Urban and Rural Homelessness in Northern Ontario:

an Indigenous Lens

by

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Abstract

Indigenous Peoples are at a higher risk of experiencing homelessness in Canada than non-Indigenous Peoples. As a result, there is a disproportionate representation of Indigenous Peoples in the homeless population. Studies have been conducted in order to identify what services are needed for people living with homelessness in Canada. However, these have failed to include an Indigenous specific focus and have not included the perspectives of Indigenous people with lived experiences. Furthermore, the majority of previous studies explore homelessness in large urban settings and seldom focus on rural or Northern Ontario. A secondary analysis on a photovoice study completed in 2014 on homelessness in Northern Ontario was done to highlight the unique experiences and needs of the Indigenous participants from the previous study. This research focused on health impacts and service provision requirements surrounding Indigenous homelessness in four communities in Northern Ontario. A literature review was also conducted in order to explore the laws and policies surrounding the rights and legal responsibility for services in relation to UNDRIP and the TRC. All of the photovoice data represents lived homelessness or hidden homelessness experience, from the perspectives of Indigenous participants. These are their voices.

Keywords: Indigenous; Homelessness; Northern Ontario; Rural; Urban; Hidden Homelessness

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Situating Self

My name is Isabelle-Gabriele Hendel. I am a descendant of European ancestors from Germany, Belgium, and Austria. I was born and raised in the Greater Sudbury area which is situated on the traditional territory of the Atikameksheng Anishnawbek. I have lived here my entire life along with my parents Raymond Hendel and Catherin Schler-Hendel. I also have three full siblings who were raised in Sudbury along with me, and a half-brother who was raised by his mother in Montreal. My half-brother is the oldest of us all, followed by my older sister, myself, my younger sister, and finally, my younger brother.

Growing up I did not receive formal schooling about the history and custodians of the land I lived in relation with. My parents, however, took learning about other cultures very seriously and introduced my siblings and me to various cultures including Indigenous culture and history. We attended powwows, spent time with Indigenous people through my father and uncle's friends, we explored museums across the country, and learned about traditional and spiritual activities. Although these experiences gave me insight on Indigenous culture that many of my peers in elementary school, high school, and even in my undergraduate degree did not have the opportunity to get, I still found myself needing to seek out more knowledge on colonialism and Indigenous worldviews.

My father is a physician here in Sudbury and my mother is a nurse. Through them, I was raised to appreciate and always strive to learn. Education was important for my family, and it was viewed as my "job" to do well in school. However, my parents also emphasized the need to enjoy learning and encouraged us to explore the passions in the different areas that they saw in me and my siblings.

I am still learning about how I have benefitted from Canada's settler-colonial history and I am still learning about my privilege as a Caucasian. My understanding of the history of the land on which I was raised is changing. At times this is uncomfortable and intimidating. Walking into a completely new way of thinking is never easy, but I was open to taking in everything I could from this experience. The most important thing is that I am pushing myself to do so. I came to this program voluntarily. I decided for myself that I needed to learn more about Indigenous worldviews and Indigenous perspectives. I plan to be in Northern Ontario for the rest of my life and I don't want to be ignorant or uneducated about people with whom I will be working and living.

When we entered the Masters in Indigenous Relations program, we were asked to speak about ourselves and what brought us to this step in our academic careers. I responded that I did not know any terminology or Indigenous methodologies, and I came to this program because I wanted to learn and was open to thinking differently and seeing the world through new, fresh, eyes.

When I reflect on this, I see that I was in a place of needing to be cantered in my research. Cantering yourself is one of the many things I have taken from this program. In my previous studies in biology, I had to act as a scientist, I was not supposed to bias my research by centring myself in it. But through this program, I have come to realize that you bias your research if you do not centre yourself in it. The place from which I write is from the position of who I am and what I know. I have a responsibility to myself and to my community to do research that is grounded in this knowledge as well as the responsibility to search for an understanding of how I can be a positive contributor to the community.

My community is every living thing that influences me or that I influence, which includes all people with whom I will come into contact in the future, both in my personal and professional life. I am trying to do research that will assist in identifying and doing what needs to be done and I take this responsibility seriously. I want to be an Ally. I don't know that I am there yet, or if I will get there. I am trying to learn, to listen and to assist. I am doing research that will allow me to assist in decolonizing programming for Indigenous people living with homelessness, research that will highlight the need for changes to Indigenous-specific programming for these people.

A young Indigenous person, whom I have known now for approximately 10 years, inspired me to undertake this research project. When I met him, he was homeless. That is his story and it is not mine to discuss. However, I will share with you my perspective on the story. Knowing him has opened my eyes even further to the injustices that Indigenous Peoples living with homelessness experience as a result of their cultural background and history. He first spoke to me about the importance of changing the programming available for Indigenous Peoples living with homelessness in Sudbury.

When the opportunity arose to relate my thesis topic to Indigenous homelessness, I knew that this program was meant for me. I hope that my research will be influential, and at the very least, that it can open the eyes of at least one more person.

Chapter 1: Introduction

Results from the 2014 General Social Survey determined that two percent of Ontario residents experience homelessness at some point in their lives (Rodrigue, 2016). For context, two percent of Ontario represents 225,000 people. The same survey showed that it was slightly more likely that people from rural parts of Ontario experienced homelessness. In both city and rural settings, Indigenous respondents reported having experienced homelessness at higher rates than non-Indigenous respondents. Similarly, in both city and rural settings, Indigenous respondents reported having experienced hidden homelessness at higher rates than non-Indigenous respondents (Rodrigue, 2016). It is clear in the literature that Indigenous Peoples are overrepresented among those living with homelessness.

We are continuing to see a trend in the literature which points to a housing crisis and increased rates of homelessness among Indigenous people living both in First Nation communities and in the broader non-Indigenous communities (Anaya, 2014). However, research on homelessness has focused primarily on groups of people with mixed ethnicities and has lacked an Indigenous focus. Furthermore, the focus of previous research has been on large urban areas and has not explored Northern Ontario or its rural communities (Kauppi et al., 2017).

In this thesis, an analysis was done on data from a photovoice study regarding Indigenous homelessness across four sites in Northern Ontario: Sudbury, Cochrane, Constance Lake, and Fort Albany First Nation. This research sought Indigenous-focused and Indigenous-led identification of needs and suggestions for solutions.

What is homelessness? Its definition varies across states and countries (Busch-Geertsema, 2010). The European Typology on Homelessness and Housing Exclusions (ETHOS) has tried to develop ‘official’ definitions of the categories used to describe the homeless

population in Europe (Busch-Geertsema, 2010). Their definitions and understandings are recognized at the national level by European states and include Rooflessness, Houselessness, Insecure or Inadequate housing, Inadequate housing and social isolation within a legally occupied dwelling, Inadequate housing (secure tenure), Insecure housing (adequate housing), and Social isolation within a secure and adequate context (Edgar, 2009). Each category has physical, legal, and social implications as seen in Table 1.

Table 1. Seven theoretical categories of homelessness

Table 1.1: Seven theoretical categories of homelessness

Conceptual category		Operational categories	Physical domain	Legal domain	Social domain
Homelessness	1	Rooflessness	No dwelling (roof)	No legal title to a space for exclusive possession	No private and safe personal space for social relations
	2	Houselessness	Has a place to live, fit for habitation	No legal title to a space for exclusive possession	No private and safe personal space for social relations
Housing exclusion	3	Insecure and inadequate housing	Has a place to live (not secure and unfit for habitation)	No security of tenure	Has space for social relations
	4	Inadequate housing and social isolation within a legally occupied dwelling	Inadequate dwelling (unfit for habitation)	Has legal title and/or security of tenure	No private and safe personal space for social relations
	5	Inadequate housing (secure tenure)	Inadequate dwelling (dwelling unfit for habitation)	Has legal title and/or security of tenure	Has space for social relations
	6	Insecure housing (adequate housing)	Has a place to live	No security of tenure	Has space for social relations
	7	Social isolation within a secure and adequate context	Has a place to live	Has legal title and/or security of tenure	No private and safe personal space for social relations

Source of Table 1.1. Edgar, 2009.

According to the Ontario Report of the Expert Advisory Panel on Homelessness, homelessness is divided into four types of living situations (MMAH, 2015 from Kauppi, 2017). These include: 1) Unsheltered; 2) Emergency sheltered; 3) Provisionally Accommodated; 4) At Risk of Homelessness. The Unsheltered category represents people living in conditions such as

in vehicles, garages, attics, closets, or in buildings or makeshift shelters which are not designed for human habitation. The Emergency sheltered category refers to people who are affected by events like natural disasters or any other violence and who then temporarily live in shelters. Provisionally accommodated are people who have temporary housing often with friends or family members "without a guarantee of continued residency". Typically, these people are not paying rent, and this may be referred to as "couch-surfing". People under this category may also be in short-term rental accommodations such as hotels, motels, and hostels or in institutional care such as prison, medical institutions, residential treatment, group homes, or addiction management programs. At risk of homelessness as a category refers to people who may be susceptible to becoming homelessness due to hardships, lack of appropriate housing, insecure housing, or in a dwelling without adequate amenities (Kauppi, 2017). Homelessness is often attributed to poverty, mental illness and addictions, inadequate housing, and domestic violence (Kauppi, 2017). We have chosen to follow Ontario's definitions of homelessness because all of our participants are from Northern Ontario.

Throughout this thesis, the term precarious housing will be used as a definition for accommodation that is not fit for human habitation as is or that does not give secure possession. The terms 'insecure housing' and 'inadequate housing' from ETHOS represent this term well (Edgar, 2009). For our study, people in insecure housing are people who do not have security of possession of their accommodations, are under the threat of evictions, or are under the threat of violence (Edgar, 2009). These people may be living temporarily with family or friends or may not have legal tenancy. Inadequate housing for our study means housing that has severe physical issues which can be dangerous to the health of the people living in it or housing where people are living with overcrowding (Edgar, 2009).

Hidden homelessness is not as visible to the public as people have temporary accommodation, however their situation is not sustainable; they may be couch surfing or using other short-term accommodations such as those falling into the category of "Provisionally accommodated". Because of the hidden aspect, they may be under-represented or even absent from data about homelessness. One study showed that part of the homeless population cycles between periods of hidden and absolute homelessness (Anucha et al., 2007).

There is a disproportionate representation of Indigenous Peoples in the homeless population. Hidden homelessness is an explanation for the lack of understanding of the topic of Indigenous homelessness (Baskin, 2007). In Canada Indigenous Peoples represent a proportionately larger part of the homeless population than do non-Indigenous peoples. The colonial history of Canada, the trauma endured by Indigenous populations as well as the continuing effects of colonialism in areas such as health, economy, legal rights, housing, and cultural security are found as explanations for the higher rate of homelessness in this population (Baskin, 2007; MMAH, 2015). Several studies have also identified child welfare related to the 'Sixties Scoop', the removal of an estimated 15, 000 Indigenous children from their families to non-Indigenous foster homes, as well as foster care in general as a factor in Indigenous homelessness (Harvey, 2016; Clarkson et al., 2015; Dickason & McNab, 2009). Although we are seeing trends of increased rates of homelessness in Indigenous communities, much of the homelessness experienced goes undocumented as a result of hidden homelessness and that the data on homelessness may not be as representative as previously thought (Anaya, 2014; Kauppi & Pallard, 2015; Kauppi et al., 2017).

Indigenous homelessness is not only a lack of physical housing; it may be more fully described as a loss of culture, spirituality, emotions, or physical relationships with Indigeneity

(Thistle, 2017). The full description of Indigenous homelessness focuses through a composite lens of Indigenous worldviews including individuals, families, and communities isolated from their relationships to land, water, place, family, kin, each other, animals, cultures, languages, and identities (Thistle, 2017). Indigenous homelessness will be explored in detail throughout this thesis.

This thesis focuses on providing an Indigenous-focused and Indigenous-led identification of the needs, suggestions, and solutions from the perspective of participants with lived Indigenous homelessness experience.

Chapter 2: Thesis Hypothesis and Objectives

Hypothesis

Indigenous people are expected to represent a large portion of the data collected in the previous study. The living conditions across sampling sites are predicted to be different. Hidden homelessness in the rural populations is expected to be more severe than in the urban populations. We expect to see a link between health and housing within the context of the interviews.

Objectives

1) Assess the degree of compliance of current practices to UNDRIP and the TRC.
2) Given the established link which exists between health and housing this thesis will compare the living conditions across all four sites and, between urban and rural settings to support the conclusion that poor housing has an adverse impact on the health of Indigenous Peoples living with homelessness (Kauppi et al., 2021).
3) Examine service provision given the established link which exists between service provision and outcomes for people living with homelessness this thesis will compare the living conditions across all four sites and, between urban and rural settings to support the conclusion that poor service provision has an adverse impact on the outcomes of Indigenous Peoples living with homelessness (Frankish et al., 2005; Gaetz, 2010).
4) Bring an Indigenous lens to homelessness.

Chapter 3: Compliance of Current Practices Regarding Indigenous Homelessness to UNDRIP and the TRC: Literature Review

This section of the thesis will focus firstly on the understanding of the United Nations Declaration on the Rights of Indigenous Peoples UNDRIP, the Truth and Reconciliation Commission of Canada TRC, and Indigenous customary practices and Canadian laws in relation to Indigenous homelessness (UNDRIP, 2007). Articles from UNDRIP and from the TRC will be explored in order to determine legislation which could be beneficial in supporting Indigenous homelessness initiatives. The TRC recommendations for the implementation of UNDRIP will also be investigated in relation to Indigenous homelessness. I will then examine the relevance of the National Housing Strategy of Canada to UNDRIP and to the TRC, its capacity to promote Indigenous resurgence and its overall value as a program to support anti-settler colonialist practices and to change the system for Indigenous Peoples living with homelessness. Finally, I will explore various aspects of resurgence efforts, principally in the form of spiritual service provision in homelessness programming will also be explored.

Before European contact, Indigenous communities had effective ways to prevent and treat illness and injury and manage social problems (Dennis et al., 1988). Housing and homelessness were not issues. Indigenous homelessness stems from colonization and despite the disproportionate experiences of homelessness among Indigenous peoples living in Canada, current legislation and policies lack an Indigenous-specific focus. It is important for Canada to implement aspects of the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) and the Truth and Reconciliation Commission of Canada (TRC) in dealing with legislation regarding Indigenous homelessness and housing as well as in policymaking and the application of those policies in service provision as these have the potential for being used as

tools moving forward. UNDRIP and the TRC can be applied to policies regarding homelessness in order to guide it in a culturally appropriate, effective and inclusive direction.

United Nations Declaration on the Rights of Indigenous Peoples

After twenty years of debate on September 13th, 2007, the General Assembly of the United Nations adopted UNDRIP, a comprehensive statement delineating and defining the rights of Indigenous Peoples (Henderson, 2008). Only four countries opposed its adoption, including Australia, New Zealand, the United States, and Canada (Henderson, 2008). Canada explained its position by saying that it opposed some of the articles in the UNDRIP document and that it required two further years of discussion (Henderson, 2008). On May 10th, 2016 in Canada, the Government announced the country's latest position on UNDRIP. The federal minister of Indigenous and Northern affairs confirmed that Canada is now a full supporter of UNDRIP, without qualification and committed to its full and effective implementation (Borrows et al., 2019). On 21 June 2021, the *United Nations Declaration on the Rights of Indigenous Peoples Act* (S.C. 2021, c. 14) received Royal Assent.

The harmonization of UNDRIP into existing law and policy relating to Indigenous Peoples is a source of tension as it expands the scope of existing human rights by explicitly referring to the right of self-determination, by embracing collective rights, and by setting out the interrelationship between heritage, land, and development as rights (Engle, 2011). However, on the other hand, contradicts itself by deliberately avoiding forms of Indigenous self-determination such as the inclusion of Indigenous Peoples in decision making and in the implementation of those services, thereby privileging individual civil and political rights.

While UNDRIP has made significant strides in areas such as the protection of cultural heritage, land rights, and development, it does so with significant compromises. Compromises were made in the development of a definition for self-determination, which was responsible for much of the controversy related to the negotiations of the final article's adoption (Engle, 2011). According to Article 3 of the 1993 draft, "Indigenous peoples have the right of self-determination. By virtue of that right, they freely determine their political status and freely pursue their economic, social and cultural development." (High Commissioner for Human Rights, 1994). An additional provision, Article 31, was added on the right to self-determination which listed the areas over which Indigenous Peoples would have control: "culture, religion, education, information, media, health, housing, employment, social welfare, economic activities, land and resources management, environment and entry by non-members" (High Commissioner for Human Rights, 1994).

The addition of Article 46(1) of UNDRIP is proof of a major compromise which makes it clear that the declaration does not support external forms of self-determination (Engle, 2011). "Nothing in this Declaration may be interpreted as implying for any State, people, group or person any right to engage in any activity or to perform any act contrary to the Charter of the United Nations or construed as authorizing or encouraging any action which would dismember or impair totally or in part, the territorial integrity or political unity of sovereign and independent States". Compromises such as this one explain the controversy pertaining to the incorporation of UNDRIP into current law, despite the potential benefits it may produce which will be discussed later.

Controversies surrounding the compromises and contradictions such as the one previously discussed can give rise to arguments that negate the reconciliation and resurgence

potentials of UNDRIP. As a declaration, UNDRIP is essentially a template showing other nation-states how to put in place a corresponding equivalent to Canada's section 35[1] in their constitutions The treaties between Indigenous Peoples and the Crown created legally binding obligations while UNDRIP is just a declaration; it is not legally binding and does not impose legal obligations on governments (Gómez, 2019). However, like all statements of human rights, it does carry moral force.

Many aspects of UNDRIP have been validated by Indigenous activists throughout it's development and endorsed as steps towards beneficial change. Articles from UNDRIP provide for the recognition of the rights of Indigenous Peoples to self-determination (art. 3), free, prior, and informed consent to agreements touching their lands and modes of government (art. 10), self-governance (art. 4), and land and resources (art. 26). Applying these articles to existing laws has the potential for positive changes for the rights of Indigenous Peoples. However, these changes need to be made in ways which recognize Indigenous Peoples and governments as equals. For example, British Columbia's *Declaration of the Rights of Indigenous Peoples Act*, SBC 2019, c. 44, mandates action plans and annual reporting on progress of programming and policies for each government department and requires government departments to prepare and implement those action plans in consultation with the Indigenous Peoples in British Columbia.

Indigenous practices have shaped UNDRIP, the TRC, and Canadian law. For example, the UNDRIP declaration and the TRC both recognize sacred relationships to water, land, and

[1] *Constitution Act, 1982*, s. 35 (1) The existing aboriginal and treaty rights of the aboriginal peoples of Canada are hereby recognized and affirmed.
(2) In this Act, ***aboriginal peoples of Canada*** includes the Indian, Inuit and Métis peoples of Canada.
(3) For greater certainty, in subsection (1) ***treaty rights*** includes rights that now exist by way of land claims agreements or may be so acquired.
(4) Notwithstanding any other provision of this Act, the aboriginal and treaty rights referred to in subsection (1) are guaranteed equally to male and female persons.
https://laws-lois.justice.gc.ca/eng/const/index.html

spirit, for example, and that recognition is a positive step in creating relationship-driven legal orders that take all aspects of life into account (UNDRIP, 2007; TRC, 2015). For example, UNDRIP recognizes the sacred relationship to Nibi (water). Article 25 of UNDRIP focuses on the right of Indigenous Peoples to "maintain and strengthen their distinctive relationship" with "land, territories, waters and coastal seas and other resources". Through these documents, Indigenous practices are influencing the direction of new legislation in Canada in terms of Indigenous views on relationships as well as in terms of Indigenous ways of doing (Borrows, 2002).

Truth and Reconciliation Commission of Canada

In the decade prior to declaring its support of UNDRIP, Canada established the Truth and Reconciliation Commission of Canada (TRC) in order to highlight the historical and lasting impacts of the Indian residential schooling system on Indigenous Peoples (Stanton, 2011). In June 2015, after some eight years of hearings and study, the TRC released its findings as well as 94 "calls to action". The purpose of the 94 calls to action was to develop an action-based plan regarding reconciliation between Canada and Indigenous Peoples (Truth and Reconciliation Commission of Canada, 2015). There is a close relation between the calls to action and UNDROP. According to Article 43 of the calls to action, UNDRIP is the "framework for reconciliation" and the TRC calls upon the federal, provincial, territorial, and municipal governments to adopt and implement UNDRIP fully (Truth and Reconciliation Commission of Canada, 2015).

Despite the publication of the 94 calls to action and despite Canada's adoption of the *UNDRIP Act*, the actual application of these documents has not, to this date, been completed.

Canada's leadership on the matter of Indigenous affairs and its failure to address Indigenous issues in many areas, such as Indigenous housing, education, youth suicide, and missing and murdered Indigenous women, has been highly debated (Mitchell, 2019). Many other issues such as health, poverty, and homelessness have also been brought to light as areas in which Canada has neglected to recognize and address gaps between Indigenous and Non-Indigenous people in Canada (Mitchell, 2019).

In May 2018, Bill C-262 was introduced to the House of Commons and proceeded to the Senate. This Bill was an Act to ensure that the laws of Canada are in harmony with UNDRIP (Parliament of Canada, 2019). This bill was received Royal Assent on June 21, 2021 and affirms UNDRIP as a "universal international human rights instrument with application in Canadian law" (Borrows et al., 2019; Bill C-262, 2021). It requires the government to make all laws consistent with UNDRIP as well as requiring them to consult with Indigenous Peoples and "to develop and implement a national action plan to achieve the objectives of UNDRIP" and follow progress within the implementation of that plan (Borrows et al., 2019).

As Canada has moved to implement changes incorporating the rights of Indigenous Peoples to its laws, there has also been a movement towards resurgence of Indigeneity (Sweeny, 2013). Indigenous resurgence is conceived as the disruption of "colonial physical, social and political boundaries designed to impede our actions to restore nationhood," where, in order to live as self-determining nations, colonial institutions, policies, and constructs must be confronted and deconstructed (Corntassel, 2012). Decolonization as a tool for resurgence offers different pathways for Indigenous Peoples to reconnect with relationships to traditional land and water-based practices (Corntassel, 2012). Resurgence has a four-century-long history, and its many definitions incorporate the resistance to colonial impositions and the reclamation of Indigenous

contexts such as knowledge, values, ethics, and processes, ways of knowing, doing, and being (Sweeny, 2013). The aim of which is the transformation of "the colonial outside into a flourishment of the Indigenous inside" (Sweeny, 2013).

Indigenous resurgence is meant to address issues which exist as a result of gaps in areas such as health, education, housing and poverty between Indigenous and non-Indigenous Peoples in Canada which have been created by settler colonialism. These gaps have resulted in injustices which have left Indigenous Peoples confronting systemic barriers and disproportionately vulnerable to financial instability, health issues, and discrimination as well as, diminished employment, economic opportunities, and cultural connections thereby creating a need for resurgence efforts within these areas (Leach, 2010).

Resurgence efforts

What does this mean for resurgence? Just as the laws of the nation-state are beginning to include Indigenous perspectives, worldviews, and ways of knowing and doing, we must move towards creating programming which is more culturally appropriate for Indigenous Peoples. Otherwise, there will be a dichotomy between the perspective that law articulates and the perspective that programming transmits; coherence requires concomitant movement. Creating opportunities for indigeneity within policies and programming facilitates resurgence.

Indigenous homelessness in Canada is one area where resurgence ca be discussed in relation to settler colonialism, UNDRIP, the TRC. In Canada, Indigenous Peoples are 10 times more likely to experience homelessness than non-Indigenous people (McCallum & Isaak, 2011). These numbers are, however, thought to underrepresent the true magnitude of Indigenous

homelessness (Belanger et al., 2013; First Nations, Métis, and Inuit Urban and Rural Homelessness policy statement, 2016; Government of Canada, 2018).

The roots of Indigenous homelessness stem from colonialism. Colonization affected relationships between Indigenous Peoples and themselves, family, community, land, water, animals, culture, and language (Bingham et al., 2019; Thistle & Smylie, 2020).

The arrival of Europeans disrupted the lives of Indigenous Peoples (Stewart, 2015). The rate at which physical and mental health issues and social problems manifested themselves in Indigenous Peoples increased significantly (Waldram, 2006). The rate at which they died increased dramatically; he deaths of over 90% of Indigenous Peoples who inhabited North America before European contact are attributable to the arrival of infectious diseases and changes in traditional diet (Kirmayer et al., 2000; Waldram, 2006).

The government of Canada developed and put into place policies which aimed to destroy Indigenous culture (Stewart, 2016). These policies, established in the 1800s, included "the creation of land reserves and residential schools, child welfare apprehension and adoptions, and strict bureaucratic control" (Stewart, 2016). The government created settlements and forced Indigenous Peoples from their traditional lands onto grouped band settings, often on undesirable plots of land with little or no natural resources (Dickason, 1997). New social structures and ways of life were forced upon them. This has been referred to as 'forced homelessness' and is still experienced in the form of intergenerational trauma (Stewart, 2016). Colonialism has had many lasting effects on Indigenous People such as increased mental and physical health problems, precarious housing, and homelessness (Webster, 2015; Stewart, 2015).

The experience of residential schools is the primary cause of the damage to Indigenous Peoples and culture and has had long-lasting effects (Stewart, 2016). These schools were

established in the 1800s and were run by Christian churches. Their goals were to eliminate Indigenous culture, to "kill the Indian in the child" (TRC, n.d.), and to assimilate Indigenous Peoples into Euro-Christian culture (Stewart, 2016). The government sought to accomplish its goals by removing children from their families and placing them in boarding schools, by forbidding them to speak their native languages, and by giving them a Christian name. Many children were subjected to physical and sexual abuse from those in authority and many died there from illnesses such as tuberculosis, influenza and malnutrition, and from drowning and exposure when they tried to escape or by suicide when they could not (TRC, 2015).

Another example of the colonial impact on Indigenous Peoples is the Sixties Scoop, a child welfare system policy which removed Indigenous children from their families and placed them in foster care or for adoption (Humphreys, 2015). In most cases, these children were apprehended simply because they were Indigenous and, as a result, their families, communities, identities, and culture were removed from them. As such, the *Indian Act*, R.S.C., 1985, c. I-5, and related policies have been labelled as cultural genocide (Bingham et al., 2019).

The intergenerational trauma extends beyond the survivors of the residential schools and the survivors of child welfare policies such as the Sixties Scoop; it affects their parents and grand-parents and as well as their own children and grand-children. Its social, economic, and health impacts are still felt to this day (Stewart, 2016). When children were removed from their communities, neither the parents nor the children were offered support for dealing with the grief and the loss occasioned. Children born into these families and communities who have been dealing with these traumas are also affected by the social and health-related effects. As a result of their removal from their families and communities, they children lost access to important basic life skills pertaining to positive parenting, relationships, and healthy eating (Stewart, 2016).

Canada's policies have also contributed to the loss of skills needed to secure housing and manage money and must be included as a factor in the disproportionate representation of Indigenous Peoples living with low socio-economic status and with homelessness. Homelessness is often attributed to poverty, mental illness and addictions, inadequate housing, and domestic violence all of which are associated with the previously mentioned colonial disruptions of relationships (Kauppi, 2017).

Unlike the colonial definition of homelessness, Indigenous homelessness is defined not only as the lack of housing but also as a loss of "relationships to land, water, family, kin, each other, animals, cultures, languages and identities" (Thistle, 2017; Bingham et al., 2019). These losses have resulted in cultural, spiritual, emotional, and physical disconnects for Indigenous homeless Peoples. As a result, these people cannot reconnect with their indigeneity or lost relationships. The TRC, UNDRIP, and Indigenous protocols do not mention the word homelessness. However, the word 'home' is included 146 times in the TRC and usually in the context of loss and enforced separation (TRC, 2015). This demonstrates the importance of home for Indigenous Peoples and we can apply our understanding of its importance to policies in relation to Indigenous homelessness.

In Canada, the dispossession of Indigenous Peoples from their traditional lands and many policies, as previously discussed, established colonial dominance. "There is a colonial milieu to homelessness that reiterates the historical practice of disenfranchisement of Indigenous Peoples from their homeland, be it through residential schools, the reserve system, and various carceral social policies" (Ansloos, 2017). Contemporary homelessness reproduces the colonial uprooting of the original inhabitants from their ancestral homes and lands Indigenous resistance to homelessness and related social action thus are intermingled with Indigenous sovereignty

(Ansloos & Wager, 2020). Both the TRC and UNDRIP mention Indigenous sovereignty, unlike Indigenous homelessness. Despite the large and disproportionate experience of Indigenous homelessness in Canada, current legislation and policies on this subject are lacking an Indigenous-specific focus. Such a focus is where sovereignty, self-determination, free, prior and informed consent, and resurgence can be discussed as needs relating to Indigenous homelessness in Canada (Christensen, 2016).

According to articles 3 and 4 of UNDRIP, Indigenous Peoples have the right to self-determination. These articles state that Indigenous Peoples have the right to "freely pursue their economic social and cultural development" and in exercising that right "have the right to autonomy or self-government in matters relating to internal and local affairs" (UNDRIP, 2008). However, the majority of service provision offered to Indigenous Peoples living with homelessness is provided by non-profit organizations funded by the government or by faith-based non-profit organizations which are not Indigenous-led (Von Riesen, 2020). Given the cultural impact of these services, Indigenous Peoples have the right to be at the forefront of decision-making for the development of such programming; moreover, their involvement in programming yields more effective results for Indigenous Peoples living with homelessness (Leach, 2010; Thistle & Smylie, 2020). Therefore, articles 3 and 4 are not being properly applied in this area.

Article 21 of UNDRIP states: "Indigenous peoples have the right, without discrimination, to the improvement of their economic and social conditions, including inter alia, in the areas of education, employment, vocational training and retraining, housing, sanitation, health and social security" (UNDRIP, 2008). A right to housing is explicitly included within the declaration. The second section of this article even sets out that states shall "take effective measures and, where

appropriate, special measures to ensure continuing improvement of their [Indigenous peoples'] economic and social conditions". Under section 5 of the Canadian UNDRIP Act, the government is obligated to ensure that Canadian laws are consistent with UNDRIP. Conformity with UNDRIP requires that, in the area of homelessness, the government make changes to its Indigenous housing initiatives. Moreover, Article 21(2) of UNDRIP provides for special measures to ensure the continuing improvement of the economic and social conditions of Indigenous Peoples. Given that Indigenous homelessness has been increasing in Canada — it has even been referred to by homelessness researchers as an epidemic (Patrick, 2014) — the housing situation of Indigenous People qualifies for the provision of such 'special measures' from the government of Canada in changing programming for Indigenous Peoples living with homelessness to arrest that downward trend.

What is currently offered in Canada? On 21 June 2019, the National Housing Strategy Act National Housing Strategy Act, S.C. 2019, c. 29, s. 313, received Royal Assent. Section 4 provides that housing is a right in Canada and not an earned dignity. Canada now has an obligation to provide its citizens with decent and affordable housing. The new strategy was named Reaching Home.

Prior to Reaching Home, most of the funding to address homelessness flowed through the Harper government's Homelessness Partnering Strategy (HPS) (Seltz & Roussopoulos, 2020). Using a Housing First approach, this strategy was based on an offer of immediate access to permanent housing instead of the premise of housing readiness (Seltz & Roussopoulos, 2020). Before Housing First, clients would have to earn their way back into independent housing by proving sobriety, among other things. This strategy was successful in many cases as it acted as a form of access to treatment for drug and alcohol abuse (Seltz & Roussopoulos, 2020). However,

the Housing First strategy was not focused on Indigenous ways of knowing or Indigenous-specific needs (Alaazi et al., 2015). Research found that "significant structural constraints, particularly the lack of culturally appropriate affordable housing in the city and the more general systemic erasure of Indigeneity from the urban socio-cultural and political landscape" had mixed impacts on the Indigenous participants who still felt, as they did while homeless, disconnected from land, family, and community (Alaazi et al., 2015). Arguably, the strategy continued the cycle of colonialism by dismissing the needs of Indigenous Peoples and displacing them further by ignoring the relationship factors of housing including family and community supports.

In 2019, the Trudeau administration replaced the HPS with Reaching Home; while preserving the positive outcomes from Housing First, it focuses on funding municipalities and local service providers directly (Seltz & Roussopoulos, 2020), the logic being that every individual community has its own housing needs. This strategy sets aside $413 million to address Indigenous homelessness issues in urban centres through 2028 (Employment and Social Development Canada, 2019). The funding is geared to "permanent supportive housing, non-supported housing, and Indigenous housing options delivered by Indigenous organizations" (Employment and Social Development Canada, 2020).

Unfortunately, hidden homelessness and community-oriented approaches seem to be overlooked in the new housing strategy (Seltz & Roussopoulos, 2020). Hidden homelessness is thought to be one of the major factors influencing the correct enumeration of homeless Indigenous Peoples who are less likely to access homeless supports and services, even when they are inadequately housed (Kauppi et al., 2017). Furthermore, the new National Housing Strategy's goal of a 50% reduction in homelessness over the next 10 years is contradictory to Bill C-97's

understanding of the right to housing, which should ensure that everyone is appropriately housed (Réseau Québecois des OSBL d'habitation, n.d).

This goes against articles 43 and 44 of the TRC's calls to action (TRC, 2015) by moving away from the implementation of Articles 1, 2 and 3 of UNDRIP. Article 1 states that "Indigenous peoples have the right to the full enjoyment, as a collective or as individuals, of all human rights and fundamental freedoms as recognized in the Charter of the United Nations, the Universal Declaration of Human Rights and international human rights law". In Canada, housing is now a human right. By creating a strategy which is not accessible to Indigenous Peoples living with homelessness, Reaching Home violates Article 1 since it indirectly prevents Indigenous Peoples living with homelessness from being housed appropriately. Article 2 states that "Indigenous peoples and individuals are free and equal to all other peoples and individuals and have the right to be free from any kind of discrimination, in the exercise of their rights, in particular, that based on their indigenous origin or identity". By creating programming which singles out Indigenous Peoples living with homelessness from the rest of the homeless population and provides them with programming which is less efficient in responding to their housing needs, these strategies are indirectly discriminatory and violate Article 2.

Article 3 states that "Indigenous peoples have the right to self-determination. By virtue of that right, they freely determine their political status and freely pursue their economic, social and cultural development". Article 19 states that "States shall consult and cooperate in good faith with the indigenous peoples concerned through their own representative institutions in order to obtain their free, prior and informed consent before adopting and implementing legislative or administrative measures that may affect them". However, the strategies put in place under the Housing First initiative were neither supported by Indigenous ways of knowing nor focussed on

the needs of Indigenous families. As such, they violated Articles 3 and 19 as the departments involved in the preparation and implementation of those strategies were not required to consult with the Indigenous Peoples. These same concerns are present when exploring the policies and programming put in place with the new Reaching home initiative.

One form of Indigenous resurgence taking place in this field of programming development is the inclusion of spiritual healing practices into programming for Indigenous Peoples living with homelessness. Spiritual well-being is a key part of Indigenous homelessness and as such spiritual care is an element essential for the success of programming for Indigenous Peoples experiencing homelessness (Von Riesen, 2020). Crises of personal identity related to loss of relationships to land, family, culture, and kinship networks has been identified as one reason for increased depressed emotional states in Indigenous Peoples living with homelessness and has been put forth as an explanation for decreased success in areas such as education, employment and health among this population (Memmott et al., 2012).

Indigenous housing policies and laws in Canada should focus on more family-oriented and community-oriented housing programs which would be more culturally appropriate and more effective in the long run for both urban and rural areas (Lubik & Kosatsky, 2019). These programs would facilitate the inclusion of Indigenous ceremonies and spirituality, create a better and more holistic sense of home, and contribute to Indigenous resurgence.

Although issues with the implementation of UNDRIP and the TRC's recommendations, as well as with current laws in Canada regarding homelessness, taken together, these documents have the potential to become powerful tools to bring about much-needed change in the area of Indigenous homelessness. I have explored some of the contradictions related to these documents as well as some of the contradictions related to their use in the area of homelessness.

Notwithstanding that, I believe that these documents are a first step towards creating better legislation and programming because they would be more culturally appropriate and more effective. Measures need to be taken to ensure new legislation, policies and programming are being properly conducted and that requires keeping the government accountable. Indigenous Peoples need to be included in decision-making in order to create a positive culture of change regarding Indigenous homelessness and it is our responsibility to support that Indigenous brilliance. Identifying housing as a right, is a step in the right direction.

UNDRIP and the TRC and these ideas of movement towards Indigenous informed and focused service provision will be used as a basis to understanding needs related to homelessness in a more holistic view. Under UNDRIP and the TRC it is clear that Indigenous rights regarding homelessness are not being prioritized and that systemic changes in policy and programming need to occur in order to improve the lives of Indigenous Peoples living with homelessness overall.

Chapter 4: Methods

The experiences of Indigenous Peoples living with homelessness across four areas in Northern Ontario; Sudbury, Cochrane, Constance Lake, and Fort Albany First Nation were explored. The data from this study was extracted from a primary study (Kauppi & Pallard, 2013), that addressed homelessness in Northern Ontario.

Theoretical framework

This research aims to privilege and promote Indigenous Peoples' voices through what Smith (1999) refers to as an Indigenous research agenda (p.120). As Smith demonstrates within the representation of an Indigenous research agenda (Figure 1) relationships exist across all areas, environments, directions, movements, and processes.

> Although there are many directions that can be named, the chart takes the Maori equivalent of the four directions: the northern, the eastern, the southern and the western. The tides represent movement, change, process, life, inward and outward flows of ideas, reflections and actions. The four directions named here - decolonization, healing, transformation and mobilization - represent processes. They are not goals or ends in themselves. They are processes which connect, inform and clarify the tensions between the local, the regional and the global. They are processes which can be incorporated into practices and methodologies.

This holistic framework based on Smith's ideas about relationships will be used as the Indigenous framework throughout this thesis. This means that the goal is to focus on all factors that contribute to Indigenous homelessness, over which participants have concern. This includes not only the physical experience of homelessness, but also the cultural and spiritual aspects. Using this framework can allow the voices of participants to guide the findings and eventually lead to change in policy and programming based on their experiences, thoughts, and needs.

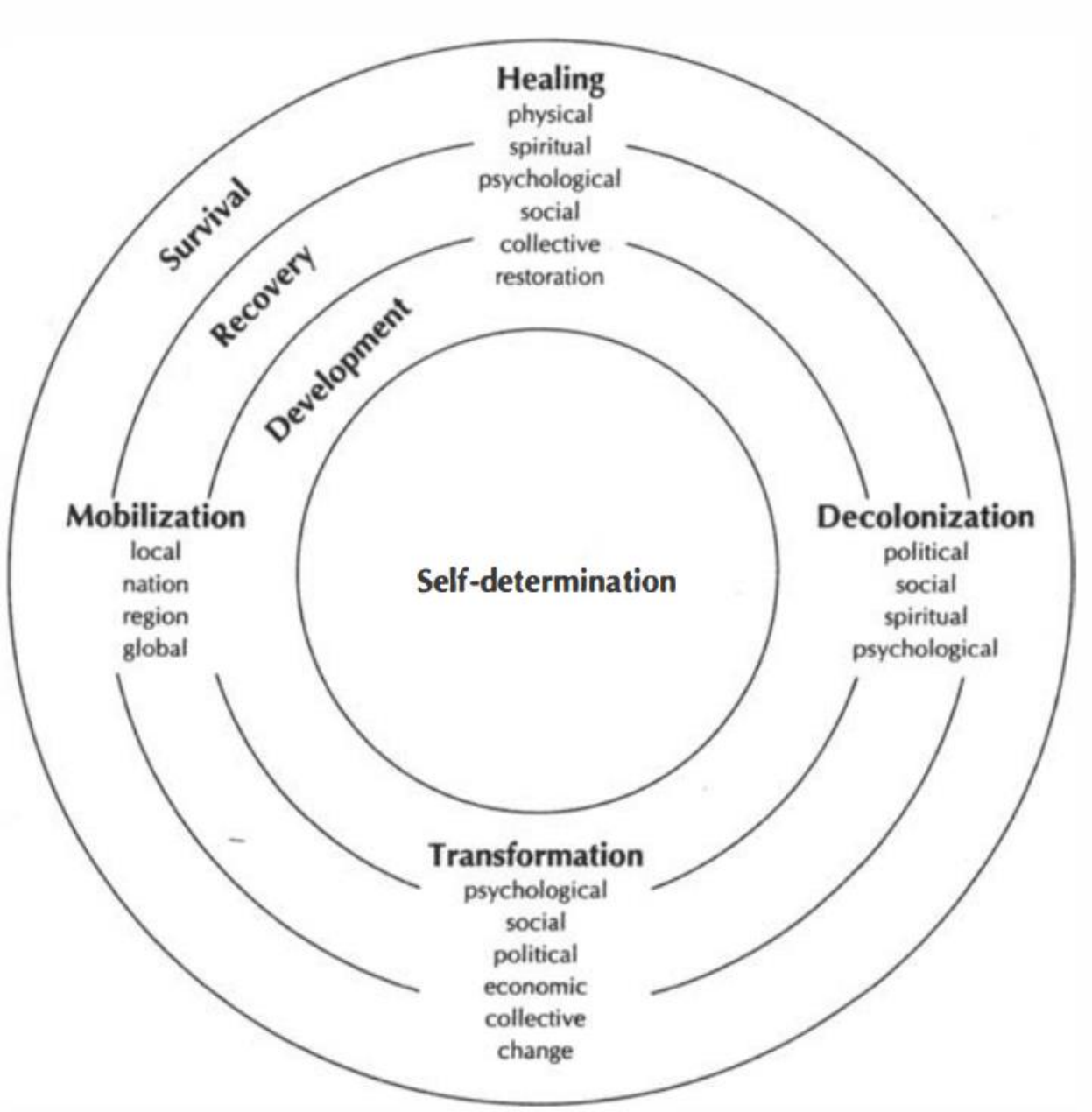

Figure 1. Smith, 1999 Indigenous research agenda

Therefore, in analysing the data, great care was taken to maintain the perspectives of participants through the interpretation, presentation, and sharing of findings. Transcripts and photographs were carefully reviewed in order to keep the stories and narratives intact. An open

heart and open mind were kept while reading the stories and experiences of our participants in order to respect and honour their voices as storytellers (Thomas, 2005).

Primary study

The methodology used in the primary study was photovoice. Photovoice is a qualitative methodology, it is a form of participatory action research that involves using cameras to capture evidence in the form of photographs which are then used as tools for change (Wang & Burris, 1997; Latz, 2017). Participants capturing images of their own community allows them to participate in the research and to share their experiences, knowledge, and expertise. Usually, participants represent marginalized community members and this methodology includes them in the research as a form of co-researcher (Fradet, 2006). The term co-researcher implies a member of the research team who co-creates new knowledge and participates in the creation and planning of the study. The term co-researcher also implies that the participant is an active part of data collection and analysis (Fradet, 2006).

There are three main goals associated with the photovoice methodology. Firstly, this method should allow communities to highlight their strengths and concerns. Secondly, through discussion of the photographs both in large and small groups, this method should promote dialogue and knowledge sharing about important issues in the community. Lastly, this method aims to reach people outside of the community such as policymakers to shed light on issues which need to be addressed (Wang & Burris, 1997).

The development of the photovoice method incorporated the concept of problem-posing which can assist in identifying commonalities and allows for dialogue about the issues (Freire, 2018). Images have been used as effective tools for encouraging critical thinking about

communities and the influences of both social and political forces on them. Furthermore, studies have shown that the use of artefacts or photographs can be used as tools for assisting participants in discussing the topic at hand because these objects allow for a more holistic representation of the topic and encourage the participants by acting as a memory-aid (Clandinin & Connelly, 2000; McGregor et al., 2018).

In comparison to documentary photography, this encourages participation and allows researchers to capture the social world of the participants by actively involving them, their intentions and their ideas into the research (Wang & Burris, 1997). Many examples exist in the literature (Worth & Adair, 1972; Ford, 1983; Ewald & Lifson, 1985; Feitosia, 1991; Hubbard, 1991; Probyn, 1997) which demonstrate the value of using photographs in different research and learning environments. Many examples also exist which demonstrate the use of the photovoice methodology specifically (Wang et al., 1998; Strack et al., 2004; Castleden & Garvin, 2008, Suprapto et al., 2020).

This methodology is said to have "high confidence when analysing the value, story or meaning of an image" (Suprapto et al., 2020). It often focuses on giving voices to people with socially stigmatized status such as people living in poverty, women, children, people who do not speak the dominant language being researched in, as well as people with socially stigmatized health conditions by offering a method for these people to give their expertise and insight into their own community.

But why use the photovoice methodology for this kind of research? Wang and Burris (1997) discuss nine advantages of this methodology. Firstly, photovoice allows the researcher to incorporate the perspectives of the participants into their research. Viewing the knowledge of participants as a source of expertise is an important part of this methodology because relying on

the perspective of the researcher may mean neglecting the needs of the community by focusing on what the researcher thinks is important versus what the community thinks is important (Wang & Burris, 1997).

Second, “a picture is worth a thousand words”. The use of photographs as a means of depicting needs means that the messages coming from the community are clear and powerful (Wang & Burris, 1997). Next, photovoice is also accessible, it allows anyone who can learn to operate a camera to participate in the research. Fourth, a more in-depth view of social and behavioural settings becomes possible because the participants capture images on their own, therefore the data being collected is not restricted to the researcher’s availability (Wang & Burris, 1997). As well, photovoice allows participation in the community meaning the research is being conducted with the community instead of on them. Sixth, this method in itself allows for modifying research methodology because participants and people who engage with participants can help modify the methodology and raise awareness about the topic at hand. In addition, this method allows for the ideas of the community to be incorporated via the participants (Wang & Burris, 1997). Eighth, participants are also able to keep photos or give the photos to neighbours and family which offers immediate benefits to them and their networks. Often when working with underprivileged or impoverished communities the focus is on the community’s needs, but this methodology also allows the opportunity to show the community’s assets (Wang & Burris, 1997). Being able to demonstrate moments of celebration and strength is empowering to the community. Finally, this method enables action. It allows people to catalyse change in their own communities, to be advocates for their communities well-being, and to open the eyes of others to the needs of the community (Wang & Burris, 1997).

Sample and data collection

The primary study's sampling method was the photovoice methodology. Participants were 17 years old or more and were proficient in English to a level of understanding and responding during the delivery of directions and in an interview setting. Participants self-identified as Indigenous with varying self-declared backgrounds including Cree, Aboriginal, Oji-Cree, First Nations, Native, French/English/Metis, ½ Native, ½ Ojibway, Metis, Ojibway/Mohawk/Scottish, and Ojibway.

This analysis focused on the photos and transcripts from the interviews of the 30 participants who had self-declared as Indigenous and who had lived experience with homelessness in the primary study. A sample of the questions asked during the interviews can be found in the following list.

- What can you tell me about this photo, is there a story behind it?
- How does this photo make you feel?
- What is it about this photo that makes you feel this way?
- How does this photo influence your overall health?
- How does this photo impact your mental or physical health?
- What aspects of this photo are positive or negative?
- What aspect of your housing environment is positive/negative?
- What would be your ideal housing?
- How can service providers facilitate housing?

Analysis

A secondary analysis on data from the original study was conducted. Data used in this analysis consisted of the transcripts and photographs from the self-declared Indigenous participants with lived homelessness experience from the original study. None of the non-Indigenous participant's data is represented in this study. One self-declared Indigenous participant was excluded from the analysis due to not having lived experience with homelessness. In total 30 participants out of the 63 total participants from the original study met the research criteria for this study. Interview transcripts were reviewed to familiarize myself with the original study's research questions and the responses from participants. All transcripts were then imported into the qualitative software package *NVivo*. Preliminary codes were established by reading through each interview transcript and determining reoccurring themes. These preliminary codes were combined, organized and further developed as each interview transcript was coded. Any data which did not classify within the preliminary coding was categorized into new code. Once all transcripts had been coded, themes were identified by grouping similar codes. Preliminary codes were refined by grouping them into new or existing headings and then by categorization and collation into sub-themes. Sub-themes were then further examined and grouped into broader themes called primary themes, which were critically analysed, reflecting on the study objectives. Through this analysis eight primary themes emerged which make up the following list:

- type of homelessness,
- path to homelessness,
- physical aspects of housing,
- health,

- social and mental impact of housing,
- costs associated with housing,
- services, and
- needs and suggestions,

Sub-themes with the most recurrence will be discussed in detail.

Chapter 5: Results

Type of homelessness

Types of homelessness included currently precariously housed, currently absolutely homeless, currently living with hidden homelessness and past of homelessness. From these participants some also spoke about having a past of absolute or hidden homelessness. These types of homelessness will be discussed within this section (see Figure 2 and Table 2).

All 30 participants in this study were either living with precarious housing, absolute homelessness, or hidden homelessness or had experienced one of these forms of homelessness.

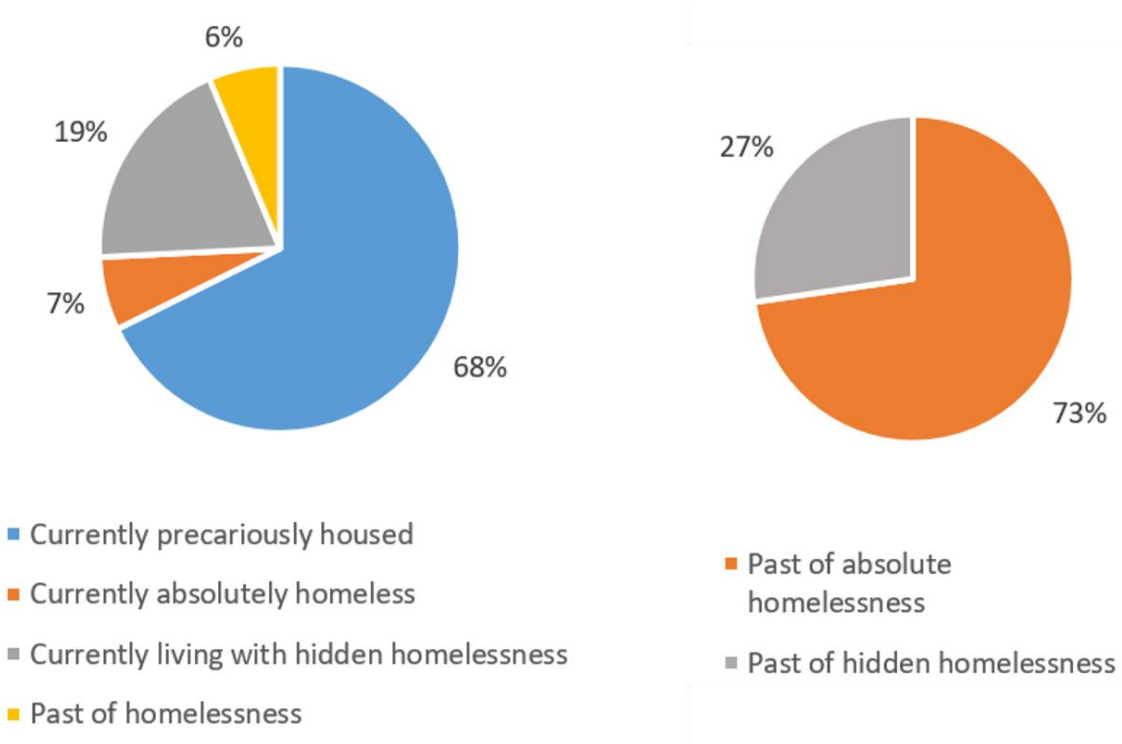

Figure 2. Types of homelessness experienced by our participants. The pie chart on the left represents the current participant's experiences of homelessness. The pie chart on the right represents those currently living with precarious housing, absolute or hidden homelessness who have past experiences with homelessness.

Sudbury

Of the twelve participants from Sudbury, one was stably housed, five were living in precarious housing, two were absolutely homeless and four were living with hidden homelessness. Seven participants identified having experienced absolute homelessness in the past and two identified having experienced hidden homelessness in the past.

Cochrane

All four participants from Cochrane were living in precarious housing. One participant identified having experienced absolute homelessness in the past and one identified having experienced hidden homelessness in the past.

Fort Albany

Of the five participants from Fort Albany, four were living in precarious housing and one was living with hidden homelessness. The band office had condemned the housing in which the participant living with hidden homelessness was occupying.

Constance Lake

Of the nine participants from Constance Lake, six were living in precarious housing and three were living with hidden homelessness. Of those living with hidden homelessness, two were living in housing that had been condemned by the band office.

Table 2. Type of homelessness

Community	Total n = 30	Precariously Housed n = 19	Absolute Homelessness n = 2	Hidden Homelessness n = 8	Stably housed n = 1	Past Absolute Homelessness n = 8	Past Hidden Homelessness n = 3
Sudbury	12	5	2	4	1	7	2
Cochrane	4	4	0	0	0	1	1
Fort Albany	5	4	0	1	0	0	0
Constance Lake	9	6	0	3	0	0	0

Path to homelessness

Eleven participants spoke about different factors which led to their homelessness from their experience. Seven factors were identified.

> You know, you only have two rooming houses like what I found out and now where people are going to go? You know what I mean and it's hard to get an apartment in one day or two days and when you get out of custody you need a place right away because you need an address, some places need right away, where are you going to go?

> And uh, yeah, that's [past incarceration] another reason why I was homeless too 'cause I was in and out of jail since the age of sixteen.

The first factor was affiliation to a gang and a past incarceration; two participants referred to such experiences. One participant spoke about having moved cities as a result of a warrant on them in another city. Both participants expressed finding it difficult to find housing when they were not in jail and listed this as a reason for their homelessness.

> It's hard, it was really hard living in that house, but we had no choice, we had no, we had nowhere else to go, no other, no other available housing anymore.

The second factor was having nowhere else to go. One participant spoke about how the living conditions they were currently experiencing were their only option. They spoke about how there was no other housing available. A lack of available housing was also mentioned as a cause for homelessness by other participants.

> Yeah, because I just moved when [participants friend] was living here, we switched houses and then we didn't tell nobody and then someone came knocking here and he was surprised that I answered the door.

The third factor was house swapping, the participant expressed having changed houses with someone they know. Having switched houses, this participant and their family have no legal rights or support for their housing.

> I was put in here because my doctor wouldn't let me go back to my friends because they had stairs so he got this apartment for me.

> […] this is where the doctor put me because he thought it was a better place for me to be in. I have no choice to be in here, cause I was sick.

The fourth factor was having been assigned housing by a medical professional or having been put into foster care. Three participants re-laid having been sent to their housing by doctors. These participants expressed their views about not having a choice about where they would live.

> Yeah I really feel it's definitely tied to colonialism, tied to the oppression put on the expression of traditional ways because now people are lost, they don't know who they are… they're losing their awareness of their connection to the land.

The fifth factor was colonialism. One participant mentioned this theme and talked about how relationships had been severed as a result of families being split by the different churches. They also expressed how people were separated from their culture and explained that this led to them feeling lost and ultimately resulted in their homelessness.

> It's tough times, like you know like I said, you know like the cost of living, it just keep goes through all of these things … and everyone has hard times.

> Because I didn't have any kids and I went from paying 105 [dollars] to paying 700 [dollars] a month. This was supposed to be low income affordable housing, well it's not affordable to my income.

The sixth factor was the increasing cost of living. Multiple participants felt that costs kept increasing which made it impossible for them to pay rent, fix their housing, acquire better housing or provide for their basic needs such as buying food.

> Cause there's a lack of jobs man, they apply and then even though that they have this mining here that's supposed to be employing all these drillers and that, and I'm a driller and still, I'm still sitting here.

> Yeah, getting screwed over big time yeah. But what can ya' do eh. Yeah. What can you do? If I had a good back I'd go back to work.

The seventh factor was unemployment. Three participants spoke about this theme. One participant said there was a lack of job opportunities which led to their homelessness. The other two participants expressed not being able to work as a result of existing disabilities or injuries and said that this was the reason for their homelessness.

Physical aspect of housing

The physical aspects of housing related to homelessness include cold, water damage, broken or damaged aspects of housing, mould, health hazards, pests, small size of housing, water availability, laundry and illegal housing which will be explored further individually within this section (see Table 3).

Table 3. Physical aspects of housing

Sub Theme	Total Participants n = 30	Sudbury Participants n = 12	Cochrane Participants n = 4	Fort Albany Participants n = 5	Constance Lake Participants n = 9
Cold	23	8	4	3	8
Water damage	19	7	4	2	6
Broken or damaged	18	3	3	3	9
Mould	17	7	1	4	5
Health hazard	15	4	2	4	5
Pests	13	8	4	0	1
Small	12	4	2	2	4
Water Availability	8	1	0	0	7
Laundry	7	4	3	0	0
Illegal Housing	2	2	0	0	0

Cold

> Inside my mom told me there was a few nights where she would wake up and have to peel a blanket off of herself because it had gotten moist and froze to her because it was so cold inside and so in the winter we would probably stuff blankets into these parts here where the window opens and closes and sort of tape it down with plastic, the plastic insulator just to try to prevent the drafts from happening.

Twenty-three participants (77%) identified problems associated with their housing not being adequately protected from the elements (see Table 3 above). Issues such as drafts from the buildings not being properly insulated or constructed, drafts from doors, drafts and frost from

broken windows or windows which had not been installed properly, and cold floors from improper flooring installation as well as from concrete flooring were identified as causes of colder temperature indoors. Participants said that they wanted to fix or reinforce drafty areas and resorted to insulating windows and doors with foam insulation, tape, towels, blankets, and plastic sheets to minimize the amount of heat escaping. Participants revealed that the cold made them feel stressed, worried, sad and depressed. Of the 23 participants, we see a relatively even distribution across all four sites in relation to problems related to cold. However, broken windows and frost building up indoors were issues identified solely in the rural communities.

Water damage

Figure 3. “During the winter months, the windows freeze and it created so much ice on the window and the water seeps and it creates mould on the ledges of the window and it happens every winter.”

Figure 4. "Water seeping through the ceiling and going to the living room… we had to catch the water with bowls in the back corner of our living room. It's a shelf just made for the bowls to sit there so we don't have to worry about it dripping everywhere."

Twenty-one participants (63%) spoke about the issue of water damage within their housing (see Table 3 above). They identified various causes such as leaking plumbing and roofing, which led to cracking and rotting drywall and ceilings, ruined flooring and carpeting, and peeling paint. All 21 participants spoke about these water damages with a negative sentiment. Some of the participants mentioned using buckets to try and capture the leaks and others spoke about removing parts of the wall to minimize damages. Of the 21 participants, 11 were from urban communities and 10 from rural ones. Although we do see water damage across

all four sites, only rural communities mentioned water damage as a result of broken windows or from frost.

Broken or damaged housing

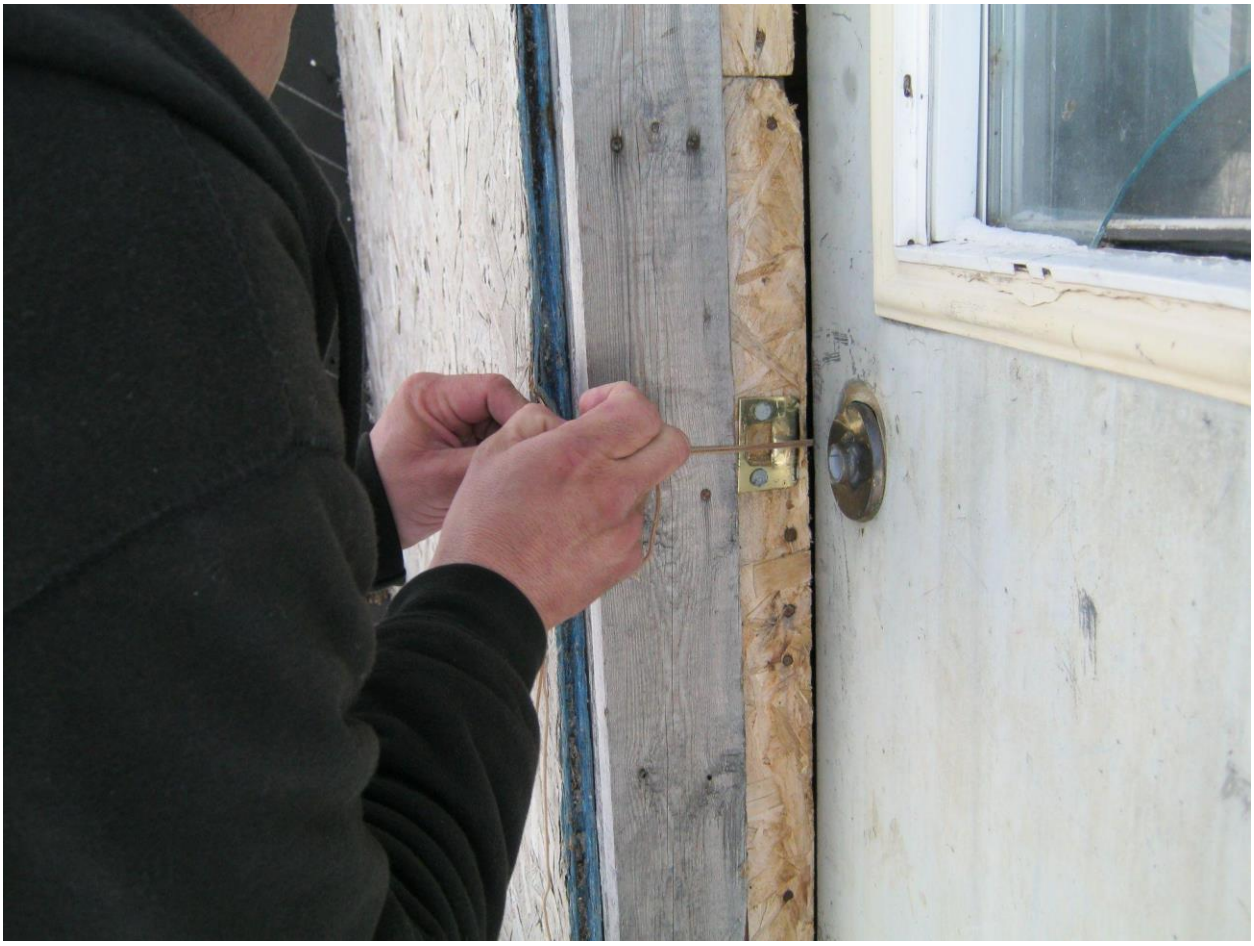

Figure 5. "Just how my doors are, there's just no locks on the doors and that's how we use them, just tie them up with string. Not too good [how the photo makes the participant feel] not good at all cause I wish I had locks on my doors and that's why I don't have my kids with me right now too."

Eighteen participants (60%) spoke about different aspects of their housing being broken or damaged (see Table 3 above). Topics such as broken windows, door handles or locks, flooring, cupboards, walls, screens, bathtubs, bathroom fans and other appliances as well as building foundations were identified as areas which were damaged. Of the 18 participants who

had discussed broken or damaged aspects in their housing, 6 participants were from urban communities and 12 were from rural communities. Seven participants indicated that their housing had broken locks on the doors. Of those participants, 1 was from Sudbury, 1 was from Cochrane and 5 were from Constance Lake First Nation.

Furthermore, participants from Constance Lake First Nation were the only ones to identify broken windows. Seven participants out of 9 from this site mentioned broken windows as a negative physical aspect present in their housing. In fact, out of the 9 participants from Constance Lake First Nation all but one spoke about aspects pertaining to the theme of damaged or broken items within the housing.

Mould

> It's hard to change the beds almost every day… like, I couldn't put the beds anywhere else, if I put them near the window, you can feel the draft, or if I put it on the other wall like they could get moist, like what do you call it, mould.

Figure 6. “It’s just my bed I sleep on, it has mould on it and it wasn’t there before.”

Seventeen participants (57%) brought up the presence of mould in their housing. Mould was prevalent across all four sites (see Table 3 above). Participants spoke about mould in areas such as the bathroom, on drywall, on window ledges, under flooring, and in some cases on bedding. Participants talked about mould negatively and about being worried about it. In an extreme case of mould, one participant from Sudbury even brought up the growth of mushrooms in their housing. Of the 17 participants, 8 were from urban communities and 9 were from rural communities. The only remarkable difference between urban and rural communities is that in rural communities, there was a concern for frost coming in from the windows and walls to create mould.

Health hazard

Figure 7. "I am just concerned like fire hazard or like for my safety or my kids in case a fire ever starts and if it is due to wires you know what I mean."

Fifteen participants (50%) spoke about concerns regarding hazards within or around their housing (see Table 3 above). Nine of those participants expressed concerns regarding fire safety in relation to electrical hazards, lack of fire exits, and lack of functional fire alarms. All seven participants who spoke about electrical hazards were from rural communities (see Table 3 above). Lack of proper fire exits were primarily a concern in the urban communities (see Table 3 above). Other concerns in this category included hazards such as a lack of fence near a high traffic area on one side of a participant's home, broken glass from windows breaking, unstable

flooring and dog attacks as a result of the location of the housing. Of the 15 participants in this theme, we see that hazards within or around the housing were mentioned more often by participants in the rural communities (9 participants) than those from the urban communities (6).

Pests

Figure 8. "That little guy there is a cockroach. That's only one… there's usually lots more, I just swept my floor, you can tell. And those lil' buggers come from everywhere. Around here to come around my cupboards, come around to eat my fridge, you know, I can't use nothing in my house, unless I wash it a second time, you know, you be on the bed, the cockroaches will come crawl on your face."

Thirteen participants (43%) spoke about experiencing pests such as rodents, flies, hornets, bees, pine beetles, bed bugs, and other insects inside of their housing. Many of the participants focused on rundown or broken aspects of their housing as an explanation for the

pests in their housing. Aspects such as cracked doors, drafts, broken bathtubs, lack of sealing between apartments and other rundown aspects of housing were broached, Participants who had mentioned pests were primarily from Sudbury (8 participants) and Cochrane (4) with only 1 participant being from Constance Lake First Nation. This means that 92% of participants who had experienced pests were from Urban communities. All of the participants in this study from Cochrane had expressed dealing with pests. Eight of the thirteen participants were specifically experiencing or had experienced bed bugs. This represents more than half of the participants who had mentioned pests.

Small

> As just like storage [Bedroom] I guess for clothes and for the clothes and the kids clothes and… their toys and that just saves us, saves us more [space] you know what I mean? It's better for us just to drag the mattress out, out back and forth every night and uh every day.

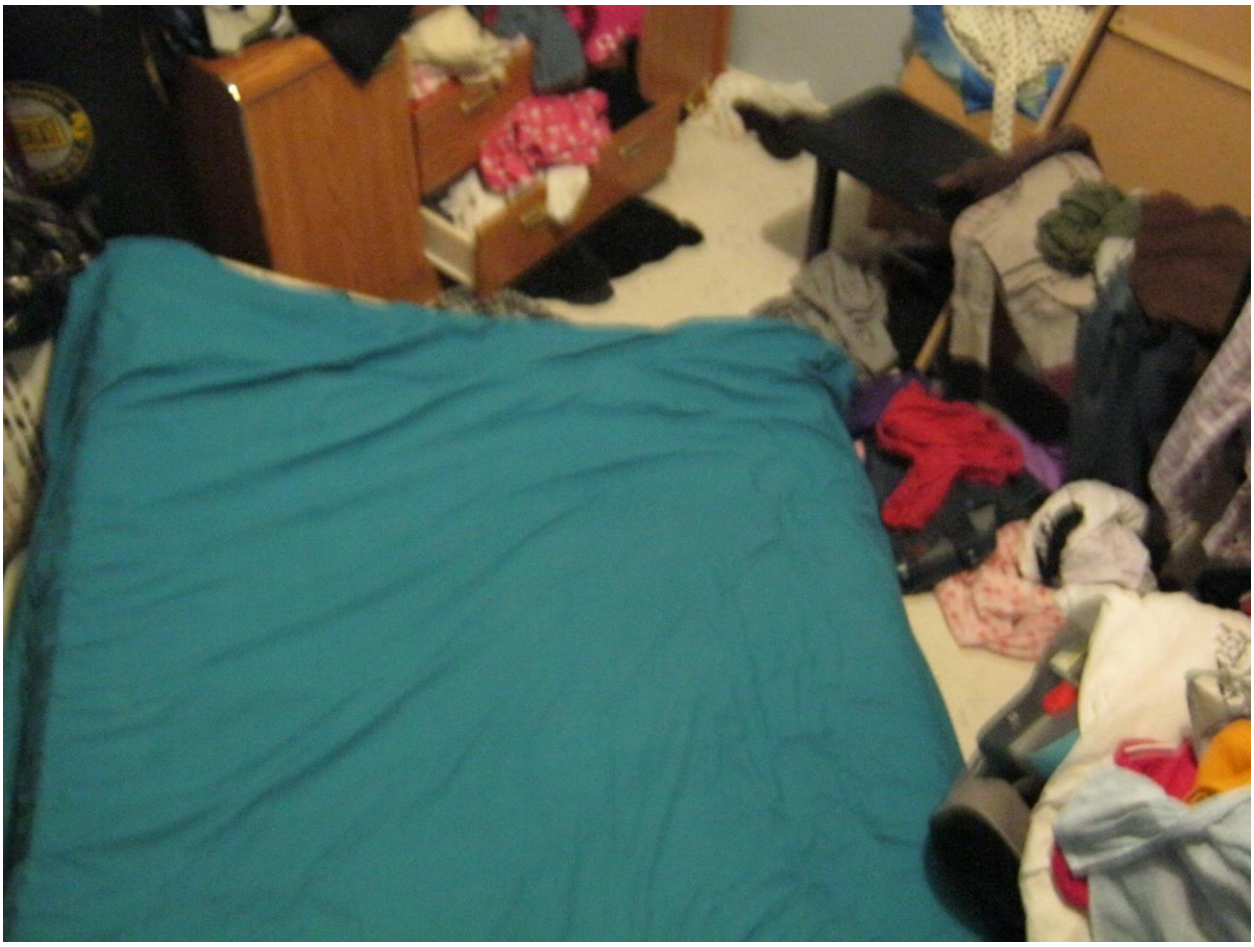

Figure 9. "It's just frustrating man during the day you know like, you know even though we're trying to clean up and there's so much junk like, uh not junk but like clothing and that you can't start throwing out their clothing just to benefit our, me and her [participant and wife] just you know what I mean and I'd rather have the kids to have more clothing than ours but still like where else are we gonna put it man? Like it's just getting impossible, now that winter's coming like where, where are we gonna store the stuff?"

Twelve participants (40%) spoke about their housing in terms of size. All twelve participants expressed that their housing was small, crowded and that there was a lack of space for storage (see Table 3 above). Participants mentioned the size of bedrooms, bathrooms, kitchens and not having room to store clothing or to have a laundry machine inside of their housing. Multiple participants discussed needing to use bedrooms as storage and crowding up living space with items they felt should be stored elsewhere. Furthermore, some participants

spoke about sharing bedrooms, beds or needing to move their bedding out of a storage area each night to be able to use it. Some participants also brought up needing to store some of their belongings elsewhere such as on their porches or with family as a result of the lack of space in their housing. Of the 12 participants in this theme, we see an even distribution between the urban and rural communities. However, a lack of storage space was mentioned more often by the participants in the rural communities (Fort Albany = 2 participants, Constance Lake = 2 participants, Cochrane = 1 participant, 80% of the participants from this sub-theme).

Water availability

Figure 10. "We don't trust that water… you could taste that stuff in there the chlorine… plus, uh, they told us it's not safe to drink the water."

Eight participants (27%) spoke about water availability within their housing. All participants from this theme were from Constance Lake with the exception of one participant from Sudbury who was discussing her experience living in Fort Albany First Nation. Participants talked about needing to purchase water jugs and needing to transport them to their housing as a result of hard water (heavy in chlorine) within their housing. Of the participants who bought water, most had 2 or 3 jugs and said they had been refilling them weekly for over a decade. Multiple participants within this category brought up needing to travel approximately 40 km in order to refill their water and spoke about the costs associated with that. Half of the participants in this theme also explained that they only use the tap water for bathing and washing clothes because they do not trust that the water is potable. Some participants also spoke about experiencing dry skin, itching or eczema as a result of bathing in the tap water. Some even purchased water to bathe in instead of using the water from the tap.

The participant who originated from Fort Albany First Nation discussed how many of the houses in the area around their childhood home did not have plumbing. This participant spoke about how there were communal water pumps located within the reservation and that people would ski-doo there to fill jugs of water each day. The bathroom in the participant's childhood home consisted of a bucket with a seat that was dumped into a latrine daily. Hand washing was done within a basin with soap and water, the basin water was changed once a day.

Laundry

> My living room right now is packed of junk okay like laundry… and my house is right now a mess because we cannot do laundry… it's been a couple of months I cannot do my laundry because no money.

Seven participants (23%) mentioned issues relating to the accessibility and functionality of laundry services within their housing (see Table 3 above). All participants from this theme were from Sudbury (4 participants) or Cochrane (3 participants), our urban communities. Participants spoke about dryers being set to lower temperature settings, thereby forcing participants to pay for more time and costing them more money. Some also spoke about how their dirty laundry was taking up living space within their housing because they could not afford to bring it to a laundromat to be cleaned. Some also mentioned how they chose to line dry their clothing because the cost of using a dryer was too high. One participant also spoke about their housing paying for pest removal for bedbugs by giving tenants 50 dollars each without taking into consideration the cost of laundry, in this case, "7.85 a load".

Illegal housing

> Well illegal rooming house pretty much is like a place you set up and then just make quick cash. Like there's no separate rooms, there were single beds put up together and they were only put in by a little piece of two by four no bigger than this [held hands apart, roughly four inches] and then there was holes in the wall, there was mould there and everything.

Illegal housing was a concern and some of the participants had lived in illegal housing. Two participants spoke about their experiences with an illegal rooming house and with an illegal basement apartment. These participants felt that the landlords were taking advantage of people coming out of custody or people living with homelessness in order to profit. Both participants from this theme were from an Urban community (Sudbury) (see Table 3 above).

Other areas of concern

Other concerns mentioned pertaining to physical aspects of the housing were; the age of the housing, living in housing condemned by the band, and living in housing which had inconsistent water temperature or pressure.

Health

Participants addressed health impacts due to aspects in their housing from mould, absolute or hidden homelessness, cold and pests. These results will be demonstrated in this section (see Table 4).

Table 4. Health aspects of housing.

Sub Theme	Total Participants n = 30	Sudbury Participants n = 12	Cochrane Participants n = 4	Fort Albany Participants n = 5	Constance Lake Participants n = 9
Health impacts from mould	9	2	3	2	2
Health impacts from absolute or hidden homelessness	9	6	3	0	0
Health impacts from cold	6	2	3	0	1
Health impacts from pests	5	5	0	0	0

Health impacts from mould

> Yeah, mhm, it [mould] was really bad, my kids were always coughing and like, rashes. I even had rashes on my arm, like, I don't know if it's from the mould or, probably, yeah.

> Bad [air quality]. Because there is mould in the air and I know there is mould in the air because my friend is for like coughing like 5-6 months straight… I am starting to get like that too, like getting sick, and getting a cold and now I now realize where it is coming from, it's probably because of that mould coming off from the floor.

Nine participants (30%) spoke about the health impacts related to living with mould in their housing (see Table 4 above). They spoke about the negative impacts of mould in different ways such as in terms of respiratory problems, skin problems, general sickness, and anxiety revolving around becoming sick as a result of the mould in their homes. Five participants were from urban communities and four were from rural communities.

Health impacts from absolute or hidden homelessness

Nine participants discussed the health impacts related to homelessness (see Table 4 above). Two participants spoke about how it was unsafe to sleep outdoors, about being robbed and seeing people beaten when sleeping outdoors. Having accommodation within a shelter did not give greater personal security as participants mentioned being robbed or injured there. Others spoke about being victims of physical or sexual assaults as a result of living with friends (hidden homelessness) and not having stable private housing. Two participants spoke about pain or discomfort related to their sleeping arrangements. Some participants also mentioned health impacts related to a lack of food or lack of nutritious foods; as they were unable to afford food, their physical health was deteriorating. One participant spoke about how they struggled to manage their diabetes as a result. Not having housing led some to accept unsafe work such as construction jobs with improper personal protective equipment this was given as a cause of

health problems. Under the table payments meant that they could not access worker's safety insurance benefits for workplace injuries.

Health impacts from cold

> I got arthritis attacks all the time, from the floor, that's why I'm wearing warm, warm slippers right now too, because the floor is too cold — it's cold.

Six participants (20%) highlighted the cold as being an aspect which impacted their health negatively (see Table 4 above). Some participants mentioned the worsening of arthritis pains as a result of the cold and others spoke about becoming sick and developing colds as a result of the temperatures. Participants discussed needing to wear shoes, warm clothing, using space heaters, and needing to block drafts with towels to keep their housing liveable. Five participants from this theme were from urban communities and one was from a rural community.

Health impacts from pests

Pests were mentioned by multiple participants as being a health concern (see Table 4 above). Participants discussed how having pests in their housing was unhealthy. They said that the pests such as cockroaches would often get into their food and they would then need to throw everything away and be constantly cleaning all surfaces in their home to avoid becoming sick. Bed bugs were also discussed in terms of health with people expressing that they felt unhealthy living in housing with bed bugs and how they were constantly being bitten.

Other areas of concern

Many health impacts were mentioned which relate to the state of the housing itself. Participants mentioned broken glass from broken windows potentially cutting them, uneven and

unstable flooring potentially causing someone to fall or break an ankle, the water in their housing causing diarrhea, appliances in their housing not functioning properly and causing food poisoning, catching a cold or nose bleeds due to the condition of their housing and drafts, injuring themselves when moving furniture in their home because of a lack of space and physical impacts from using walking as their only source of transportation. A lack of fire exits and fire alarms were also mentioned as being dangers within their housing.

Social and mental impact of housing

Participants spoke about social and mental impacts of homelessness and the results from the subjects which were brought up will be highlighted within this section (see Table 5).

Table 5. Social and mental aspects of housing.

Sub Theme	Total Participants n = 30	Sudbury Participants n = 12	Cochrane Participants n = 4	Fort Albany Participants n = 5	Constance Lake Participants n = 9
Negative mental health	20	9	4	2	5
Social impacts	13	9	2	0	2
Shared living space	10	4	0	1	5
Drug Abuse	9	6	2	0	1
Landlord conflicts	7	1	4	0	2

Social impacts

Fourteen participants (47%) spoke about experiencing social impacts from living with homelessness in relation to service provision and their relationships to family, friends, community, and pets (see Table 5 above). Five participants talked about the positives of feeling supported by family that had taken them in or by their community through spiritual programming. Of these participants, all five felt increased support, a lack of stress and an improvement in overall health from being able to be close to family, friends, and community. They mentioned feeling less isolated and having assistance with tasks of daily living such as in food preparation and laundry and felt less stressed as a result.

Others spoke about the negatives of being separated from family as a result of the distance of housing, unsafe living conditions which forced parents to make difficult decisions ultimately resulting in them living separated from their children, as well as a lack of space for taking care of children or grandchildren. One participant also discussed being separated from their pet as a result of the housing services they were put into. Of the nine participants that discussed negatives, aspects that were brought up were feelings of isolation, stress, feeling lost, and missing family as a result of being separated from them by their living conditions. A lack of privacy from living with family was also listed as a negative in relation to living with homelessness and a lack of services. Participants that brought up positive sentiments were all from Sudbury. Of those that mentioned negative sentiments six were from urban communities and three were from a rural community (Constance Lake).

Shared living space

Ten participants (33%) spoke about aspects related to having shared living space within their housing (see Table 5 above). They talked about sharing beds, sharing bedrooms, sleeping in

communal areas as a result of a lack of space, making room in their housing for family members in need, deteriorating housing as a result of overcrowding, shared washrooms, and shared kitchens. The majority of participants from this theme had a negative sentiment in relation to the shared aspects of their housing. They expressed feeling sad about not being able to have individual sleeping arrangements for their families, feeling disgusted by the conditions of their shared washrooms, experiencing a lack of privacy and feeling crowded. Six of the participants were from rural communities and four were from Sudbury.

Drug abuse

> It pretty much brought it down [participants' health] 'cause I was drinking all the time there and my doctor tells me not to drink but I do anyway. I have a bad liver and yeah, it was caused because of my youth because I was homeless as a youth. I spent three grand in two weeks at a fine liquor store downtown.

Nine participants spoke about their experiences with drug abuse which describes either drug or alcohol abuse (see Table 5 above). Participants had either experienced drug abuse first-hand or spoke about their environment. They spoke about stealing from family to buy drugs or alcohol, having possessions or money stolen to purchase drugs or alcohol, feeling hopeless, losing loved ones such as being separated from children (because of intervention from child protective services in some cases) as a result of drug or alcohol abuse and feeling unsafe in environments where there was drug abuse. Participants from this theme also mentioned using services to overcome their addictions and most spoke about these services positively. There is a disproportionate representation of participants from urban communities — 8 participants — in comparison to those from rural settings —1 participant — in this theme.

Landlord conflicts

Seven participants (23%) shared about how their landlords did not care about them or wanted them gone and that as a result, these landlords were not doing their jobs (see Table 5 above). Participants said that their landlords did not care, avoided speaking to them, did not want to fix issues inside of the housing, made cheap fixes that didn't solve the issues in the housing and even spoke about being threatened by their landlords that they would be evicted for complaining about issues within their housing.

Negative mental health and other areas of concern

Twenty participants (67%) mentioned negatives associated with their mental or social health (see Table 5 above). In this theme there were discussions of feeling aggravated, annoyed, concerned, depressed, discouraged, disgusted, embarrassed, frustrated, ignored, isolated, lonely, sad, stressed, and worried in relation to their housing and services relating to their housing. Other sub-themes in relation to negatives included feeling unstably housed, being stressed about income, and feeling that there is favouritism within service provision.

> I was uh, nervous a bit cause I know people like to steal in places like that, so I was always on edge, like when I was sleeping at the Sally Anne I'd always have my pocket knife out, just right underneath my pillow in case somebody were to try to steal something from me.

Six participants spoke about being afraid of theft as a result of their housing or living conditions. Of these participants, four were from urban communities (Sudbury = 3 participants, Cochrane = 1 participant) and two were from a rural community, Constance Lake.

> I find I get depressed, like last year I got very depressed looking at my house.

Six participants spoke about feeling depressed as a result of their housing or living conditions. Of these participants, four were from Sudbury and two were from Constance Lake. One participant also mentioned that suicide rates among Indigenous Peoples living with homelessness had increased.

> It just doesn't make sense like, it's okay for a native I guess to breathe that shit [mould].

Four participants talked about experiencing discrimination as a result of being Indigenous. These participants felt that the Indigenous Peoples looking for service provision were experiencing a different level of care than non-Indigenous people. Subjects mentioned in relation to discrimination included housing maintenance, mould removal, health care and not being taken seriously by service providers. The participants from this theme were from both urban (Sudbury = 2 participants, Cochrane = 1 participant) and rural communities (Constance Lake = 1 participant).

> No, I am embarrassed. I am embarrassed, I have a friend that comes over, he comes over maybe once in every 2 weeks or once a week sometimes, you know and it is embarrassing. I got to tell him I have cockroaches and I got bed bugs, before you leave check yourself out. Just give your clothes a good wipe or whatever, eh? Like I don't invite anyone else over. I am embarrassed, I am embarrassed, I am ashamed.

Nine participants expressed either feeling disgusted or embarrassed by an aspect of their housing. These participants spoke about their housing being inaccessible to them because of their disabilities, the rundown aspects of their housing being unsanitary, feeling embarrassed and avoiding inviting people over, and even avoiding being in their housing or looking at the aspects within their housing that are rundown. The participants from this theme were from both urban (Sudbury = 4 participants, Cochrane = 2 participants) and rural communities (Constance Lake = 1 participant, Fort Albany = 2 participants).

> There's no privacy in the front, there's always people coming and going that are drinking and I know they're on drugs and doing all kinds of crap; I don't want to see that.

Four participants spoke about how their living environment was disruptive. They expressed not having privacy, people coming and going and drug and alcohol use. The participants from this theme felt that their environment was unsafe, frustrating and made them feel stuck.

> Mmm, I don't feel good. No, I don't like that, but it's there you know? There's nothing I can do about it because they're [service providers] not going to do anything about it anyways.

At least one participant expressed experiencing negative mental health as a result of service providers not doing their jobs and feeling as though no one is doing anything to help Indigenous people living with homelessness.

Other social and mental impacts

Other factors mentioned in relation to social and mental health related to housing include; adapting to having to buy water and not having drinkable water at all times, disliking the landlord of the housing, having been evicted in the past and feeling unstable within existing housing, experiencing familial poverty across multiple generations, laws favouring landlords and not tenants, losing everything from pests or from being evicted, needing help, not wanting to go home, wanting to go home and wanting to fix housing but feeling incapable of doing so.

Costs associated to housing

Participants mentioned costs associated to housing which they related to their homelessness the results will be highlighted in this section (see Table 6).

Table 6. Costs associated with housing.

Sub Theme	Total Participants n = 30	Sudbury Participants n = 12	Cochrane Participants n = 4	Fort Albany Participants n = 5	Constance Lake Participants n = 9
Food insecurity	13	7	3	0	3
Paying out of pocket for services	10	0	2	1	7
Price of rental	8	5	2	1	0

Food insecurity

> At least before when it was 105 [price of rent] I could afford to eat. I'd still run low by the end of the month but it wasn't like it is now. Like I haven't boughten meat for a long time. Can't afford it. By the time you buy 100$ worth of meat and pay your cab there and back you can't run there every week, it's impossible.

> I try and eat noodles and pasta if I can… if I can try and get a dollar here and there or sometimes panhandling around… because at the dollar store you got cheap noodles, you got a big bag, like this for a dollar fifty and that's a 500 gram bag for a dollar fifty, you know that divided into half, that's about maybe couple of good meals, 1, 2, 3, 4 maybe 3 days of meal. So it's good.

Thirteen participants (43%) mentioned the cost of food as an important issue related to costs associated with housing (see Table 6 above). All 13 participants described costs related to acquiring food as a concern with a negative emphasis. The majority of the participants touched on their dependence to services such as the food bank or the mission to help with this issue.

Multiple participants discussed purchasing pre-made or inexpensive foods such as Mr. Noodles, Pasta, and McDonald's to supplement dietary needs. Of the participants from this theme, ten were from urban communities and only three were from a rural community (Constance lake).

Paying out of pocket for services

> […] and I don't have money to buy more weather stripping or whatever they call that stuff and it's not my job to fix stuff. They're [Landlords] taking all of like 80% of my income.

> Like we're taking money out of our own pocket just to get things fixed, you know what I mean.

Ten participants (33%) expressed how they used their own money to pay for different needs in relation to their housing (see Table 6 above). They discussed paying out of pocket to do the repairs that were essential for their housing such as insulating, patching roofs, replacing windows, adding locks to doors, weather-proofing and doing other household repairs. All ten participants described these costs as being negative and expressed that they should not have been held responsible to maintain the housing themselves. There is a disproportionate representation of participants from rural communities within this theme (eight participants) in comparison to those from urban communities (two participants).

Price of rental

> But like I said it's hard, you know what I mean, like the cost of living is too much, you know what I mean the apartments they are a lot too much rent like a bachelor apartment you are looking at 7-800$ and it's a small room… lots of people are on welfare, how can they survive.

Eight participants (26%) spoke about issues with the cost of renting housing including renting a house, an apartment, and a room. Four participants (13%) revealed the amount of

money they pay for their apartments. These participants were solely from Sudbury and Cochrane and their monthly rent averaged 520$ a month. One other participant rented a room and paid 75$ a month. Of the participants from this theme, seven were from urban communities and only one was from a rural community.

Other costs associated with housing

Participants also addressed multiple other factors related to the costs associated to their housing including; the cost of education, the impact of mining increasing prices in their community, relying on jobs paying them under the table or on panhandling to support themselves, services misusing funds and not having funding available for the people who need it as a result, the price of heating and the price of transportation. One participant also mentioned paying for rent with food.

Services

Services were discussed by participants in five sub themes, the results from which will be highlighted within this section (see Table 7).

Table 7. Services in relation to housing.

Sub Theme	Total Participants n = 30	Sudbury Participants n = 12	Cochrane Participants n = 4	Fort Albany Participants n = 5	Constance Lake Participants n = 9
Asking for assistance and not receiving it	18	6	4	2	6
Familiarity and use of services	16	13	1	0	2
Lack of services	5	2	3	0	0
Distance of services	6	3	1	0	2
Lack of sufficient funding	5	2	3	0	0

Asking for assistance and not receiving it

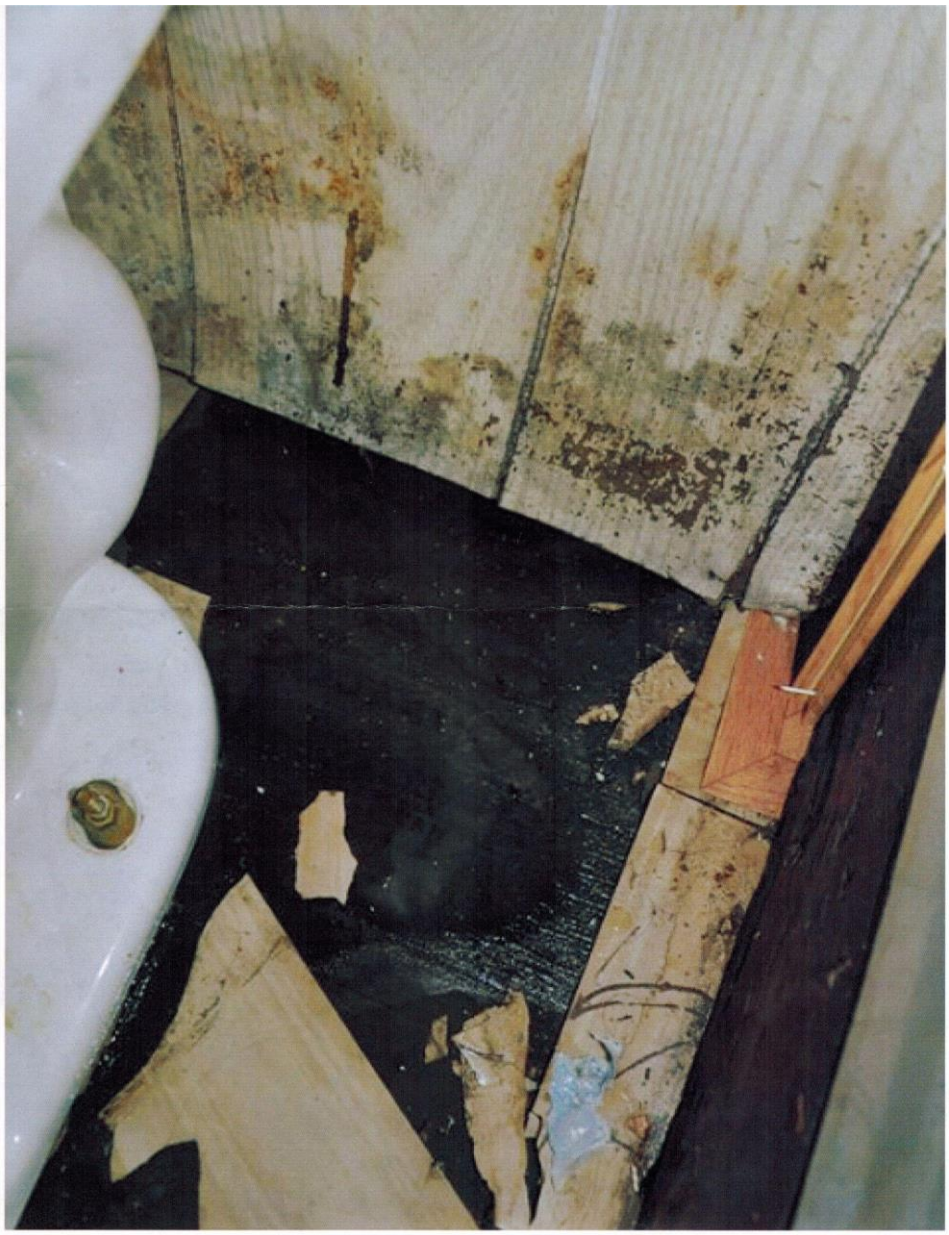

Figure 11. "I feel neglected, like especially from my own band office, in my own band, like Chief and Council. I did approach them with these pictures, and that's, their own people they sent were those professional mould people and that was it, that's where everything stopped. They said there was no mould in your house, so I moved out of that house…"

Eighteen participants (60%) spoke about asking for assistance in relation to their housing and not receiving it (see Table 7 above). In this theme, participants discussed asking for

assistance from the band offices in their community, landlords, and other service providers such as Ontario Disability Support Program (ODSP). These requests were made in relation to heating not being functional, renovations, broken windows, fixing drafts, fixing plumbing, landscaping, appliances, laundry, mould removal, leaks, curtains in shared showering spaces for privacy, pests, and for assistance with services for disabilities.

Ten participants were from the urban communities and eight were from the rural communities within this theme, therefore the distribution is pretty evenly distributed across the urban and rural communities. All participants from this theme expressed being disappointed, upset, or frustrated by the lack of support they were receiving after making several requests for assistance.

Familiarity and use of Services

Sixteen participants (53%) spoke about services that they had used in relation to their housing and experience with homelessness (see Table 7 above). Fourteen of the participants in this theme were from Urban communities with the majority (13 participants) being from Sudbury. Only two were from our rural communities and these were specifically from Constance Lake First Nation.

The services mentioned by participants were Aboriginal Peoples Alliance Northern Ontario (APANO), Band offices, Community Homelessness Prevention Initiative (CHPI) (Sudbury), Corner Clinic (Sudbury), Elgin Street Mission (Sudbury), Elizabeth Fry Society (Sudbury), Ontario Aboriginal Housing Services (OAHS), Ontario Works, N'swakamok Native Friendship centre (Sudbury), Saint-Vincent de Paul (Sudbury), Salvation Army (Sudbury), Sudbury Action Centre for Youth (SACY), Sudbury Food Bank, The Blue Door Soup Kitchen (Sudbury), White Pines Counselling (Sudbury), Sudbury YMCA, Ontario Student Assistance

Program (OSAP). There is an uneven distribution across the urban and rural communities within this theme. The majority of the services were accessed by participants in Sudbury.

Lack of services

> It's not like the servers ain't doing their work. It's just there isn't any period. You know there's no place around this fucking town where you can go and see and help uh you know fix stuff for free and shit like that to help you out you know.

> And like for kids your age if they're thrown out by their parents they can't even go to the men's shelter because they're not of what's called legal age to enter into that shelter, so if they get kicked out, thrown out, burned out, no matter what, you're gonna live on the street because there's nothing [services] within that age gap. Nothing, absolutely nothing.

Six participants (20%) indicated that they felt there was a lack of services available to them (see Table 7 above). They brought up a lack of services for youth, welfare not giving them spending money, not being able to get grants from the government to fix rental properties because of lack of ownership, not having services available to assist in disputes with landlords, not having services available for repairs, not having pest removal services and not having services to assist with moving costs and start-up costs.

Distance of services

> Well he [landlord] didn't give me enough to look for an apartment after [flood]. That's why I went all the way out to Chemmy and I had no other choice.

Participants also mentioned the distance of services. Six participants (20%) spoke about needing to travel further from town to find appropriate housing or housing within their budget, travelling for health care and travelling for services such as shelters and water (see Table 7 above). Participants from this theme were unhappy with the distances they needed to travel and

felt they had no choice. Four participants from this theme were from urban communities and two were from a rural community specifically Constance Lake.

Positives related to service provision

> Actually, it lifts my spirits because now I always think that, yeah, I don't have to sleep on the street, I don't have to ask people where I have to go to sleep. I can just go home whenever I want.

Although many of the participants from this major theme (Services) spoke about services with a negative sentiment, some did express the importance of services and how programming had helped them with both schooling and drug interventions. Some positives mentioned in relation to services were feeling happy, having a roof over their heads, feeling safe and supported by neighbours, having their spirits lifted, and feeling independent.

Lack of sufficient funding

Five participants (17%) spoke about how service providers had a lack of sufficient funding from the government and that they were therefore, unable to assist the communities properly (see Table 7 above). They spoke about this lack of funding in relation to programs which could help people with paying rent, doing laundry, supporting the local food banks to assure there is enough food for everyone who uses their services, and supporting non-emergent medical expenses such as contact lenses. All of the participants from this theme were from urban communities.

Other aspects related to services

Other aspects mentioned were; being punished by service providers for asking for services, giving up on asking service providers for assistance after long periods of being denied

help, experiencing lies from service providers, services not doing their jobs and experiencing long waiting lists for shelters and housing assistance.

Needs and suggestions

> I want to get another place, I don't want to stay there because I am tired of crouching down, tired of thinking that, okay every time you step on the floor, there is mold under the floor and it comes up in the air and that's what I am breathing in. I have to get out of the house and I can't stay. I just have to get out of there. That's it.

Nine participants (30%) discussed needing better housing. They expressed needing more affordable and bigger housing with space for every individual person, with storage and with better conditions in relation to health, cold, mould, pests, etc.

> Like, come in, look at the house and see what kind of condition its in

> They could come in and do inspections and stuff to see, like make, decisions that will help us. You know just to experience like how it feels to live in conditions like this, like day in day out, instead of looking down, just looking at the picture I guess.

Eight participants (26%) suggested implementing regular check-ups on housing to ensure its being properly maintained. They spoke about checking in on the conditions related to electrical, plumbing, pests, mould and drafts. They suggested that landlords and service providers speak to tenants about what changes need to be made within their housing to ensure health and safety measures are being maintained and to provide appropriate living conditions.

> I don't know this year how is it but that's how me and my partner got homeless too because, not enough [housing]. They [college students] are coming from everywhere that's why. I think we need more housing.

Building more housing was suggested as a solution for homelessness by the participants. They spoke about how their homelessness was related to a lack of available housing. Yearly housing fluctuations as a result of college and university students coming and going was mentioned as a reason for the lack of housing availability.

> Build more housing units that don't discriminate because you don't have no little kids with you. I'm too old to have babies now, good God and they shouldn't be discriminating against elders because they don't have small children, because even the ones that don't have kids living at home, their grandkids and their kids they all still come visit and then they have to sleep on the floor because there's not adequate space. It's pretty sad.

Another suggestion that was made was to build more housing units for the elderly. Multiple participants talked about how most of the housing that currently exists is geared towards families and not towards people without dependent children which makes it harder for them to find appropriate housing.

> Yeah, and somewhat in the support though 'cause, not too many people know where to go.

> Especially taking care of elders like this community needs to find ways to support the full age span of all it's community members because there's, there's also a lack of social programming that people should be able to access like help for addictions or help for different mental health issues or domestic issues, family relationship issues...the main thing they would benefit from is just better accessibility like if there was only a way you could make it easy to get in and out of that place that would I think just open the door to so many more opportunities for further development of the community.

Eight participants discussed needing more services. They expressed a need for services specifically for elders, services specifically for youth, services to repair things within their housing, services for financial assistance specifically for moving expenses and start-up costs and services for pest removal. One participant also discussed the importance of getting the word out

about available services. Social programming was also mentioned as an area in which more service provision was suggested.

Yeah, always inside, I never go out. They never take me out.

One participant suggested implementing programming to allow them and others opportunities to do activities and get out of their housing. They expressed that they felt confined to their housing and that they were lonely. They suggested programming which would allow them to have home visits, where service providers could help them with paperwork, applications and with contacting other service providers and which would also provide them with opportunities to participate in outings and other activities.

Further suggestions included; renovating the existing housing to comply with housing regulations starting with housing which is already occupied by families, fixing or creating water systems to provide clean drinking water to all Indigenous reservations, assistance with transportation, having regulations for landlords to maintain housing, and increasing health care support.

Chapter 6: Discussion

This study explored trends across urban and rural communities and the key concerns of Indigenous Peoples living with homelessness with respect to their past or current living conditions in northern Ontario. As perspectives were compiled from a small number of Indigenous participants from northern Ontario, the results may not be fully representative of the entire region. However, these findings provide an important look at the perspectives of self-identified Indigenous Peoples with lived homelessness experience. This section explores the unique perspectives of our participants and weaves our results with findings from the literature to discuss Indigenous homelessness in northern Ontario.

A link between health and housing

Overall, we have seen that many links exist between health and housing and that Indigenous Peoples living with homelessness may experience adverse health conditions to a greater extent than non-Indigenous people living within the same socioeconomic status. Our participants and other Indigenous Peoples living with homelessness are more likely to experience health effects related to the cold, water damage, mould, pests, the small size of housing and water insecurity. Further, we saw that Indigenous Peoples living with homelessness or with similar socioeconomic status to our participants in rural areas are more likely to experience more severe housing conditions such as broken windows and improper wiring, which may amplify cold, water damage and mould. Housing in these areas is also likely to be smaller and water availability is more likely to be limited. All health effects associated with these aspects are also

suspected to be amplified in rural areas. Urban areas, on the other hand, are more likely to experience the presence of pests, lack of proper fire exits and illegal housing.

Multiple themes were uncovered during the analysis of our data, the majority of which highlighted areas of concern in relation to the physical aspects of our participants' housing and the impacts of those conditions on health effects, both physical and mental. Cold, for example, was the most prevalent concern in relation to the physical aspects of housing across all four sites. Participants spoke about negative emotions in relation to the cold and mentioned wanting to repair areas affected by these concerns. Some participants who mentioned cold also brought up the health effects associated and described feeling the worsening of pain and increased sickness as a result of this aspect of their housing. This is in accordance with the literature which shows that cold housing environments have been associated with increased respiratory illness, immunological disease, and arthritis symptoms (Aimee et al., 2020).

Water damage was the second greatest concern and went hand-in-hand with the concern for mould within housing. Participants regarded water damage and mould as being a problem in their housing and wanted to repair affected areas. These findings are consistent with those of studies regarding rural First Nation communities in Canada, which have found that inadequate housing conditions are commonplace within these communities and can lead to environmental impacts such as mould and dampness within housing (Carrière et al., 2017; Pahwa et al., 2017; Anwar et al., 2021). A survey conducted in 2002-2003 by the First Nations Centre and the National Aboriginal Health Organization found that 44% of respondents reported having mould within their housing (First Nations Centre, 2006), while another study found that up to 59% of houses studied within a First Nations community had signs of mould and dampness (Anwar et al., 2021). Participants also described many of the conditions necessary for mould development

indoors such as rainwater entering open cracks, faulty plumbing, insufficient insulation, broken or leaky windows, or any other defects to the building envelope many of which have also been found in the literature about rural Indigenous housing (Prezant et al., 2008; Optis et al., 2012; Anwar et al., 2021). While this reflects the increased risk of rural Indigenous communities experiencing mould within their housing, participants from urban areas within this study also experienced some of the conditions necessary for mould development indoors. Furthermore, participants spoke about the negative health effects of living in housing with water damage and mould. As has been shown in the literature, respiratory health issues such as wheezing, bronchitis, shortness of breath, asthma, and pulmonary disease can be related to the presence of mould and were discussed by participants (Fisk et al 2007; Sahakiam et al., 2008; Government of Canada, 2010; Ospina et al., 2015; Pahwa et al., 2017).

Differences between rural and urban communities were increasingly apparent among three sub-themes related to the physical aspects of housing. All of these sub-themes also have a direct impact on the health of participants. Firstly, broken or damaged aspects of housing were also brought up as a concern for many participants. Of these participants, two-thirds were from rural communities, and the majority of statements about this theme came from Constance Lake First Nation. In fact, all but one of the participants from this site identified broken or damaged aspects within their housing. All participants who discussed this theme saw it as being negative and spoke about different hopes, needs, or actions that they would take to replace or fix the broken aspects of their housing or belongings. This finding is in agreement with the previously mentioned research which states that First Nation communities are more likely to be in need of major repairs than urban areas (Quicke & Green, 2017). In following, multiple health hazards were then discussed, especially around concerns about fire safety. Electrical hazards related to

improper wiring were an aspect discussed solely in the rural communities, whereas a lack of fire exits was discussed only in relation to urban communities. Studies have demonstrated that fires are more likely to occur in lower-income housing in comparison to higher-income housing (Satterthwaite & Tacoli, 2014) because, lower-income housing is more likely to be made of lower quality and more flammable materials, more likely to be overcrowded, and more likely to rely on open fires such as kerosene stoves or lights, wood-burning stoves, or candles (Satterthwaite & Tacoli, 2014). Our participants, given their particular demographics, are at an increased risk of experiencing health hazards such as house fires.

Furthermore, pests were identified as being a problematic aspect of housing by several participants. All but one participant who had discussed this theme were from urban communities, and all of the participants from Cochrane had experienced pests in their housing. As has been found within the current study, research has demonstrated that insects are more prevalent in urban settings than in rural settings and this is thought to be caused by the differences in heat between the two (Meineke et al., 2013). The urban heat island effect explains the increase in heat in urban areas due to the decrease of plants and the increase of concrete that cover the land (Oke, 1973). Concrete roads and sidewalks absorb heat from the sun and that trapped heat is released slowly such that the overall temperature in urban areas remains relatively high even at night (Yang et al., 2016). Similarly, rodent populations have been shown to be more prevalent in urban settings as a result of anthropogenic activities which concentrate food resources and reduce native predator populations (Parsons et al., 2017). Therefore, our participants are at a higher risk of experiencing pests within their housing as a result of their socioeconomic status and quality of housing (Sutherland et al., 2020). Understandably, the more housing is deteriorated, the easier it becomes for pests to find ways into housing. Pests within the housing are a vector for disease,

therefore many health concerns can be associated with their presence (Laroche et al., 2018). Health concerns in relation to pests included the physical, mental and social impacts that their presence caused. Sleeplessness, stress, shame and other more severe mental health conditions have been associated with the presence of pests (Hwang et al., 2018; Perron et al., 2018). Since many of the participants from our study who currently lived in urbanized areas had moved there from other, more rural Indigenous communities, living with pest infestations may have been novel to them as would be any of the resulting health, mental health or social effects that come along with them.

The small size of housing was also identified as being a problematic aspect of housing by several participants. Participants from both urban and rural communities discussed this sub-theme, but a lack of storage was mentioned more often by the participants from the rural (80%) than from urban communities (20%). Research has shown that houses in rural communities, especially in Indigenous communities, are considerably smaller than houses in urban areas (Larcombe et al., 2011). In contrast, our findings suggest that participants living with homelessness experience smaller living arrangements regardless of if they live in urban or rural communities. However, it is important to remember that our study focuses on people living with homelessness, therefore it is to be expected that the size of housing will be consistently small across all sites due to the socio-economic class of our participants.

Furthermore, not only is housing smaller but it has also been well documented that First Nations communities in Northern Ontario experience more overcrowding than anywhere else in the province (Statistics Canada, 2006b). Our participants who discussed a lack of space often lived with multiple family members or discussed wanting to live in a multigenerational housing setting but not being able to, due to space availability. This link between housing size and

cultural and social aspects will be further discussed later in this discussion (see the section called Indigenous lens on homelessness). Briefly, many Indigenous cultures traditionally celebrated and encouraged multigenerational living arrangements as we see in the long history of longhouses which predates European arrival in Canada (White-Harvey, 1993). Since the colonization of North America, housing has moved primarily towards individualistic housing forms moulded from the Europeans. This form of housing may not suit First Nations needs as it moves away from traditional practices involving so much more than the housing itself. As a result of the movement towards individualistic housing, smaller, single-family homes have been prioritized (White-Harvey, 1993). This means that there is increased stress for those who do want to live in multigenerational housing because there is not enough room for the whole family.

Next, the availability of water was a concern identified solely by participants from the rural communities. Participants discussed needing to purchase water and needing to travel for water. Access to safe and reliable drinking water, although almost guaranteed anywhere else in Canada, has been, and continues to be denied to many First Nations people across the country (Galway, 2016). Water is a key determinant of health and holds much spiritual and cultural meaning to many Indigenous cultures (Baird et al., 2015). Despite this, people living on Indigenous reserves are 90 times more likely to have no access to running water than other Canadians (Morrison et al., 2015). Although the majority of our participants did have running water in their housing, the quality and safety of that water was discussed at length. This is further proof that inequalities exist in Indigenous communities regarding water quality, a fact which is well known in the literature. Studies have reported that "the number of water-borne infections in First Nations communities is an alarming 26 times higher than the Canadian national average" (Basdeo & Bharadwaj, 2013). Therefore, we see that Indigenous Peoples living in Indigenous

communities are more likely than anyone else in Canada to experience a lack of access to clean drinking water. This link between water and cultural and social aspects will also be further discussed later in this discussion (see the section called Indigenous lens on homelessness).

Finally, illegal housing was a concern identified solely by participants from the urban communities. This was discussed in respect to small, substandard housing offered primarily to people coming out of legal custody. The participants who discussed this theme felt that the people running the illegal housing were taking advantage of people living with homelessness to make a profit. These boarding houses are often unregistered or illegal and extremely affordable but are often "squalid bedsits" or extremely dirty and small rooms or beds with no privacy (Davenport & Gilmour, 2018). Although these illegal boarding houses do not specifically target Indigenous Peoples coming out of custody, it is more likely that they are used by Indigenous Peoples because there is an overrepresentation of Indigenous Peoples in Canadian prisons and jails (Corrado et al., 2014).

Crucially, homelessness in and of itself was listed as a factor which contributed to the overall health of participants. The topics discussed in relation to this by our participants were safety, theft, sleeping arrangements, food availability, and the management of pre-existing conditions. Homelessness is associated to poor health, specific health conditions such as increased risk of death, increased risk of mental illness including alcohol and drug abuse, increased risk of tuberculosis, increased risk of HIV, increased risk of injuries and assaults are all correlated to homelessness (Advisory Council for the Elimination of Tuberculosis, 1992; Manzon et al., 1992; Crowe & Hardill, 1993; Roy et al., 1998; Canadian Mental Health Association, 1998). As Indigenous Peoples are overrepresented in the homeless population it is important to understand that this means they are at a greater risk of all the previously mentioned

conditions and that overall Indigenous Peoples living with homelessness are more likely to have poor health in comparison to their non-Indigenous counterparts (Patrick, 2014).

In conclusion, since the 1990s researchers have seen gaps in the health of people of lower socioeconomic status in comparison to people of higher socioeconomic status (Mustard & Frohlich, 1995; Katz et al., 1996; Currie & Stabile, 2003; Olah & Hwang, 2013; Currie & Goodman, 2020). Another factor associated with health is ethnicity: for example, it is well known that in Canada there is a significant health gap between Indigenous and non-Indigenous Peoples (Hayward et al., 2020; Nguyen et al., 2020; Young et al., 2020). In the literature, this becomes even more evident when looking at health among First Nations Peoples living on-reserve in Canada (Batal et al., 2021). Further, within the existing literature, it is clear that there are differences between housing in urban and rural communities. These differences are even more pronounced in rural Indigenous communities in Canada where housing conditions have been recorded as being poor in comparison to more urban areas (Standing Senate Committee on Aboriginal Peoples, 2015). This has been repeatedly documented in First Nation communities where housing is more likely to be crowded or need major repairs (Statistics Canada, 2006). Therefore, health and health services are incredibly important to our participants, who are Indigenous, who are all people from lower socioeconomic backgrounds with lived homelessness experience, and who have discussed various aspects within their housing which fall into the description of poor quality housing. A clear cycle of poor health develops among the demographic that our participants represent, where due to socioeconomic status and ethnicity, housing is in poorer condition, which causes health conditions to develop or worsen.

Service provision

Health, law, housing, and social services are all key factors in the success of ending homelessness (Frankish et al., 2005). Currently, Canada's response to homelessness has focused on "prevention, rapid transition out of homelessness, and the provision of emergency services" (Gaetz, 2010). However, in order to be successful in ending homelessness, structural conditions that create and perpetuate homelessness need to be addressed. Our participants spoke about their experiences and needs in relation to service provision and multiple subjects on this topic have been highlighted through our research.

Firstly, costs associated with housing are one of the major factors responsible for the perpetuation of homelessness. For example, our participants discussed food insecurity as being an important issue related to costs associated with housing. The participants from this theme discussed negative health and mental health associated with this factor. Studies have identified food insecurity as a common occurrence among people living with homelessness (Russell & Parkes, 2018). The cost of food has been reported to take up as much as 11% of people's annual income (Canadian Federation of Agriculture, 2020). It is important to remember, however, that we are discussing experiences related to homelessness and that the majority of people living with homelessness are either partially or fully reliant on services to provide food for them (Gaetz, 2010). Indigenous Canadians living off-reserve experience food insecurity at higher rates than non-Indigenous Canadians (33% versus 8.4% respectively) (Chen & Che, 2001; Bush & General, 2007; Willows et al., 2009). Therefore, food insecurity is experienced more often by Indigenous Peoples in urban areas and that the food services provided such as food banks and soup kitchens are essential to Indigenous Peoples living with homelessness. Earle (2013) also said that "mental health, biological and nutritional mechanisms may be inseparable from the

cultural and social aspects of traditional lifestyles". This link between food and cultural and social aspects will be further discussed in the next section of this discussion (see section called Indigenous lens on homelessness).

Paying out of pocket for services was the second most discussed factor related to the cost of housing. Participants discussed how the financial responsibilities related to repairing their housing were often put on them instead of on the landlords or homeowners. They felt these costs were negative and should not be their responsibility. The majority of participants who discussed this theme were from rural communities where housing was considered under the ownership of the band. All reserve land is owned by the Canadian government, and while some band members own their housing, the majority rent from the band itself (Lavoie 2009). This means that there is sometimes a lack of a feeling of pride of ownership, or confusion regarding who is responsible for the upkeep of housing (Lavoie, 2009). It is however, clear from our research that the participants from our study were overwhelmingly concerned with the quality of their housing and maintaining it to the best of their ability; additional support, especially financial, was needed to keep housing liveable.

The price of renting was another cost associated with housing that participants spoke about. They expressed that the cost of living was too high and unaffordable to their incomes. The majority of participants relied heavily on financial assistance programs and even with these services they did not feel as though they could afford appropriate housing. Social assistance or government benefits include welfare, disability support payments, old age security and employment insurance (Homeless Hub, 2021). Studies have demonstrated that recipients of social assistance often find it does not cover basic living expenses and in fact, social assistance payments are lower than what they were in the 1990's and have failed to keep up with inflation

rates (Homeless Hub, 2021). As Indigenous Peoples experience the highest poverty rates in Canada and as we know they are the most represented population in those living with homelessness, social assistance services are crucial (Canadian Poverty Institute, 2021).

In terms of services, one of the most common comments from our participants was that they were asking for assistance from service providers and not receiving it. Sixty percent of our participants discussed this theme and their comments related mostly to assistance with major repairs within housing. Furthermore, twenty percent of our participants spoke about there being a lack of services available to them especially services for youth, elders, and for repairs. The distance of services was also an important factor. Participants felt that services were inaccessible to them due to their distance. A lack of sufficient funding within services was also mentioned, participants felt that local services were not being provided with enough funding to support service receivers. One important finding from our study was that the majority of participants who discussed using services were from the urban communities. Rural communities are not as capable as urban communities in dealing with homelessness issues, therefore it is common to see people move to larger urban centres to access services (Tota, 2004). Services in rural and northern communities seem to be less comprehensive, available, and accessible (Canadian Mental Health Association, 2009). This means that Indigenous Peoples living with homelessness in rural areas are more likely to face fewer and less effective services. However, we see from our results that the services provided in urban areas are also in need of significant changes based on our participants' comments.

Although the majority of the comments regarding service provision were focusing on the negatives related to services and changes which need to be made, some positives were also highlighted throughout our study. Participants acknowledged the importance of services and

some expressed positive outcomes that came with programming they had been involved in such as services for schooling and drug intervention. Educational programming has been shown to be an important factor in reducing homelessness and improving the quality of life of people who have experienced homelessness in the past (Frankish et al., 2005). One participant mentioned drug intervention services as being crucial in homelessness intervention, which has also been shown in the literature as an important factor related to homelessness intervention (Peterson et al., 2006). Service provision made participants feel happy, safe, supported, lifted spirits, and restored a sense of community among participants. This demonstrated the incredible impacts that services have on service receivers and the changes that can happen when services are accessible, comprehensive, and effective.

Overall, services are important determinants of homelessness intervention. Services are important for providing support with costs, health, housing and even with sociability. When provided in appropriate measures, when accessible and available, services can lead to improvements in the lives of people living with homelessness. In general, our research indicates that Indigenous Peoples living with homelessness benefit from services no matter what area they live in. However, services are utilized more in urban settings due to their availability. Furthermore, in urban communities, services relating to food insecurity are incredibly important. In rural community's services do not seem to be as available to people living with homelessness but services remain extremely important and were discussed as a need in these communities.

An Indigenous lens on homelessness

As we have seen in our results and in the literature, Indigenous Peoples living with homelessness are more likely to live in poorer quality housing, experience more health effects

and have less access to necessary services (Tota, 2004; Canadian Mental Health Association, 2009; Hayward et al., 2020; Nguyen et al., 2020; Young et al., 2020). These effects are further amplified in rural communities. However, the effects of homelessness on Indigenous Peoples can be more fully explored in a holistic manner. Not only do physical aspects of homelessness affect Indigenous Peoples living with it, but culture and spirituality also come into play here as do social and mental well-being (Edgar et al, 2005; Busch-Geertsema, 2010).

There is no single pathway to homelessness. As we see in our study, it is a complex relationship between individual factors such as "childhood experiences, low education attainment, lack of job skills, family breakdown, mental illness, and substance abuse" and societal factors such as "poverty, high housing costs, labour market conditions, decreased public benefits and racism and discrimination" (Susser et al., 1993; Jencks, 1994; Koegel et al., 1995; O'Flaherty, 1996; Herman et al., 1997; Schwartz & Carpenter, 1999). The social domain also plays an important role in homelessness because safe and private space is needed for social relations (Edgar, 2005; Busch-Geertsema, 2010).

Research on Indigenous homelessness necessitates a focus on colonization and the factors (or social determinants of health) impacted by colonization which create and perpetuate Indigenous homelessness (Kolahdooz et al., 2015). Colonization's impact on Indigenous homelessness has been discussed regarding many different aspects in the lives of Indigenous Peoples living with homelessness (Menzies, 2009; Peters & Robillard, 2009; Wente, 2000). However, this has not focused on the perspectives of the Indigenous Peoples living with homelessness. The lives, cultures, spirituality, and connection to traditional lands as well as traditions in themselves of Indigenous Peoples changed profoundly because of colonization (Christensen, 2016). Many Indigenous Peoples began to move away from seasonal travel and

"began to stay in one place" (Blondin, 1997). 'Settlement' in Canada facilitated assimilation efforts, in particular, the creation of the residential schooling system. Which as previously mentioned, were church-run, federally funded assimilation efforts which focused on 'schooling' Indigenous children in the European way. These were also a way to displace Indigenous Peoples from their land (De Leeuw, 2009). Additionally, children were separated from their families and were taught to be ashamed of their languages, culture and traditional knowledge (Lavallee & Poole, 2010; Ruttan et al., 2010). All elements that represented home were taken away from these children (Fournier & Crey, 1997). Many were also physically or sexually abused during their time at residential school (Brasfield, 2001; Degagné, 2007). Many survivors of the residential schooling system developed symptoms similar to post-traumatic stress disorder and the term 'residential school syndrome' is often used to explain things like "emotional detachment, substance abuse, anger issues, sleep disturbances, and intrusive memories'' (Brasfield, 2001). The trauma endured by residential school survivors has been studied quite heavily and has been found to be multigenerational (Crowshoe et al., 2018; Oshima, 2018; Panofsky et al., 2021). The trauma has lasted over time and generations, and it has been extensively linked to poor mental health among Indigenous Peoples in Canada (Christensen, 2016). Poor mental health has been listed as one of the main causes which lead to homelessness, therefore the trauma from colonization is in itself a cause of homelessness (Johnstone et al., 2016).

Multigenerational trauma is said to be 'embedded' within cultural memory and 'passed on' as a component of a people's culture (Kolahdooz et al., 2015). The cycle of multigenerational trauma created cultural, familial and social dissociation which "have influenced material, socioeconomic and socio-environmental disparities between Indigenous and

non-Indigenous Canadians through generations" (Wesley-Esquimaux & Smolewski, 2004; Smith et al., 2005; Menzies, 2007; King et al., 2009; Reimer et al., 2010). Trauma is known to shape the experience of homelessness, and this is even more pronounced when discussing the experience of Indigenous homelessness because of colonization and because of the continued impacts government policies have on Indigenous Peoples (Stewart et al., 2004; Robinson, 2005; Kim & Ford, 2006; Taylor & Sharpe, 2008; Menzies, 2009). The trauma endured by Indigenous Peoples because of the 1867 Indian Act and its various assimilation efforts affected "Indigenous spirituality, traditions, cultures, languages, and connections to the lands, which are vital to Indigenous well-being and health" (Kolahdooz et al., 2015). Structural discrimination has been discussed in relation to Indigenous Peoples and this is true when discussing homelessness (Kolahdooz et al., 2015).

Homelessness is predominantly discussed as being a multidimensional experience, ultimately, however, it is understood as being "fundamentally rooted in a lack of housing" (Somerville, 1992; May, 2000; Klodawsky, 2006; DeVerteuil et al., 2009; Cloke et al., 2010; Christensen, 2016). The perspectives of people living with homelessness have been shown to focus past a simple lack of housing and focus rather on home as a sense of 'being-in-the-world' (Heidegger, 1962; Christensen, 2016). Somerville (1992) moves away from the idea of 'rooflessness' suggesting that homelessness be understood as 'rootlessness' "a state of being that implies the absence of a sense of place or a sense of home (Somerville, 1992; Christensen, 2016).

These concepts of home and homelessness were evident throughout our study where participants spoke about social, mental, spiritual, and cultural health in relation to their experiences with homelessness and service provision. The majority of our participants discussed

feeling depressed, hopeless and giving up on services. Many expressed feeling that there was nothing they could do to change their living conditions and that no help was being given to them. This lack of a connection, or even negative connection to housing and services may be attributed to the absence of a sense of home among our participants. This has been documented in the *Integrated Life Course and Social Determinants of Aboriginal Health* (Reading & Wien, 2009) which discusses employment and income, education, physical housing environment, individual health and food security as proximal social determinants of health (SDH) which have a direct impact on the "Physical, emotional, mental or spiritual health of Indigenous Canadians" (Kolahdooz et al., 2015). These SDH's have been listed as being more easily targeted by policy changes, it is therefore, important to understand them from the perspective of people with lived experiences to be able to advocate for necessary policy changes (Kolahdooz et al., 2015).

As we see in the results, continuously asking for services and not receiving them was incredibly stressful and harmful to the participants' sense of worth. Especially when the lack of assistance was caused by discrimination and racism among service providers which multiple participants expressed favoured non-Indigenous tenants and service receivers. These messages of racism, unworthiness and the sheer lack of assistance received by Indigenous Peoples living with homelessness perpetuate the conditions which keep them from moving forward and breaking the cycle of homelessness (Johnstone et al., 2016; Thistle, 2017).

In many Indigenous cultures, relationships are at the core of their worldviews (Harris & Wasilewski, 2004; Absolon, 2016). Relationships are known to exist between all things, meaning they are all connected. Interconnection between all things means that people are deeply connected to their communities, ancestors, future generations, lands, animals, plants, and any inanimate objects on those lands (Smith & Ward, 2000; Absolon, 2010; Hart, 2010).

Furthermore, as a result of this interconnection, all things are responsible for each other, this is clear in the seven grandfather teachings; wisdom, love, respect, bravery, honestly, humility, and truth, which value human responsibility to all situations and which do not privilege humans over other aspects of creation (Native Women's Centre, 2008; Verbos & Humphries, 2014; Absolon, 2016).

Many of our participants spoke about a loss of relationships to family, land, spirituality and tradition as a result of their homelessness. As previously mentioned the movement from traditional housing to European single-family homes, forced separation between families which thereby created social impacts on the individuals who were no longer able to live in dynamic multigenerational housing (Lubik & Kosatsky, 2019). This is experienced further in cases where Indigenous Peoples are forced to separate from their families and traditional ways of living due to the size or condition of housing or lack of services, which are all aspects related to living in precarious housing or with absolute or hidden homelessness (Lubik & Kosatsky, 2019). It is important to note that while many participants felt a loss of relationships due to their housing, some felt their housing created negative relationships with their families due to a lack of space and privacy and some participants did express wanting to live alone.

These relationships have been severed by colonization in many cases not only due to the changes imposed on Indigenous Peoples but also due to the continuing colonial systems that it developed.

> For generations, Aboriginal people have had the social values of others imposed on them. It's created social marginalisation ... For us, our communities and families were central, which is different from the European way of prioritising the individual [and] looking out for yourself. So we've had this system pushed on us that is counter to what we believed in, and it has meant for a lot of upheaval" (Christensen, 2016).

This movement away from relationships because of colonial services was obvious in our findings where for example, multiple participants discussed the social impacts related to being separated from their families or children as a result of their living conditions. Some participants lived further from family or even moved to urban areas to seek out homelessness services which were not available to them in their rural communities. Some decided to leave their children with family members because they did not feel their housing was safe (no locks on doors). Others were embarrassed about their housing conditions and isolated themselves from their families as a result of that shame. These losses in relationships between people and their families left them feeling isolated, stressed and lost. Many of these losses can be explained by the fact that the system which offers homelessness services are discriminatory and urban-centred (Tota, 2004; Canadian Mental Health Association, 2009; Bingham et al., 2019). In the development of services Indigenous Peoples have been left out of the decision-making process and have become an afterthought of the system (Christensen, 2016; Reo et al., 2017). Therefore, many services focus on non-Indigenous issues and factors related to homelessness and offer inappropriate programming to Indigenous Peoples living with homelessness for example, single-family housing arrangements.

Another example from our study of inappropriate service provision specific to Indigenous Peoples living with homelessness are services which relate to food and water. Colonization resulted in lifestyle changes which disrupted food systems and this resulted in devastating effects on both health and wellbeing (Alfred, 2009). Europeans took control over and banned many activities related to food, cultural events surrounding food were prohibited, the sales and trading of Indigenous People foods were also heavily regulated and traditional lands and resources were destroyed (McIlwraith, 2012; King, 2012; Hiebert & Power, 2016; Daschuk, 2021). Therefore,

traditional diets which are diverse, nutrient-dense, sustainable, and spiritually grounding were forever changed by colonization (Earle, 2013; Johnson, 2014). In terms of market value these diets are also considered expensive (Earle, 2013).

For many Indigenous communities, food represents more than nutrition, it also represents "empowerment, knowledge renewal, and renewal of family and community relationships" (Elliott et al., 2012). Food, health, and well-being are all interconnected, some Indigenous communities even consider land-based activities like hunting and eating appropriate food, as one of the biggest factors related to health (Grey & Patel, 2015).

Food sovereignty involves principles such as "spirituality or sacredness, participation, self-determination and policy relatedness" (Indigenous Food Systems Network, n.d.a; Johnson, 2014; Morrison, 2011). Decolonizing food systems by promoting food sovereignty has been shown to increase health (Cidro et al., 2015; Weiler et al., 2015; Skinner et al., 2016). However, despite this, current emergency food services provide "a stark contrast to the precepts if Indigenous food sovereignty" (Russell & Parkes, 2018).

Many of the participants from our study discussed food insecurity in relation to their homelessness. This is in accordance with the literature which shows that Indigenous Peoples are overrepresented in the data regarding food insecurity in Canada (Russel & Parkes, 2018). Within the confines of urban areas, many of our participants identified that food, especially healthy traditional foods such as hunted meats, were unaffordable and inaccessible. Participants spoke about their health in relation to these foods and about needing to purchase foods such as cheap pastas to keep themselves full. They felt their health had been and continued to deteriorate due to a lack of healthy foods and found that the services related to food were not able to provide the support that they required. Some participants spoke about running out of food on a regular basis

because of a lack of available funds and a lack of available supply at the various food banks. Although food insecurity was more prevalent in the urban communities, the participants from rural communities did speak about food insecurities as well. However, these participants focused on services not being well enough funded to support everyone in need.

In the literature, studies on food in relation to Indigenous Peoples living with homelessness, have found that the loss of traditional foods and loss of traditional hunting and gathering activities creates a cultural disconnect (Russel & Parkes, 2018). Concerns range further than the quantity or provision of food into relationships, power, displacement, health and interconnectivity of food (Russel & Parkes, 2018). This is in accordance with our findings where participants discussed health, relationships to land, and the social and spiritual experiences they felt they were lacking in relation to the food services and food availability they were experiencing.

All in all, food services are not focusing on the needs of Indigenous Peoples living with homelessness. Services for food are colonial in that they ignore issues surrounding spirituality and culture. Further, these services completely disregard the traditional aspects of land-based activities such as hunting and fishing, focusing solely on food as nutrition.

With regard to water, multiple participants spoke about not having access to clean drinking water within their housing. We have seen previously that water accessibility is an issue faced primarily by Indigenous Peoples and is more common in rural areas. Again, this has to do with colonization and its lasting impacts within the development of policies (Ansloos & Wager, 2020). Once more, we see that the impacts of water availability move past inaccessibility and poor infrastructure and move towards considerations of health, spirituality and culture. A common occurrence in issues relating to service provision for Indigenous People is the lack of

Indigenous perspectives or Indigenous-focus in the development of programming, and this is true in relation to water planning and water services in Canada (Jackson & Morrison, 2007).

McGregor (2012) discusses the meaning of water for Indigenous Peoples, describing water as being a 'living force' which must be "protected and nurtured" (McGregor, 2012). Water is precious, cleansing, purifying and supports life, it is a medicine and has spiritual properties (McGregor, 2012). Our participants spoke about water mostly within the context of supporting life by speaking about health-related effects of unclean water. However, some participants mentioned aspects which related to community and personal relationships in relation to water such as receiving rides from community members to get water, stealing water jugs to sell them and borrowing water from neighbours or family. Although our findings did not include specific factors relating to the traditional uses of water, it is clear, from the literature, that these are impacted when water is not available and that this impacts people spiritually, culturally and in terms of their physical health and is a problem among Indigenous Peoples living with homelessness (McGregor, 2012; Arsenault, 2020).

Drug abuse is another factor which was discussed by our participants which should be discussed within an Indigenous lens. Addiction is a well-known pathway to homelessness and the prevalence of addiction in Indigenous Peoples is far greater than that in non-Indigenous Peoples (Richards, 2009; Anderson & Collins, 2014). Indigenous Peoples are more likely to develop HIV, hepatitis C and are more likely to overdose or die from drug use than non-Indigenous Peoples (Urbanoski, 2017). Substance abuse problems are heavily linked to colonization, particularly to the multigenerational trauma from residential schools (Ross et al., 2015).

In order to look at the cultural and spiritual aspects of drug use, it is helpful to look at Indigenous traditions in the treatment of substance abuse. Cultural dislocation caused by colonization as mentioned previously, caused many mental health problems in Indigenous Peoples. Much of the drug abuse among Indigenous Peoples is thought to be associated with the trauma from colonization and residential schools (McCormick, 2000). Furthermore, an alarming rate of deaths, nearly three-quarters, caused by accidents and violence including suicide, homicide and fires among Indigenous Peoples, are linked to drug or alcohol consumption (York, 1990).

One factor discussed in relation to traditional treatment of substance abuse is a reconnection to creation including "family, community, culture, the natural world and the spiritual world" which may have been forgotten as a result of drug use (McCormick, 2000). Many of the mental health issues experienced by Indigenous Peoples seem to be linked to a disconnection from their culture. Therefore, methods which promote the reconnection of these relationships seem to be the most effective (McCormick, 2000). Our findings are in accordance with the literature that discusses a disconnection from culture being a factor in drug usage and abusage. Our participants spoke about using services to overcome their addictions and of those the services which focused on spirituality, healing and rebuilding relationships and culture were discussed as being the most helpful.

Many aspects which our participants discussed are experienced primarily or solely by Indigenous Peoples living with homelessness (Thistle, 2017). There are many pathways and factors which create cycles of homelessness for Indigenous Peoples and these include things like colonization, colonial policies, social health factors like being separated from family, or living in single-family housing. Other factors include, personal trauma and multigenerational trauma, a

loss of relationships and improper service provision especially in relation to food, water and drug interventions. These are all areas of concern that have been highlighted by our participants and which are particular to Indigenous Peoples living with homelessness in comparison to non-Indigenous Peoples living with homelessness. These factors lead to homelessness and perpetuate it by creating various issues in the lives of many Indigenous Peoples and as we have seen, often, when multiple of these issues are experienced by the same person, they tend to become stuck in a sense of worthlessness, stress and resign to their homelessness.

Needs and suggestions

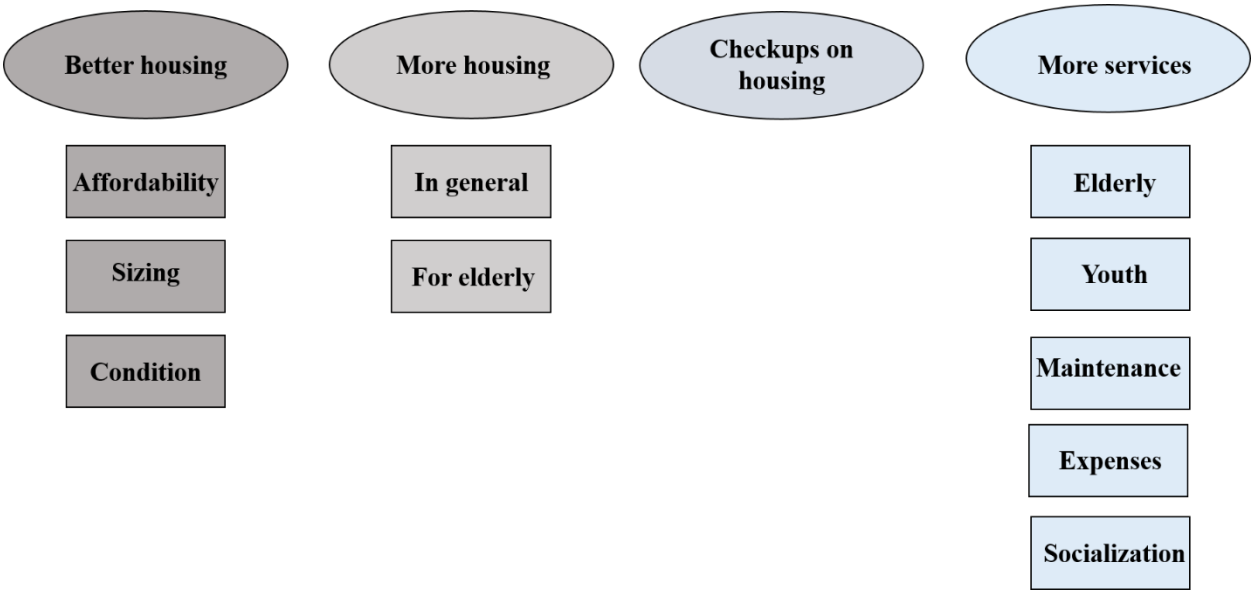

Figure 12. Participants suggestions for improving service provision and housing of Indigenous Peoples living with homelessness.

As indicated throughout the previous section, colonialism has affected Indigenous housing and homemaking practices in multiple ways, displacing Indigenous Peoples from traditional lands, separating children from their families, and creating policies which perpetuate discrimination and racism. These disruptions undermine "social determinants of Indigenous

health, ranging from proximal determinants like housing and poverty, to the distal determinants of cultural continuity, self-determination, and an Indigenous sense of home" (Christensen, 2016). Just like the definition of homelessness is different for Indigenous Peoples, so must be the solutions for Indigenous homelessness.

Much like our findings, other evidence exists in the literature which shows that many aspects of Indigenous cultural practices are often directly conflicted by the existing policies pertaining to housing (Christensen, 2016; Thistle, 2020). One example from the literature is the strain of rental schemes competing with traditional reciprocity and sharing practices in terms of financial resources (Peterson, 1993; Stern, 2005). Cultural practices such as welcoming kin who need residence for extended periods of time are traditional practices which mediate homelessness (Birdsall-Jones, 2010). Yet, simultaneously, the financial and social strain of overcrowding can lead to homelessness for an entire family (Birdsall-Jones, 2010). Therefore, a cultural safety approach to housing is essential for service provision relating to Indigenous homelessness and housing (Christensen, 2016). Such an approach would focus on homelessness more holistically, incorporating both Indigenous and Western knowledge to disrupt any power imbalances that may exist and to prioritize the health of the people living with homelessness (Dyck & Kearns, 1995; Durie, 2001). In order to fully understand what changes need to be made and how services are working we need to be able to see them more holistically. Policy, programs, and infrastructure need to have an Indigenous focus which celebrates Indigenous cultures, and which are informed and implemented by Indigenous communities and people (Christensen, 2016).

Our participants discussed multiple needs and suggestions related to their experiences with homelessness. Firstly, our participants discussed needing better housing. This section concentrated mostly on the affordability of housing, sizing and overall condition. It is clear from

our findings and from the literature that housing plays an important role in health (physical and mental), culture and spirituality (Bailie & Wayte, 2006). Furthermore, it is clear that good housing conditions are not always accessible or affordable for people fitting the socio-economic description of our participants (Ware, 2013). Our participants' housing has been shown to be in need of major repairs, which is in accordance with the literature on lower socioeconomic Indigenous housing (Quicke & Green, 2017).

Building more housing was also suggested by our participants, both in general and specifically for the elderly. Participants discussed their homelessness in relation to a lack of available housing and older participants discussed how existing housing was geared more towards families and not towards people living independently. The lack of housing for Indigenous Peoples has been explored in the literature, therefore our participants' suggestions regarding the need for more housing is documented (Memmott et al., 2012). Gaetz (2010) agrees with the suggestion of building more housing but discusses cases in the literature which suggest that creating more housing alone, is not sufficient enough to end homelessness. Instead, he suggests taking a strategic approach encouraging the development of affordable housing as well as changes in policy and support for low-income Canadians (Gaetz, 2010).

Thirdly, our participants suggested the implementation of regular check-ups on housing to ensure it is being properly maintained. At this time, Canada does not have an inspection program running for subsidized housing (ACORN, 2017). However, ACORN, a national organization representing low-income families in Canada has been pushing for exactly that. Studies conducted by ACORN have demonstrated the need for an inspection strategy for low-income housing (ACORN, 2017). In the United States, a program called Housing Choice Vouchers (formerly Section 8 Housing vouchers) was run for this exact purpose (Teater, 2009).

The program offers tenants the right to request an inspection of housing before they move in to make sure it complies with Housing Quality Standards. Further, once a year after the tenant moves in or when a tenant or landlord complains about a health or safety condition, inspections are also done (Housing Choice Vouchers, 2021). If landlords fail inspections, they are given a list of aspects which need repairs and the opportunity to remedy any violations by a specific date (Patterson & Yoo, 2012). This program has been shown to increase the availability of affordable and good-quality housing, and a similar program has been suggested for use in Canada (ACORN, 2017; Housing Choice Vouchers, 2021). This kind of program could be beneficial for Indigenous Peoples living with homelessness as they represent a large proportion of Canadians living with homelessness.

Next, participants discussed needing more services for elders, youth, to help with maintenance and expenses and finally for socialization. It has been well documented that the increase in available services, especially when guided by service receivers, has important and long-lasting effects on people living with homelessness (Padgett et al., 2016). Services are clearly needed to help Indigenous Peoples living with homelessness and it is important that those services be guided and implemented by Indigenous Peoples, especially those with lived homelessness experiences (Christensen, 2016). In terms of social, spiritual and cultural programming, studies have found that participants experience significant improvements in areas of physical and mental health as well as in overall wellness. Therefore, this kind of programming is crucial to ending Indigenous homelessness (Christensen, 2016).

Overall, our participants discussed many needs and suggestions from their perspectives in relation to Indigenous homelessness. Creating better housing, developing more housing, implementing programming to inspect housing regularly and developing more Indigenous-led

and implemented services were suggested. It is clear that changes are required to help Indigenous Peoples living with homelessness and that the changes need to be focusing on the Indigenous experience of homelessness in order for them to be successful in reducing and ultimately ending Indigenous homelessness.

Chapter 7: Conclusion

Indigenous homelessness has been said to be perceived in two views, one focusing on the individual scale of homelessness reducing it to a lack of material possessions and the other diminishing the seriousness of materialistic homelessness by romanticizing views of 'Indigenous-as-nomadic'(Kearns, 2006). In the first view, homelessness is discussed as a material condition which is explained away by "poverty, addiction and poor mental health" without considering the specific Indigenous factors which contribute to it (Jeyaraj, 2003).

Indigenous homelessness, the pathways to it and its perpetuation are all framed by colonial socio-structural dynamics (Christensen, 2016). Through this study, we have demonstrated this control by discussing literature in relation to the compliance of policies and laws to UNDRIP and the TRC for articles which impact Indigenous homelessness. We have also highlighted our participants' understanding of a link between health and housing and to their understanding and needs related to service provision. Furthermore, we have informed the development of culturally appropriate services and programming through the voices of our participants by discussing their experiences from a holistic lens, and highlighting their needs and suggestions.

Through our discussion of Indigenous-specific experiences in homelessness, we have gone further than examining the literal experience of homelessness and have viewed it also as a spiritual experience. This understanding allows for a more holistic representation of the experience of Indigenous homelessness in northern Ontario and addresses both "Individual and collective needs for self-determination, cultural emplacement and socio-economic inclusion" (Christensen, 2016).

Through our analysis of Indigenous homelessness across four northern Ontarian communities, we explored multiple dimensions of Indigenous homelessness and found six main themes; type of homelessness, path to homelessness, physical aspects of housing, health, social and mental impact of housing, costs associated with housing, services and, needs and suggestions.

Health and housing were intertwined in the perspectives of our participants, providing contextualized accounts of the link between health and housing found in other studies about homelessness (Rosenberg & Wilson, 2001; Waterson et al., 2015; Clair & Hughes, 2019; Lubik & Kosatsky, 2019). Northern Indigenous Peoples living with homelessness experienced housing in precarious conditions and suffered health complications as a result. Rural communities had more major housing condition issues than urban communities but similar issues regarding physical aspects of housing were noted (Quicke & Green, 2017). These living conditions demonstrated the ongoing effects of colonial control over housing especially in terms of the movement towards smaller, single-family housing and overcrowding (Lubik & Kosatsky, 2019).

The role of services in supporting individuals living with homelessness was articulated by the participants as being important, yet inefficient. Especially in rural areas, services were inaccessible, ineffective, or non-existent. Most participants felt there was a lack of services, there was discrimination within service provision, and felt unsupported by existing service providers.

The role of a holistic approach to finding solutions to Indigenous homelessness highlighted the spiritual and cultural links that participants identified and which were identified in other research (Memmott et al., 2012; Christensen, 2016). A focus on colonial impacts was taken in order to identify factors which are specific to Indigenous homelessness and which need to be addressed in order to facilitate interventions for Indigenous homelessness. The residential

schooling system, multigenerational trauma and the ongoing colonial mind-set within policies were explored. By conceptualizing factors like loss of relationships, cultural impacts of food and water inaccessibility, and drug abuse as factors in 'spiritual homelessness' we can explain the socio-cultural dimensions of Indigenous homelessness more fully (Keys Young, 1998; Christensen, 2016). This understanding of factors which contribute to the Indigenous experience of homelessness demonstrates the need for services, programming and policies which focus on the decolonization of current practices by addressing colonial impacts on the lives of Indigenous Peoples both socially and materially. Further, it supports the need for practices which are rooted in traditional Indigenous culture and which focus on self-determined support (led and informed by Indigenous Peoples).

All of the previously mentioned factors were aspects discussed within our participants' suggestions for solutions which focused on specific areas within current service provision which need to be addressed. More good quality housing and programming is required by Indigenous Peoples living with homelessness and as identified by our participants and in the literature, these changes need to consider not only the physical experience of homelessness but also spiritual and cultural factors which impact it and the success of services (Memmott, 2012; Christensen, 2016).

The sentiments of our participants and their perspectives on their experiences with homelessness in relation to health, services and their Indigeneity are important factors which can be used to create successful, culturally appropriate services and programming which are informed by the expertise of Indigenous Peoples with lived homelessness experience.

Strengths

A major strength of this research is the use of a Participatory Action Research model from the original study, the photovoice methodology. This form of research allows for the active

engagement and participation of participants. This insures that the research is being modified and is led by the participants who are then able to make decisions on what aspects of their experiences to share and which aspects to keep private. It also allows them the liberty to highlight areas within the scope of the research that they identify as being important, because they can choose to take photos of those aspects and they can choose to focus solely on them.

With respect to the photovoice methodology, participants also have the opportunity to give context to the images they take and to explain their strengths, needs and concerns in their own words. Therefore, this research allows the participants voices to be heard, which is an important feature that would be difficult to recreate using other methodologies.

Furthermore, the lived experiences of participants allow for a deeper look into homelessness in Northern Ontario. Indigenous lived experience is considered ontologically significant and is therefore an important part of research. Because lived experience "refuses the notion of an imaginary relationship to existence" it is considered by many Indigenous communities to be sacred knowledge (Martin, 2017). The importance of lived experience within an Indigenous research paradigm can be explained by the acceptance that knowledge has agency (Wilson, 2008). Therefore, one of the major strengths of this research is the recognition within it that our participants are extremely knowledgeable because of their lived experience and are in fact experts on Indigenous homelessness in Northern Ontario. This understanding allows us as researchers to take on the role of learners in this context.

Limitations

As this study is a secondary supplementary analysis of research originally completed to increase the understanding of homelessness in Northern Ontario across both Indigenous and non-

Indigenous Peoples, the methodology used in the original study could be modified to better suit the needs of this study.

Firstly, this study focuses solely on the data provided by the Indigenous participants from the original study. Therefore, our sample size is only 30 in comparison to the total number of participants.

Second, the participants from the original study were recruited in a way to get the maximum amount of participation. This means that the number of participants varies across sites. As a result, it becomes difficult to analyse based on the total amount of Indigenous participants because there are more participants in Sudbury than any other site. Therefore, our data may not be as representative as it could be. For example, if all participants from Fort Albany First Nation discuss a specific topic, they could still represent a lower percentage of the total population based on the fact that there are only 4 participants from Fort Albany First Nation. The findings from each community were discussed individually for this reason.

Third, the original study questions were not geared towards the Indigenous participants specifically, therefore there may be significant differences in the living experiences of Indigenous Peoples living with homelessness in comparison to non-Indigenous Peoples living with homelessness that we are unable to see within the scope of the current study.

Also, the thematic analysis methodology being used can be considered subjective. We have corrected for this by using the *NVivo* software which has been shown to decrease subjectivity and also by including the review of findings from a second person as a means to validate them. This is the protocol administered by many researchers using this methodology. However, there is still an element of subjectivity within the analysis method which is important to note.

Lastly, as noted throughout this study, data about homelessness is often incomplete as a result of people living with hidden homelessness, not using services or being isolated from participation opportunities. It is also immensely important to note the history of research with Indigenous communities which has many negative associations among Indigenous community members as a result of researchers and organizations taking advantage of entire communities. This means that many people with lived experiences may choose not to participate in future research endeavours. This may be an explanation for the sample size in this study.

Contributions

This study provides evidence about the complexity of Indigenous Northern Ontario, Canada. The results of this study provide further understanding of compliance of current practices, the impact of homelessness on health and well-being and the efficiency of service provision from the perspective of service receivers. It provides a much needed look into Indigenous homelessness from the perspective of Indigenous Peoples with lived experiences. Differences between living conditions and available supports in urban versus rural communities have also been identified through our study. Limited studies have examined the differences in urban versus rural homelessness and to our knowledge none have been done on Indigenous homelessness, especially from the perspective of Indigenous Peoples with lived experience. Specific conditions, needs and suggestions described through our study identify areas which could be improved upon to better the living conditions for people living with homelessness across Northern Ontario. Further understanding of Indigenous homelessness and Indigenous specific needs in relation to homelessness could benefit housing programming and other services, fostering an environment of Indigenous brilliance and Indigenous health within current programs, as well as provide opportunities for future research.

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