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Indigenous housing and health in the Canadian North: Revisiting cultural safety

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ABSTRACT

In this article, I explore the relationship between housing, home and health amongst Indigenous homeless people living in the Canadian North. In particular, I examine the ways in which Indigenous homemaking practices conflict with housing policy, and exacerbate individual pathways to homelessness. I argue that integral components in northern Indigenous conceptualizations of home and, in turn, health are not only unrecognized in housing policy, but actively discouraged. The potential for homemaking to inform health and housing policy speaks to the relevance of cultural safety not only to Indigenous health services, but also to a comprehensive framing of Indigenous health.

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1. Introduction

In Canada's Northwest Territories (NWT), visible homelessness was largely uncommon prior to the late 1990s. Since then, emergency shelters in the largest NWT communities, Yellowknife and Inuvik (Fig. 1), have reported a steady increase in demand (IIC, 2003; YHC, 2007). By 2008, approximately five per cent of the city's then-population of 18,700 experienced episodic or chronic homelessness resulting in shelter stays (YHC, 2007). In Inuvik, anecdotal reports from service providers in 2008 suggested that anywhere from 50 to 100 adults (1.4–2.8 per cent of the town's population of 3484) experienced homelessness. These numbers do not include hidden homelessness, however, which many support providers believe is much higher.

The population of the NWT is 41,062, spread across 33 communities (Statistics Canada, 2011). Populations range significantly between these communities—from 19,234 in the city of Yellowknife to 3463 in the town of Inuvik to hamlets as small as 50 inhabitants (Statistics Canada, 2011). Yellowknife and Inuvik are the principal administrative, transportation and economic development centres of the territory. Support providers estimate that 90–95% of homeless people in both communities are Indigenous to the territory (Christensen, 2012, 2013), which includes the ancestral homelands of the Dene, Métis, and Inuit. While 54.5% of the

territorial population is Indigenous, in Yellowknife, Indigenous people account for only 22.2% of the population, and in Inuvik, 63.3% (Statistics Canada, 2011). Meanwhile, Indigenous peoples are overrepresented among the visibly homeless in all major Canadian cities, and comprise the majority homeless population in over half (Belanger et al., 2012). However, visible homelessness must also be situated within a wider, even more pervasive spectrum of chronic housing need that includes the more 'hidden' experiences of chronic housing need, overcrowding, insecure housing tenure and staying temporarily with family or friends due to a lack of permanent shelter. Such housing insecurity continues to characterize the experiences of many Indigenous communities across Canada following the introduction of state-managed housing programs and rental schemes (Lauster and Tester, 2010; Walker, 2008).

The overrepresentation of Indigenous people among the rural and urban homeless in Canada (Belanger et al., 2013) is mirrored in other like-settled states like Australia and Aotearoa/New Zealand (Anderson and Collins, 2014; Collins, 2010), where Indigenous communities also experience higher rates of chronic housing need (Cooke et al., 2007; Habibis, 2013; Minnery et al., 2000). Recent scholarship has aimed to situate Indigenous homelessness within the overall context of colonialism (Menzies, 2009; Parsell and Philips, 2014; Peters and Robillard, 2009; Weasel Head, 2011), as well as articulate the specific health and social service needs of Indigenous homeless people (Bailie and Wayte, 2006; Davey and Kearns, 1994; Groot et al., 2011; Milligan et al., 2011). However, more work is needed to inform the decolonization of policy and

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Fig. 1. Map of study communities in the Northwest Territories (Eades, 2010).

discourse necessary to alter these geographies and alleviate Indigenous homelessness (Christensen, 2013).

The concept of culturally safe health care was developed in the late 1980s through a desire in the health field in Aotearoa/New Zealand to decolonize the conceptualization and delivery of health and health services. Yet just as cultural safety has encouraged us to “to rethink our ways of knowing in an emerging geography of health and healing” (Dyck and Kearns, 1995, p. 138), so too can it encourage a recognition of diverse Indigenous conceptualizations of the relationship between health and home. This, in turn, presents significant potential for the development of housing and health policy that works to alleviate Indigenous homelessness by promoting contextualized, Indigenous practices of homemaking. By homemaking, I mean the culturally embedded routines, practices and ideologies that are enacted in the pursuit of creating home, be it material, spiritual, relational or emotional (see Blunt and Dowling, 2006; Mallett, 2004).

In this article, I explore the relationship between housing, home and health amongst Indigenous homeless people living in the NWT. In particular, I am interested in the ways in which integral components in northern Indigenous conceptualizations of home and, in turn, social determinants of Indigenous health are not only unrecognized, but are actively discouraged, as current northern housing policy clashes with the strength and resilience of Indigenous homemaking. The potential for homemaking to inform health and housing policy speaks to “culture as a positive resource” (Ramsden, 2015, p. 7) and the relevance of cultural safety not only to Indigenous health services, but also to a holistic framing of Indigenous health.

2. Indigenous home, homelessness and the social determinants of Indigenous health

Colonialism has, in myriad cross-generational ways, disrupted Indigenous homemaking practices by displacing Indigenous peoples from their ancestral lands, separating children from their families, and implementing exclusionary socio-spatial structures, all of which have undermined 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 (Czyzewski, 2011; Greenwood and de Leeuw, 2012; Reading and Wein, 2009).

Such distal, collective forms of dispossession and displacement lie at the heart of what Keys Young (1998) terms “spiritual homelessness”, a concept to explain the broader significance of being disconnected from culturally-rooted knowledge, identity and spirituality to Indigenous homelessness. Memmott and Chambers (2008, p. 2) have expanded upon this to articulate spiritual homelessness as:

a state arising from separation from traditional land, and from family and kinship networks (noted earlier as a result of historical governmental policies), and involving a crisis of personal identity wherein a person's understanding or knowledge of how they relate to country, family and Aboriginal identity systems is confused or lacking.

Building upon this work (Christensen, 2013), I have argued that Indigenous homelessness across settler colonial contexts is a multi-scalar phenomenon, and occurs simultaneously a collective experience of ‘disbelonging’ as a result of the settler colonial

project, and a very individual, intimate and embodied experience of literally being without secure shelter, and without a place to be.

Spiritual homelessness compounds the already negative effects of homelessness on mental health (Memmott et al., 2012). Likewise, scholars have emphasized the need to support Indigenous families and communities as part and parcel of efforts to address health inequalities (Menzies, 2008; Smith et al., 2005). Yet with each era of post-contact Indigenous history in Canada, new policies have resulted in the disruption of Indigenous families and communities (Fournier and Crey, 1997). In particular, Menzies (2009) has found that Indigenous homeless people consistently report personal or family histories of traumatic events that have resulted in the severing of ties from family or community of origin. Playing an integral role in this trend is the contemporary child welfare system (Menzies, 2009). In fact, Tait et al. (2013) have argued that the child welfare system itself, where Indigenous children comprise almost half of the children in care despite being less than five percent of the total child population (Trocmé et al., 2004), is a social determinant of health for Indigenous peoples in Canada.

Just as linking individual experiences of Indigenous homelessness to shared, collective encounters with colonialism is important to fully articulating the significance of being homeless in one's homeland, so too do these multiple scales of homelessness illustrate the complexity and importance of home, both at the intimate, proximal scale as well as the ontological, or distal, scale (Greenwood and de Leeuw, 2012). A multi-scalar understanding of homelessness also opens up the conceptual space necessary to fully recognize the ways in which homeless Indigenous men and women *make home* as they engage with, and resist, colonial geographies in their everyday lives.

3. Revisiting cultural safety

Though cultural safety was initially developed to meet the specific health service needs of Māori (Ramsden, 1990, 1992; Ramsden and Spoonley, 1993), the approach soon developed into a broader consideration of alternative ways of conceptualizing health and practicing health care where “previously subjugated knowledge [is] brought alongside that of established Western biomedical discourse and practice, as Māori make a claim for the legitimacy of their beliefs and practices” (Dyck and Kearns, 1995). In the years since, cultural safety has been expanded and applied across other geographic contexts in efforts to improve the quality of, and access to, health services by Indigenous peoples (Josewski, 2012; Shahid et al., 2011; Smye and Browne, 2002).

Cultural safety is an approach to health policy and service delivery that aims to disrupt the power imbalance that lies at the heart of conventional health services, and emphasize in the health care encounter the comfort and safety of the client (Durie, 2001).

Therefore, I draw on cultural safety as an approach to health and social policy development and service delivery that moves beyond cultural sensitivity to actively recognize and encourage health-promoting cultural elements as a way to maximize gains in health and social service intervention as well as the potential for housing programs to alleviate homelessness at multiple scales. In the case of housing, this means the development of housing policy that promotes Indigenous homemaking practices, and thereby recognizes the deep cultural links between health and home.

While culturally-safe approaches for promoting Indigenous health have been widely lauded (Papps and Ramsden, 1996; Polaschek, 1998), there has been little focus on the potential for such approaches in areas beyond conventional health services that are important to the broader social determinants of Indigenous health, such as housing, family and community relationships, cultural continuity,

self-determination and colonialism (Adelson, 2005; Greenwood and de Leeuw, 2012). This, despite the fact that cultural safety was originally concerned with supporting the life chances of Māori, which extend beyond health services to include access to employment, education and housing that recognize, respect and accommodate Indigenous cultures (Smye and Browne, 2002).

Indeed, there is evidence that housing policy often directly conflicts with Indigenous cultural practices. For example, Stern (2005) in northern Canada and Peterson (1993) in Australia have both demonstrated how households are put under significant strain as rental schemes and traditional reciprocity and sharing practices compete for limited financial resources. Similarly, Bird-sall-Jones et al. (2010) argue that Indigenous cultural practices play a significant role in mediating homelessness by, for example, motivating family to welcome kin without permanent residence to stay for extended periods. Yet while such kinship obligation might prevent the immediate homelessness of one family member, the financial and social strain of overcrowding and increased expenses can eventually lead to a loss of housing for the entire family (Birdsall-Jones et al., 2010).

Thus, in its attention to the specific health needs of Indigenous peoples and its promotion of Indigenous health strengths, cultural safety presents an opportunity for the recognition of links between Indigenous health and home, and housing policy. Moreover, a cultural safety approach to housing necessitates policy, programs and infrastructure that not only reflect and celebrate Indigenous cultures, but are also informed and implemented by Indigenous communities, policymakers and practitioners (Nursing Council of New Zealand, 1992). In the following sections, I explore the ways in which the narratives of Indigenous homeless men and women convey efforts to resist or alleviate homelessness through homemaking practices that were disrupted or prevented entirely by housing policy.

4. Indigenous homelessness in the Northwest Territories (NWT), Canada

This article emerges from a larger study aimed at understanding how Indigenous homelessness in Inuvik and Yellowknife is produced and/or reproduced. In 2007, I began five years of ethnographic fieldwork on visible homelessness in the two study communities. To position myself in this research, I am non-Indigenous woman born and raised in Yellowknife as part of an extended family that includes long-time northern residents of European descent, as well as Dene whose ancestors have lived in the region since time immemorial. Since the early 1990s, I have worked as a volunteer support provider to homeless youth, adults and families in Yellowknife, and since 2006 have also been engaged as a researcher-advocate for homeless and housing insecure people in both study communities.

The project was designed through a long and extensive consultation process with self-identified Indigenous homeless people in Inuvik and Yellowknife, as well as a range of community groups and Indigenous governments. Collectively, these groups identified the need for a contextualized understanding of northern Indigenous homelessness to inform effective policy and program development. Among other objectives, this included a place-based understanding of the health and housing needs of northern homeless Indigenous people.

5. Public housing in the NWT

The provision of modern housing to Indigenous peoples in the in the Canadian North was a significant strategy not only for the centralization of previously nomadic Indigenous peoples, but also

Table 1
Number of interviewees by community and gender.

Yellowknife	Total numbers
Men	34
Women	15
Subtotal:	49
Inuvik	
Men	31
Women	7
Subtotal:	38
Total:	87

as a tool for their cultural assimilation (Thomas and Thompson, 1972). The implementation of northern housing programs as part and parcel of the northward expansion of the Canadian Welfare State in the 1950s and 1960s was especially motivated by public health concerns around the living conditions of northern Indigenous peoples (O'Neil, 1986). Euro-Canadian cultural attitudes towards housing, home and wage labour were privileged through the design of northern housing, as well as the accompanying rental schemes (Dawson, 2006).

Today, public housing in the NWT is administered through 23 local housing organizations (LHOs), each of which is accountable to the Northwest Territories Housing Corporation (NWTHC), a branch of the territorial government. In Inuvik and Yellowknife, the LHOs are known as Housing Authorities. Chronic housing shortages, high construction costs, and high rates of “core housing need” in the vast majority of settlement communities complicate access to public housing across the Canadian North. Core housing need is defined by both the federal and territorial governments as housing that does not meet adequacy, suitability, and affordability norms.

The emergence of visible Indigenous homelessness in the NWT has occurred alongside recent efforts on the part of the federal and territorial governments to restructure spending on the provision of public housing. Support for public housing from the federal and territorial governments is being slowly phased out in favour of programs that emphasize household autonomy and home ownership, and that link the provision of subsidized housing to ‘welfare to work’ programs (see Gorlick, 2001). The decrease in government support for public housing has exacerbated the already inadequate supply of housing for low-income residents of the NWT.

The persistent demand for public housing, coupled with the diminishing supply of housing units, has resulted in an escalating crackdown on rental arrears as well as increased surveillance of tenants and their guests both of which have resulted in a wave of evictions (CBC, 2012, 2015), all fuelled by a discourse of welfare dependency resistance. The implications of these changes are tremendous in the NWT, where, as in the rest of the Canadian North, residents are largely dependent on government-subsidized housing, especially those who live outside the five regional centres (Webster, 2006). Though statistics on Indigenous versus non-Indigenous housing tenure in the NWT do not exist, public housing dominates the housing stock in 28 out of 33 communities in the NWT, whose populations range from 90 to 100% Indigenous (GNWT, 2009). These rural, non-market settlement communities also have the highest rates of chronic housing need (GNWT, 2009).

Meanwhile, in the market communities of Yellowknife and Inuvik, the housing stock is more diverse, as much of the housing is either privately rented or owned. Public housing, however, is the only source of low-income housing, and the territorial government is reducing the supply in both locales (Falvo, 2011). This trend is of particular concern for single adults: the public housing stock in

both communities is largely comprised of family-sized units, and what units do exist for singles are prioritized for those over sixty years old and with disabilities (Falvo, 2011). This bleak housing landscape for single adults in need of affordable and/or supportive housing persists despite mounting evidence to illustrate the fundamental role of safe, secure and affordable housing in the alleviation of homelessness (Atherton and Nicholls, 2008; Tsemberis et al., 2004).

6. Methods

Homelessness pathways are the diverse, complex routes that one may take into, through and out of homelessness (Anderson, 2005). A biographical interview method (May 2000) complements this approach through the use of in-depth, semi-structured conversational interviews to ‘map’ pathways over time, and allows for an exploration of both agency and socio-structural elements in understanding the diverse factors that guide individual experiences. Employing a purposeful sampling strategy, I conducted 87 biographical interviews with Indigenous homeless men and women in both study communities (Table 1). I also conducted six focus groups, three in each study community, with groups of either homeless men or women, ranging from four to twelve participants each. All focus group participants also participated in biographical interviews. Focus group discussions explored the scope and significance of homelessness in the NWT, perceptions of sociocultural change and its impacts on homelessness, and support service needs.

Also employing a purposeful sampling strategy, I conducted 55 in-depth, semi-structured interviews with representatives from the territorial and Indigenous governments, representatives of NGOs and support providers working in shelter provision, social work and homeless advocacy. Participants were selected in order to obtain a comprehensive representation of people who interact with homeless people from various angles: lending support, implementing programs and through governance. During the research process, I learned that several support providers themselves had first-hand experiences with homelessness. This added a new and relevant dimension to the research, as I was able to glean significant insight into the various ways in which they transitioned out of homelessness.

Dynamics of homemaking were integral to pathways into and out of homelessness, and specifically illustrated the role and importance of family in Indigenous health and home (see also Christensen with Andrews, 2016). In the following sections, I share some of these personal accounts and highlight the strategies of homemaking conveyed within them. However, in order to illustrate the multidimensional nature of these personal experiences, and also to demonstrate the ways in which home-making efforts come into conflict with policy in different ways, it is important to provide significant detail while still maintaining the anonymity of individual research participants. For this reason, all participant-identifying features are changed.

7. Northern housing policy: fragmenting home and health

While ‘home’ is conceived of and experienced in different ways between and within the ethnic and cultural bounds of the Dene, Métis and Inuit, certain elements, like the land and the family, thread them together. Keeping in mind these shared components in Indigenous senses of home reveals the broader significance and meaning of Indigenous experiences of ‘homelessness’. Attacks on the family and on Indigenous homelands through colonial processes of domination and dispossession are therefore deeply

implicit in Indigenous experiences of homelessness. In interviews and focus group discussions, the concept of ‘home’ was never limited to four walls and a roof: home was also closely linked to positive, healthy relationships with family and friends, physical and mental health and wellbeing, strong cultural ties, and self-determination.

Policies aimed at regulating public housing tenants significantly shaped the homelessness experiences of homeless research participants, both by contributing to their loss of housing as well as by presenting a significant obstacle in their efforts to exit homelessness. Meanwhile, of the seven support providers who had themselves exited homelessness, five cited encouragement and support from family as the most critical factor in their ability to transition into homed lives. For homeless research participants, two housing policies in particular act as a barrier for family relations and care, and contributed to individual pathways to homelessness.

7.1. Two-week limit on guests: preventing family care

The first policy concerns the length of time in which adult guests may stay with friends or family who live in public housing. In both Inuvik and Yellowknife, a limit of two weeks is imposed on guests 19 years of age or older. Interview participants indicated that the presence of guests was often discovered through the local rumour mill, as a result of conflict between neighbours, or through surprise inspections and routine maintenance. Several support providers also indicated that housing staff knew “who to look out for” and so kept a more watchful eye on certain tenants.

A government administrator working in public housing suggested that the two-week time limit on adult guests is largely an effort to cut down on the number of people living in a unit who can afford to contribute to the rent (either through employment or income support) but do not, which then places the rental burden on those tenants whose names are on the lease. The two-week limit is also in place to ensure that no one with arrears or an otherwise poor record with the NWT HC is staying in a public housing unit. According to Housing Authority representatives in both study communities, several tenants had encountered difficult and even potentially life-threatening situations where a disruptive or violent family member would not leave, or refused to contribute financially to the rent or household maintenance. In some of these instances, public housing tenants contacted the Housing Authority to request that an eviction notice be sent to the guest in question, because it was not considered culturally appropriate to tell a family member to leave.

At the same time, the two-week rule effectively eliminates a housing option for those who cannot contribute to the rent but at the same time have no alternative options for accommodation (Christensen with Andrews, 2016). One woman living homeless in Inuvik stayed with her sister after she had been evicted from her unit due to disruptions and damage caused by an abusive spouse. The Housing Authority distributed the arrears for damage equally between the spouses, and because she was unable to pay her share, she was not eligible to have her name included on her sister’s lease. Once the Housing Authority became aware of her presence, she was told to vacate her sister’s unit, after which point, having nowhere else to go, she moved into an emergency shelter.

Several men and women described similar accounts of the two-week rule as a key factor that contributed to their homelessness. One man staying at the emergency shelter in Inuvik recounted that when he had returned to town following treatment for alcohol addiction at the only treatment centre in the territory, which is at least two flights away, he stayed with his sister in her public housing unit. He had been evicted from public housing prior to his treatment, however, and owed arrears. After a neighbour saw him

coming and going and complained to the Housing Authority, he moved out so his sister and her children would not be evicted. At the time of our interview, he had been staying at the shelter for seven weeks and was, by his own account, struggling once again to get sober.

In a related account, a woman living in public housing in Inuvik told me that her son was staying at the shelter because he did not want to cause her any problems by staying with her in her unit. She explained that putting his name on the lease would mean her rent would increase. He too had recently returned from stint at the treatment centre and she felt he was not yet ready for employment. Faced with this predicament, he decided to move into the shelter in the hopes he could have more time to regain his bearings. At the time of our interview, however, his mother was very concerned that her son would relapse.

Staying with family or friends for short periods of time, particularly in an effort to support sobriety, was an important coping strategy for homeless research participants, and yet housing policy hinders the ability, and sense of cultural obligation, of households to care for family members in need. As mentioned above, research participants repeatedly emphasized the significance of family to their conceptualizations of home, as well as the role of family disruptions or disconnections in their homelessness. The homelessness that results for individuals unable to stay with family in public housing, then, is above and beyond a matter of being without secure shelter, it is also, and perhaps most significantly, a matter of being disconnected from family during a time of intense personal crisis (Christensen with Andrews, 2016).

7.2. Child welfare system: fragmenting parents and children

The second policy clash repeatedly encountered in research participant accounts concerns a link between public housing and the child welfare system. Of the homeless women with children in care in Yellowknife, all were in public housing prior to losing their children, either in another community or in the city itself. The loss of their children was generally connected to other home-eroding, compounding factors in their lives, such as addiction or domestic violence. When children are apprehended from a family living in public housing, the parent(s) in question are rendered ineligible to remain in a family-sized unit. This policy is particularly enforced in Inuvik and Yellowknife where the public housing supply is under even greater demand than other, smaller NWT communities. Due to the dismal numbers of single-adult dwellings in public housing in the NWT, the apprehension of children into child welfare often leads directly to the homelessness of parents.

There is a distinct geography to the child welfare system in the NWT, with the vast majority of foster families and group homes located in Yellowknife, by far the territory’s largest centre. For homeless mothers, relationships with their children were repeatedly cited as integral to their sense of home. In recounting their life stories to me, the experience of having children taken into the child welfare system was highlighted as not only a key contributing factor in their homelessness, but also a factor in their choosing to remain in Yellowknife, with the two factors often closely intertwined. While fathers experiencing homelessness only rarely alluded to the significance of children in their lives, this absence must be contextualized by the ways in which the specific effects of colonialism on the traditional roles of men in Indigenous communities, combined with the high levels of incarceration amongst Indigenous men, have resulted in “a fissure in the socio-cultural transmission of father roles across generations and created monumental challenges for Indigenous fathers’ positive and sustained involvement with their children” (Ball, 2009, p. 29).

As I illustrate elsewhere (Christensen, 2012), more than half of the female interviewees in Yellowknife followed their children to

the city from rural settlement communities and/or chose to remain in the city because their children were in foster care. The willingness to move from home communities and consequently become homeless, or remain in the city where low-income housing opportunities are bleak in order to remain close to children is a profound testament to the significance of family in the lives of many interviewees and is poignantly demonstrative of their efforts to find, maintain or re-establish a sense of home (Christensen with Andrews, 2016). Such moves were also encouraged by a parent's belief that a better situation might be found in Yellowknife once she regained custody of her children. Many mothers who followed their children to the city left behind already-insecure housing situations in the home community, such as overcrowded conditions or violent or abusive behaviour by family or friends (including substance abuse). Additionally, some mothers believed they could address their own substance dependencies by distancing themselves from social triggers in their home communities. Conversely, the majority of mothers cited distance from family and community supports, including cultural practices of food sharing and hosting family members without shelter, as well as the relatively inflexible housing landscape in Yellowknife, as significant factors compounding their homelessness. A complex combination of push- and pull-factors were thus often evident in the rural-urban migration of parents whose children were taken into the child welfare system (Christensen, 2012).

Support providers working with homeless women also spoke of the overwhelmingly damaging experience that losing the custody of one's children was for mothers, and that it often led to a loss of hope. For example, both Rosa and Tammy had been living on and off in the women's shelter in Yellowknife for a number of years when we met. Rosa suggested that the loss of her children to the child welfare system played a significant role in her homelessness. Once she lost them, she said, she gave up trying to get better. After one unsuccessful effort to get sober and get her kids back, Rosa fell into a depression and began drinking again. Rosa hinted that Tammy had endured a similar experience, but Tammy was very reluctant to talk about her children, and became visibly upset with Rosa for suggesting it. The painful nature of these experiences was palpable.

Though there are indeed some cases in which a family cannot be reunited, very few resources exist to support parents in their efforts to regain custody. Meanwhile, the resources that do exist, such as counselling programs, are separated from the housing needs of a parent seeking to regain custody of her children. There is also no sustained collaboration between the territorial Department of Health and Social Services and the NWT Housing Corporation to support parents seeking to regain custody of their children.

The precarious nature of housing, particularly for women in these circumstances, speaks to the state of 'relative' homelessness that many women find themselves in, with custody of their children the key factor that keeps them 'homed' or conversely, keeps them from homelessness (Bopp, 2007). This emotional or ontological connection is materialized through housing policy that evicts single parents once they lose custody of their children. The connection between the loss of children and the loss of housing marks a significant point of intersection where contemporary housing policy clearly discriminates against northern families in crisis. Meanwhile, the dearth of public housing available to single adults makes it difficult for parents to even begin the work necessary to regain custody of their children. There is therefore a direct and immediate connection between the increasing implementation of such policies and rising absolute homelessness in the territory.

8. Towards a culturally safe approach to health and housing policy

Conceptualizations of home articulated throughout this research extend beyond physical infrastructure to include families as well as communities, the land, culture, and self-determination, all of which are also social determinants of Indigenous health. Yet it is clear from the accounts I present here that housing policy (re) produces homelessness, not only through the persistence of core housing need, but also through its inability to recognize Indigenous homemaking, particularly through family bonds, as a crucial opportunity. In particular, the fragmentation of Indigenous health and home through the current northern policy landscape clashes with the potential role of family in alleviating homelessness.

Culturally safe housing policy would ensure the policy cohesion of Indigenous home and health by promoting healthful cultural elements as a means towards the alleviation of not only the immediate, material experiences of housing need, but also the ontological experiences of spiritual homelessness. Such healthful cultural elements need to be formally recognized and promoted through the training of housing officers as well as support providers working in child welfare and mental health and addictions treatment.

There is an urgent need for the integration of the various territorial governmental departments and divisions that interact with northern Indigenous homeless people to enable the comprehensive promotion and protection of Indigenous health. Specifically, more resources are required towards coordinating housing policy with the child welfare system as well as treatment landscape for mental health and addictions. The appointment of housing case workers, well versed in Indigenous homemaking strategies, who work on a case-by-case basis with families could facilitate service integration and needs-based support.

In the case of the two-week limit on guests, housing policy currently prevents tenants from being able to make their own decisions about their homes and, more broadly, their lives. Culturally safe housing policy in this case denotes the self-determination of families in public housing to make decisions for themselves based on their own assessment of family member needs. A flexible housing policy that allowed for consideration of both an adult guest's needs as well as the needs of the public housing tenant(s), facilitated through the support of a designated housing case worker, would recognize the very integral role family can play in the alleviation of homelessness.

Integrated approaches that see the maintenance or rebuilding of parental relationships with children as central to addressing homelessness both in its immediate and spiritual dimensions, are also necessary to developing culturally safe housing policy. Furthermore, improvement in the social conditions that frame the high rates of Indigenous children in child welfare (see Blackstock and Trocmé, 2005) is limited not only by a lack of acknowledgement of the role of social determinants of health in the overrepresentation of Indigenous children in the child welfare system, but also by the separation of child welfare from other related and intersecting areas of health and social policy, particularly housing.

Efforts to provide supportive housing on a case-by-case basis, or develop an individualized housing plan through cooperation between social workers and housing case workers, to parents whose children are no longer in their custody should be a critical component in any child welfare program. Though there are certainly many cases where reunification between parents and children is not possible, under the current housing policy, the correlation between loss of children and public housing is in effect a sentence to homelessness.

Finally, the development of culturally safe housing policy depends upon the meaningful and sustained involvement of Indigenous governments. An inter-governmental approach to the development and implementation of housing policy could ensure a much stronger emphasis on Indigenous knowledge and cultural practices in housing policy. The greater involvement of Indigenous governments is needed in order to develop housing policy that is not only sensitive to Indigenous cultural values, and meets the housing and health needs of homeless Indigenous peoples, but that ensures more broadly that Indigenous people feel at home, indeed culturally safe, in housing (see Durie, 2001).

9. Conclusion

In this article, I have sought to illustrate the ways in which Indigenous homemaking practices speak to the relevance of home to social determinants of Indigenous health, and the opportunity this then presents for the development of housing policy better equipped to alleviate Indigenous homelessness. Woven throughout the personal accounts detailed in this article were narratives of homemaking that conflicted with housing policy. These homemaking strategies illustrate the strength, resilience and agency of homeless research participants as they attempt to maintain close ties with family, or receive their family's support, through times of extreme personal crisis. Yet the inability or unwillingness of northern policymakers to recognize and support these efforts ultimately contributes to the perpetuation of Indigenous homelessness.

In order for northern health and social policy to effectively address Indigenous homelessness, it must recognize homelessness as a matter of both proximal and distal health determinants, both material and ontological, and reflect the cultural norms and values of northern Indigenous peoples. Instead of approaching family relationships as secondary to the function of housing programs, culturally safe housing policy would recognize Indigenous home and homemaking practices as positive resources (Ramsden, 2015), inextricable from a broader conceptualization of Indigenous health, and integral to policy efforts to alleviate homelessness.

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