

Aboriginal homelessness and mental health:

Exploring the supports and
challenges of Aboriginal
peoples on the street



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Introduction to the Study

- ❖ Statistics demonstrate a near crisis of homelessness for Indigenous adults, many of whom live in urban communities, such as Toronto.
- ❖ Indigenous peoples face multiple housing barriers related to poverty, access, literacy weaknesses, discrimination, colonization, addictions and mental health, and intergenerational trauma of residential school.
- ❖ Yet **little is known** about the details of Indigenous peoples' experiences of living on the streets, and even less has been written about those who survive and thrive in street life settings, despite mental health obstacles.
- ❖ This research, which explores the **supports, challenges, and barriers** Indigenous people face in episodes of homelessness in Toronto, will contribute new insights to understanding the immediate and pressing issues facing these Indigenous people so that appropriate health services and policies can be mobilized.

Context

- ❖ According to the City of Toronto (2010) 13,605 persons (0.5 per cent) of persons in the City of Toronto are Aboriginal.
- ❖ However, agencies serving the Aboriginal community in Toronto estimate that there are 70,000 residents who belong to this community (City of Toronto, 2010).
- ❖ In Toronto, the overall population of homeless people identifying as Aboriginal is 15.4%, with 0.5% to 1.5% of the city's population being Aboriginal (City of Toronto, 2009).
- ❖ Thus, Aboriginal people remain disproportionately represented in the total homeless population of Toronto.

Context

- ❖ Many Aboriginal individuals may move to Toronto to:
 - ❖ Utilize the numerous Aboriginal services and culturally-specific housing in the city,
 - ❖ Utilize job and educational opportunities (Wendte, 1991)
- ❖ However, once they have migrated to an urban area, many find themselves at risk of life on the street or adopting a lifestyle of homelessness:
 - ❖ This often takes them farther away from their traditional cultural identities.
 - ❖ Often pulls them into involvement in the sex trade, and abuse or addiction of drugs and alcohol (Ward, 2008).
- ❖ There remains a poorly-understood and unexplored disconnect in the trajectory of Aboriginal people who migrate to the city, many of whom do not utilize social and cultural services and often quickly become involved in street life and end up living on the streets either in temporary shelters or sleeping outdoors (CMHC, 2001).

Homelessness & Mental Health

“Homelessness is a key indicator of poor health and is often marked by mental health problems and drug and alcohol abuse.”

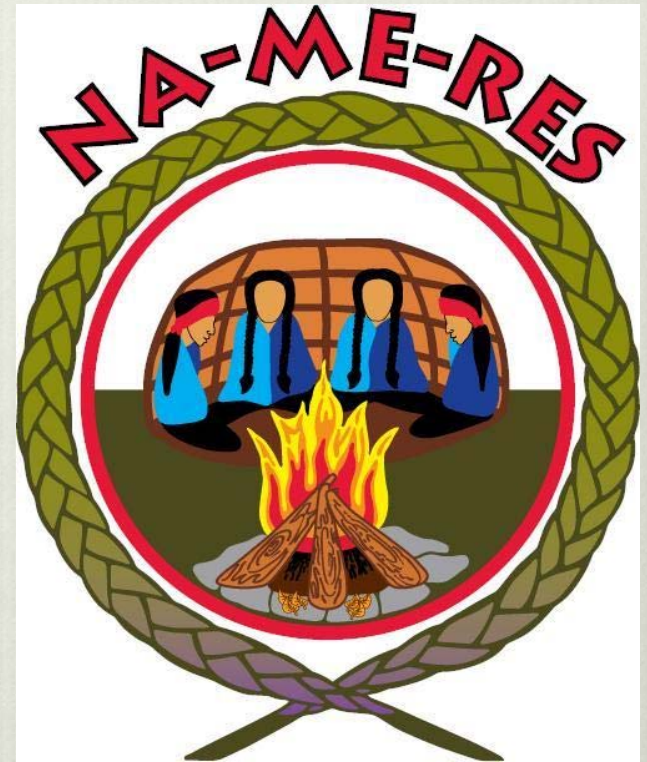
(Menzies, 2010, p.1)

Homelessness & Mental Health

- ❖ People's experiences of homelessness often lead to distress, and personal satisfaction or dissatisfaction has been shown to be a significant predictor of overall **mental health** (Hulchanski, 1999).
- ❖ In a 2009 survey, the City of Toronto found that 51.8% of homeless people self-identified that **access to addiction, health, and mental health services** would help them to find housing and that current services were not adequate (City of Toronto, 2009, p. 35).

Community Partnership

- ❖ This project is a collaborative community-based endeavour that is being conducted in partnership with Dr. Stewart of the University of Toronto and Native Men's Residence (NA-ME-RES)
- ❖ Dr. Stewart was approached by NA-ME-RES, a Toronto-based shelter for homeless men whose clientele is largely Aboriginal, who expressed interest in conducting research related to identifying the needs of the client's that they serve
- ❖ This study was conceived and has progressed in the spirit of the OCAP Principles (Ownership, Control, Access and Possession; First Nations Centre, 2007).
- ❖ Appointment of community research assistant



Research Question

What supports, challenges, and barriers do Aboriginal people experience with regard to a harm reduction approach to homelessness and mental health in culturally supportive spaces?

Methodology

- ❖ The depth and detail focus of the research question requires a qualitative methodology that emphasizes co-construction and meaning-making in context.
- ❖ The conceptual framework utilizes Aboriginal ways of knowing and social constructivism
 - ❖ Narrative orientation
 - ❖ Community Partnerships and Aboriginal Ethical Principles (OCAP Principles)
- ❖ Indigenous research paradigm:
 - ❖ Supports Native communities to more effectively deal with their healing issues.
- ❖ Memoranda of Understanding (MOU) with local Aboriginal service agencies
 - ❖ Toronto's Native Men's Residence (Na-Me-Res)
 - ❖ Training and hiring local of Community Research Assistants - CRA

Methods

- ❖ 50 Participants in Focus Groups (broad narrative)
 - ❖ Five groups with 10 participants
- ❖ 20 Individual Interviews (in-depth narrative)
 - ❖ Five with housing workers
 - ❖ 15 with men and women who have experienced homelessness/street-involved living



Interview Questions

- ❖ Tell us your story or stories of homelessness.
- ❖ We are particularly interested in the mental health supports, challenges, and barriers you have experienced or are experiencing now.
- ❖ We would also like to know what harm reduction means to you and how a harm reduction approach in social services has or might affect your use of that space
- ❖ What would you consider to be a culturally-relevant treatment program? For example, what kind of cultural supports would you like to see?

Data Analysis

- ❖ Interviews were transcribed by the research team members, then coded by hand according to an Aboriginal narrative methodology (Stewart 2007, 2008, 2009).
- ❖ Observations, field notes, and other data are reviewed and analyzed by the research team and in consultation with participants and community partners.
- ❖ Key themes were identified and **story maps** constructed, based on the interviews.

Results

- ❖ Strong relationships between homelessness, mental health and addictions
 - ❖ Individuals often took to the streets as a result of various socioeconomic factors (e.g., poverty, physical disability, mental health distress such as trauma), and alcohol and substance use often served as a means to cope with these various stresses.
 - ❖ Participants suggested that alcohol and substance use is typically part of a street-involved culture and street-involved living, and the use of alcohol and substances acts as a means by which to connect and relate with other individuals socially.



Results

- ❖ Need for a continuum of shelter/housing services
 - ❖ Majority of the participants expressed that a continuum of shelter/transitional housing is needed which would see the inclusion of wet shelters (alcohol and drug use permitted) employing a harm reduction approach and abstinence based shelters.
 - ❖ It was suggested that there be 1) shelters with limited restrictions around alcohol/substance use, 2) shelters with restrictions around alcohol/substance use, such as use is only permitted in an individual's private room, and 3) abstinence shelter/housing.

Results

- ❖ In employing a continuum of shelter/housing services, this would enable a far larger number of individuals to be housed, and that being housed was strongly correlated with beginning to heal/treat addictions issues (i.e., once a person is housed, they are then able to engage in treatment and healing).



- ❖ Several participants expressed that it was important to also retain abstinence based housing, particularly for those individuals who either do not use alcohol/substances and those who are in the early stages of healing from addictions issues.

Results

- ❖ Healing from mental health and addictions
 - ❖ Several of the participants had accessed mental health and/or addictions treatment/healing services. Services that were accessed included both Western and Indigenous approaches.
 - ❖ Experiences with the treatment/healing system and process were diverse (i.e., some experienced barriers such as being cycled through the system, whereas others received adequate support)
 - ❖ Majority of the participants stated that connection with Indigenous culture either proved to be a successful pathway of healing for them personally, or felt that reconnecting with Indigenous culture was a promising pathway for healing.

Results

- ❖ Interface between Indigenous culture and harm reduction
 - ❖ Both housing workers and participants expressed that it was important for Indigenous Elders and healers to recognize that many Indigenous people will not be able to follow cultural protocols around abstinence and engaging in cultural practices (e.g., four days of abstinence to attend ceremony).
 - ❖ Instead, many housing workers and participants felt that it was important for traditional people to work with Indigenous peoples wherever they are at with respect to substance use and their healing journey, as engaging with the culture is often the mechanism for healing and recovery from addictions.
 - ❖ This is important as participants expressed that being connected with Indigenous culture was an important factor in succeeding and aiding in their healing journey.



Results

- ❖ Social services and housing
 - ❖ The majority of the participants stated that they would like to see shelters/transitional housing offer multiple social services as part of the housing process:
 - ❖ mental health and addictions counsellors; health professionals (doctor, nurse, massage therapist); social service staff (e.g., workshops on literacy, skill development) cultural services (Elders, traditional teachers, ceremony)
- ❖ Participants expressed a universal need for more housing, particularly housing that is central to Toronto
 - ❖ Important for maintaining connections with family and community (well-being), and there are greater employment and educational opportunities in the city.

Significance

- ❖ Results will contribute new insights to Aboriginal psychology theory:
 - ❖ Increase knowledge and understanding of the immediate and pressing issues facing Aboriginal people
 - ❖ Mobilize & evaluate appropriate health services and policies
 - ❖ Identify key issues to be further investigated
- ❖ Results will contribute to research methodology, extending understanding of community-based and Aboriginal research ethics and procedures.

Questions

Wela'lin!

Miigwetch!

Merci!

Kinana'skomitin!

Mahsi cho!

Thank You!

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