

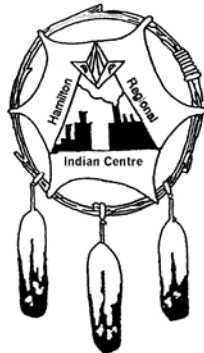
Hamilton Aboriginal Men's Residence Transitional Housing Needs Analysis

May 2006

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Hamilton Executive Directors' Aboriginal Coalition

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In partnership with:
The Hamilton Regional Indian Centre



and the Social Planning and Research Council of Hamilton



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THE ONKWEHON:WE (Original Peoples') ACKNOWLEDGMENTS

As always, in the spirit of welcoming, giving thanks and acknowledgment, I present to you a shortened version of the "Thanksgiving Address" (as told by Al Loft, an elder and good friend). Nia:wen kowa, Al. It is my understanding that the title or beginning of this address, "Ohen:ten Kariwentehkwen" can be translated to mean "The Words Before All Else" or more literally as "Before the Business is Set"; and is said daily (as a personal reflection), and/or at the beginning of meetings, ceremonies and gatherings of all types.

THE THANKSGIVING ADDRESS - OHEN:TON KARIWENTEHKWEN

THE PEOPLE: We have been given the duty to live in harmony with one another, and with other living things. We give thanks that this is true.

MOTHER EARTH: We give thanks to our Mother Earth. All that makes us strong and alive comes from you. We are all like children as we walk upon you. You nourish us and all living things.

THE WATER: We give thanks to the waters for our well-being. You quench our thirst. You give strength for plants and animals and for many medicines.

PLANTS: We give thanks to the plant life. Within you is the energy that sustains many life forms. You give us food, medicine and beauty.

TREES: We give thanks to the trees of the forest. You give us shelter and fruits of many kinds. Your beauty is ever changing.

ANIMALS: We give thanks to our animal brothers. You are still living in your hidden places and we see you sometimes. You still give us food, clothing and beauty.

BIRDS: We give thanks to the winged creatures, you remind us to enjoy our life cycle.

THE FOUR WINDS: We give thanks to the four winds. We listen, and hear your voices as you blow above our heads. Always you bring us strength. You come from the four directions.

THE SUN: We give thanks to Brother Sun, as you travel across the sky, you nourish Mother Earth. You give us warmth, energy and light. Your cycle changes, to allow all life forms to be reborn with every sunrise...., is a miracle.

GRANDMOTHER MOON: We give thanks to Grandmother Moon. We see your face shine for us at night. Your cycle provides new life on Mother Earth.

THE STARS: We give thanks to the stars. You are the helpers for Grandmother Moon. You make the sky shine at night, and we admire your glowing beauty.

THE CREATOR: We give thanks to the Creator. You have prepared all these things on Mother Earth for our peace of mind. We see that all things are following your teachings. All together, we give thanks to you the CREATOR.

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I would like to thank the Aboriginal Men's Residence Steering Committee whose expertise, guidance and feedback was greatly appreciated. The members were:

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- Jeff Wingard, Social Planning & Research Council of Hamilton
- Janice Lewis, Urban Native Homes Inc.
- Al Loft, Healthy Aboriginal Men's Circle
- Linda Ense, Native Women's Centre
- Walter Cooke, De dwa da dehs nye>s Aboriginal Health Centre
- Ralph Summers, Aboriginal Homelessness Consultant

Thank you to all the organizations and individuals who shared their stories, experiences, and knowledge which was invaluable for the completion of this report. I would like to especially acknowledge both Na-Me-Res in Toronto and Brant Native Homes Inc. in Brantford for their caring and sharing for the benefit of Aboriginal people in a sister community.

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Canada

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Author's Note: Please forgive me and extend to me your patience; for all things that I may have forgotten or not included in this report; for my poor and little usage of my Kenia:ke:ha (Flint People) Mohawk language and my extensive use of my non-Native language; and for anything that may not be expressed in the manner that it was intended. Please also excuse me if I sometimes write in the first person, as this it is respectfully done in a conscious attempt to be more personal and inclusive. Wa'kenhaten' tanon nia:weh kowa (I am sorry and thank you very much). CSM

1.0 INTRODUCTION

Aboriginal people are over represented among those experiencing poverty, physical and mental health issues, involvement with the criminal justice system, barriers to employment, lower levels of education and access to safe and affordable housing. These social ills have contributed to the disproportionate representation of Aboriginal men experiencing absolute homelessness.

In Hamilton, homelessness has grown significantly in the last ten years. The number of people accessing emergency shelters has doubled, and the community has been struggling to find appropriate service responses for the increased demands. In the last three years, the growth of homelessness appears to have leveled off, still at double the rate ten years ago. There have been major funding initiatives by the federal and provincial governments to address homelessness, and to try and develop community based responses.

In Hamilton, the Hamilton Executive Directors Aboriginal Coalition (HEDAC) is responsible for planning around Aboriginal homelessness, and for the disbursement of the National Homelessness Initiative - Urban Aboriginal Strategy Homelessness funding. One of the strategic aims of HEDAC, and long term strategies to address Aboriginal homelessness was to develop an Aboriginal Men's Transitional Housing Residence.

This project, a research partnership between the Hamilton Regional Indian Centre and the Social Planning and Research Council of Hamilton, was funded to conduct a needs assessment for an Aboriginal Men's Transitional Housing Residence.

The purpose of this report is:

- To assist in the homelessness planning activities of the Hamilton Aboriginal community;
- To research the need for a Homeless Aboriginal Men's Residence; and
- To facilitate the process for a Homeless Aboriginal Men's Residence.

The Steering Committee was formed and involved a number of key stakeholders from the Aboriginal community. The research questions developed were:

- (1) What is the demand for an Aboriginal specific transitional housing residence for men that are currently homeless in Hamilton?
- (2) What kind of needs do people have that would be coming to this housing and what kind of supports would it need to offer?
- (3) What would such a facility look like?

This report is divided into sections based on the above questions. The key findings are summarized in the Analysis, Conclusions, and Recommendations section.

2.0 BACKGROUND INFORMATION

2.1 Context of Aboriginal Homelessness

The statement "that it takes a village to raise a child" captures the historical view of homelessness within traditional Aboriginal societies. There were no "homeless" people. Community customs ensured that all people were treated as one large family. This type of idealism is still reflected in modern day practices as the Hamilton Aboriginal community strives to deliver innovative solutions to homelessness through autonomous, self-determined actions endeavoring to incorporate community driven and/or family centered approaches when applicable.

Historical practices, processes and policies regarding Aboriginal Peoples of Canada denotes why Aboriginal people are over-represented among the homeless. Brave Heart-Jordan (1995) identifies

...[Aboriginal] homelessness is a symptom of the historical effort to extinguish the existence of Aboriginal people within this country. Colonialism, genocide, residential schools, Canadian Indian Act, the loss of inherent rights and freedoms, reservations, lost culture and languages were all efforts to assimilate and acculturate Aboriginal people into the dominant society. The psychological torment of these efforts has had a devastating impact on Aboriginal people as a whole¹.

Higher rates of substance abuse (alcohol & drugs), incarceration, poverty, suicide, mental health issues, family violence (physical & sexual) and overall higher health problems are modern day results that characterize the disproportionate numbers of homeless within the Canadian Aboriginal community.

Hamilton is geographically located approximately 60 kilometers from Ontario's largest Aboriginal reserve: Six Nations. With the notable exception of Brantford, Hamilton is the closest major centre to the reserve, and many Aboriginal youth and adults come from the reserve to Hamilton. There is also a significant amount of travel back and forth between Hamilton and the reserve. There is also a substantial population of urban Aboriginal people who have lived in Hamilton their entire lives.

The Aboriginal community of Hamilton has demonstrated that it is capable of taking innovative, effective, and self-determined action in addressing Aboriginal homelessness when adequate resources are provided. Although there has been progress made in terms of new programs, partnerships, community planning and capacity building; longer-term solutions towards the prevention of homelessness must address the issues of poverty and safe, affordable and sustainable housing. To that end, HEDAC continues to identify "Aboriginal Homelessness and Affordable Housing" as a community need and a strategic planning priority.

¹ Freeman, 2002. *Aboriginal Homelessness Evaluation*.

3.0 METHODOLOGY

The Aboriginal Men's Residence Steering Committee came together under the guidance of HEDAC in September 2005. The purpose of the Steering Committee was to give their expertise, guidance and feedback on the research questions, identifying key informants, analyzing the data, and the conclusions and recommendations.

The following research questions were discussed and developed:

- (1) What is the demand for an Aboriginal specific transitional housing residence for men that are currently homeless in Hamilton?
- (2) What kind of needs do people have that would be coming to this housing and what kind of supports would it need to offer?
- (3) What would such a facility look like?

The research design focused on four areas: a literature review, key informant interviews, and visiting other Aboriginal Men's Residences.

3.1 Literature Review

A number of local, regional and national reports were reviewed. In addition, records from Na-Ma-Res were analyzed and summarized. A list of these reports can be found in the reference section.

3.2 Key Informant Interviews & Focus Groups

Key informant interviews were held with 10 Aboriginal men who have been homeless within the last year, and 10 additional Aboriginal men who have been homeless at some point in their lives. Convenience and snowball sampling methods were used.

As well, interviews were conducted with Aboriginal service providers, experts in Aboriginal homelessness, Elders, Aboriginal Outreach workers, and HEDAC. A list of key informants and focus group participants is included in the appendix.

3.3 Aboriginal Specific Models

The Steering Committee also traveled to Toronto to have an on-site visit at Na-Ma-Res, and were provided with a vast amount of organizational records for reference. Brant Native Housing has also recently prepared a Needs Assessment for Aboriginal Men's Transitional Housing, and shared the findings of that work with the Steering Committee.

3.4 Definitions

For the purposes of this study, the Steering Committee agreed on the following definitions:

- (a) **Aboriginal** means a person who self identifies as of North American (Turtle Island) Aboriginal descent.
- (b) **Transitional housing** means housing for a period of 6 weeks to 3 years (usually) with supports.
- (c) **Emergency shelter** means usually a 1 night stay, maximum stay of 6 weeks.

- (d) *Homeless* means absolute homelessness (i.e. shelters, in the streets, staying in cars, or couch surfing).
- (e) The *age* of the men for this housing is 16 years of age and up.

3.5 Limitations

There are significant barriers to quantifying Aboriginal homelessness in Hamilton. Wingard, McCormack and Neigh (2003) noted the lack of statistics around Aboriginal homelessness at the community level. Statistics Canada also recognizes the fact that their numbers are an under-representation of Aboriginal people based on various indicators of non-participation in the enumeration process. Most mainstream community programs do not collect information about whether their clients are Aboriginal or not.

There continues to be an attempt through the Homelessness Individuals and Families Information System (HIFIS) to get better local information on who is experiencing absolute homelessness, including consistent Aboriginal statistics. The implementation of this system has taken longer than expected, but the community is hopeful that we continue to get better quantitative information around Aboriginal homelessness.

4.0 WHAT IS THE DEMAND?

4.1 Literature Review

The federal government recognizes that "*Aboriginal homelessness continues to be a serious issue in many Canadian cities*" and is "*alarmingly high compared with that for other Canadians*"². It also acknowledges that, "*For Aboriginal people living off-reserve, low incomes continue to affect their ability to find adequate, suitable and affordable housing*". A goal to "*provide homeless persons access to transitional housing, to permanent housing and independence*" may require a "*progression of support steps*" and "*follow-up support*"³.

The demand for transitional housing continues to remain a key community priority of the Hamilton Aboriginal community. Homelessness planning documents that support this priority include:

- The Niagara Peninsula Aboriginal Area Management Board Objectives (1999);
- Homelessness Plans for the Hamilton Aboriginal Community (2001-2003 & 2003 - 2006);
- *The Homelessness Trail: The Voice of the People* (2001);
- "*Listening to Our People*" - Hamilton Aboriginal Homelessness Evaluation (Freeman, 2001/2002); and
- Hamilton Executive Directors' Aboriginal Coalition (HEDAC) Strategic Planning Sessions of November, 2005 & March, 2006.

There were many other indications of need for a Homeless Aboriginal Men's Residence in the literature. Among the findings were:

- A 1989 Needs Assessment for a Hamilton Native Men's Residence recommended the development of a 17 bed residence. The research identified 335 men that could utilize this residence (as indicated on an initial survey). Consultation of 16 agencies (13 non-Aboriginal, 3 Aboriginal) confirmed and supported the need for a Native men's residence, that promoted "a culturally enriched environment which would be most beneficial and also have the most chance to be successful". Letters of support included the John Howard Society of Hamilton, the Hamilton-Wentworth Regional Police (Ethnic & Race Relations) and the Honourable Mayor Robert M. Morrow (City of Hamilton)⁴.
- Aboriginal population is on the rise (19.8% increase since 1996) with 69% of Aboriginal people live off-reserve, with almost one-half (49%) living in urban areas and a total of 188,315 (19.3%) reporting Aboriginal identity living in Ontario (the highest of all provinces & territories)⁵.

² National Homelessness Initiative website (www.homelessness.gc.ca).

³ Ibid.

⁴ Needs Assessment, Circle of Brotherhood, Native Men's Residence, BomCor Associates, 1989.

⁵ Statistics Canada 2001 (as reported in Appendix H: Progress Report on Homelessness in Hamilton 2003).

- It is estimated that there are between 12-15,000 Aboriginal people within Hamilton (approximately 2% of Hamilton's overall population); however, they are over-represented among the homeless population with conservative estimates at 20%⁶.
- Of 202 Aboriginal people surveyed in Hamilton in 2001, 21% were experiencing absolute homelessness - a total of 43 people (approx. 28 men). This population overwhelmingly identified a need for Aboriginal, culture-based non-exclusionary (open to all) facilities such as Transitional Housing (28%) and a Drop In Centre (19%)⁷.
- 100% of the absolutely homeless respondents indicated that Aboriginal services would make a difference, with almost half (44%) identifying a requirement for special cultural needs⁸.
- Recent information from the Social Planning and Research Council of Hamilton indicates that the number of men (overall) staying in emergency shelters on a given night has increased from 114 in 1998 to 246 in 2002.
- The City of Hamilton identifies urban Aboriginal people in the category of "Households at Greater Risk of Homelessness". Risk factors identified are: very low income, little formal education, high-risk behaviour (eg., alcoholism), fetal alcohol syndrome, and disproportionate poverty⁹.
- The City of Hamilton also states that, "Outside of Toronto, there is little formal supply of transitional housing programs in Ontario". City staff analysis "revealed a limited inventory of transitional housing in Hamilton", identifying no transitional housing specific to Aboriginal men¹⁰.
- Urban Native Homes Inc., which offers a unique housing program in Hamilton geared to low income tenants, does not accept applications for 1 bedroom units due to the shortage of supply. They have only 1 unit in Hamilton, 4 units in outskirts of Hamilton, and those units that are available have been occupied by long term tenants.
- *Aboriginal Mental Health: What Works Best*¹¹ states, "There is no lack of data describing the disproportionate burden of (mental) health problems suffered by First Nations people". They support Brant's (1994) identification of mental health issues in Native communities across Canada to include: "widespread substance abuse, including alcohol, solvent inhalation, street drugs and prescription medications; family violence, including spousal assault and the sexual and physical abuse of children; and depression and hopelessness, often culminating in suicide". This report concludes that supported housing for those with mental health concerns is largely

⁶ Progress Report on Homelessness in Hamilton 2003.

⁷ Homelessness Trail: The Voice of the People, 2001

⁸ Ibid.

⁹ City of Hamilton 2004. Keys to the Home: A Housing Strategy for Hamilton.

¹⁰ Ibid.

¹¹ Smye and Mussell, 2001

unavailable even though homelessness is one of the root causes of mental health problems for Aboriginal people.

- *Our Homes and Our Streets: Homelessness in Hamilton-Wentworth*¹² states that 36% of people who experience homelessness have a mental illness and 41% experience substance abuse, homelessness and mental illness combined. A local report entitled *Background Report: Housing and Support Requirements for Persons with Serious Mental Illness*¹³ recommends transitional housing with supports as being most beneficial for that specific population.
- A research report by Correctional Service of Canada (John-Patrick Moore, 2003) identifies that there is an over-representation of Aboriginal peoples at several levels of the Canadian justice system. It states, "Aboriginal persons generally comprise 15% of provincial/territorial admissions, 17% of federal admissions, and 14% of admissions to probation. Aboriginal peoples, however, account for only 2% of the Canadian adult population". This over-representation can be attributed by certain themes regarding Aboriginal offenders which were identified in this report to include: low levels of education, high rates of employment, considerable need for comprehensive intervention, problems related to personal well-being, difficulties associated with substance abuse, and extensive criminal careers exemplified by violent behaviour. This type of information should be utilized not only for correctional programming but also towards various avenues of prevention (i.e. transitional housing with supports).
- A recent CMHC document¹⁴ recommends transitional housing with culturally appropriate services as a housing option that is critical for urban Aboriginal people living with HIV/AIDS. A complexity of barriers such as stigmas around AIDS related to injection drug use and sex work, gender-based discrimination and a lack of overall services are reflective of the fact that the majority of Aboriginal people with HIV/AIDS cannot return to their home communities.

4.2 Key Informant Interviews & Focus Groups

Service Providers and Outreach Workers

Service providers, key informants and a variety of experts in the field of homelessness overwhelmingly supported the demand of transitional housing for Aboriginal homeless men in Hamilton.

One Aboriginal outreach worker stated that "*at least 3 out of 10*" people that accessed the services of a homelessness van run every Friday was Aboriginal. December statistics indicated 215 men received services (noting a disruption in services due to Christmas holidays). "*Nothing's changed, this isn't the first time we've talked about an Aboriginal*

¹² Social Planning & Research Council of Hamilton, 1999

¹³ Hamilton District Health Council, 2001.

¹⁴ Housing, Long Term Care Facilities, and Services for Homeless and Low-Income Urban Aboriginal People Living with HIV/AIDS, March 2004

Men's Residence (reference to a couple of previous attempts in the past 20 years to plan and implement this vision before) and there's still nothing out there for single Aboriginal homeless men in Hamilton".

Another Aboriginal outreach worker stated "*absolutely, there's a demand....I see Aboriginal homeless men and youth too... They don't get shelter allowance, get basic needs (PNA) if staying in shelter. No money to go & put down on an apartment. Hard time with landlord, no letters of reference. Usually unsafe living conditions, no heat, hydro, water.*" It was also stated that in participation with a breakfast program for street-involved youth in downtown Hamilton, approximately 25% of the youth were Native.

This person also indicated a higher demand for Aboriginal homeless men due to "*the revolving door*" of the correction system, stating "*that a high number come out of corrections*", and recommended the need for an overall "*better discharge system*". In Hamilton, Aboriginal men's services that were provided for the months of January and February (2006) such as, the Native Counselling & Discharge Planning program (135 contacts), Native Courtworker (50 contacts) and Aboriginal Alcohol & Drug worker (17 contacts), indicate the high demand for a continued coordinated approach that could benefit from increased support.¹⁵

The John Howard Society of Hamilton, Burlington & Area support the need and demand for transitional housing as often presented to workers in the Bail Verification & Supervision Program. If an accused cannot provide an address for release purposes, the chances of being granted bail are greatly reduced. Currently, shelters are often the only option. Approximately 5.07% (or 62) of their clients have identified themselves as Aboriginal¹⁶.

Men Experiencing Homelessness

A previously homeless Aboriginal man (more than one year ago), shared his expertise and prophetic reality of Aboriginal men in Hamilton. "*There are no support services for Native men and they fall in-between the cracks or gaps in the system. They end up homeless and get into trouble with the law and get incarcerated. It seems they end up on the street or in jail and are lucky if they don't develop an addiction in dealing with the stress and pressure of being a man*".

Key informant interviews with 10 Aboriginal homeless men and 10 previously Aboriginal homeless men in Hamilton overwhelmingly indicated prior involvement in the corrections system. There was also a general agreement that transitional housing is "*definitely*" or "*absolutely*" needed in Hamilton. One man was adamant about not using mainstream services. "*I was incarcerated for 99 days...just got out (a few weeks ago) and I had nothing...I'd rather live on the streets than go there (reference to shelters)... This Native won't ever go there...just won't!... There's a lot of Aboriginal men that won't use mainstream services.... There's definitely a need for it.....I sure coulda used it when I got out (of jail)*".

¹⁵ (Personal communications, April 2006)

¹⁶ (Personal communication, March 2006)

Interestingly, two men we interviewed remembered the previous Aboriginal men's needs assessment that had been done about 20 years ago. One stated, "There was a need 20 years ago, there's a need today and there's gonna be a need in the future"; the other just laughed and said "Didn't you do this about 20 years ago?"

4.3 Aboriginal Specific Models

Toronto's Na-Me-Res Native Men's Residence was established in 1986 with 38 beds that has expanded in 2003 to 61 beds (plus two emergency beds). The average age of residents is 37 years old and average stay is 90 days. Na-Me-Res demographics include: Aboriginal 65%, Mainstream 25%, New Canadians 10%. An additional transitional shelter for homeless youth was established in 2003 (52 male/female beds).

A Na-Me-Res staff person stated that "when a bed becomes available it's filled in minutes". Higher mental health issues (especially since the closing of psychiatric wards), second and third generation trauma due to residential schools (resulting in addictions issues), and subtle racism (i.e. trouble with landlords) were reasons cited for a continuing increase in demand (*personal interview, October 2005*). With a high occupancy level (99%), programs and services in the areas of counselling, employment and housing have resulted in a 34.2% percentage of men who are now housed in permanent or transitional housing.

The Brantford Native Housing - Transitional Home Project through its *Aboriginal Transition Housing Project Feasibility Study* (2005) has identified that:

- the Aboriginal population accounts for only 3-5% of the total population of Brant/Brantford;
- it disproportionately accounts for 26% of the homeless population; and
- the Aboriginal population of Brant/Brantford accounts for 25% of those on waiting lists for subsidized housing.

This study also identified a need for Aboriginal specific transition housing and support services tied to transition housing with culture-based programming and services to serve Aboriginal people who may be:

- in crisis;
- lacking basic human needs;
- homeless, at risk of becoming homeless;
- leaving a shelter;
- returning to the community after drug/alcohol/mental health treatment; and
- returning to the community after incarceration.

Although Aboriginal homelessness is different in both Toronto and Brantford, the increasingly high demand for transitional housing in these sister communities can be utilized in providing a general trend for the Hamilton Aboriginal homeless population.

4.4 Key Findings - Demand

1. A higher incidence of Aboriginal homelessness and the subsequent demand for appropriate transitional housing options have been documented nationally and locally. This type of housing option is recommended as a best practice in addressing the Aboriginal homeless population and homeless sub-groups such as those with HIV/AIDS, mental health, and involvement in the criminal justice system.
2. There is support from a varied range of homelessness experts in the Aboriginal community that validate both a historical and current demand of transitional housing for Aboriginal homeless men in Hamilton. Most key informants recommended links or partnerships with the corrections system, as there is a high overlap with the Canadian correctional systems.
3. Consistent quantitative information about the number of Aboriginal men using emergency shelters in Hamilton is not available. However, this study easily identified ten Aboriginal men who have been homeless within the last year, and would be potential candidates for such a transitional housing residence.
4. Although Aboriginal homelessness in the surrounding areas of Toronto and Brantford can be quite different, the documented high demand for transitional housing in both these sister communities can be used to support a common general trend in Hamilton.

5.0 WHAT KINDS OF SUPPORTS ARE NEEDED?

5.1 Literature Review

The federal government identifies that "a whole progression of support steps may be needed to help a person who is homeless"¹⁷. It also identifies that "continued follow-up support could be required to prevent a return to homelessness". The federal government acknowledges that specific "programs have been designed to meet the needs of homeless Aboriginal people through culturally sensitive services and community-driven strategies" to "improve the well-being of urban Aboriginal people" and "find local solutions to the complex issues facing Aboriginal people"¹⁸.

Aboriginal specific supports and programming were recommended in *The Homelessness Trail: The Voice of the People*. Related findings in this report were:

- 100% of people who were absolutely homeless indicated 'Aboriginal Services' would make a difference, with almost half (44%) identifying a requirement for special cultural needs.
- A recommended increase access to culture, spiritual & traditional healing.
- The development of additional Aboriginal specific programs/services for people who are homeless to fill gaps.

*Listening to Our People*¹⁹, an Aboriginal homelessness evaluation in Hamilton recommended:

- The promotion and awareness of a traditional Aboriginal holistic perspective of health, wellness and healing;
- Additional programming and support in transitional housing for Aboriginal people who are homeless or in a transitional period within their lives (who have been incarcerated, etc.); and
- Additional research, programming and support for Aboriginal individuals experiencing mental health issues and homelessness.

A report of the Research Branch of Correctional Service of Canada²⁰ indicates that Aboriginal offenders' needs relating to the criminal justice domains (such as employment history, family background, associations, addictions, attitudes) are areas in significant need for intervention. Certain themes that are significant in profiles of Aboriginal offenders include: "low levels of education, high rates of unemployment, considerable need for comprehensive intervention, problems related to personal well-being, difficulties associated with substance abuse and extensive criminal careers exemplified by violent behaviour". With the large numbers of Aboriginal men leaving the correctional system who are homeless, any transitional housing will have to address a wide range of these factors.

¹⁷ <http://www.homelessness.gc.ca>

¹⁸ Ibid.

¹⁹ Freeman, 2001/2002, pg. 63

²⁰ John-Patrick Moore, 2003

5.2 Key Informant Interviews & Focus Groups

Key informants, agency personnel, and men who have been and are homeless were asked what kinds of supports they thought would be necessary in a transitional housing residence. The following shows the results of these responses. There were a total of 74 respondents.

Healing and Health with a Cultural Component (30). The areas of health, healing and cultural component were categorized together because of the overlap regarding types of supports needed. A holistic approach to health and healing included the need for health services and healing to use culturally appropriate & traditional teachings, the need for family re-unification, and community involvement. The most common response to the need for healing was the need to address the shame and lack of self esteem that many of the men feel on an ongoing basis. Supports would need to assist in recovering their identity, restore pride, spiritual guidance, and contribute to the person's overall well-being. People talked about the importance of an Aboriginal component to any service: *"For Aboriginal homeless men, especially on the road to recovery, it is so important to be with your own people".* Another man said, *"[You] need a place for healing, getting to know yourself, teachings help do that, learn how to help yourself. It teaches you about how we're all part of the community. Women and family are an important part of our lives; being able to do things so that you can be involved with your family".*

- Shame, self-esteem building, restore pride (7)
- Traditional upbringing, Aboriginal programs, traditional teachings (4)
- To focus on culture, appropriate services (3)
- Holistic - Emotional, Physical, Mental, Spiritual (3)
- Need for family reunification, strengthen family structure (2)
- Assist in loss of their identity (2)
- Recover, healing in abuse issues (2)
- Support health, mind, body & spirit. (1)
- Understand ourselves & exercise the "Spirit of the Grandmother" (1)
- Allow the tears of men to flow with understanding, it's okay to cry (1)
- Men's healing circle (1)
- Spiritual guidance (1)
- Our understanding & knowledge that men have experienced abuse as well (1)
- A reason to continue, help them find it, whatever it is (1)

Counselling (12). Many people also identified a variety of counseling supports that would be required. Addictions (i.e. alcohol & drugs), family counseling, and support with behavioural changes that incorporate traditional/cultural components were all spoken about. In particular, people talked about the value of Aboriginal run services, and, in the words of one key informant, their preference for "being able to talk to someone who is Indian and has been there or done that".

- Counselling: Willingness or ability to change known patterns, peer pressure (2)
- Counselling: Men to develop communication, expressing their wants (2)
- Addictions counselling (1)
- Family counselling (1)
- Counselling in behaviour change to end abuse (1)

- Transitional, 24 hour service (1)
- Counselling: Traditional element (1)
- Referral services (1)
- Commitment to provide ongoing services (1)
- Support for newly released incarcerated men (1)

Employment & Education (6). The opportunities for employment & education were recognized as part of a continuum of supports required for a permanent or long lasting solution to homelessness.

- Education (3)
- Employment/trades (3)

Food and Clothing (6). The need for basic daily meals and support for getting and storing clothing scored especially high with respondents who were absolutely homeless or had previously been homeless. Interestingly enough, it was also identified by many other "experts" although not quite as highly prioritized.

Life skills (5). Answers in this category included training and teachings in activities of daily living such as budgeting support, cleaning, cooking, laundry, food management, how to shop, and hygiene.

- Activities of daily living (basic life skills)
- Budgeting support

Financial (5). Resources, vying for dollars, funding or lack of funding, operating dollars and not having enough money for sustainability were areas reported under "Financial".

- Financial support (5)

Community Acceptance (4). People made statements such as "not being wanted in their neighborhood" or experiences of "we don't want them" were categorized under this theme.

- Support to get community acceptance (3)
- Citizens groups in neighborhood (1)

Racism (3). Although this is a difficult issue to address, respondents recognized the need for supports in areas to address such incidents as: who to contact if you perceive a landlord to be racist, employment preparedness (i.e. how to act if you perceive an employer to be racist, who to contact for assistance); what to do if you are having difficulties with the police because of perceived racism. Words such as "stereotyping" & "labelling" were also categorized under this theme.

- Supports to combat racism/stereotyping (3)

Housing/Place/Building (3). People noted that the physical structure of the transitional housing would be important. Some suggested there may be two buildings (one in city, one out of city). Finally, men wanted support to find and maintain safe, permanent housing.

- Buildings (2)
- Suitable safe accommodations with support services

5.3 Aboriginal Specific Models

The Na-Me-Res Aboriginal Men's Residence in Toronto states that:

*We carefully design all programs and services to meet the individual needs of the homeless with a goal of evoking solutions, reconnection, and self-sufficiency, in a one stop intervention/referral support network that offers a solid aftercare component.*²¹

Programs and services are offered in employment, addictions and housing to assist clients in their journey. Programs towards self-sufficiency are listed as:

- Traditional and contemporary counselling;
- Invitation to participate in over 20 life skills workshops;
- Cultural healing workshops using art and music therapy;
- Pre-employment training and literacy programs;
- Access to computer labs to upgrade technological skills;
- Housing placement and referrals;
- Transitional aftercare and follow-up.

A healing program has also been designed that includes workshops and counselling in the following:

- One-on-one Counselling
- Family Violence
- Computer Skills Training
- Street Help
- Health and Sexuality
- Men's Healing Circle
- Arts and Crafts
- Traditional Values and Culture
- Addictions

One of the "secret ingredients" that was identified by Na-Ma-Res staff was the high percentage of Aboriginal staff (80%) and previously homeless staff (40%). This allows clients to "identify more with staff", and staff are viewed as "more caring" and "non-judgmental". As one client noted, the success of Na-Ma-Res is due to the staff who "have PhD's in homelessness"²².

The Brantford Native Housing - Transitional Home Project²³ has identified programs that will be offered as:

- *Based upon native culture and teachings which emphasize respect for the individual, re-creation of the person and development of a sense of self-worth and self-esteem*

²¹ <http://www.nameres.org>.

²² Personal interview, October 2005.

²³ Stevenato & Associates, June 2005. *Brantford Aboriginal Transition Housing Feasibility Report*, pp. 51-53.

- *Impact of residential schools,*
- *Decision making,*
- *Family violence,*
- *Family/discipline/genealogy,*
- *Assertiveness, co-dependence, healthy relationships,*
- *Shame and blame,*
- *Vicarious trauma,*
- *Anger management,*
- *Healthy parenting,*
- *Traditional relationship with food.*

5.4 Key Findings

1. The National Homelessness Initiative, Correctional Services Canada and a review of current local Aboriginal literature suggests that a wide variety of support services that are culturally sensitive and community-driven are required in order to provide effective transitional housing that addresses the complexity of issues facing urban Aboriginal people.
2. The largest priority for supports being offered at a transitional housing men's residence needs to focus on healing and health from an Aboriginal perspective. The most common response to what kind of healing people needed was to restore pride and help cope with the shame men have. Key informants, men who have experienced homelessness and experiences in other communities identified that the Aboriginal perspective is best provided through hiring Aboriginal staff, and staff who have had some personal experience with homelessness.
3. There will be a need for a wide range of clinical counselling supports, particularly around addictions (alcohol use especially), family re-unification, behavioural changes, and support around coming out of jail.
4. Men who have or are experiencing homelessness expressed that the provision of basic needs will be important. Supports around daily meals, having appropriate clothing, and budgeting were all identified as important to people wanting to make a transition off the street.
5. Other communities who have, or are developing, similar services offer a wide range of programming and supports. Both Na-Ma-Res and the potential project in Brantford have a long list of available programs and supports. This likely means that men accessing a program in Hamilton will have a wide variety of needs for support programs.

6.0 WHAT WILL IT LOOK LIKE?

6.1 Literature Review

The findings of a local Needs Assessments for Transitional Housing for men who have been homeless²⁴ concluded that:

- Men wanted their own locking space, and were reluctant about shared cooking and bedroom situations.
- The men identified the need for flexible rules for living together - around alcohol use, curfew, & visitation by friends.
- The amount of support/supervision would depend on several factors:
 - The needs and requirements of the men who enter,
 - The physical space (i.e. scattered apts., one location etc), and
 - The kind of partnerships developed with other organizations.

A 1989 Hamilton Native Men's Residence Needs Assessment promoted "a culturally enriched environment" and recommended a minimum number of 17 beds, after finding 335 men who could utilize this residence. This study identified an organizational structure, mode of operations, financing, and sample operating budget that could be utilized as baseline information for current planning purposes²⁵.

Brant Native Homes, Inc. has recently undertaken a very similar study to this one²⁶. They provided the Steering Committee with their final report, which outlined different factors such as program design, space requirements, location criteria and analysis, capital and operating cost estimates, and an implementation plan. This report provides a high quantity of information that could be extremely useful as a map of possible avenues to investigate.

The Brantford study also included a chart of many different models of what a men's residence could look like, each with pros and cons. Because of the utility of this information and the relevance of this information to the Steering Committee, we have reproduced it here in its entirety.

²⁴ Wingard 2004. *Needs Assessment for Transitional Housing for Men Experiencing Homelessness, Aged 25-44*. Social Planning and Research Council of Hamilton.

²⁵ Steering Committee members received a copy with permission from Urban Native Homes Inc.

²⁶ Stevanato & Associates, 2005. *The Brantford Aboriginal Transition Housing Feasibility Report*. Brant Native Homes, Inc.

Table 1: Aboriginal Transition Housing Options²⁷

Options	Pros	Cons/Barriers
<p>(a) Transition housing with support services. One building. Private units with bedroom/sitting room, washroom, kitchenette (for singles, similar to bachelor apartment with housekeeping features-sink, fridge, microwave), administration offices. Multi-bedroom units would be required for families with children.</p>	<ul style="list-style-type: none"> • Compared to several buildings, easier, more efficient and potentially less costly to provide security and deliver programs and supports because everyone is in one location. Visiting professionals can assess and treat several clients in one visit. Fewer staff required. • Can design programs and services so they are culturally appropriate. • Separate units help to maintain privacy and integrity. 	<ul style="list-style-type: none"> • Costly to build and operate unless capital and ongoing operating funding can be secured. • More costly than (b) or (c) because of separate apartments. • Less opportunity for socialization and peer support; potentially less interactive with counsellors, compared to (b) and (c). • It can be challenging to deliver supports if clients have wide-ranging and differing needs. • Location may become an issue, as it will be less accessible vs. scattered units. • Anonymity/confidentiality issues (also true for any Aboriginal programs/services). • NIMBY (Not-In-My-Backyard) Syndrome where neighbourhoods will be against the land use. • Zoning restrictions if 5+ residents. • Minimum separation distances increases if 11+ residents.
<p>(b) Transition housing with support services. One building. Private bedrooms with common areas such as shared washrooms, kitchen, dining room and living room. There would be congregate dining where the residents may assist the cook with preparing meals.</p>	<ul style="list-style-type: none"> • Compared to several buildings, easier, more efficient and potentially less costly to provide security and deliver programs and supports because everyone is in one location. Visiting professionals can assess and treat several clients in one visit. Fewer staff required. • Can design programs and services so they are culturally appropriate. • Cheaper vs. (a) • Community kitchen and dining area encourages socializing and peer support vs. (a) and can use meal planning and 	<ul style="list-style-type: none"> • Costly to build and operate unless capital and ongoing operating funding can be secured. • Less privacy vs. (a). Residents need to work together. • More costly than (c). • It can be challenging to deliver supports if clients have wide-ranging and differing needs. • Location may become an issue, as it will be less accessible vs. scattered units. • Anonymity/confidentiality issues (also true for any Aboriginal programs/services). • NIMBY (Not-In-My-Backyard) Syndrome where neighbourhoods will be against the land use.

²⁷ Reproduced in its entirety from Stevanato & Associates, 2005.

Options	Pros	Cons/Barriers
	<p>cooking as a form of therapy.</p>	<ul style="list-style-type: none"> • Zoning restrictions if 5+ residents. • Minimum separation distances increases if 11+ residents.
<p>(c) Transition housing with support services. One building. Dormitories of 2, 4, 6 or more per room (vs. private bedrooms) with common areas such as shared washrooms, kitchen, dining room and living room. There would be congregate dining where the resident's cook or a cook is hired to prepare all meals.</p>	<ul style="list-style-type: none"> • Compared to several buildings, easier, more efficient and potentially less costly to provide security and deliver programs and supports because everyone is in one location. Visiting professionals can assess and treat several clients in one visit. Fewer staff required. • Can design programs and services so they are culturally appropriate. • Cheaper vs. (a) & (b). • Community kitchen and dining area encourages socializing and peer support vs. (a) and can use meal planning and cooking as a form of therapy. 	<ul style="list-style-type: none"> • Costly to build and operate unless capital and ongoing operating funding can be secured. • Less privacy vs. (a) & (b). Residents need to work together. • It can be challenging to deliver supports if clients have wide-ranging and differing needs. • Location may become an issue, as it will be less accessible vs. scattered units. • Anonymity/confidentiality issues (also true for any Aboriginal programs/services). • NIMBY (Not-In-My-Backyard) Syndrome where neighbourhoods will be against the land use. • Zoning restrictions if 5+ residents. • Minimum separation distances increases if 11+ residents.
<p>(d) New construction vs. renovating an existing building vs. a floor/separate space in an existing operation (i.e., expansion).</p>	<ul style="list-style-type: none"> • New Construction: purpose built and get exactly what you need with respect to space and design. • Renovate an existing building: Less expensive vs. build new. Possibly locate in better area of City. • Expand/modify existing building: less expensive. Expansion permits purpose-build design. Opportunity to partner with experienced operator and share operating costs (efficiencies of scale). Zoning less of an issue. 	<ul style="list-style-type: none"> • New Construction: Costly. May not find best location unless tear down and build. • Renovate an existing building: more costly than expansion of existing building but less costly vs. new construction. Potential restrictions re: design. • Expand/modify existing building: Potentially cheaper to build and operate vs. above. Negotiation with partner required. Need to find suitable partner. Existing shelters at capacity and would have to expand building vs. allocate a floor of existing space. • NIMBY syndrome may create a challenge with respect to location. • Municipal zoning restrictions for transition housing land issues.
<p>(e) Rent vs. purchase</p>	<ul style="list-style-type: none"> • Rent Option: cheaper over short term; may not be cheaper over long term because no equity. • Purchase Option: potential for funding. Own building and 	<ul style="list-style-type: none"> • Rent Option: Less security. Have to deal with landlord. No funding for rental. Less inclination to do renovations. • Purchase Option: Requires large initial financial outlay.

Options	Pros	Cons/Barriers
	<p>have control and equity.</p>	<ul style="list-style-type: none"> • NIMBY syndrome may create a challenge with respect to location. • Municipal zoning restrictions for transition housing and land uses.
<p>(f) Several smaller buildings vs. one larger building, designed for specific target groups (i.e., men, women, youth, families). They could be set up as separate apartments, private bedrooms with common areas or dormitories with common areas similar to (a), (b), and (c) above.</p>	<ul style="list-style-type: none"> • Compared to one large building: Prevents "ghettoizing". Increases accessibility for those with transportation issues. Easier to consider rental option. Potentially more "home" feeling. Can create small transition homes targeting different groups (men, women, youth, families). Less concern with anonymity/confidentiality. Less capital cost initially and can purchase additional buildings as capital funding becomes available. • Zoning is more lenient if 1-4 residents (can locate in more residential zones). • Minimum separation distance between like land uses is less restrictive if 1-4 residents. • Parking is less restrictive if 1-4 residents (2 spaces). 	<ul style="list-style-type: none"> • Compared to one large building: Less efficient re: delivering programs and services, potentially more costly capital and operating (more staff); more difficult (cost) to have 24-hour support. • NIMBY Syndrome where neighbourhoods will be against land use. • Zoning restrictions if 5+ residents. • Minimum separation distances increases if 11+ residents.
<p>(g) L'Arche model: Half of residents need assistance, the other half reside to assist/support others (three year commitment required, no payment, receive room and board in exchange for assisting residents). (principal of families living together). Include elders.</p>	<ul style="list-style-type: none"> • Relatively low operating costs vs. some other housing options. • Encourages volunteerism and solicits youth who are interested in charitable activities. • Offers plenty of support for residents, however the assistants would be less skilled vs. trained social workers. • Create a family atmosphere - supportive. • Have 24-hour assistance available - could take higher maintenance cases. 	<ul style="list-style-type: none"> • Expensive to buy building, build new building or rent building. • May be difficult attracting assistants initially and may be significant turn-over (sign an agreement specifying a minimum time period). • NIMBY Syndrome where neighbourhoods will be against the land use. • Zoning restrictions if 5+ residents. • Minimum separation distances increases if 11+ residents.

6.2 Key Informant Interviews & Focus Groups

Most Aboriginal homeless men and previously homeless men supported the idea of two sites. Their statements are summarized below:

- (1) One location in the city to address immediate needs. Comments included "no booze", cameras & surveillance, a big house with lots of rooms (i.e. rooming house idea), big brownstone under the mountain, everyone shares everything, "time to get your shit together", short term stays, approx. 10 beds, areas suggested: Bay & Victoria - Mountain to the Bay and Bay & Mary Streets.
- (2) One location on the outskirts of the city: To stay away from temptations (i.e. alcohol, drugs, drinking buddies); room to build cabins; opportunity to get back to nature - farm (self-sufficient, garden, chickens); place to socialize with others (i.e. Elders, youth, etc); approximately 10 - 30 beds.

A re-occurring theme was to have the men working and participating in meaningful activities (i.e. renovations, building, farming, fishing, beading, drumming, etc.). Men wanted an opportunity to re-connect to nature, and an opportunity to "give back". Men talked about wanting to participate in things keep busy and out of trouble (especially for men that had recently been incarcerated).

It would be better to be out of the city....it's too tempting to be in the city. Maybe something like a farm...self-sufficient. There's a lot of Aboriginal men out there on the streets. They need something to do....to keep busy. We could have community volunteers....then when you're all good, when you got your shit together... you can volunteer.

The suggestion of an Aboriginal-run establishment with Aboriginal staff was also stated several times. *"Being able to talk is really important...like me talking to you....If I didn't know you...like if I hadn't seen you around...you know....that you're Indian...I wouldn't be talking to you".*

6.3 Aboriginal Specific Models

Na-Me-Res staff emphasized the importance of the financial viability and funding of a transitional men's residence.

They spoke of the importance of having a diverse funding base - their funders include the Trillium Foundation, the United Way, Justice Canada, the Jewish community, different local foundations, the City of Toronto. They also have a fundraiser position on staff, and cited that decision as a good organizational strategy, as the fundraiser was aware of and could submit to different sources of funding. The fundraiser position pays for own position and more.

Ongoing program dollars help fund positions, insurance, utilities, food, telephone and communications. This funding comes from Health Canada and Employment & Training - HRDSC. They said that operational dollars are the hardest to find, some organizations use rent supplements

and shelter allowances to fund operating costs but "be aware" - they may only pay \$52.00 and it costs \$64.00/day to operate.

Na-Ma-Res staff stated that the more staff a Men's Residence has, the more it costs to operate. Because many of the funding streams are based on occupancy of beds, if the bed is empty it costs the organization money. It was estimated that to reach financial stability, Hamilton would need a 50 - 60 bed residence to break even (with 30 - 40 transitional beds, and 10 - 20 shelter beds).

The biggest challenge stated for Na-Me-Res was "*paying for the damn thing! [You] live payday to payday. Donations are down (due to New Orleans, Hurricane Katrina, etc). [The biggest challenge is...] funding and feeding the beast!*"

6.4 Key Findings

1. There are a number of different options with regard to how an Aboriginal Men's Transitional Housing Residence might look. These options are identified in a recent report completed for Brantford. The options include a single building with individual rooms and bathrooms, a single building with individual rooms and shared bathrooms and kitchens, a single building with dormitory style bedrooms (shared bedrooms and common space), multiple buildings, new construction vs. renovation, purchasing vs. renting, or a community model like L'Arche.
2. Results from other transitional and supportive housing studies (not necessarily Aboriginal) indicate that men want privacy (their own rooms, bathrooms, and kitchens), and identified that when living in the same place, rules around alcohol use, curfew, and visits from friends/family will have to be clarified.
3. A majority of Aboriginal men in Hamilton who have been homeless favoured a two site (one in city, one out of city) transitional housing option. They wanted opportunities for meaningful activities, a chance to re-connect to nature, and also stressed the importance of an Aboriginal run and staffed project.
4. The 1989 Needs Assessment suggested a need for a 17-bed facility. While homelessness in Hamilton has escalated dramatically since that time, we were unable to determine a definitive number of beds for a transitional housing residence. The demand for the service would be dependent on several factors: types of supports and services offered, location, who the staff are (Aboriginal or not), and other factors.
5. Funding for any transitional housing is likely to be a major obstacle in the development of such a project. Key informants identified that *operational* funding is very difficult to obtain, and often must be patched together from a variety of different funders. Staff from Na-Ma-Res estimated that to break even financially, 50-60 beds would be required. Based on these cautions, any efforts to move this project into the next stages should conduct a detailed financial analysis to ensure the viability of the project over the long term.

7.0 ANALYSIS AND CONCLUSIONS

The purpose of this report was:

- To assist in the homelessness planning activities of the Hamilton Aboriginal community;
- To research the need for a Homeless Aboriginal Men's Residence; and
- To facilitate the process for a Homeless Aboriginal Men's Residence.

By reviewing the literature, speaking with key informants, service providers, men who have experienced homelessness, and visiting other Aboriginal Men's Residences, this report has gathered a considerable amount of information regarding the need for transitional housing for Aboriginal men. In conclusion, there are several points that we would like to draw together.

1) There is a long history of documented need for Aboriginal men's transitional housing.

- The 1989 Needs Assessment recommended a 17 bed project of transitional housing for Aboriginal Men who were homeless.
- The Homelessness Trail identified 28 Aboriginal men who were experiencing absolute homelessness who wanted culturally specific services.
- The overall number of men staying in emergency shelters in Hamilton on a given night has increased from 114 in 1998 to 264 in 2002.
- There is a gap in the community for medium term transitional housing for men run by the Aboriginal community for Aboriginal men. Many of the Aboriginal people interviewed stated a preference for Aboriginal specific services and programming.
- As one Aboriginal man stated "*There was a need back 20 years ago, there's a need today and there's going to be a need in the future. I sure could'a used it when I got out (of jail).*"

2) Any transitional housing will have to offer a wide range of supports.

- Information from all available sources (the literature review, key informant interviews, and experiences of other communities) indicate that there are a large number of programs and supports that are required to help people make the transition from the street into longer-term housing.
- The highest number of people indicated that supports around health and healing from an Aboriginal perspective would be the most important type of supports. People were clear that these supports must address emotional, medical, and physical needs.
- There will be a need for clinical supports around addressing addictions, family re-unification efforts, and changes in behavior.
- By beginning from the Aboriginal perspective, some of the systemic issues that men face when they are homeless will be able to be addressed, such as: the effects of residential schools as well as racism and discrimination.

3) There is a large overlap with the corrections system.

- The literature review, key informants including outreach workers, and men who have experienced homelessness all talked about the links between the corrections system and the experience of homelessness.
- Outreach workers talked about the “revolving door” of the corrections system, where a person gets discharged from jail, has nothing, commits another crime, and returns to jail.
- Any transitional housing facility may want to consider partnering in a formal way with the justice system in order to reduce service gaps for Aboriginal men.
- As people stated: “I was incarcerated for 99 days...just got out [a few weeks ago and I had nothing”.

4) There are many different models of what a men's residence might look like - each with pros and cons. However, Aboriginal men who were potential tenants preferred one in-city site and one country site.

- The different potential models that were identified by Brant Native Homes included:

<ul style="list-style-type: none"> • One building - bachelor apartments • One building - private bedrooms, shared common space • One building - dormitory style, shared bedrooms 	<ul style="list-style-type: none"> • New construction vs. renovation vs. modification (floor on an existing operation) • Rent vs. purchase • Several smaller buildings • L'Arche model - community building
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- The majority of Aboriginal men who have been homeless favored one in-city site and one country site.
- The findings of the Needs Assessment for Transitional Housing for Men Who Have Been Homeless, Aged 25-44 found that:
 - Men wanted their own locking space, and were reluctant about shared cooking and bedroom situations.
 - Men identified the need for rules for living together - around alcohol use, curfew, and visitation by friends.

5) Key informants and past research have pointed out the difficulties in funding such a project. A detailed economic feasibility assessment needs to be explored to determine next steps.

- There were two components that were identified by key informants that need to be accounted for: capital costs and operating costs. Capital costs refer to the initial renovation or purchase costs - they are one time expenses. Operating costs are the year to year costs - staffing, utilities, rent, program costs, etc.
- Operating costs for transitional and supportive housing are difficult to find and secure. Most programs rely on several funders to make the project feasible.

- When using rents from clients to fund the operational costs, a project needs to be between 50 and 60 beds - which is much larger than the numbers talked about by the Steering Committee.
- A key component of any next steps will be a detailed economic feasibility statement to ensure that the project is viable over the long term.

6) Aboriginal men want meaningful activities as well as transitional housing.

- The key informants we talked with identified the activities that would need to be linked to the housing. People were not only interested in housing, but also the meaningful activities that went along with the housing.
- The suggestions for potential activities were:
 - Building, construction, and renovations
 - Bead work, teaching skills
 - Re-connecting with nature
 - Being "away from temptations".

7) An important next step in this project will be to identify a Lead Group or Agency to move this proposal ahead.

- In order to coordinate the many activities that are necessary to move this project into the next stages, a Lead Group or Agency needs to be identified.
- This Lead Agency or Group should be within the Aboriginal community in Hamilton.
- The Lead Group or Agency may want to develop partnerships around the Corrections System, alcohol and substance misuse, counselling and life skills supports, and employment programs.

8.0 REFERENCES

- Austen, A. and Sirko, A.M. (2003). *The Homelessness Continuum: A Community Plan for Hamilton*. Hamilton: Public Health and Community Services Department, City of Hamilton.
- Barker, A. (2002). *From Colonization to the Streets: An Examination of the Possible Causal Connections Between Colonization and Urban Aboriginal Homelessness*. Unpublished. Arts and Science Programme: McMaster University.
- Bomberry, S.C. (1989). *Needs Assessment - Circle of Brotherhood - Native Men's Residence*. BomCor Associates
- Brant, C. (1994). Native Issues. In R. Grant (ed), *Images in psychiatry - Canada*. World Psychiatric Association.
- Brant Native Homes Inc. (2005). *Operational and Sustainability Plan for Brantford Native Housing*. Brantford: Brant Native Homes Inc.
- Freeman, B. (2003). *Hamilton Aboriginal Homelessness Evaluation - "Listening to Our People"*. Hamilton: McMaster University.
- Keys To The Home: A Housing Strategy for Hamilton. (2004). Hamilton: Program Policy and Planning Division; Employment, Housing and Long-Term Care Division; Public Health and Community Services Department, City of Hamilton.
- Hamilton Executive Directors' Aboriginal Coalition. (2001). *The Homelessness Trail: "The Voice of the People*, Introductory Report on Aboriginal Homelessness within the New City of Hamilton. Native Home Providers of Ontario.
- Moore, J.P. (2003). *First Nations, Metis, Inuit and Non-Aboriginal Federal Offenders: A Comparative Profile*. Ottawa: Research Branch, Correctional Service of Canada.
- National Homelessness Initiative. (2005). *A Review of Canadian Literature on Transitional Housing*. Retrieved February, 2006, from http://www.homelessness.gc.ca/research/toolkit/docs/transitionalhousingreview_e.pdf
- Smith, L.T. (1999). *Decolonizing Methodologies: Research and Indigenous Peoples*. London: Zed Books.
- Smye, V. and Mussell, B. (2001). *Aboriginal Mental Health: 'What Works Best'*, A Discussion Paper. British Columbia: University of British Columbia, Mental Health Evaluation & Community Consultation Unit.

Statistics Canada. (2003). *Aboriginal peoples of Canada: A demographic profile*, Catalogue no. 96F0030XIE2001007. Ottawa: Statistics Canada, Census Operations Division.

Stevenato & Associates. (2005). *Brantford Aboriginal Transition Housing Feasibility Report*. Brantford: Brant Native Homes Inc.

Sweetgrass Consulting. (2004). *Housing, Long Term Care Facilities, and Services for Homeless and Low-Income Urban Aboriginal People Living with HIV/AIDS*. Ottawa: Canada Mortgage and Housing Corporation, Research Highlights, Socio-economic Series 04-019.

Todd, S., and Brown, S. (1999). *Our Homes and Our Streets: Homelessness in Hamilton*. Social Planning and Research Council of Hamilton.

Wingard, J., McCormack, C.S., Neigh, S. (2003). *Progress Report on Homelessness in Hamilton 2003*. Social Planning and Research Council of Hamilton.

Wingard, J. (2004). *Needs Analysis For Transitional Housing with an Employment Component for Men Who Have Been Homeless Aged 40-55*. Social Planning and Research Council of Hamilton.

APPENDIX - A
Additional Notes on Methodology

ADDITIONAL NOTES ON METHODOLOGY

In conducting the research for this study, it was important to acknowledge the mistrust regarding research, the conducting of studies or the writing of another report. "*Just another report that will sit and gather dust*" was a sentiment that was expressed more than once. "*We've been researched to death....didn't you do this 20 years ago?*" This mistrust can be attributed to historical experiences of Aboriginal research that has not been beneficial (i.e. inaccuracies, misrepresentation, discrimination, racism, etc). In a book by an Aboriginal writer called *Decolonizing Methodologies*, reference is made to this issue, as the author states "*The word itself, 'research' is probably one of the dirtiest words in the indigenous world's vocabulary. When mentioned in many indigenous contexts, it stirs up silence, it conjures up bad memories, it raises a smile that is knowing and distrustful*".

This struggle was acknowledged and attention was paid to the issue of potential benefits vs. potential risks. The Steering Committee and researcher weighed the benefits to the Hamilton Aboriginal community and decided that they outweighed the risks of raising their expectations once again, with the very real possibility of no funding for such a project. These factors were then reflected in research that was carried out with a great deal of caring, sensitivity, respectfulness and gratitude.

The understanding of an Aboriginal "worldview" or "way of thinking" and importance assigned to everyone that contributed to this report was essential in the gathering of information. From service providers, to Absolute homeless men, to outreach workers (whether Aboriginal or non-Aboriginal), to various groups, all were considered to be equal in their expertise in homelessness. In an Aboriginal view, everyone has an opinion, and whether this opinion has been influenced by education, personal experiences, whether from a male or female perspective, each opinion is just as important as someone else's. This respect is integral in an Aboriginal centered research project.

The already established relationship of the researcher to the Hamilton Aboriginal community did not detract from the importance of further involvement in areas more specifically related to Aboriginal homeless men. The researcher participated in the following activities:

Researcher Participation in the Aboriginal Community:

- Continued to assist in Hamilton Aboriginal homelessness planning activities.
- June 21st National Aboriginal Day Celebration.
- Monthly meetings of the Hamilton Executive Directors' Aboriginal Coalition (HEDAC).
- Attended several Branches of Native Development (BOND) meetings.
- Participated in numerous Hamilton Aboriginal festivities, functions, and gatherings, workshops, AGMs, etc.

Experiential Participation in Aboriginal Homelessness Activities:

- Attended several Healthy Aboriginal Men's weekly group meetings.

- Outreach activities via weekly Friday morning homeless runs with the Hamilton Regional Indian Centre (i.e. distributing food, hot drinks, hygiene packs, and winter clothing) to various "high use" locations in Hamilton.
- Aboriginal Food Bank participation.
- Christmas hamper coordination and distribution.
- Referral services to Aboriginal and non-Aboriginal homeless men.

Interviews with Homelessness Experts in Hamilton:

- 10 Absolute Aboriginal Homeless men.
- 10 Previously Homeless Aboriginal men.
- 3 Aboriginal Outreach Workers.
- City of Hamilton Mental Health Street Outreach Team (10 people).
- Hamilton Executive Directors' Aboriginal Coalition (13 agencies, Executive Directors and President/Board members, Elders).
- Healthy Aboriginal Men's Group.

On-Site Visits to Best Practices Models:

- Na-Me-Res Aboriginal Men's Residence (9 staff interviews).
- Brantford Native Housing - Transitional Home Project.

The opportunity for self-determining input (i.e. types of support needed) within this research project can hopefully assist in a grass roots approach to local autonomy. This information has been gathered by Aboriginal people, for Aboriginal people and belongs to the Aboriginal people in Hamilton. We respectfully acknowledge all participants' contributions to this research project and although false promises were never given, the hope that their "expertise" can make a difference, is always there. Nia:wen Kowa Awke:kon (Thank you very much everyone).

APPENDIX B
BRANT NATIVE HOMES INC.
Brantford Aboriginal Transition Housing Feasibility Report
EXTENDED LIST OF PROGRAMS AND SERVICES

BRANT NATIVE HOMES INC.
Brantford Aboriginal Transition Housing Feasibility Report
EXTENDED LIST OF PROGRAMS AND SERVICES

- For youth: combine housing with business or farm for skills training in a supportive atmosphere (Burtch).
- Replacement and payment of lost identification, setting up of bank accounts, applying for assistance.
- Last months rent fund, rent/utilities arrears fund (Rent Bank in place - referral).
- Counselling on life skills, training, job search, job interview skills, resume writing, employment programming for job-ready clients, education opportunities, interpersonal skills, anger management and conflict resolution, prevention/reduction of substance abuse, healthy sexuality and relationship counselling, self-esteem, parenting, computer literacy, tenant's rights, etc.
- Holistic approach (i.e., prevention and treatment physically, emotionally, spiritually and mentally) based on traditional ways.
- Coordination of access to Traditional ceremonies, medicines, Healers and seers via De dwa da dehs nye>s Aboriginal Health Centre Traditional Healing Program, Enahtig Healing Lodge and Learning Centre.
- Use of language (speak language, signs/information in language).
- Recreational activities during evening leisure time (socials, traditional dancing, drumming and singing, traditional beading, crafts, sewing/quilting/knitting, traditional music and games).
- Counselling: individual, group and family (via referrals).
- Referrals.
- Security checks/reassurance service (buddy system).
- Advocacy (health cards, housing waiting lists, housing options)
- Follow-up/aftercare.
- Skills upgrading with chores in facility (i.e., cooking, cleaning, facility maintenance and repairs) option: teams for chores.
- Meal services and congregate dining, including traditional foods. A cook may be hired to prepare three meals per day. Alternatively, residents could be responsible for preparing their own breakfast and lunch and a part-time cook could prepare dinner. As part of the chores, residents could assist the cook with meal preparation as long as accepted safety measures are enforced during food preparation. Because of liability concerns, residents are not permitted to prepare meals for other residents.
- Emergency clothing and personal need items for residents.
- Laundry room (do own laundry).
- Traditional garden or peace garden.
- Arrange for visiting nurse practitioner to visit to provide prevention information, assessment, treatment and referrals.