The SPRC’s *Profile of Aboriginal Residents*, published in 2015, reported that the Aboriginal community is much younger than Hamilton’s general population and is growing rapidly. According to Statistics Canada’s National Household survey, there were over 15,000 Aboriginal residents in 2011, approximately 3.1% of Hamilton’s population.

In 2016, a City of Hamilton survey of persons experiencing homelessness found that 28% identified as Aboriginal. The tremendous over-representation of Aboriginal persons in the homeless population is common across Canada. This disparity is part of the legacy of Canada’s colonization of Aboriginal Peoples. The resulting intergenerational trauma is the principal cause of higher rates of homelessness and poverty among Aboriginal residents.

This report will explore what intergenerational trauma is, how it relates to historical treatment of Aboriginal Peoples and how it is perpetuated today. Agencies in Hamilton in all sectors serve Aboriginal residents on a daily basis. This report offers insights into ways mainstream organizations can join in the reconciliation process, help to heal families and communities, and move forward in a relationship of trust, dignity and respect between Aboriginal and non-Aboriginal communities.

This report is published by the Social Planning and Research Council of Hamilton (September 2017). Prepared by: Savannah Hope, Social Planner Assistant, Sara Mayo, Social Planner, Cindy Sue Montana McCormack, Senior Social Planner and Jennifer Rollings, Social Planner Assistant. For more information: 905-522-1148 or sprc@sprc.hamilton.on.ca Download this report at www.sprc.hamilton.on.ca/publications

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Cover art “Mother Earth – and the Coming of Nations” by Yvonne Maracle
What Causes Intergenerational Trauma?

Dr. Peter Menzies is a member of Sagamok Anishnawbek First Nation, a faculty member of the Psychiatry Department of the University of Toronto, and a distinguished scholar and therapist. Dr. Menzies was invited to speak in Hamilton in 2015 by the Aboriginal Community Advisory Board at an event to better understand intergenerational trauma, how it continues to impact Aboriginal people today and how it is connected to high rates of homelessness.

The legacy of Canada’s colonial history: racism, discrimination and intergenerational trauma

In his publications including, Intergenerational Trauma from a Mental Health Perspective, Dr. Menzies points to Canada’s major social policies and attitudes that have negatively impacted Aboriginal people for centuries, including:

- **The Indian Act (1876 to present)** – Gave authority to non-Aboriginals to control the everyday life of Aboriginals across Canada including creating artificial segregated settlements (reserves), and regulating the definition of “who is Native.”

- **Residential Schools (1840-1996)** – Designed for the purpose of assimilating Aboriginal people into the dominant culture and ultimately subjecting thousands of Aboriginal children to abuse, neglect, and death. Over 100,000 Aboriginal children were placed in residential schools, enduring long separations from their parents, their communities, their culture, and their spiritual beliefs.

- **Child Welfare, including the “Sixties Scoop”** – Thousands of Aboriginal children have been removed from their families and communities at disproportionately high rates.

- **Society** – In general, widespread racism, discrimination, prejudice, distrust and misunderstanding persists, resulting in high rates of suicide, concurrent disorders, domestic violence, and incarceration, among other impacts for Aboriginal people.

To help understand the relationship between intergenerational trauma and mental health and homelessness, Dr. Menzies has developed the Intergenerational Trauma Model (illustrated on the following page).

“If we do not consider mental illness within the context of historical injustices then we are collecting and presenting information in a vacuum, and perpetuating the stereotype that Aboriginal peoples are more susceptible to mental illnesses than the general Canadian population.” - Dr. Peter Menzies

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Transmission of Intergenerational Trauma

Research has documented ways that trauma caused by residential schools and historical conditions for Aboriginal people is transmitted through generations and continues to affect the population, both socially and biologically, to this day:

“Many passed the abuse suffered on to their children, thereby perpetuating the cycle of abuse and dysfunctional arising from the Residential School System. Subsequent generation of children were left with the consequences of what happened to their parents and grandparents. They grew up without the opportunity to learn their language, to have traditions and cultural knowledge passed down to them, or to be apart of a strong and healthy family and community” – Aboriginal Healing Foundation (2001)

Researchers are now studying the role of “epigenetics” in the transmission of intergenerational trauma. Findings suggest that the impact of trauma can also be carried on genetically, ultimately influencing stress responses coded into the biology of a person’s genetic expressions.2

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Aboriginal Homelessness in Hamilton

In 2016, the City of Hamilton conducted a “Point in Time” survey of 522 residents experiencing homelessness as part of the 20,000 Homes Campaign\(^3\). Overall, 28% of respondents identified as Aboriginal, ranging from a high of 40% among persons aged 16-25, to 9% among those aged 65 and over.

The survey was an opportunity to document the disparities between Aboriginal and non-Aboriginal persons experiencing homelessness in Hamilton. The charts below show that in many areas, including health, foster care and involvement in the justice system, Aboriginal respondents reported higher rates of vulnerability. These disparities reflect the impact of intergenerational trauma discussed in this report and point to the need for societal and systemic changes along with individual supports.

Demographics

Chart 1. Proportion of Aboriginal respondents by age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-25</td>
<td>40%</td>
<td>54%</td>
<td>46%</td>
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<tr>
<td>26-39</td>
<td>32%</td>
<td>91%</td>
<td>9%</td>
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<tr>
<td>40-49</td>
<td>23%</td>
<td>80%</td>
<td>20%</td>
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<tr>
<td>50-64</td>
<td>28%</td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td>65 and older</td>
<td>9%</td>
<td>100%</td>
<td>0%</td>
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</tbody>
</table>

Chart 2. Gender breakdown among Aboriginal respondents, by age group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
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<tbody>
<tr>
<td>16-25</td>
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</tbody>
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Health

Chart 3. Self-reported health and illness indicators

- Mental health issues have affected housing stability: Aboriginal 39%, Non-Aboriginal 32%
- Avoid getting help when ill: Aboriginal 60%, Non-Aboriginal 50%
- Physical disability that would limit type of housing: Aboriginal 24%, Non-Aboriginal 17%
- Chronic health issues with your liver, kidneys, stomach, lungs or heart?: Aboriginal 42%, Non-Aboriginal 37%

Chart 4. Average number of ER visits in last six months

- Total: Aboriginal 2.1, Non-Aboriginal 1.3
- 40 and older: Aboriginal 1.9, Non-Aboriginal 1.2
- Under 40: Aboriginal 2.2, Non-Aboriginal 1.0
- Male: Aboriginal 1.0, Non-Aboriginal 1.8
- Female: Aboriginal 2.7, Non-Aboriginal 1.8

Involvement with child welfare and justice systems

Chart 5. Foster care as a child

- Both sexes: Aboriginal 49%, Non-Aboriginal 22%
- Male: Aboriginal 45%, Non-Aboriginal 14%
- Female: Aboriginal 55%, Non-Aboriginal 26%

Chart 6. Incarcerated in last six months (jail or prison)

- Both sexes: Aboriginal 25%, Non-Abidential 13%
- Male: Aboriginal 30%, Non-Abidential 10%
- Female: Aboriginal 10%, Non-Abidential 6%

\(^3\) For more information about Hamilton’s 20,000 Homes Point-in-Time survey and methods visit: https://www.hamilton.ca/social-services/housing/20000-homes-campaign
The book, *Journey to Healing: Aboriginal People with Addiction and Mental Health Issues* (edited by Peter Menzies and Lynn F. Lavallée), explores ways individuals and communities can heal from the intergenerational trauma that causes high rates of homelessness among urban Aboriginal residents. The foundations of healing are strengths-based approaches, such as:

- Traditional ceremonies, including sweat lodges, vision quests, smudging, and ceremonial dances.
- Applying the medicine wheel as a healing guide to help achieve balance among the four components of self—physical, spiritual, emotional and mental.
- Traditional stories and oral teachings, for example in clinical application by Aboriginal therapists.\(^4\)
- Using Indigenous ways of helping including understanding the traditional worldview of Aboriginal people, the central place of spirit, the significance of relationships, respectful individualism, connection to previous generations, sharing and community, Indigenous knowledge keepers, and wholistic understanding.\(^5\)
- The central role of Elders as spiritual and cultural leaders who “provide cultural teachings, share knowledge of language and medicines and offer spiritual teachings and wisdom”\(^6\)

Dr. Menzies has also highlighted the pioneering work of Duran, Duran, Brave Heart & Horse-Davis in 1998: “A part of healing is to allow the clients to become aware of historical factors, which will help the client to shake off the internalized oppressor. Communities need to be healed through sharing experiences, the provision of hope, collective mourning, and social support. The public has little knowledge of the soul wound.”

Strengthening of Aboriginal service providers allows this healing to occur with Aboriginal therapists, teachers, other support staff: “The need is paramount for programs that support the development of Aboriginal peoples and allow us, as a community, to enhance our knowledge and skills so that we can provide support to community members through health care services, education, public policy, the justice system, and other important elements of our nation’s infrastructure.” (Menzies, P. in *Intergenerational Trauma from a Mental Health Perspective*)

> “Just as food, water and air nurture the body, relationships and feelings of connectedness nourish the heart, mind and spirit. The deep yearning and movement toward connection is […] a central force in a healthy life, while traumatic disconnection is […] the source of most human suffering.”
> - Aboriginal Healing Foundation

The following references are chapters in *Journey to Healing: Aboriginal People with Addiction and Mental Health Issues* (edited by Peter Menzies and Lynn F. Lavallée): \(^4\) Menzies, P. Chapter 5: *Intergenerational Trauma* \(^5\) Hart, M. A. Chapter 6: *Indigenous Ways of Helping* and \(^6\) Manotowabi, S. Chapter 6: *The Role of Elders in the Community*
Urban Aboriginal Service Providers’ Leadership on Eliminating Homelessness

The Aboriginal community in Hamilton has been self-reliant in creating their own networks of support and services to help members of their community experiencing homelessness. This continues a long tradition in Aboriginal communities to help extended family and friends who are experiencing homelessness. For example, in 2014 the SPRC conducted a survey of 455 people attending Hamilton’s National Aboriginal Day festivities which found that 39% of Aboriginal residents had helped a homeless person in the last two years by giving them a place to stay in their home, compared to 26% of non-Aboriginal survey respondents. Two major initiatives have developed out of the urban Aboriginal community’s efforts to eliminate homeless among the City’s Aboriginal residents, first HEDAC and more recently Homeward Bound.

Hamilton’s Executive Directors’ Aboriginal Coalition (HEDAC)

Hamilton has a deep history of Aboriginal social service agencies providing a wide variety of support. In the 1990s, Hamilton was the first urban Aboriginal community in Canada to create a leadership table of Aboriginal agencies, Hamilton’s Executive Directors’ Aboriginal Coalition (HEDAC). HEDAC negotiated with the city for proportional funding to address homelessness with Aboriginal decision-making on how funds should be spent, and funding levels based on the proportion of Aboriginals within the homeless population, rather than the general population. This “made in Hamilton” funding model has recently been adopted by the province of Ontario as well. HEDAC has also collaborated with the City of Hamilton to develop the position of a Senior Project Manager for the city’s Urban Indigenous Strategy to further strengthen Aboriginal leadership in Hamilton (see last page of this report). The members of HEDAC include: De dwa da dehs nye>s Aboriginal Health Centre, Hamilton Regional Indian Centre, McMaster University Indigenous Studies Program, Native Women’s Centre, Niagara Peninsula Area Aboriginal Management Board, Niwasa Kendaaswin Teg, and Sacajawea Non-Profit Housing.

Homeward Bound: Hamilton’s Aboriginal response to prolonged homelessness

Homeward Bound is a program of De dwa da dehs nye>s Aboriginal Health Centre and provides street and peer outreach services, cultural supports, wellness and community resource referrals, as well as housing resources to the chronically and episodically homeless urban Aboriginal population in Hamilton. Since Homeward Bound’s creation in April of 2015, close to 100 Aboriginal residents experiencing chronic or episodic homelessness have been housed, surpassing the city’s targets.

The cultural component of Homeward Bound’s work addressing homelessness has been key to their success in connecting with, housing, and supporting Aboriginal people experiencing homelessness. In interviews conducted in 2016 by the SPRC, clients reported that cultural programming is tremendously valuable, mentioning drumming and learning about their culture as important examples. Since many participants have experienced a disconnection from their families, the sense of community and family that they feel in the program is significant. Homeward Bound participants reported eating together like a family, developing an informal support network, and engaging in activities or teachings all contributed to improving their quality of life by creating meaning, offering opportunities for socialization, and building community.
Honouring the Truth, Reconciling the Future

Priority Calls to Action to address the root causes of homelessness in Hamilton

In 2015, the Truth and Reconciliation Commission of Canada released its report, “Honouring the Truth, Reconciling the Future,” which investigated and documented the impacts and legacy of the Residential School system on Aboriginal families across Canada. In order to redress the legacy of residential schools and advance the process of Canadian reconciliation, the Truth and Reconciliation Commission makes 94 Calls to Action in its final report. Among these Calls to Action, 19 are highlighted here as priority recommendations that address the root causes of homelessness among Aboriginal people in Canada, including locally in Hamilton. Individuals and organizations can consider steps they can take to put these recommendations into action.

**Overall:**

- The recognition and acknowledgment that detrimental Canadian policies (i.e. residential schools) have directly resulted in the various issues facing Aboriginal people today.
- Addressing the overrepresentation of Aboriginal people who are incarcerated and victimized.
- Reducing and closing the gaps in the differences of health status, incarceration, and children in care between Aboriginal and non-Aboriginal peoples.
- Commitment to community-controlled healing and reconciliation, community revitalization, and educational projects for Aboriginal residential school survivors.

**Child Welfare:**

- Reducing number of Aboriginal children in care (all governments).
- This will be done by providing adequate resources to Aboriginal families, with emphasis on keeping families together when it is safe.
- Ensuring culturally appropriate environments for children.

**Education:**

- All governments to develop culturally appropriate early childhood education programs.

**Language, Identity and Culture:**

- Degree and diploma programs in Aboriginal languages.

**Health:**

- Instances of ill health in Aboriginal communities are a direct result of Canadian policies, all governments to acknowledge this and implement health-care rights for Aboriginal peoples.
- All governments to close health gaps between Aboriginal and non-Aboriginal communities, publishing annual reports and assessing long-term trends.
- Recognition of the value of Aboriginal healing practices in health care systems.
- Health-care professionals to be culturally competent in working with Aboriginal peoples.

**Justice:**

- Governments to eliminate the overrepresentation of Aboriginal peoples in custody. Specifically, youth within 10 years.
- Governments to provide culturally relevant services to inmates, halfway houses and parole services. This is inclusive of implementing Aboriginal healing lodges in correctional systems.
- Governments to provide adequate funding on Aboriginal specific victim programs. Additionally, establish an inquiry into the disproportionate victimization of Aboriginal women and girls.
- Governments to recognize Fetal Alcohol Spectrum Disorder (FASD) prevention as a high priority (programing, sentencing, needs of offenders with FASD).

**Business and Reconciliation**

- All businesses in Canada to adopt United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) principles. Inclusive of this is consultation for economic development with Aboriginal peoples, ensuring equitable access to jobs and education opportunities and providing education for employees on the history of Aboriginal peoples.

**Sports and Reconciliation**

- All levels of government to ensure long-term Aboriginal athlete development and growth, with support for the North American Indigenous Games (inclusive of funding).
Steps Towards Reconciliation in Hamilton

I am Affected and I am Committed

In 2013, the Hamilton Legal Clinic established YÉN:TENE (Mohawk for “you and I will go there together”), an Indigenous justice initiative that strives to build relationships between the Clinic and the Indigenous community.

Together with the Professional Aboriginal Advocacy Networking Group (PAANG), the Hamilton Legal Clinic and the YÉN: TENE Advisory Committee, have launched two campaigns “I am Affected” and “I am Committed” (with funding from Legal Aid Ontario). Campaign posters are displayed at bus stops, libraries, and recreational centres in Hamilton.

“The I am Affected campaign was developed to initiate conversation and provoke thought on the Canadian Indian Residential School system and the intergenerational trauma caused by that system,” explains Lyndon George, the Indigenous Justice Coordinator of YÉN:TENE at the Hamilton Legal Clinic.

Through the “I am Committed” poster campaign and website www.iamcommitted.ca, members of the public can make personal commitments such as implementing calls to action from the Truth and Reconciliation Commission and integrating them into their daily lives and/or professional work.

City of Hamilton Urban Indigenous Strategy and Indigenous-led Poverty Reduction Strategy

In 2016, the City of Hamilton hired a Senior Project Manager for the development of an Urban Indigenous Strategy “that will act as a commitment and identify actions for the City to build a stronger relationship with the Indigenous community. The strategy will also promote a better understanding among all Hamilton residents about Indigenous histories, cultures, challenges and contributions. This important work will be done in collaboration with the Indigenous community in Hamilton, with guiding principles that honour traditional knowledge and teachings.” Hamilton’s Urban Indigenous Strategy along with updates about events and initiatives are available at: www.hamilton.ca/indigenous

Another important milestone and testament to the City’s commitment to principles of self-government and reconciliation is City Council’s decision in 2017 to invest $1 million annually over 10 years for Canada’s first Indigenous-led poverty reduction strategy. The programs across Hamilton that will be delivered by HEDAC-member agencies as part of this strategy address intergenerational trauma in multiple ways, including through cultural programing, advocacy and supports for tenants and survivors of domestic violence, housing stability assistance, and youth employment and engagement programs.

This report

This report is one tool to educate service providers and community members in Hamilton about the reality of how colonization has impacted Aboriginal people in Canada, and how the effects persist to this day. The concept of residential schools and intergenerational trauma is new to many non-Aboriginal people, so as one action in the larger initiative towards reconciliation, this understanding must be developed across communities. Reading this report and integrating the learnings into everyday actions are steps Hamilton’s non-Aboriginal service providers and community members can take towards reconciliation.