. Some participants indicated bringing services in-house generally constituted an emergent best practice in serving homeless individuals. This was seen as especially

relevant where homeless people had to obtain services alongside those who were not homeless, such as in medical facilities, because the potential for discrimination and iatrogenic care was great.

When asked about organizations outside their region, participants had little to share. They were reluctant to speak about organizations and issues about which they knew little. They explained time was a significant barrier to connecting to organizations across regions. One participant noted they often feel pressure from government regulators and funders to connect with other organizations, but this was difficult because staff were constrained by day-to-day work and exhausting workloads. Unless resources were increased, participants did not have the capacity to engage with service providers outside of their region. Some organizations sought best practices, identified through memberships in consortiums or coalitions, training or mandates from funding organizations, partnerships with academic institutions, or primary research conducted by the organization. A gap was noted by participants, as few sources of knowledge regarding service delivery were widely accessible to the community of homeless serving organizations: “There’s not a lot of research that has been done in the area of best practice...there’s just not a lot of research in the area of addictions and shelters and best practice in terms of helping people move onto the next step” (participant 137). However, when desperately needed, sources of knowledge were purposefully sought out, but requiring resources to access them. Currently, there is no easy-access point for service providers to support the use of best practices, current research, or knowledge from diverse sources in program development. One participant said: “When they asked me to put together this shelter, I learned very quickly there’s no such thing as homeless shelter schools so you have to go out and research and talk to people, travel the country a little bit and all that kind of stuff” (participant 60).

Participants did make an effort and provided a number of recommendations to improve homeless services for

Aboriginal peoples, though these were not particularly innovative. Their suggestions included: hiring Aboriginal staff; providing cultural reconnection; increasing access to Elders; integrating Aboriginal programming within mainstream organizations; and establishing better connections to current Aboriginal organizations and programs. The need for building strong, respectful relationships with Aboriginal clients was considered to be of great importance.

The general culture of the homelessness serving sector did not support research and evaluation that could identify best practices. Many participants stated they did not keep records of the numbers of Aboriginal people who used their services compared to the general population. Some participants could provide statistics reflective of this, although many estimated the numbers. Several participants indicated they purposefully do not track ethnicity for their own records. Others indicated mandates existed that required they measure some form of Aboriginal status for allocation of program funding: “We just ask everybody if they’re First Nations. It’s all about the funding. It’s all about the province getting its money back from the Feds. We just ask everybody if they have a Band number” (participant 91). Beyond the collection of Aboriginal status to gain funding from the Federal government and data collection for some Housing First programs, participants mentioned little about ongoing monitoring of services and clientele. It was difficult to know whether general statistics were collected or not.

Overall, participants expressed dissatisfaction with the methods of evaluation available to them. Despite the specialization of organizations and their commitment to programming, evaluation was seen as burdensome, and often it did not occur at all. Monitoring outcomes was either mandated by the organization or the funder. For some, monitoring was undertaken specifically for funders; for others, outcomes were evaluated based on concern for the population served. Participants indicated mandated methods were not effective in capturing the successes and challenges of their

programs or services. Hence, they developed or used additional evaluation models to better meet their needs. Several participants indicated their organization had clients who were no longer using their services but who returned to the facility or program to share successes and challenges with others. This was seen as both an indication of success and a rewarding practice for both staff and clientele.

Participants said organizations had little capacity for evaluation both in terms of resources and expertise: “We do struggle to evaluate; exactly when is the best time or how is the best, how long people should stay, because we have a sort of sequence of events where families will leave before they’re ready and then come back” (participant 31). Many participants stated they are only capable of attending to daily operations, restricting their ability to connect and the capacity to perform other activities such as evaluation and research. Some participants had a very limited view of evaluation as program outputs: “Shelters are really hard to evaluate at the best of times...you know really because you’re providing a pretty basic service. They’re either coming or they’re not” (participant 137). Most of the discussion on evaluation and monitoring was limited to obtaining feedback on programs and services from people who used them (e.g., participant satisfaction, relevancy). Thirty-one percent of organizations were said to have some mechanism for collecting feedback from clients about the services they received. Both formal and informal methods were used to collect this feedback. Though many indicated that measuring outcomes was important to evaluating program or service effectiveness, the majority of participants did not have any formal methods in place to do this. They noted the success of individuals within programs was assumed rather than measured.

...when they leave you can say that you know they’re in a good spot and that’s what you hope for. Whether they are able, and this is where the housing issue comes in, to maintain the independent life that they’re expecting to have

with the costs of apartments and rent and utilities and all those things, that sort of unexpected changes to their lifestyle. Are they able to maintain that...with the tools that we gave them? (participant 59)

Methodological problems did plague those interested in more sophisticated outcomes. Participants highlighted the difficulty of maintaining contact with individuals who were using services but who were often discharged or exited the program before being housed. Participants acknowledged the importance of follow-up with the people they served to determine long-term effectiveness of programming; however, limitations on time and other resources typically limited their ability to do so. Typically follow-up was related to service provision rather than research:

Lots of times we’ll have a youth in the house and they might not be doing very well or they’ll head somewhere else, and so it’s nice to stay connected with them in case they want to come back, but we don’t have the funding to be doing that kind of stuff so sometimes we were doing it just because we care for the kids. So we’ll do follow up and we’ll do the outreach with them and so they might not be at the point where they want to live in the house right now, but they still want to be connected to [our organization] and some of our services, but we can’t do that. (participant 13)

Although participants were asked about evaluation methods, they were not specifically asked how their programs changed and improved based on evaluation results. Even so, several participants explained the ways in which they developed programs to be responsive to the needs they observed. Several participants gave examples of changes to programs based upon client concerns.

...the client surveys that we received back indicated a relatively high level of satisfaction with the services received, with the exception of the question that was not being answered [which]

was ‘what would happen at the end of their twelve months of support’ and would they actually end up being homeless again? Would they lose their rent etcetera, and so that has created now an initiative on our part to be working with clients in a more targeted way around their graduation from the program and what their options are as far as going back to work, maybe getting into some sort of assured income stream. (participant 88)

In some regions, participants reported organizations were required to use specific evaluation models dependent on service type and funder. In one region, Housing First teams were required to meet with funders to review expectations and best practices for service delivery. These practices included data collection for performance measurement. Several participants pointed out the limited scope of funder driven evaluation, as funders each have specific mandates and require information pertaining to different components of the program. Thus organizations were required to keep several data sets, each unique to a specific funder, enabling them to view only one aspect of a multifaceted program or organization.

Our funders know what they fund... ‘I fund the sports program so I know what the sports program does,’ but they don’t realize that we have residential housing and [they] don’t know that we have [other programs] so they can’t speak to [our organization] as a whole and the impact in the community and the outcomes as a whole organization. (participant 21)

Mandated evaluation methods were noted to be particularly ineffective for Aboriginal organizations and 27% of participants from Aboriginal organizations indicated they are working with funders and other regulatory bodies to have evaluation methods altered to better reflect Aboriginal traditions.

Well I’m trying a new thing of evaluation. I’m trying to get funders to evaluate according to the

Medicine Wheel, and I have to tell you, I have some interest, and then our [school board] they’re going to evaluate our partnership according to that. So you know you gotta talk to them and try and show them the way to make some change. (participant 61)

CONCLUSIONS

There is great diversity in organizations that make up the homelessness serving sector. Within it is the sector of services to women who are homeless because of domestic violence. The domestic violence sector has decades of experience working with diversity in services and organizing to promote the work of shelters. It is clear that the homelessness serving sector in general has not built upon the work of the domestic violence sector in networking, developing best practices, and collaborating. It raises a question about the diversity in the homelessness serving sector and we conclude that best practices will need to be specified along the continuum of services needed to address homelessness; however, as was done in Washington D.C. (Marshall, 2011), a community partnership is needed to support strengths, identify gaps, and coordinate activities.

In each of the four provinces, organizations, services, and programs along the homeless serving continuum vary significantly on mandates, models of services delivery, programs, and services provided. To a large extent, the practices, policies, and procedures of organizations are shaped by funding organizations (e.g., government, granting organizations, and private donors). Participants related to the interview questions in different ways based on the focus of their organization. Organizations appear to be segregated because of directives from funders, values and assumptions, and perceived differences in the root causes of homelessness. While there are trends across these western provinces, there are also differences between them, such as formalizing of specific Housing First initiatives in some but not all.

Local systems and the various organizations are influenced by local regulation, funding agencies, community norms, media, and factors contributing to the causes of homelessness. The systems are less influenced by knowledge of best practices because these have not been identified, except as concerns the Housing First model, and there is little program evaluation or systematic research on outcomes occurring, especially long-term outcomes.

The diversity of services makes sense in terms of the diversity in the homeless population; however, this diversity is seldom fore-grounded in conversations, perhaps because people tend to see homelessness from the perspective of the population served in their organization. Local, regional, and national meetings that bring different service providers from the homelessness sector together may influence this, but it probably depends on coordinating bodies to keep the big picture in the forefront of planning. One thing that was made clear here was that the front-line service delivery organizations are overtaxed and have few resources for building networks or collaborations beyond those needed in delivery of service to the clients. Competition exists for funding, and although this has not limited cross-referral and client services, it does impact on the ability to collaborate.

In terms of delivery of service to the Aboriginal homeless, the diversity also needs to be recognized. It must be possible to attend to the needs of the most complex cases without generalizing to everyone, and to keep a holistic perspective for everyone. The harm reduction approach is more in keeping with the holistic and relational healing practices of Aboriginal peoples and should be emphasized.

The Housing First model has received widespread support, but its applicability to all populations was questioned. Also, it depends on the quality, location and availability of housing which is a problem. A further problem in terms of urban programs for Aboriginal peoples is housing them in neighbourhoods where they do not feel welcomed and, alternatively

segregating Aboriginal peoples in one housing location. The development of organizations, support for workers within them, and the maintenance of capacity, both in terms of physical infrastructure and in terms of human resources, were identified as priorities by participants from across the sector.

Best practices in resolving relationships and housing provision policies between First Nations and urban governments would be one partial solution to issues of capacity. National statistics, however, suggest First Nations are facing a housing shortage on reserves, which may account for some Aboriginal urban homeless. It must also be recognized that Aboriginal peoples' organizations do not have the same breadth of fundraising opportunity in urban communities as non-Aboriginal organizations. These are issues of inequity that need to be addressed in government programs if Aboriginal homelessness, a large proportion of urban homelessness, is to be reduced.

Partnership as a process is not well understood, although the value of collaboration was apparent to all participants. Presently the focus of collaboration is on referral of clients and that can be a foundation for building other collaborative relationships. There are accessible tools available to aid in partnership development that could be of some help. We appear to be moving into a period of trying to do more with less, so partnerships may be critical. Those that work successfully across cultures (non-Aboriginal and Aboriginal collaboration) have managed to do so through extensive relationship building and acknowledgment and mitigation of existing power dynamics. It takes resources to build relationships and to write grants for innovative partnership programs. The need for Aboriginal leadership in ending Aboriginal homeless was not well recognized by non-Aboriginal participants. The ability of organizations to benefit from Aboriginal designated funding without developing a relationship with an Aboriginal community organization is unfortunate since it fails to build relationships and partnerships. In addition, all funders need to attend to the principles of Ownership,

Control, Access, and Possession that address research *with and for* Aboriginal peoples, and also point to ways of working together in diverse communities.

The way in which organizations regulate interactions between staff and homeless people (through policy and organizational culture) is a product both of the systems in which homeless service provision occurs and the framework of organizations. The interactions between homeless people and service providers constitute the ultimate end of the policy line. Cultural safety was not discussed at length by participants. For the most part it is equated with cultural awareness training for staff of mainstream organizations. The philosophy of multiculturalism was also discussed by a number of participants who suggested that Aboriginal peoples' needs are no different than those of other ethnocultural groups and, as such, they consider that their services treat all people the same. Thus, many organizations have policies that may be harmful to Aboriginal peoples, whether these are implicit or explicit policies. Funders could take leadership in encouraging the dismantling of such policies and practices.

There was minimal recognition and understanding of the root causes of homelessness, particularly for Aboriginal peoples (e.g., colonial history, residential school experiences, intergenerational trauma), except in Aboriginal specific organizations. Non-aboriginal or mainstream homelessness organizations may need to consider particular needs of Aboriginal clients in terms of cultural safety, time, bureaucracy, and general ease in a place. Hence, providing a system for homelessness that is culturally safe for Aboriginal homeless peoples should be a priority. It is unfair to 'dump' the goal of a culturally safe system on Aboriginal organizations, particularly those few in the homelessness field. Culturally unsafe services are a failure to homeless individuals and therefore to the field in general, so everyone has a role to play in creating solutions.

The need for Aboriginal leadership and collaboration supports the need for Aboriginal specific

organizations to better address the needs of Aboriginal homeless peoples. They need resources to be able to participate in addressing gaps in the sector and for training Aboriginal people to staff different programs. This issue of hiring Aboriginal staff is compounded by ideas of Aboriginal identity. As urban Aboriginal peoples are a very diverse group with many varied cultural backgrounds, Aboriginal workers are unable to *represent* the cultural needs of people from all Aboriginal groups. Because they 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. Generally, however, people should not be expected to change the culture of an organization on their own and more than one appointee if Aboriginal heritage represents a serious policy.

Overall, little information on best practices in the homelessness field was provided by participants. Some pockets of better practices are evident, but overall best practices for the delivery of services for Aboriginal homeless peoples in western Canada were not explicated by participants.

Finally, comprehensive evaluation was largely absent in organizational programs although it was recognized as being important. Concerns were also raised about traditional evaluation methods not being well aligned with the homeless community and its service providers. A paucity of research is available on the issue and what is available is not readily accessible to organizations to determine best practices for programming. Evaluation models that are participatory are proving to fit the Aboriginal approach more closely and also to respond to the needs of social service providers.

In the next chapter, we continue to explore successful practices, procedures and policies using a case study method. Organizations chosen for Phase 3 of the study were either nominated by interview participants

as one of those that were seen to be effective in serving homeless populations, in particular, Aboriginal people experiencing homelessness and/or they stood out in other data collected throughout the study.

Phase 3: Case Studies – Innovative & Effective Practices

A case based method was selected for Phase 3 because of its ability to provide data that may produce practical models, to collect information without overly intrusive or resource dependent practices, and to provide insight in situations such as social and cross-cultural interactions that require a multifaceted analysis (Brinkerhoff, 2002). Case studies also require contextualized analysis (Brinkerhoff, 2002), which is in keeping with the project objectives. It is natural for organizations, often asked to prove their efficacy in order to obtain funding and other resources, to provide information that highlights their greatest achievements. Thus, this research was conducted with the assumption that respondents may be wary about sharing challenges in their organizations, and every attempt was made to foster supportive relationships with interviewees and to maintain their confidentiality.

We aimed to select organizations based on the number and type of recommendations they received from their peers (Brinkerhoff, 2002). In Phase 2 we asked participants to name organizations within their city, province or from the Western provinces, that in their opinion exemplify best practiced in ending Aboriginal homelessness. All (n=42) could name organizations within their cities, but few (13%) were able to describe the best practices and even fewer were able to name organizations (8%) or describe best practices (3%) in other jurisdictions.

Of the 194 organizations in the Phase 1 database, 105 (54%) were recommended (Table 21). Given the results of Phase 2 interviews concerning evaluation practices, the respondents have to be nominating services they know and believe to be doing good work, rather than those systematically assessed according to a *best practice*. The assessments that form these beliefs are a source of knowledge formed by experts in the field, however, and should not be discounted. About 54% of organizations overall are assessed by their peers to be performing well in addressing homelessness. The proportion is slightly higher in Alberta and quite a bit lower in Manitoba. The latter result should be viewed with caution since the response rate for Manitoba was below 60% and therefore participants were biased in some way.

The organizations selected to be case studies were chosen based largely on recommendations from within their region, as well as an analysis of data collected in Phases 1 and 2. Cases were selected from each province to triangulate what we learned with the data from previous Phases. Two representatives from each organization were interviewed and each was asked three broad open-ended questions regarding their practices, policies, and procedures. Site visits were outside of resources available; as such, telephone interviews were conducted. Interviews were transcribed verbatim.

Table 21. Total Recommendations by Province

	Manitoba	Saskatchewan	Alberta	British Columbia	Total
Organizations Interviewed	4 9.5%	8 19.5%	18 42.9%	12 28.6%	42 100%
Total Identified in Database	26 13.4%	36 18.4%	74 38.1%	58 29.9%	194 100%
Number of Organizations Recommended	9 8.5%	19 18.0%	46 43.4%	31 29.2%	105 100%
Percent of Recommendations by Database Representation	9/26 35%	19/36 53%	46/74 62%	31/58 53%	105/194 54%

In addition, each case study organization was asked to provide at least 4 documents from the following list:

1. Internal reports;
2. Training program descriptions and/or content;
3. Blank client forms (intake or evaluations, etc.);
4. Employee/Board training manuals;
5. New hire policies and/or job descriptions;
6. Press releases;
7. Previous evaluations and/or research;
8. Planning documents;
9. Program descriptions/funding applications;
10. Brochures and/or other handouts; and
11. Client feedback reports or forms.

While the majority of organizations provided the documents directly, some requested that the research team select information from the organization’s website, while others felt they did not have the time to participate in this part of the research (see [Table 3](#)). In these cases, web sources were analyzed. We

received 75 documents: 18 position descriptions; 24 annual reports, newsletter or web-site; 10 reports on policies; 19 forms used in an organization; and 4 brochures. The documents collected were analyzed comparatively with documents with similar purposes from other organizations, or were explored for content that reflected on practices, policies, and procedures.

The interviews and documents were analyzed, coded and organized into themes and issues. These were compared within organizations and across all the cases for information on best practices.

The findings have been synthesized across the organizations, both to protect confidentiality and anonymity of our sources, but also as some strong commonalities in terms of successful practices, policies and procedures emerged across the organizations. The next section outlines these commonalities.

Table 22. Overview of Cases

Type of Organization	Governance	Continuum of Homelessness Services	Organization’s Particular Successes
Community & Family Services	Aboriginal	Provision of transitional and long-term housing	Homelessness integrated into a broad mandate of community development and services; Individuals and families provided opportunities to learn and grow with mentorship and interdisciplinary supports; Long-term support provided – can be years
Community Coordination Agency	Non-Aboriginal	Provided some front line service but concentrated in support of other agencies: collection of community knowledge and resources, and knowledge translation; regional leadership; facilitation of funding for capital and support projects	History of community consultation and trust established with both Aboriginal and non-Aboriginal communities
Housing & Support Services	Non-Aboriginal	Transitional and long-term housing includes services for people exiting prison; large percentage Aboriginal	Some buildings have 24 hour support workers; Comprehensive referral service for any type of need
Addictions & Other Special Needs	Non-Aboriginal	“Hard to house” group characterized as people who required a low barrier service and high degree of case management (addictions, mental and physical health)	In-house low barrier service and transitional support in stages to foster independence
Youth Homelessness	Aboriginal	Providing shelter 24/7 and transitional housing for youth up to age 24	Access to various services through collaborations; Provide services to all Aboriginal youth, regardless of homeless status
Housing & Support Services	Aboriginal	Transitional and long-term housing with supports	Transitional support in stages to foster independence

RESULTS OF PHASE 3

Overview of Cases

[Table 22](#) provides a brief overview of the cases included in this phase of the study. In general these services had been in existence in the communities in one form or another for a long period (over five years), suggesting that maturity both builds success and builds a reputation in the community. Housing for women leaving abusive relationships was included in one of the cases, but a specific stand-alone shelter for this purpose was not. The continuum of housing services from emergency to long-term affordable housing was included. Some highlights of success are noted in the table, but each of these was also embedded in models of successful governance, community engagement, volunteerism, and cultural safety, to name a few. The interviewees from these organizations reflected that accountability to their clients, the broader Aboriginal community, and the homelessness serving sector was taken seriously.

All of the cases exist within a context where access to affordable housing is restricted, and needed are “more housing, more funding, more programming, more community resources. I could go on and on...” (participant 70). Participants from each case described the necessity of increased support from regional and federal systems. In general, they noted they do not have the resources required to end homelessness.

The dialogue on ending homelessness was also common across the provinces and cities, regardless of the acknowledgement that the homelessness sector will not end homelessness. Homelessness is rooted in education, employment, income, and access to crisis prevention for families. Participants from each case and province also stressed the need for a culture of improvement and learning in the homelessness sector, ranging from logistical and system improvements to collaboration on service delivery and policy adoption.

Our resources tend to focus on services but there is definite value in research and evaluation pieces, when I see some of the impacts that having programming in this community has had and the discussions that have stemmed from some of the challenges that they are now documenting in housing individuals that we work with every day, what I hope to see in the outcome of a project like that is that the learnings are then acted upon. (participant 185)

There were regional issues identified, such as, the impact on people of the culture of the downtown Eastside of Vancouver, or policies that cut services to youth of a certain age. The representatives of these success cases were aware broadly of the socio-political issues in the regions in which they worked. They discussed best practices in terms of specific population needs, locating services so that people could easily access them, but attending to the need for mixed housing and avoidance of ghettos. Some maintained separate housing for different demographic groups, including women, families, seniors, and singles.

Partnerships & Community Mandate

In previous sections we focused on the mandate of the organization in terms of housing services provided, particular target population, etc. In this phase, mandates were often described as providing care, hope, and advocacy for the whole homeless and Aboriginal community, as well as supports to individuals. This suggests staff were concerned with both overall individual and community wellness; they took a holistic perspective on the needs of the homeless and were involved in primary prevention at some level. They looked for and encouraged more of this in the sector as a whole: “I just wish that it was more onus on the agencies to adopt the family as a whole, not just the youth or anything like that. They gotta look at a better system” (participant 21).

Participation in community committees and partnering with other organizations was a key to

becoming a successful organization. Participating in information exchange and debates within the community allowed them to see needs and influence internal service delivery policies. Involvement in the community was also an opportunity to show their expertise and, more importantly, to build the relationships and reputations that encouraged longevity and success.

It was clear from previous phases that each city had a variety of services across the housing services continuum and that services in each city were trying to address the needs of a variety of populations, yet sometimes the particular needs of Aboriginal peoples were overlooked. In these successful cases, the particular needs of Aboriginal people were attended to and not in a superficial way. Partnerships with Aboriginal organizations were common, whether or not the case was governed by an Aboriginal organization.

Well we have a number of key goals of the organization, some of them to do with housing and that is to provide a safe, welcoming, caring environment for our people, [and] to provide outreach to the people living in our homes. We work toward education, justice, employment, training, all of the areas, and of course our biggest one is reduction of poverty. (participant 61)

Participants still noted the challenge of working in a competitive funding environment, where collaboration was hindered by fears of losing resources. Additionally, they expressed concern that collaboration in advocacy, while essential, was sometimes missing from regional approaches.

All the organizations selected as best practice cases communicated to the broad community in a number of ways. All maintained organizational websites with information about programs and initiatives, contact information, and organizational descriptions. While some organizations had forms and service applications available online, others did not. Some

organizations provided large catalogues of data, including annual reports, accreditation certificates, research and planning documents, and newsletters. Public documents and forms for success cases were clear and transparent about practices, conditions of service use, and governance.

Partnership development and maintenance required attention to ongoing communication, clarity of goals, transparency, exchange of resources, and respect. Respect was a common value, both for the rights of people served and for the Aboriginal community at large. The development of partnerships required time and resources that were committed by the organizations and their funders.

Involvement in Policy Dialogue

One of the potential benefits of greater collaboration in the homelessness sector might be improved public knowledge, particularly about the needs of Aboriginal people. Some participants believed that challenges facing the homeless community were at least partly caused by a lack of awareness and understanding about the field and the people it serves. Organization's fundraising and public education efforts could highlight the continuum of services needed, and the public dialogue could shift from a focus on only the "hard to house" to include the many other types of homeless people.

I think if the general populous understood the damage done by the residential school system and the damage done by The Indian Act, they would have a much better appreciation of what Aboriginal people have to struggle with and be much more empathetic... You know it's a vicious cycle that Aboriginal people have gone through with the intergenerational effects of the residential school system and to a lesser degree, The Indian Act, but all that 'great white father' taking care of folks thing, does not work. (participant 70)

While there are some people who will never be permanently housed independently, because the

standards for housing do not match their lifestyle choices or their capacity, these need not be the focus of public dialogue:

Across from us here there's this field and each year there's four guys who set up kind of a little teepee tent with blankets and that's where they stay from the minute the ground melts to, till when there's still snow on the ground, they stay there. This year there was six of them and you know I mean they come here... We give them food and when we have extras, stuff like that and I've talked to them. They do not want housing. They want to live like that. I look at that and I say 'okay but you're part of our homeless count'. And I was telling them that and they said 'well tell them not to count us'... I'm not being critical of them because I respect that if that's the lifestyle someone insists on having, then that's their right. (participant 61)

The general public and policy makers need to be able to understand that this is not a failure of the homelessness sector and that best practices exist along a continuum of services.

Flexibility to Respond to Community Needs

There was a focus in these cases on moving people through the housing continuum according to their needs, if possible working within one organization which simplified intake and lessened the chance of people falling through the cracks. The organizations tended to be community based and able to respond to emerging issues either within the Aboriginal community or for a particular sub-population of homeless people. Flexibility and being connected through partnerships allowed organizations to respond to changing realities in the homeless serving field.

We have a lot of addiction issues in the community. We have a lot of issues period in the community, domestic, whatever the situation, and

the foster care system hasn't been that great in our community. So with the help of the provincial government, we did a partnership agreement that we would get a shelter up and running for the Moms because a lot of times a lot of those Moms lose their children because they're homeless, got no place to live and so the children go into care and so we have set up shelters. (participant 61)

Cultural Continuity & Community Participation

Every success case organization had policies and activities attending to the specific needs of Aboriginal populations. Consultations they held showed homelessness for Aboriginal people would only end when the community of Aboriginal people was able to impact programming and policy. Organizations that served a large number of Aboriginal people but were not Aboriginal attended to capacity building in the wider community, integrating Aboriginal issues into their business model, and providing the resources necessary for Aboriginal people to develop their own mechanisms for ending homelessness in partnership.

All organizations addressed the specific challenges and barriers that existed within Aboriginal homeless populations, and acknowledged individual connection to traditional culture, cultural continuity, was important as was developing new ways to live and work in the non-Aboriginal culture (e.g., cooking, employment training, FASD specific programming, and assistance removing children from provincial custody). A depth of understanding included awareness that cultural customs differed around issues like child rearing, as well as facilitating programming for cultural re-connection through ceremonies, arts, and traditional teachings (e.g., pipe ceremonies, feasts, full-moon ceremonies, powwows, smudging, drumming and singing, crafts, naming ceremonies, and traditional teachings delivered by Elders). Doing things like providing Aboriginal imagery in buildings helped show respect for Aboriginal culture.

Access to Elders by clients was ensured, but boards and committees also respected the need to have the wisdom of Elders. Non-Aboriginal organizations that engaged with Aboriginal communities seemed either to be more attuned to holistic and family-centred views or to have grown into these as a result of the engagement. In the cases where Aboriginal programming was provided by another organization, the participants did not explain whether their organization paid for this in some way.

One issue of success was being blind to official status of an Aboriginal person. This also implied that the cultural services were varied, as urban Aboriginal peoples have diverse backgrounds.

Collaboration was essential to their success as organizations serving Aboriginal people, and the majority described collaborative practices. These ranged from working with the homeless serving field in general, to communities in which homeless facilities were situated, to granting and regulating bodies. They also frequently encouraged participation of clients and homeless populations in development of policies and procedures.

We don't do anything without talking to our community. We're a community owned organization. We're a community run organization and [we do] tons of consultation. We don't make decisions in the dark. We don't make decisions without consulting with our community and that's the Aboriginal community, that's the homeless serving community, it's everyone that's involved in this work. (participant)

People in residences, for instance, were asked to participate in regular meetings with staff to discuss the operations of a facility. Program evaluations by service users were another way to obtain feedback and to assess policies and procedures. Resident input into programming was seen to increase a sense of ownership and accountability. This was often also part of creating a sense of community for people.

One of the important aspects of consultation and community participation reported was the perception that advice was heard and used. This increased credibility that the organization was genuinely intent on serving the Aboriginal population well.

Credibility & Reputation

The importance of community perceptions of the organization was expressed in many ways. One way was credibility and respect created by the governance bodies – boards and managers. Trust in the organization was an important related outcome. Some of the cases had a board of directors that was entirely Aboriginal, while others had Aboriginal representation on their boards. The key, whether it was an Aboriginal or a non-Aboriginal organization, a totally Aboriginal board or a mixed board, was that the practices reflected serious attention to Aboriginal populations and their ways of being and were respected by the broader community.

Having the support of the broader Aboriginal community as well as of the homeless serving community helped organizations in being able to secure housing and buildings. Reputation in the local community impacted the trusted placed in the organization by both local and regional partners and funders.

...it all comes from years of working together and building those partnerships because getting that trust and the commitment and having cooperative partnerships, and of course we definitely need the funding from the government and so it. It took years to do that and I think that's a big piece of why we're where we're at today is because we have that support, we've built the credibility and government will come to us now. (participant 61)

Staffing

Job descriptions outlined the responsibilities, regular activities, and qualifications of positions within organizations and businesses. They also provided a public window into organizational culture, priorities,

and standards. Organizations were asked to submit their job descriptions for this reason and eighteen were collected from the six organizations.

In general, organizations appeared to have flexible criteria for experience (including education and job experience) required for positions, except for management positions and in jobs where specific certifications were required by law (e.g., membership in a professional organization or medical training). This flexibility allowed organizations to hire individuals who had struggled with homelessness or other issues (e.g., addiction or substance use) in the past, and reflected a value in hiring “peers” as staff. The life experience of these individuals afforded them the opportunity to better understand homeless people and participate in program development from an end user perspective. A unanimous standard was a criminal record check or confidentiality guarantee, even for organizations that made it clear that people with criminal records would not be excluded and would even be welcome members of a staff team.

Some position descriptions listed knowledge of Aboriginal culture or issues affecting homeless people, or both, as assets of potential candidates, but not all. Of the 18 job descriptions submitted, 56% listed empathy or respect for homeless people as an asset or requirement. Meanwhile 67% noted that working with stakeholders was a function of the job or a required skill (i.e., ability to communicate across agencies and governments). In general the organizations demonstrated a requirement for high functioning staff who could work independently, be flexible, provide leadership, and demonstrate empathy for the clients. Investment in the well-being of the Aboriginal community was implied or stated.

While organizations did not have all Aboriginal staff, participants noted the staff element that made their organization effective was the inclusion of Aboriginal people at all levels. Organizations maintained positions for Aboriginal people on

boards and in upper level management positions for maintaining Aboriginal relations, as well as in front-line positions. They ensured that management had both an understanding of the local homelessness field, and awareness of the needs of specific groups that are especially impacted by homelessness, such as Aboriginal people. In one case, each staff team had at least one Aboriginal staff person.

Organizations also maintained high standards in human resource management, such as, regular evaluation processes to ensure staff complied with policies (e.g., harm reduction). They provided diverse training opportunities on an ongoing basis, and it was the individual staff member’s responsibility to make time for training.

Any work we’re doing with an individual client is absolutely based on what they want to do today, not what we think they need to do but what they want to do and that can be a difficult stance to take and it’s hard to stay truly committed to that. It’s easy to stray because there’s a lot of very compassionate staff here who really want to see people succeed in either their lives overall or [see their] physical health improve, because they genuinely care and if you do slip into a mode where you start to move from hearing what the client is really wanting to do to a place where you are making gentle and not so gentle suggestions about what they should do so that’s something that we’re always talking about, always watchful to ensure that we’re not slipping. (participant 185)

Volunteer Programs

Successful volunteer programs were a component of successful operations. Often clients returned to volunteer at the service or to support the Aboriginal community in other ways. Volunteer programs also provided a sign of community acceptance of the organizations and opportunities for participation in policy development. Former clients often became peer educators or counsellors, participating in service delivery or public education.

Successful volunteer programs identified the required specific skill sets, with roles and responsibilities well defined and they identified the time commitment required. They might have a trial period, and have candidates agree with the organization's philosophy.

Success in Service Delivery

Of course an organization was not considered successful unless it was seen to deliver effective services that made a difference to the homeless populations. It was clear that across the homelessness continuum of services, different models and policies had to be faced. These cases generally adopted a harm reduction model in services (e.g., substance use was not forbidden); however, this was not true across the board. In transitional and long-term housing where supports for other problems were being provided, substance use was often forbidden. This was for the benefit of both the individual and the community within which they lived. Every organization described models for individuals' gradual movement towards independent living in the modern world, through stages of growth as necessary; therefore, those not ready for substance free living would be found an alternative.

Accessibility to services was the most commonly mentioned practice that success case studies described in response to queries about their effectiveness. The term accessibility was used to describe practices that are connected to a harm reduction approach, such as being non-prescriptive, being status blind, or having flexibility in programming, reporting, and spending. Homeless people were viewed as autonomous and with a right to their own decisions. Practices that improved outcomes were to provide support to individuals regardless of their current desire (or disinterest) in housing, and to providing housing in general. A comprehensive referral process which built trust and empathy, and reduced barriers to other services also aided success. Some organizations afforded clients several chances to succeed, for instance,

when they failed to meet rental agreements; but the continuum model was used both ways; if individuals didn't meet minimum standards, they were moved out of their current accommodations until they built the skills to return. This may have occurred when individuals relapsed into heavy drug use, or became involved in illegal matters.

Involvement in Evaluation & Other Research

All of the organizations were involved in program evaluation or other research activities and they supported the development and sharing of best practices across the housing service continuum. One service, for instance, held follow up face to face meetings with staff at partner organizations to determine the success of the referral they had made, and to determine any other support the person might need. Several used methods of needs assessment and program analysis to determine program needs. This included the consultation and community participation and engagement discussed above. It was noted that organizations needed to be provided with the resources to conduct evaluations to ensure their programs were effective and efficient. The challenge of documenting community knowledge so that funders and policy makers recognized its validity was also noted.

The importance of research in producing regional plans was also highlighted.

CONCLUSIONS

Success in delivering services to Aboriginal homeless populations requires organizational maturity, good governance, and good working relationships with the Aboriginal community as well as with the broader homelessness serving sector. Cultural continuity is a fundamental part of the services provided to Aboriginal peoples and takes place with an organizational culture of respect and relationship building. People in organizations across the continuum of services addressing homelessness

develop best practices in meeting the needs of the population as defined by their mandate but they do much more than that. They use evaluation research to assess the needs of the Aboriginal homeless and they are flexible enough to be able to respond to those needs. They are knowledgeable of local political and social factors that impact the work of the homelessness sector. Their organizations are engaged in effective partnership development and maintenance both for the provision of effective services and for building internal capacity to respond to the community. Community engagement is a fundamental tool for success and helps ensure credibility and a reputation that facilitates access for homeless people and access to the decision-makers when advocacy for the homeless is needed. Successful organizations utilize sound human resource policies that ensure high standard staffing and effective utilization of volunteers. The whole organization is engaged in ensuring cultural safety for Aboriginal peoples.

Phase 4: Assessing the Capacity in Calgary to Undertake Collaborative Work to End Aboriginal Homelessness

The intent of Phase 4 was to build upon work previously done in Calgary. This chapter thus provides an example of community environmental scanning and assessing the capacity to move forward with community work to develop a network of organizations committed to solving Aboriginal homelessness. People from other cities can assess whether similar work is needed their community.

Twenty-five organizations within the Calgary region were selected for an additional round of interviews. From the database created in Phase 1, fifteen organizations were selected based on their attendance at a community gathering previously held in the Spring of 2010 (Bird et al., 2010) as this had demonstrated some interest in collaboration, and the remaining 10 were selected through random sampling of the remaining Calgary organizations in the database.

In advance of data collection, the selected organizations were first contacted by a research team member to be made aware of this research and its relevance to their work in the community. A research assistant then called each of the organizations by phone, asked to speak to an appropriate representative, and conducted an interview consisting of three questions related to their interest and ability to participate in collaboration with Aboriginal communities to end homelessness in Calgary ([Appendix 5](#)).

The 25 interviews were recorded and transcribed verbatim and were coded according to answers to the specific questions and general themes. An analysis of secondary sources was completed on published research as well as grey literature in order to assess the context for Aboriginal homelessness activities in the Calgary CMA.

We begin with a description of the context for planning around homelessness prevention in Alberta and Calgary. This is followed by results from the survey and conclusions.

A PLAN FOR ALBERTA

While Calgary has its own action plan, the provincial government has also put into place a strategy to end homelessness. In Alberta, homelessness falls under the Housing and Urban Affairs department, which also manages affordable housing issues and neighbourhood revitalization. In 2008, in cooperation with the Premier's office, the Housing and Urban Affairs department announced its "Plan for Alberta: Ending Homelessness in Ten Years" (Alberta Secretariat for Action on Homelessness, 2008). The implementation of the plan was to be overseen by a newly created Alberta Secretariat for Action on Homelessness. Alberta's plan was developed in consultation with the seven largest cities in the province and was informed by successes and challenges identified by other regional ten year plans.

Alberta's plan includes seventeen strategies based on seven guiding principles. The majority of these strategies are concerned with improving management of and access to provincially operated systems, as well as providing the necessary supports for localized regional plans. One unique element of Alberta's Plan is that it identifies eight barriers or causes of homelessness including household income not keeping pace with cost of living, high rates of immigration, shortage of affordable housing, societal attitudes creating housing challenges, homeless-serving agencies under strain, lack of coordination in mainstream systems, groups with special situations requiring particular attention, and regulatory complexity and inefficiency. The strategies outlined

in the plan are aimed at alleviating these specific challenges, and the guiding principles describe the spirit in which activities should be undertaken.

It is interesting to note that within the plan, Aboriginal people are not listed as a “group with special situations” nor are the specific issues they face in achieving housing described under the heading of “societal attitudes creating housing challenges”. Despite the fact that Aboriginal people are the most over-represented segment of the homeless population in Alberta, the word Aboriginal is used in the Plan only once.

ALBERTA SECRETARIAT FOR ACTION ON HOMELESSNESS

In 2010, the Alberta Secretariat for Action on Homelessness developed an Alberta Homelessness Research Consortium (AHRC). The Consortium was initiated in order to support the collaboration of research efforts across the province, and to provide some support to the dissemination of new and relevant studies. One of the first actions of the AHRC was to conduct an environmental scan of homelessness related articles and reports, as well as a study of research related capacities in Alberta specific to homelessness.

The Environmental Scan summarized peer reviewed academic literature, as well as relevant reports and documentation produced in other settings (Kovacs Burns & Richter, 2010). Combined findings of both the peer reviewed articles and grey literature showed limitations in the research occurring within Alberta on homeless related topics, with 24 published articles, and 232 grey reports. Approximately 49 of the unpublished reports were concerned primarily with issues in Calgary. In addition to these, the grey reports included Calgary homeless counts (which took place every even year between 1992 and 2008), two articles about the count’s operation, as well as ten research summaries (2006) and twenty four research briefs (2007) published by the City of

Calgary which were also focused on counts of homeless populations. Still, this scan revealed more than was reported in Chapter 2 from The National Housing Research Committee (NHRC) website.

The Environmental Scan illustrated Aboriginal homelessness is not a well researched concept. The first summary, an annotated bibliography of published homelessness research literature (1990 – 2010), contained only three articles that specifically and purposefully addressed the unique context of Aboriginal people and homelessness. Meanwhile only two articles that focused on Aboriginal homelessness were identified in the grey literature on homelessness research in Alberta 1990-2010. While the scan is acknowledged to be somewhat incomplete, the gap in data specifically concerning Aboriginal issues in homelessness specific to this region is obvious.

RESULTS OF PHASE 4

Interest in Collaboration

The majority of participants (92%, n=23) expressed interest in collaboration between the Aboriginal community and Calgary homeless serving agencies on a long-term strategy to address Aboriginal homelessness. Only 61% (n=14) felt they had the capacity to participate, while the other 39% (n=9) said only that they might have the capacity.

The underlying reasons for their willingness to collaborate varied from being ‘the right thing to do’ to being an organizational priority. For the latter, cited by about a third of those interested in collaboration, this priority arose because a majority of clients that accessed their agency were Aboriginal. Participating in such a collaboration would assist them in determining effective ways to support this population.

Consistently between 50 and 60 % of our clients are Aboriginal so yes, absolutely, we would be interested in collaborating. (Organization 21)

There's an interest and I think it's an organizational priority to address the demographic that we see here..., probably half of the individuals that come here for services are Aboriginal. (Organization 5)

We want to create community and then be able to rely on and work on a collaborative basis with agencies in the community that can support the specific needs and have the expertise to provide that type of support and services to the individuals based on whatever their personal and individual circumstances are. (Organization 23)

Existing collaborative efforts with other agencies was also cited as a reason for participant interest. These collaborations are driven by either pragmatic considerations or implicit acknowledgment of the role of culture in providing effective services or programs for Aboriginal homeless people.

Others fell upon the referral of clients as the notion of collaboration or thought of collaboration only in so far as it did not require change in their organizations.

From an Aboriginal perspective, I mean we really, have always said we don't know anything about the culture, we can't we don't try to meet the need of culture... we would lean on the Aboriginal Friendship Centre or something to come around, someone who is looking for an Aboriginal culture to do things with them to help bring them back into that side of things, and you're willing just to provide them a bed to sleep on at night, so we think that is important. We also know that cultural things are important but we're not the ones that do that. (Organization 30)

Thus the all too common confusion about what partnerships and collaboration entail was evident.

Capacity for Collaboration

Although the initial interest in collaboration was clear for some participants, many stated organizational capacity needed to be considered

before it was undertaken. Those working in homeless serving organizations and human services were inclined to express an interest in collaboration but they were pragmatic when probed. All respondents (regardless of their interest to collaborate) qualified their responses with conditions and assumptions of the collaboration as well as concern about the level of time commitment and amount of work required. The most common word used by organizations in Calgary in discussing their capacity to participate with the Aboriginal community and homeless serving organizations to end homelessness was "stretched." "If organizations are already stretched and aren't able to, you know, move things over, it [collaboration] can fail just based on lack of resources" (Organization 1). Being stretched was linked by some participants to insufficient funding for staff work: "There's already not enough hours in the day to complete that tasks that are trying to be done" (Organization 19).

Resource concerns were considerable in participants' dialogue; their ability to invest the necessary time and energy into collaboration with Aboriginal organizations may have been overestimated. About half described the relationship between funding, staff, and time as a barrier to collaboration.

Half of participants (n=14) suggested their organizations had resources to contribute to a collaboration, drawing on the key organizational strengths, namely, support services, experience or expertise, staff, and time. Some participants stated, for instance, that they might not have housing to offer (due to limited availability or because this aspect was not part of their service delivery), but they could contribute to direct support or wrap around services in collaboration with other agencies:

Certainly we do have healthcare we could coordinate, but I think that we, we do sort of long term support and so that's helpful when folks are looking to end their homelessness, it's more than

just housing, so we don't have the housing we can provide at this point, but we can do all of the support work that goes with that (Organization 11).

Some participants felt their experience and knowledge of successfully assisting people out of homelessness would be of benefit to other agencies addressing Aboriginal homelessness. Some participants noted that the extent of the demands of collaboration and the needed resources would have to be tailored to their agency's capacity: "It would depend on the intensity of it, so that's a tough one to answer" (Organization 6).

Supports Required for Successful Collaboration

Key components identified for collaboration to be successful and the number of participants included: Aboriginal leadership and governance (n=4); clear articulation of the goals, expectations and resource requirements for the collaboration (n=5); and good communication or coordination (n=3). Funding to support the collaboration was mentioned by about half (n=12), and human resources was the next most frequent response (n=11), followed by time (n=8). Funding was also linked to ensuring not only the provision of an organization's core services or programs, but allowing staff to have the time to participate in collaboration. As this participant

articulated, even directors who may not be doing front-line work have time limitations: "It really comes down to human resource hours at the end of the day and what can our directors engage in beyond what they are doing" (Organization 29). A lack of capacity within Aboriginal populations was also mentioned:

There's a limited number of Aboriginal [workers] from the field...there's certainly some outstanding individuals in the field, but there's just not very many of them, so when it comes to Aboriginal homelessness, certainly more Aboriginal people within the field...would make a big difference to bring that cultural awareness and sensitivities (Organization 13).

Several participants commented on the importance of leadership and coordination to successful collaboration. The need for an individual to be responsible for leadership and coordination of the collaborative was described by some as being critical to success. Some participants noted that their involvement with the Aboriginal Standing Committee on Housing and Homelessness was providing experience that was a potential asset for future collaboration, but the potential of this organization in terms of leadership was not raised.

THE ABORIGINAL FRIENDSHIP CENTRE OF CALGARY'S ABORIGINAL HOMELESS OUTREACH AND CULTURAL RECONNECTION PROGRAM

* With permission from the AFCC, its staff and the author, information for the Calgary Case was taken from the contracted evaluation of the AHOCRCP: Oelke ND. (2011). Aboriginal homeless outreach and cultural reconnection: Evaluation report. Calgary, AB: Aboriginal Friendship Centre of Calgary.

In 2009, the Aboriginal Friendship Centre of Calgary (AFCC) received funding to implement its Aboriginal Homeless Outreach and Cultural Reconnection Program (AHOCRCP). The program's overarching goal was "to assist homeless Aboriginal people in Calgary find and maintain appropriate housing, increasing appropriate housing choices for homeless Aboriginal people in Calgary" (AFCC, 2010). A key objective was to provide cultural reconnection for Aboriginal homeless people in Calgary. Through this program, the AFCC worked in partnership with non-Aboriginal agencies to provide services to Aboriginal homeless people, including cultural supports and activities. It also facilitated Aboriginal Awareness Training for agencies and their staff. The AHOCRCP employed a coordinator and two outreach workers.

Outreach Services

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

Cultural Services

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

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

Successes of the Program

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

Challenges Encountered in the Program

Capacity of the program overall, and in particular the outreach workers, was a major concern. Space and insufficient funding were also concerns. Aboriginal Awareness Training was deemed important but needed to be offered more frequently. Further, regular update sessions needed to be considered as one session really only served as an introduction and also did not support the frequent staff turn-over that occurred in organizations. Finally, improved data collection and analysis for monitoring and evaluation were identified as needed.

Summary

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

It is notable that alongside its program delivery, the AFCC also built a partnership with researchers from the University of Calgary to identify and address the needs of urban Aboriginal homeless peoples. The AFCC and those same researchers continued the partnership through their collaboration on this project, Improving Housing Outcomes for Aboriginal People in Western Canada, and the partnership appears positioned to continue to play a role in advocacy.

CONCLUSIONS

From 2006 to 2011, Calgary has seen unprecedented development of housing and homelessness strategies, which have recently been showing signs of general effectiveness. In this city, Aboriginal people have met increased success in affecting policy, practices and procedures that impact Aboriginal homeless people. For examples, we point to the inclusion of Aboriginal homelessness as a priority in the strategic plan of the Calgary Homelessness Foundation (CHF), the appointment of two people to represent Aboriginal populations on the CHF Board of Directors, the hiring of an Aboriginal Outreach worker by the CHF, and the funding of an Aboriginal Community Liaison position for the Aboriginal Standing Committee on Housing and Homelessness.

The results from this phase of the study suggest that building a community-wide response is possible. They also suggest that efforts to develop community partnerships are best spent with organizations that see partnership as something different from what they are already doing and who would undertake the work of partnership development. Organizations willing to commit resources both to the service to be delivered and maintenance of the partnership are a natural starting point. Funders can facilitate successful partnership development by allowing for the time needed for development of the relationships and supporting the need for evidence of clarity of understanding, goals, commitment, etc. This could avoid creating a lot of ‘partnerships’ that are simply referrals to an already stretched Aboriginal organization. The capacity of the Aboriginal community could be supported by universities and colleges developing a certificate program specifically concerning Aboriginal homelessness. For example, the CHF did support a certificate program, *Working with Homeless Populations*, developed through the Faculty of Social Work at the University of Calgary based on the underlying philosophy of Housing First. A specialty program for Aboriginal peoples could be considered since a particular gap has been identified.

Conclusions and A Model for Best Practices

The data collected in Phase 1 of this study show clearly that the homelessness serving sector is different in each city and in each province. Services directed at the same sub-population differ in significant ways, such as, governance and number of clients served. This is as should be expected as programs develop in the here and now, evolving in a particular political context and succeeding when people put in the needed resources to make them succeed (Brinkeroff, 2002; Pawson, 2006).

On an individual level understanding what services are delivered to various sub-populations (e.g., women leaving abusive relationships, the low income wage owner who cannot afford rent, the schizophrenic who has difficulty with treatment regimes) are opportunities to exchange information on successes and innovations, “What did they use that worked?” (Brinkeroff, 2002, p. 142). A key to knowing when something *works* is understanding with whom and under what circumstances *it* (the innovation) worked in the other setting. The experts then return to their organization and assess if the circumstances are favourable for success in their settings. What is needed is much more systematic collection of evaluation data on processes and outcomes in the homelessness sector so that these conversations can take place. With Potvin and McQueen (2008), we argue, however, that process of evaluation should be health promoting for the communities involved. There are efforts underway to make the regular and systematic review of research happen, even for Aboriginal homelessness initiatives, through the Canadian Homelessness Research Network.

The conclusions on best practices for ending Aboriginal homelessness that we draw from this study suggest a few steps that are essential. These

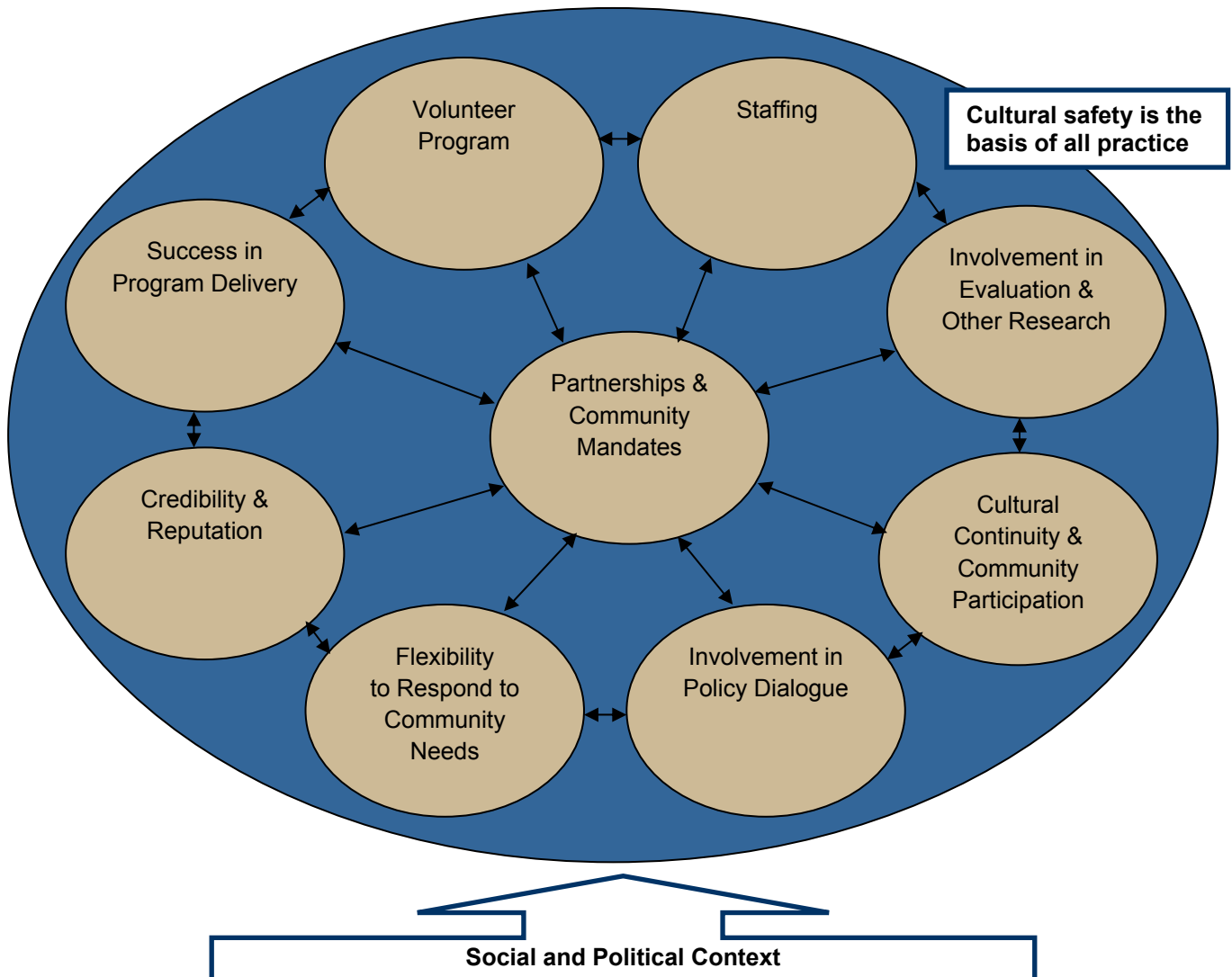
steps, however, require relationship building – not a simple process, but one that can be satisfying and productive in the long run. There are no recipes for success, such as characterized in Box 1 – which we emphasize is a joke in case that is the only thing read. Too many efforts in the past have been that simplistic, however, well-meaning.

The characteristics of successful programs identified in this study (Figure 3) are based on an understanding of cultural safety. Cultural safety requires everyone, in particular non-Aboriginal peoples, understand some of the history of Aboriginal peoples in Canada, and to respect that most Aboriginal peoples want to reconcile with the rest of Canada (Truth and Reconciliation Commission, 2011) after decades of discrimination and abuse. The materials available for study, for staff or board development and so on are extensive (Aboriginal Healing Foundation, 2011; Truth and Reconciliation Commission, 2011). Cultural safety goes well beyond understanding *cultural practices*, and appreciates that all cultures are evolving. What one Aboriginal person views as *traditional* Aboriginal practice may vary from what another sees as traditional. Engaging in a prolonged relationship is therefore important to the learning process. People in the successful organizations came to view the well-being of the whole Aboriginal community as part of the mandate being addressed, which meant that partnerships were relationships worth developing and maintaining, even if their service was strictly for homeless people. Enabling cultural continuity to a variety of Aboriginal people in one service is made possible by these partnerships and broader community partnerships. Networks develop that facilitate referral and community building. Successful clients become part of these networks and can return as staff or volunteers.

Accountability through involvement in evaluation and research, partnerships, and being responsive to what the community says is needed to build credibility and reputation. Success in program delivery which occurs when there is good governance and attention to staff and volunteer development can breed success in other areas, such as fund raising. Helping Aboriginal organizations to build capacity and develop these reputations is therefore part of ending Aboriginal homelessness. The research showed that success in addressing

Aboriginal homelessness requires a strong presence of Aboriginal organizations. A best practice framework follows and includes suggested actions for moving forward. People in some cities or communities will assess that they have already made progress in many areas. In Calgary we learned that we have an openness to collaboration but a need for resources if partnerships are to develop. We are, however, hopeful for the future and hope that this research aids the reader in finding hope in their own work.

Figure 3: The Elements of Success in Programming for Aboriginal Peoples



THE BEST PRACTICE FRAMEWORK

Component of Best Practice	Activities
1. Cultural safety is foundational for all organizations and staff to provide respectful and appropriate services for Aboriginal peoples	<ul style="list-style-type: none"> • Cultural competency is essential • Cultural safety must occur at all levels of the system for homelessness people (e.g., organizational, leadership, and staff) (Oelke, 2010) • A culturally safe environment is required to ensure respect for Aboriginal peoples
2. Partnership and relationship building is critical in fostering a collaborative process to address the many needs of Aboriginal homeless peoples & create cultural safety	<ul style="list-style-type: none"> • Collaboration between non-Aboriginal organizations and non-Aboriginal and Aboriginal organizations is essential • Supports for collaboration are necessary including funding, human resources, and time
3. Aboriginal governance and coordination of homelessness services needs to be supported	<ul style="list-style-type: none"> • Currently there is a lack of recognition for the need for Aboriginal leadership in the homelessness and housing field • Given the gross over representation of Aboriginal peoples among the homeless population, Aboriginal leadership is essential • Aboriginal leadership is essential to begin to address the root causes of homelessness
4. Adequate and equitable funding is required for Aboriginal specific services	<ul style="list-style-type: none"> • Western provinces may need to consider the establishment of an Aboriginal specific funding process to align with the existing federal initiative
5. Research and evaluation is required to better understand best practices for Aboriginal homelessness	<ul style="list-style-type: none"> • Opportunities for research need to be explored • Partnerships for research should be developed between Aboriginal community organizations and academic researchers • Ethical principles for research with Aboriginal peoples must be incorporated (CIHR, 2007; Schnarch, 2004) • Appropriate data collection systems are required by homeless and housing services • Evaluation approaches should incorporate Aboriginal worldviews (Small & Bodor, n.d.)
6. Increased number of Aboriginal staff working with the homeless population	<ul style="list-style-type: none"> • Number of staff must meet the proportion of the population of Aboriginal homeless peoples • Training must be accessible to ensure a qualified Aboriginal workforce to work in the homelessness and housing field
7. Cultural reconnection is the cornerstone of addressing the needs of Aboriginal homeless peoples	<ul style="list-style-type: none"> • Outreach and cultural services should be key components of Aboriginal specific programming for the homeless

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Appendices

Appendix 1. Definition of Terms

Aboriginal: people of First Nations, Inuit, or Métis descent.

Aboriginal model: a model, developed by or in partnership with Aboriginal people, which takes into account their historic and present-day experiences, world views and values (e.g., respect of the roles of Elders in decision-making, consensus models, spiritual centering practices, priorities of family, value of physical environment).

Aboriginal organization: an entity that is run by Aboriginal people, usually in order to serve the Aboriginal community.

Aboriginal status: the currently accepted term for defining an individual's ethnicity in the context of being Aboriginal or not. Aboriginal status is not uniformly defined; people with Aboriginal Status may be people who are legally considered Aboriginal by the Government of Canada, or they may self identify as Aboriginal.

Aboriginal worker: a person who self-identifies as Aboriginal that works within the homeless serving field.

Affordable housing: housing units which are deemed accessible to people earning a living at or above the poverty line.

Bottle picking: an economic activity often engaged in by homeless individuals, where recyclables are collected and exchanged for cash at a recycling depot.

Collaboration: clearly defined work between different entities in order to achieve a specific goal.

Community residential facilities: transitional residences that are used within the justice system as part of reintegration strategies.

Consultation: activity of seeking out local information from community members.

Continuum of care: a range of services for homeless people that aims to meet all their needs in order to transition them out of homelessness.

Detox: short for detoxification, treatment designed to rid the body of alcohol and/or other drugs.

Engagement: a process by which relationships are built between organizations, governments and/or individuals.

Harm reduction: practices that aim primarily to reduce the adverse consequences of behaviour.

Homelessness industry: a term used to describe the community of people who work with the homeless, directly or indirectly, or who work towards ending homelessness.

Housing First: an approach to ending homelessness which aims to house people in independent permanent housing and to provide services which will prevent them from returning to homelessness.

Appendix 2. Letter Sent to Organizations in Each Participating City

Organization Name
Address

Dear *[Insert Name]*

I would like to inform you of the research project “*Improving housing outcomes for Aboriginal people through the assessment and development of practices, policies and procedures*”, recently funded by Human Resources and Skills Development Canada, Homelessness Partnering Strategy. The overall goal of the project is to increase the number of Aboriginal people who are successfully housed in Calgary. To achieve this, we hope to better understand current practices and identify best practices for Aboriginal housing in other western Canadian urban centres. We are conducting an environmental scan of current housing practices and models in these urban centres. This information, along with Calgary specific information, will be used to develop a best practice model for Aboriginal homeless people and will be shared with all the participants and nationally.

Your city has been selected as one of the western Canadian urban centres of focus and your organization has been identified through our initial web-based search of housing services available in the city. We invite you to participate by describing the housing practices for Aboriginal people in your city. We are interested in the services provided by your organization, as well as the identification of other organizations that you are aware of in your city that provide housing services to Aboriginal people.

You will find attached a list of organizations we have identified to date. **Please review the list and add any additional organizations that we have missed.** Once you have completed your review of the list, please send any changes or additions to Brittney LaPietra at blapiet@ucalgary.ca by *[insert date]*. If you do not have email, please mail it to the address above. A copy of the final report will be sent to you at the end of the research project.

Thank you for your willingness to participate and your assistance with the study. A research assistant will be following up with you in the next couple of weeks to get your information if we have not heard from you by then. Should you have any questions, please do not hesitate to contact myself, Dr. Thurston, project Principal Investigator, at (403) 220-6940 or thurston@ucalgary.ca, or David Turner, project Co-Investigator & Aboriginal Homeless Coordinator at the Aboriginal Friendship Centre of Calgary, at (403) 270-7379 or dturner@afccalgary.org.

Sincerely,
Dr. W.E. Thurston
Department of Community Health Sciences
Faculty of Medicine
University of Calgary

Appendix 3. Database Categories of Information

ORGANIZATIONAL INFORMATION

- A. **Name of Organization** – if there is a difference in name between the main organization and the housing service, please make a note of that. A & C will be used for mailing purposes.
- B. **City in Which located** – Winnipeg, Regina, Saskatoon, Calgary, Edmonton, Victoria, Vancouver.
- C. **Address of Organization** – mailing address.
- D. **Phone Number** – number where administration or spokespeople can be reached.
- E. **Contact Person & Position** – name and position in organization of person who provided the information.
- F. **Aboriginal Specific** – Yes or No (yes= service designed specifically for Aboriginal people).
- G. **Governance Structure** – insert one of: Aboriginal NGO (non-governmental organization); non-Aboriginal NGO; Band Council owned and operated; municipal government run organization; provincial government run organization; federal government run organization.

HOUSING SERVICES AND PROGRAMS PROVIDED

- H. **Advocacy and Referral** – Yes or No (yes=will do advocacy and referral with other organizations to help client get housed).
- I. **Shelter** – Yes or No (yes=provide emergency and short accommodation).
- J. **Transitional Housing** – Yes or No (yes=provide more than emergency accommodation – longer stays but not permanent housing).
- K. **Long-term** – Yes or No (yes=secure long-term housing as long as client chooses to stay).
- L. **Aboriginal Cultural Healing** – Yes or No (yes=organization provides specific programs for Aboriginal people around their cultural traditions for healing, e.g., sweats, elder meetings).
- M. **Specific Focus** – does the organization have a specific focus on certain homeless populations (list the actual focus - e.g., mental health, addictions, abused women).

POPULATIONS SERVED BY AGE AND SEX

- N. **Women** – Yes or No (Yes= usually considered women over the age of 18, may take the occasional teenager).
- O. **Men** – Yes or No (Yes=usually considered men over the age of 18, may take the occasional teenager).
- P. **Children & Adolescents – male** – Yes or No (Yes=will take males under the age of 18).
- Q. **Children & Adolescents – female** – Yes or No (Yes=will take females under the age of 18).
- R. **Families** – Yes or No (Yes=will take adult parents and children together).
- S. **Seniors** – Yes or No (Yes=will take seniors -aged 65+ - even without children).

SIZE OF PROGRAM

- T. **Number of Beds** – insert number or NA for not applicable.
 - U. **Number of Apartments or Separate Units** – insert number or NA for not applicable.
 - V. **Length of Stay Permitted** – insert number and indicate days or months (e.g., 2 days, 6 months) or NA for not applicable.
 - W. **Number of Staff** – number of staff working in the organization – if the organization has several programs, take the number for the whole organization – see X (approximate count is acceptable and include part time and full time).
 - X. **Number of Housing Staff** – number of staff working ion the housing program (could be the same as W or could be a subset of W).
 - Y. **Number of Clients Per Year** – insert the reported number of clients that the organization serves on average per year or last year if that is what they can recall.
 - Z. **Proportion of Aboriginal Clients** – insert what percentage of the clients served per year are Aboriginal
- AA. **Cultural Training for Staff** – Yes or No (Yes=organization requires that staff have training or experience in Aboriginal history and traditions)

Appendix 4. Phase 2 Script and Interview Questions

INTRODUCTION

Hi, my name is _____.

I'm calling from the University of Calgary. We had an interview scheduled today so we could talk about your opinions on best practices when working with **Aboriginal people who are homeless**. **pause for response**

Thank you for agreeing to talk with me, and for your participation in this research project. I anticipate the interview will last about 20 minutes, and appreciate any information you can provide. This interview is important for the success of this assessment, and it will serve to increase our understanding of the best ways to meet the needs of **Aboriginal people who are homeless**. Your answers are completely confidential and will be coded and recorded without names. Although your responses will only be reported as part of a group, it is helpful for accuracy to record your responses. Is it okay if I tape record this interview? **pause for response**

You can also stop the interview at any time or withdraw from the research project at anytime if you do not wish to continue. Do you still agree to participate? **pause for response**

Ok, let's begin.

QUESTIONS

1. Your organization provides services to (population served) _____ and _____, what are the best practices for Aboriginal _____ and Aboriginal _____?
2. Do you have opinion on the best practices on other populations like _____? How about _____?
3. You haven't mentioned : Governance (aboriginal owned or operated ? does it matter) , Funding source , Sustainability , Partnerships, Cultural Competence
4. In your city what are some examples (look for 4) of the organizations doing the best for Aboriginal homeless populations? (Probe: **Aboriginal** Youth, Women, Men, Families)
5. What about the organizations/programs make them the best?
6. Can we get back to you if we need more information?

Thank you for your time. We appreciate it. You can contact the Research Coordinator if you have any questions or concerns.

Appendix 5. Phase 4 Script and Interview Questions

INTRODUCTION

Hi there, my name is _____.

We had an appointment scheduled today to talk briefly about opportunities for community collaboration in order to improve housing outcomes for Aboriginal people. **Pause for response**

As you may know, this project is taking place in order to move forward and capitalize on progress that was made on Aboriginal homelessness issues at the community Gathering that took place in March 2010. As follow up to that event, we're looking at the capacity and interest of Calgary homeless serving organizations to collaborate on improving housing outcomes for Aboriginal people.

Your answers are completely confidential and will be coded and recorded without names. Although your responses will only be reported as part of a group, it is helpful for accuracy to record your responses. Is it okay if I tape record this interview? **pause for response**

You can also stop the interview at any time or withdraw from the research project at anytime if you do not wish to continue. Do you still agree to participate? **pause for response**

QUESTIONS

1. Would your organization be interested in collaboration with Aboriginal organizations / community on a long term strategy in order to improve service for Aboriginal homeless people?
2. Does your organization have the capacity (e.g., time, expertise, resources) to participate in a collaboration of this nature?
3. What supports might be needed, either internally or within the general field, to make this type of collaboration possible?

CONCLUSION

Thank the interviewee for their participation.

This study is one piece of a multi-faceted look at current trends and best practices in homeless serving organizations. The findings of this study will be presented in several forums beginning this March, would you like to be contacted with the final study when it is released? **Record information if requested**

If you have any questions or concerns about this research you can contact the Research Coordinator.

The following can also be provided upon request:

- Principal Investigator of the project
- Co-Investigator
- Chair, Conjoint Health Research Ethics Board, Office of Medical Bioethics
- Ethics Resource Officer, Internal Awards, Research Services, University of Calgary