

The Benefits of Providing Aboriginal Specific Services:  
An Analysis of Supportive Transitional Housing in the Niagara Region  
For Aboriginal Women

By

Jennifer Ann Elgie

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Centre for Women's and Gender Studies, Brock University  
St. Catharines, Ontario

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### **Abstract**

As an effect of colonial violence services for Aboriginal people are a highly neglected area within mainstream society. In the current context of low funding and everyday colonial violence Aboriginal women and their needs are habitually erased and invisibilized. This research looks at the benefits of providing Aboriginal specific services through the context of Abbey House, a supportive transitional housing organization for Aboriginal women in the Niagara Region. This research focuses on why Abbey House is a necessary organization by looking at the trauma that Aboriginal women face as distinct from other forms of mainstream trauma, why Abbey House works for Aboriginal women through focus on the relationship between trauma, support, and the development of an extended family system, and lastly the structural challenges that are preventing Abbey House from expanding within the Niagara Region.

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## Table of Contents

1. INTRODUCTION .....	5
I. Purpose, Background, Significance of Research.....	5
II. Research Questions and Thesis Statement .....	7
III. Summary of Sections .....	8
2. REVIEW OF THE LITERATURE .....	9
I. Defining Supportive Transitional Housing.....	9
II. Who is Served .....	11
III. Missing From the Literature .....	12
IV. Focus on Aboriginal Women.....	13
V. Needs of Aboriginal Women .....	15
III. Missing From the Literature .....	12
3. METHODOLOGY .....	19
4. PRESENTATION OF FINDINGS .....	23
I. Why Aboriginal Specific Services are Necessary .....	24
a. Trauma .....	24
II. Why Aboriginal Specific Services Work .....	34
a. Support .....	34
b. Family .....	47
III. Why Abbey House is Unable to Move Forward and Grow.....	55
a. Challenges .....	55
IV. Summary of Findings .....	61
5. DISCUSSION AND IMPLICATIONS OF FINDINGS.....	63
I. Limitations.....	66
II. Recommendations for Future Research .....	67
6. CONCLUSION.....	68
References.....	70
APPENDIX A: Client Questionnaire.....	74
APPENDIX B: Staff Questionnaire.....	76
APPENDIX C: Brock University Ethics Approval .....	79
APPENDIX D: Intake Form .....	82
APPENDIX E: Letter of Invitation.....	93

## 1. INTRODUCTION

This research looks at the role Abbey House as a supportive transitional housing organization has within the Aboriginal community of Niagara Ontario. Abbey House provides supportive transitional housing and support for Aboriginal women and their children who are experiencing homelessness, are at risk of homelessness, or trying to leave partner violence for up to one year. Abbey House operates under the umbrella of the Niagara Regional Native Centre (NRNC) who is a member of the Ontario Federation of Indian Friendship Centres (OFIFC).

### **I. Purpose, Background, Significance of Research**

*Purpose.* The purpose of this research is to examine the benefits of providing Aboriginal specific services to Aboriginal women by focusing on why specific services are effective and necessary for Aboriginal women within the context of Abbey House. The lives of Aboriginal women are experienced within the context of historic and current colonialism. Loomba (1998) describes colonialism as “the conquest and control of other people’s land and goods” (p. 2). However as a basic definition, Loomba (1998) also discusses how colonialism has shifting meanings depending on historical processes. Currently colonialism impacts Aboriginal people through intergenerational trauma and discriminatory policies and practices present within mainstream Canadian culture and society. Due to this colonial context the need for Aboriginal specific social services becomes evident. Abbey House as an organization runs under the umbrella of the NRNC, a community based organization that fought ten years to open Abbey House. The NRNC understood the need for an organization like Abbey House; a need that has continued and even deepened as an effect of consistently declining funding for Aboriginal focused programming.

*Background.* It is within the context of reduced funding and colonially based structural and systemic discrimination towards Aboriginal needs that this research project arose. In October 2012 the Administrative Director of Abbey House along with the Director of the NRNC approached the Centre for Women's and Gender Studies at Brock University with a proposed idea for research. It was their hope that a student would be interested in working with Abbey House and perform an evaluation of their agency. As a researcher and ally in respect to indigenous and white settler relations, I hope that this research will illustrate Abbey House as a beneficial organization for the healthy growth and healing of Aboriginal women that is translated into the growth of the Aboriginal community. Simultaneously through my role as a researcher I hope to show that Abbey House as an organization is in need of further expansion to meaningfully and holistically address the needs of Aboriginal women and communities. This research is an expanded and more elaborated version of the program evaluation that focuses on the experiences of the women residents of Abbey House, the benefits of providing Aboriginal specific services, and the challenges facing Abbey House, the staff, and the residents.

*Significance.* Aboriginal women as a population exist within a regime of disappearance, a form of representation that marginalizes and erases categories of people as persons through specific strategies of representation having both symbolic and material effects (Culhane, 2003). The regime of disappearance addresses the contradictory heightened visibility experienced by Aboriginal people through negative representations and mainstream appropriation, and the simultaneous invisibilization experienced through erasure of personhood as an effect of heightened visibility. As a product of the regime of disappearance the current historical, racial, colonial, and social context that dictate the experienced realities of Aboriginal women are often erased, ignored, or excused. It is hoped that this research will be used by and for Aboriginal

women and Aboriginal organizations as a tool of visibilization to better understand the experiences of Aboriginal women through their voices and personal understandings. In addition it is hoped that this research will bring greater understanding and awareness to the non-Aboriginal population in respect to the depth of abuse experienced by Aboriginal people and the role of non-Aboriginal people in this historic and current abuse.

## **II. Research Questions and Thesis Statement**

This research was built off of the assumption that Abbey House, as a supportive transitional housing organization with an Aboriginal focus and foundation has beneficial attributes for Aboriginal women and potential to meaningfully support Aboriginal women and their community. As both a highly researched yet simultaneously invisibilized population, three research questions were developed based on this colonial understanding of Aboriginal representation; 1) why are Aboriginal specific services necessary to addressing challenges facing Aboriginal people; 2) why do Aboriginal specific services pose greater potential to meaningfully assist Aboriginal people; and 3) what are the challenges preventing Aboriginal centered organizations from growing and expanding within the current colonial context. These three questions are explored in relation to Abbey House and the staff and residents Abbey House serves. However the results of this research can be understood and translated to other Aboriginal based organizations and services similar to Abbey House. By analyzing Abbey House as a supportive transitional housing organization for Aboriginal women, this research will show that Aboriginal specific services are beneficial and necessary for Aboriginal women in the current colonial context.

### **III. Summary of Sections**

The first three sections of this thesis paper introduce the research, look at the existing literature and the conceptual framework of the study, and the methodology of this research respectively. The fourth section entitled the Presentation of Findings is split up into four sub-sections focusing on the themes: I) trauma; II) support; III) family and; IV) structural challenges, all of which are situated within the context of Aboriginal realities and native culture, values, and beliefs. These four themes are used to discuss the research questions outlined above.

Under the Presentation of Findings, the first sub section addresses the first research question regarding the necessity of Aboriginal specific services by discussing the trauma that many Aboriginal women face. The trauma experienced by Aboriginal women often takes form intergenerationally or passed between generations as an effect of early colonization, the residential school system, and continued discrimination and abuse. Intergenerational trauma experienced by Aboriginal people is relational to different forms of abuse and trauma that Aboriginal women experience currently in the form of homelessness, childhood abuse, partner violence, and structural discrimination all of which are interconnected.

The second and third sub- sections address the second research question focusing on why Aboriginal specific services and the inclusion of culturally specific programs, values, and beliefs work for Aboriginal women. The second section focuses on the theme of support by looking at the ways the staff of Abbey House support their residents. The support that is given is based on individual needs that are reflexive of the trauma that each woman experiences as a systemic issue. The third section looks at how the theme of an extended family is incorporated into the healing process of women residents at Abbey House. The extended family formed at Abbey House focuses on the importance of gaining and/or maintaining mother/children relationship,

creating meaningful relationships between the residents of Abbey House and between the residents and the staff of Abbey House, and developing strong and lasting connections between the residents and the larger Aboriginal community specifically the NRNC.

The last sub-section addresses the third research question by uncovering the challenges facing Abbey House that prevents it from moving forward and expanding as a community based organization. The final discussion of this research focuses on the benefits of providing Aboriginal specific services for Aboriginal women in the current colonial context. This section discusses the limitations of Abbey House and what is needed for Abbey House to grow within the Aboriginal and mainstream community. This section also looks at the limitations and benefits of this research and how further research is necessary on this topic.

## **2. REVIEW OF THE LITERATURE**

### **I. Defining Supportive Transitional Housing**

The Canada Mortgage and Housing Corporation (CMHC) conceptualize transitional housing as “an intermediate step between emergency crisis shelter and permanent housing” (Canada Mortgage Housing Corporation, 2004). According to the CMHC, transitional housing offers not just housing accommodations but also provides skill building tools for a variety of people that are necessary to combat homelessness including supports for employment, education and skill building, substance addiction, and mental illness with the goal of independent community living (Canada Mortgage Housing Corporation, 2004).

The Corporation for Supportive Housing (CHS), a nonprofit American organization that supports communities in developing supportive housing programs, defines supportive housing as “a successful, cost-effective combination of affordable housing with services that helps people live more stable, productive lives” (Corporation for Supportive Housing, 2007). Supportive

housing uses a model similar to that of transitional housing as both encompass a combination of supportive services and housing. Research differentiates between transitional and supportive housing through the length of residency where supportive housing is a longer stay that is often permanent as opposed to residents in transitional housing who are expected to eventually graduate to more independent living (Novac & Quance, 2008; Barrow & Zimmer, 1999).

Most literature focuses on transitional housing or supportive housing rather than a combination of the two. However much discrepancy exists surrounding the definition of supportive housing and transitional housing. By examining the literature there appears to be a great deal of overlap and name variance across different studies and research. Supportive transitional housing is a combination of transitional housing and supportive housing yet exact differences within the literature are unclear. Rather supportive transitional housing and transitional housing are similar in program structure, conceptualization, and objectives. Supportive transitional housing and transitional housing offer a place for individuals or families to stay while simultaneously offering access to personal and familial onsite and community partnered based services and resources necessary for people to move out of homelessness into stable housing (Canada Mortgage Housing Corporation). Length of supportive transitional housing and transitional housing programs vary from one year to three but offer longer stay periods than crisis shelters (Canada Mortgage Housing Corporation, 2004).

Supportive transitional housing has been deemed a necessary service for different groups of people in need. The main documented groups of people that use transitional housing services are victims of crises or partner violence, substance abuse, persons with chronic medical problems, immigrant populations, and deinstitutionalized persons of all ages (Canada Mortgage Housing Corporation, 2004; Burt, Aron, Douglas, Valente, Lee, Ewen, 1999)

## **II. Who is Served**

In respect to who utilizes transitional housing organizations, the research indicates patterns among clientele. Most transitional housing organizations have more than one major clientele group (Canada Mortgage Housing Corporation, 2004). However within programs that focus on assisting specific groups of people those most often targeted are people experiencing mental health issues, addiction problems, and abused women (Burt et al., 1999). Abused women with or without children represent a large proportion of those who experience homelessness and seek housing programs (Baker, Niolon, Oliphant, 2009). Women survivors of partner abuse and trauma as a population experience high risk of homelessness and present a need for transitional housing and supportive housing programs (Baker et al., 2009).

Many women who have experienced partner abuse lack economic stability and safe and stable housing as an effect of the abuse. Domestic physical and physiological abuse often also encompasses financial abuse where abusive partners may demand control over all money and financial business, and prohibit women from employment opportunities and access to a personal bank account leaving these women vulnerable to further abuse. To leave an abusive partner often means women must leave their homes (Baker et al., 2009), which can lead to both financial and psychological insecurity in addition to homelessness.

Transitional housing remains an essential service for women survivors of domestic abuse as it offers more stability and support than women shelters by providing privacy, 24 hour support, and longer term of residency where most shelters allow women to stay from 30-60 days (Baker et al. 2009). The perspective homelessness in addition to lack of financial independence that can surround abusive relationships has negative consequences on women looking for safe and stable housing. In regards to cost and financial security, transitional housing allows women

more time to find permanent housing or gain income to cover the cost of rent (Baker et al. 2009), where alternatively homelessness or return to abusive relationships could occur due to lack of options.

In summation the literature surrounding the variations in transitional housing and supportive transitional housing offer an informative representation of housing programs and the necessity of such programs for a variety of groups of people experiencing homelessness. However missing from this mainstream research is a structural analysis of the experiences of transitional housing in respect to larger social forces including racism, classism, misogyny, colonialism, neoliberalism, and other social forces that are larger than issues such as substance abuse and should be used to define personal experience.

### **III. Missing From the Literature**

Women represent a large portion of those who use transitional housing programs. While many women appreciate and greatly benefit from transitional housing programs, criticism towards mainstream transitional housing exists in that it excludes certain groups of women such as women of colour who experience language barriers or find that their cultural needs are not being met (Baker et al. 2009). While mainstream literature discusses health issues, mental health, substance abuse, and domestic violence as factors that lead people to needing additional support through transitional housing, missing from mainstream literature is a discussion of the more structural problems and conditions that foster these environments and social locations where certain groups of people are more vulnerable to homelessness.

Further missing from mainstream literature is focus on Aboriginal populations specifically Aboriginal women and their unique social location as survivors of colonial violence

simultaneously living within the current context of colonial violence. Current mainstream literature provides a symptomatic analysis of homelessness in respect to substance abuse, mental illness, and partner violence rather than addressing the deep complexities of these experiences in relation to structural issues, especially when looking at Aboriginal people. Of the mainstream literature that provides a more in-depth and structural analysis of homelessness, the colonial relations surrounding Aboriginal people remain under analyzed. In effect Aboriginal people and their needs often become erased within mainstream literature with only a surface or symptomatic evaluation of homelessness often being performed. By addressing the symptoms of homelessness such as substance abuse, and partner violence the structural conditions and social forces that foster an environment conducive to homelessness are erased and in effect perpetuated that include the intergenerational effects of colonialism and the residential school system, and the historic sixties scoop that is highly pervasive today.

#### **IV. Focus on Aboriginal Women**

However in respect to Aboriginal based literature some scholarship exists that highlight the structural challenges facing Aboriginal women in respect to homelessness and housing. The Toronto Aboriginal Research Project (TARP) Final Report addresses the structural challenges facing Toronto Aboriginal women with specific focus on Aboriginal women in urban settings and the unique complexities that arise within this context (McCaskill, FitzMaurice, & Cidro, n.d). Poverty remained a large risk factor in the lives of Toronto Aboriginal women with a reported 21% of women having been on social assistance at one time in their lives, and only 55% of respondents having full time employment. Despite these challenges McCaskill et al. (n.d) highlight that many working Aboriginal women are in managerial or other professional roles,

however often with lower wages and salaries due to many professional Aboriginal women working in Aboriginal as opposed to mainstream organizations.

In respect to Aboriginal women and housing, McCaskill et al. (n.d) reported challenges in finding affordable housing due to the often extended nature of Aboriginal families, a type of family that is “normal in terms of many traditional Aboriginal home environments” (p. 144), however that is often not recognized within mainstream organizations. The housing challenges faced by Aboriginal women are directly related to poverty as a systemic issue discussed above where the current colonial context systematically perpetuates poverty as a cyclical challenge (McCaskill et al., n.d). The challenges faced by Aboriginal women in the form of homelessness and poverty are related to structural and colonial forms of discrimination that perpetuate further marginalization and exclusion of Aboriginal women from mainstream organizations.

Child removal within Aboriginal families continues to be a complex and colonially rooted phenomenon. Currently national consensus data maintains that while Aboriginal children make up only 6% of children in Canada they represent 22% of all child welfare reports (Trocmé et al., 2010). Fallon et al. (n.d.) described the relationship between Aboriginal child removal and the high proportion of social welfare involvement in Aboriginal families at the community level as relational to high levels of poverty within specific communities. The literature on forced Aboriginal child removal indicates that the high rates of Aboriginal child removal and placement into non-Aboriginal families systematically began in the mid 1960s known as the sixties scoops. As Aboriginal residential schools began closing in large numbers forced removal of Aboriginal children became a colonial method of cultural assimilation and disregard towards intergenerational effects of residential school trauma on healthy family development in Aboriginal communities (Castellano, 2002). Poverty as a disadvantage facing many Aboriginal

families specifically women has been deemed a factor leading to higher involvement of child welfare services (Ruttan, LaBoucane-Benson, Munro, 2008). Ruttan et al. (2008) discussed the link between involvement in child welfare services and homelessness stating that children who were involved with child welfare services or who were otherwise removed from their families experienced an increased risk of homelessness. However the intergenerational and current effects of Aboriginal child removal in respect to Aboriginal homelessness is a highly understudied relationship.

## **V. Needs of Aboriginal Women**

As discussed above, many mainstream transitional housing organizations often, however intentionally or unintentionally, create and perpetuate barriers that prevent certain groups of women from fully benefiting from the services offered. Aboriginal women and systemic structural barriers they often face within mainstream society and service organizations as mothers are colonially rooted and have foundations in discriminatory assimilative policies. Assimilative strategies of early colonization resulting in a an 80% decrease of Aboriginal people from contact to confederation (Blackstock & Trocmé, 2005) in conjunction with the historical and current forced child removal through the residential school legacy, the sixties scoop, and the current overrepresentation of Aboriginal children involved with child welfare services have resulted in a cultural disconnect between Aboriginal people and traditional Indigenous culture (Castellano, 2002).

While sexual and physical abuse that pervaded the residential school system has been acknowledged and discussed within mainstream media and literature, the depth and magnitude of the effects of the residential school system, the abuse, and the extreme cultural disconnect that

has resulted are rarely discussed outside of scholarly literature. Aboriginal children forced to attend residential schools were removed from their families and cultural traditions often for years at a time due to the long distance and high costs of travelling home during the summer (Blackburn, n.d.). Along with the physical and sexual forms of abuse, Aboriginal children also experienced feelings of shame towards their culture and identities resulting in a disconnect from their families and communities that was and continues to be passed intergenerationally (Blackburn, n.d.).

Many residential schools began closing or being transferred to band control during the 1970s and 80s (Blackburn, n.d.). However in replacement of residential schools, child welfare services began removing Aboriginal children from their homes in great numbers. During the 1960s Aboriginal children began to be literally scooped from their families and communities in disproportionate numbers in the name of child welfare, 70% of whom were adopted into non-Aboriginal families (Sinclair, 2007). The effects of this forced removal and placement into non-Aboriginal families has resulted in a significant loss of cultural connection. Castellano (2002) discusses that while many Aboriginal children adopted into non-Aboriginal families had positive experiences, as adults many adopted children wanting to reconnect with their culture experience difficulties with re-establishing those connections due to removal and loss of Aboriginal familial and community based ties.

Assimilative strategies of forced child removal and abuse towards Aboriginal children through the Residential school legacy and sixties scoop have resulted in a cultural disconnect between many Aboriginal people and their cultural traditions. The negative effects of the sixties scoop on Aboriginal people, families, and communities have been extensive and have developed into what is now being referred to as the millennium scoop (Sinclair, 2007) where Aboriginal

children remain highly over represented within child welfare services. The historical and now current context of Aboriginal overrepresentation within child welfare services has led to distrust and shame by the Aboriginal community towards child welfare services and the common ethnocentric views that are practiced (Long & Sephton, 2011).

The notion of acting on the best interests of the child, a concept developed by the UN, became the highly influential and discriminatory foundation for the forced removal of Aboriginal children despite the obvious cultural bias towards dominant white cultural and the construction of the white nuclear family (Long & Sephton, 2011). Long and Sephton (2011) discuss that while definitions of child abuse often translate culture differences, the idea of neglect is culturally relative and constructed based on the expected roles of children within different cultures, specifically looking at child independence and the roles and responsibilities of siblings.

Despite more literature surrounding the forced removal of Aboriginal children, Blackstock, Trocmé, and Bennett (2004) maintain, “the pathways leading these children being removed from their families are poorly understood” (p. 902). Lacking government intervention towards the drivers of child maltreatment such as poverty, unemployment, lack of housing, lack of culturally relevant services, ethnocentric values, and predisposed judgments made by child welfare workers have resulted in forced child removal being “the primary intervention in child maltreatment cases versus the intervention [as] last resort” (Blackstock et al., 2004). Evidence shows that Aboriginal parents involved in child welfare cases are more likely than non-Aboriginal parents to remain suspected of child maltreatment and are more likely to be previously reported to authorities than non-Aboriginal families (Blackstock et al., 2004). It is because of the discriminatory treatment towards Aboriginal people that the relationship between child welfare services and Indigenous communities remains controversial

Due to the structural challenges that Aboriginal women face, and the necessity of their needs being understood and addressed as an overrepresented yet highly invisibilized population within mainstream society that this research develops significance. While much academic literature focuses on Aboriginal populations and the negative effects of the residential school system it is important to acknowledge this abuse in addition to the less discussed aspects of historical and current methods of colonial violence experienced by Aboriginal people including early colonization, the residential schools, the sixties scoop, and the continued overrepresentation of Aboriginal children within the child welfare system. By talking to the Aboriginal women of Abbey House it is hoped that this research will illustrate the depth of abuse and structural damage colonialism has and continues to have on Aboriginal people through their everyday experiences of loss, discrimination, and resilience through their roles as Aboriginal women, mothers, and community members. By focusing on the everyday experiences of the residents and staff of Abbey House as women, mothers, and community members, a link will be developed between these everyday experiences and deeper colonial realities experienced as Aboriginal people.

The experiences of the staff and residents of Abbey House will be discussed in conjunction with larger structural meanings; specifically how structural forces of colonial social relations shape their experiences. This research will look at the experiences of Aboriginal women as staff and residents of Abbey House and their relationship to the themes trauma, support, family, and structural challenges. Native culture, beliefs, and values will be incorporated throughout the four main themes outlined above. Each of these four themes is multifaceted and exists in relation to one another.

The existing research, acting as foundational to understanding what supportive transitional housing and transitional housing entails will be further developed taking a narrower approach by looking at the experiences of Aboriginal women in the Niagara region in relation to their stay at Abbey House a supportive transitional housing organization. In addition colonial violence and its continued effects as a propelling force and its relationship to Aboriginal women will be addressed within the body of this research. Throughout this research colonialism experienced by Aboriginal people specifically residents of Abbey House will be referred to as colonial violence because of the violent features of dominant Canadian culture that continually abuse Aboriginal women.

### **3. METHODOLOGY**

This study takes a feminist standpoint epistemological approach to knowledge formation by looking at the lives of Aboriginal women from their situated position and social location in effect validating and legitimizing the women participants as authorized knowers of their lives. Aboriginal women become the knowers in this research as their voices and experiences are used as the evidence that validates this research. Taking a feminist standpoint epistemological approach is crucial to the development of knowledge surrounding the lives of Aboriginal women due to the invisibilization and systemic repression of Aboriginal women as knowers and producers of knowledge.

As an outsider in respect to Aboriginal women and their culture and communities standpoint feminism allows me to better address how my social location as a non-Aboriginal woman researcher impacts both my research and the women whom this research is for. As a

white, female, heterosexual, educated, student researcher, these social locations intersect to impact my research. As a white researcher it can be challenging to meaningfully conceptualize the realities of people from social locations other than my own. I justify my research through the notion that as a woman I share certain experiences with other women, and that my experiences of both oppression and privilege are relational to the experiences of the Aboriginal women that this research is for. In addition this research was developed with Abbey House and the NRNC therefore it is hoped that these organizations will be able to utilize this research how they see fit for the benefit of Aboriginal women and the Aboriginal community in Niagara.

The methodology used for this research is institutional ethnography developed by Dorothy Smith as a way to examine “how the scenes of everyday life are knitted into broader forms of social organizations” (Mann, 2012, p. 145). Institutional ethnography is used to find meaning in the daily experiences of Aboriginal women. By examining the local experiences of Aboriginal women it becomes evident how their lives are situated and dominated by forces outside them. This research will show how the everyday experiences of the residents of Abbey House and the meanings of these experiences are situated in institutions of oppression.

This research was conducted at Abbey House in the Niagara region of Ontario. The residents interviewed were comfortable with the interviews at Abbey House as they were familiar with the setting and therefore at ease as Abbey House had been their home either currently or previously for some period of time. In respect to the staff interviewed Abbey House was convenient for them as it was their place of employment making it easier for them to take the time to participate in the interviews.

The mixed methods approach used included in-depth semi structured qualitative interviews and quantitative descriptive analysis of intake records that Abbey House had been

collecting from 2007 until the present. Interviews were conducted with five current and previous residents of Abbey House and two staff members of Abbey House. Two interview questionnaires were developed, one for the residents of Abbey House (see Appendix A) and one for the staff of Abbey House (see Appendix B). All interviews were semi structured with specific questions developed for discussion. However during the interview if the residents wanted to discuss other topics, this was encouraged. The questions developed for the residents of Abbey House focused on their experiences that led them to Abbey House, their experiences they had while staying at Abbey House, and for those women who were previous residents their experiences once they had left Abbey House. The questions developed for the staff of Abbey House focused on their experiences as staff members of Abbey House including personal challenges, their experiences working with women at Abbey House, the structural challenges that face Abbey Houses as an organization that serves Aboriginal women, and the structural challenges that face Aboriginal women in general. The questions developed were adapted on an interview by interview basis to reflect the variety of experiences the women had. The interviews were recorded and later transcribed. Ethical approval for these interviews were sought and approved by Brock University's ethic board (see Appendix C).

Themes were developed from the interviews by looking at what the residents focused on in their interview and uncovering patterns based on their experiences and discussion. The themes developed during the interview became the basis of what was focused on in respect to the intake forms (see Appendix D). The intake forms were provided by the staff of Abbey House who took the time to photocopy the 94 original intake forms dating from 2007 until the present and black out all identifying information. The intake forms are questionnaires developed by Abby House that all women are required to fill out/answer. These forms are filled out for all women who

would like the possibility of staying at Abbey House by staff from Abbey House and the NRNC regardless of the eligibility of the women. Filling out intake forms is the method Abbey House uses to determine resident eligibility.

The intake forms contain a plethora of information and proved to be a highly informative tool regarding the experiences of Aboriginal women. For the purposes of this study only certain information on the intake forms was utilized. The information used focused on the experiences of women including age, services and programs that women were interested in pursuing, information regarding the presence of children, and the women's experiences that brought them to Abbey House focusing on trauma. Descriptive analysis was used to interpret the information derived from the intake forms as a method of bringing forward the main features that define and are central to the women's experiences at Abbey House.

The participants for this research included two current staff members of Abbey House and five current and previous residents of Abbey House. The practical means of gaining consent for this study was a challenge due to the close proximity of the staff to each other, the staff to the previous and current residents, and the residents and staff with the wider Aboriginal community. In respect to gaining consent of the staff, it was a non-issue as it was the staff that had brought forth and suggested this project. Consent for the residents was more of a challenge as all of the women were either living at Abbey House during the time of the research or still maintained close relationships with the staff at Abbey House. In order to gain consent several previous and current residents were contact by Abbey House staff that gave a number of women a letter of invitation to participate in the research (see Appendix E). The letter of invitation outlined the study in full and the women were advised to contact me if they would like to participate.

Through the combination of in depth interviews and descriptive analysis of the intake forms the experiences of Aboriginal women in the Niagara region began to surface. While the experiences derived from my research are not meant to generalize or essentialize the experiences of Aboriginal women, after speaking to the women and examining the intake forms it became clear that many Aboriginal women have a shared history of colonial violence that translates into similar experiences in respect to trauma. The use of in depth interviews allowed for a deeper understanding of how the daily lives of Aboriginal women are shaped by their experiences of colonialism. The intake records were useful in that I was able to examine the daily experiences of women in respect to the structural and larger forces that shape the lives of Aboriginal women in general.

#### **4. PRESENTATION OF FINDINGS**

The intake records of Abby House, which began in 2007 until the present, were rich in data. They, along with the interviews provided a rich foundational understanding towards the lives of Aboriginal women in the Niagara region. Some of the major themes that will be discussed further in relation to how they impact and shape the lives of women at Abbey House are the role of trauma, the variety in the catered support at Abbey House that incorporates native values and culture, the role of children, other women at Abbey House, and the community as an extended family system, and lastly structural challenges and problems women had that were unable to fully be addressed at Abbey House and the structural challenges facing Abbey House in general. Each of these themes were found to be highly relational and interlocking through native belief systems that value holistic approaches to understanding how the experiences of

Aboriginal women are both influenced by and influential towards the collective memory of the larger Aboriginal community.

Throughout my data collection process anything that was referred to as non-Aboriginal was classified by the residents and staff interviewed as mainstream; thus anything non-Aboriginal in reference to services, and sentiments will be referred to as mainstream here forward.

## **I. Why Aboriginal Specific Services are Necessary**

**a) Trauma.** The presence of trauma is crucial to understanding the lives of Aboriginal women, specifically how trauma has developed throughout their extended family as a structural and systemic issue that pervades the relational activities of Aboriginal women. The concept of trauma is vast and can encompass a variety of experiences. Trauma can arise from relational experiences such as childhood abuse (Wesley-Esquimaux & Smolewski, 2004) childhood family removal to foster care (Castellano, 2002) and gendered abuse towards women (Kennedy, 2005), all of which are linked experiences and can have a relationship with one another. In addition trauma can be inflicted through social and economic factors such as loss of culture, job loss and under or unemployment, poverty, addictions, and war (Wesley-Esquimaux & Smolewski, 2004; Wasik, 2006; Klest, 2012; Martz, 2010) that are relational to forms of trauma. Lastly trauma can be experienced through natural disasters such as earthquakes, or hurricanes (Foster, Goodwin, & Keefe, 2013) that similarly can influence other forms of trauma. Trauma is not strictly experienced by certain groups of people but rather transcends barriers of class, race, gender, sexuality, religious affiliation, ability, and other social locations that impact how a person understands themselves in relation to society.

As a community, the trauma experienced by Aboriginal people has distinct characteristics that are distinguishable from mainstream trauma. The historical and colonialist trauma experienced by Aboriginal people in relation to mainstream structural and systemic problems create a unique environment within Aboriginal communities both on and off the reserve system. The legacy of historical abuse Aboriginal people have faced is horrendous and has become a collective trauma (Wesley-Esquimaux & Smolewski, 2004), that is expressed as a collective memory even without individual self-recognition. Aboriginal people have experienced three major periods of colonization including cultural transition, cultural dispossession, and cultural oppression, and four hundred years of epidemics ( Wesley-Esquimaux & Smolewski, 2004) resulting in mass loss of culture and decimation of Aboriginal populations.

The trauma associated with early colonization has continued to the present with the residential school legacy where Aboriginal children were removed from their families and communities and forced into government and Christian church run schools for the purpose of segregation and assimilation (Aboriginal Healing Foundation, 2005; Barlow, 2009). According to Barlow (2009) physical and sexual abuse are the two main forms of abuse that were experienced in residential schools, with most current literature focusing on these forms of abuse. It is important to recognize that even without direct experiences of physical or sexual abuse, the forced removal of children was abuse in and of itself. In addition Barlow (2009) discussed feelings of developed powerlessness or what Barlow classifies as vicarious trauma “which is witnessing or hearing about the abuse and feeling powerless and too frightened to do anything about it... This powerlessness is a major characteristic of the residential school legacy” (p. 11).

Past experiences of trauma become present through the transmission of collective memories in the form of oral transmission and the transmission of symptoms. Oral transmission

or storytelling of information and memories is a very important part of Aboriginal culture as a holistic approach towards understanding how the experiences of individuals are interrelated (Stock, Mares, & Robinson, 2012). Through the storytelling of Aboriginal experiences, “traumatic memory perpetuates itself” (Wesley-Esquimaux & Smolewski, 2004, p.71). As part of Aboriginal culture the traditional practice of storytelling results in the transmission of traumatic collective memory which over time becomes as an intrinsic aspect of Aboriginal communities. The actual presence during times of trauma becomes unnecessary as the trauma is transmitted through cultural storytelling, or oppositely through lack of beneficial discussion surrounding Aboriginal traditions, culture, and beliefs (Wesley-Esquimaux & Smolewski, 2004). (Wesley-Esquimaux & Smolewski, 2004). Aboriginal people are highly relational people. Therefore collective trauma can impact growth on a community based level. Traumatic memories are often transmitted collectively and can take form through maladaptive social patterns, behavioural issues, and negative coping mechanisms such as suicide or sexual abuse (Wesley-Esquimaux & Smolewski, 2004). In effect the trauma experienced by the individual becomes a collective community trauma as the effects of suicide, sexual abuse and other systemic barriers such as addictions become community wide and systemic.

The 94 intake forms provided by Abbey House staff between 2007- until the present proved useful in better understanding how trauma has shaped the lives of the previous and current residents of Abbey House. One of the sections on the intake form looked at previous history of residential schools and intergenerational effects. Of the 94 intake forms four were removed from the analysis due to missing data. Of the 90 remaining intake forms two women or approximately 2% said to have been survivors of residential schools themselves. When looking at intergenerational survivors of residential schools 44 women or 49% of women said they were

intergenerational survivors of residential schools where they had one or more immediate or extended family member that had attended a residential school. Of the remaining intake forms 26 women or 29% said they were not intergenerational survivors of residential school, and 20 women or 22% said they were unsure if they were intergenerational survivors of residential schools (see Table 1)

#### Residential School Trauma

	Residential School Survivors (%)	Intergenerational Survivors (%)
Yes	2	49
No	98	29
Unsure	--	22
Total	100	100

Table 1. Residential School Trauma

The number of women who knew they were intergenerational trauma survivors is significantly high where almost half of all women who applied to stay at Abbey House regardless of eligibility were self-classified survivors of intergenerational trauma. When looking at the 22% of women who were unsure whether they were intergenerational survivors of residential school, this number is also significant to understanding the collective and individual trauma experienced by Aboriginal women in the Niagara region and points to the lack of discussion surrounding the abuse of Aboriginal people even among Aboriginal people. Lack of discussion among Aboriginal communities and extended families surrounding the experienced collective trauma and the continuation of this trauma is reflexive of the marginalization experienced by Aboriginal people and both the fear of reliving the traumatic experience and the shame and often lack of understanding towards the experienced trauma and the intergenerational effects of such trauma. It is possible that some of the women who said they were not

intergenerational survivors are simply unaware of their family's trauma due to the erasure and extend of the abuse. Regardless of individual experienced trauma, the Aboriginal community as a whole has been deeply affected by this assimilative history.

In addition to the historical and relatively recent forms of colonial violence such as segregation and assimilation through early colonization and residential schools is the structural and systemic discrimination that Aboriginal people face. Exclusive and assimilative policies and procedures by the government and other governing and social bodies are translated into everyday racism and discrimination that continue to make historical forms of colonialism a current and relative issue. Through structural and systemic forms of abuse, "the past is real today even though times have changed" (Wesley-Esquimaux & Smolewski, 2004). As a product of the residential schools children have become parents despite lacking the needed parenting skill set as an effect of trauma associated with their forced removal and lack of positive and culturally relevant parent figures and role models (Castellano, 2002). In effect even though residential schools were eventually closed, a new avenue of removal and assimilation opened up where child welfare services could look at the children of residential schools who were now adult parents as incapable of parenting irrespective of the trauma they had experienced and the removal process of Aboriginal children from their families (Castellano, 2002). Child removal that was momentarily put to a halt through the closure of residential schools was able to continue through child welfare services.

The intake forms provided by Abbey House offer some indication of the amount of women who had been involved with foster care or who were adopted as children, however this data are limited. The intake forms do not ask about foster care and adoption until 2010 and even in 2010 the section regarding childhood care is sporadic with many of the forms missing this

information. Only in 2011 did the section on childhood care become concrete. In order to get a general idea of the number of women involved in these organizations as children analysis was restricted from 2011 until the present. After the forms from 2007-2010 were removed, the analysis was conducted on 34 intake forms dated from 2011 until the present, 2013. In respect to adoption, 4 women or 12% said they had been adopted as a child. Of the 34 women 15 or 44% said they had been in foster care as a child; 18 women or 53% said they had not been in foster care as a child; and 1 woman or 3% said she did not know if she had been in foster care (see Table 2).

#### Childhood Care

	Children Adopted (%)	Children in Foster Care (%)
Yes	12	44
No	88	53
Unsure	--	3
Total	100	100

Table 2 – Childhood Care

The high number of Aboriginal children in care is highly problematic and is reflexive of both historical trauma and the current systemic discrimination and structural abuse that permeate Aboriginal families. Aboriginal families specifically mothers are constantly in battle with child welfare services. An assumption exists that Aboriginal women are bad mothers until proven otherwise, but never actually good mothers. This assumption fails to situate Aboriginal families in the historical and current context of colonial violence and neglect by focusing on lack of parenting skills as opposed to the resiliency of Aboriginal families despite continued colonial violence and discrimination.

In addition to the removal of Aboriginal children from their families and communities, the intake forms showed that as children many of the women experienced sexual, physical, and emotional abuse. The section of the intake form that focused on childhood abuse, like the section on childcare, was only added to the intake forms with consistency in 2011. Therefore the analysis is limited to 2011 until the present. Of the 34 intake forms, 17 women or 50% said they had experienced childhood sexual abuse; 15 women or 44% said they had not experienced childhood sexual abuse; and 2 women or 6% said they were unsure as to whether they had experienced childhood sexual abuse. In respect to physical and emotional abuse the number of women who experienced this form of abuse as a child – many of which was in addition to sexual abuse – is even greater than sexual abuse. Of the 34 intake forms 27 women or 79% said they had experienced emotional and/or physical abuse as a child; compared to seven women or 21% who said they had not experienced emotional and/or physical abuse as a child (see Table 3).

#### Childhood Abuse

	Sexual Abuse (%)	Physical/Emotional Abuse (%)
Yes	50	79
No	44	21
Unsure	6	--
Total	100	100

Table 3 – Childhood Abuse

Even higher than the number of women who have been in care as children is the amount of abuse that these women faced when they were children. With the amount of sexual abuse, and physical and emotional abuse being 50% and 79% respectively, these numbers point to massive amounts of trauma that are historically and colonially situated. The trauma experienced is

saturated with very personal connotations. A stranger committed only one of the experiences of sexual abuse. All the other abuse both sexual, physical, and emotion was perpetrated against these women by family member and extended family friends including mother, foster mother, father, foster father, brothers, uncles, and cousins. The high rates of childhood abuse leads to unhealthy family relationship development because as children the women did not have positive representations of supportive family relationships. These forms of childhood abuse are deeply rooted and translate into the current trauma that often lead to the women interviewed becoming homeless.

The childhood trauma experienced by the women at Abbey House that can be translated into current abuse and trauma is a common theme among homeless women as a general population (Kennedy, 2005). Numerous studies that focus on women homelessness have found strong relationships between childhood abuse, adult partner abuse, and homelessness where childhood trauma often at the hands of family members or friends is linked to abuse in later stages of life as a cyclical effect that leads to a greater likelihood of homelessness as a result of escaping an abusive partner (Kennedy, 2005; Stein, Leslie, & Nigamath, 2002). Childhood trauma encompassing sexual, physical, verbal, and emotional abuse often leading to later partner abuse is seemingly very high among mainstream homelessness involving women which highlights the gendered nature of homelessness across both mainstream and Aboriginal populations.

The trauma experienced by the women applying to stay at Abbey House impacted their lives on a social and economic level. The intake form outlined the four main traumas that led women to Abbey House including homelessness, risk of homelessness, facing eviction, and violence. All 94 intake forms were used for this analysis. Homelessness was by far the leading

factor bringing women to Abbey House where 54 women or 57% of women who filled out an intake form were homeless, and 32 women or 34% said they were at risk of becoming homeless (see Table 4).

While homelessness was the biggest trauma that brought women to Abbey House the women interviewed also discussed being implicated by other negative influences such as substance abuse, and some form of violence. Violence against Aboriginal women was the second largest trauma that the women applying to stay at Abbey House experienced. Of the 94 intake forms, 33 or 36% of women said they had experienced some form of violence, mainly partner violence or abuse from other family members of whom they were living with (see Table 4). In addition 27 women or 82% of women who were experiencing partner violence were also either homeless or at risk of homelessness. The current trauma of abuse experienced by Aboriginal women has foundations in the historical and intergenerational trauma that Aboriginal people have been experiencing since early colonization that devalued the role of women in many Aboriginal communities. In addition when looking at the relationship between residential schools and violence, the high rates of childhood abuse that took place at residential school had effects of normalizing such abuse and also created domestic violence as a symptom of maladaptive social pattern and behaviours (Wesley-Esquimaux & Smolewski, 2004). Of the five previous and current residents that were interviewed three had experienced partner violence. Each of these three women expressed difficulty in leaving their partner, two of whom said they stayed with their abusive partner for an extended period of time do to lack of financial control and also the normalization of abuse.

Only 3% of women applying to stay at Abbey House said they were facing eviction, and 6% of women said they were experiencing some other form of trauma that led them to apply to Abbey House however the trauma in this category was not specified (see Table 4).

#### Trauma

	Homelessness (%)	Homelessness Risk (%)	Domestic Violence (%)	Eviction (%)	Other (%)
Yes	57	34	36	3	6
No	43	66	64	97	94
Total	100	100	100	100	100

Table 4 – Trauma

In addition to the common traumas outlined above that led many of the women to seek out Abbey House, 32 of the women or 37% were currently or had been involved with Family and Children services (FACS) through the course of their lives as mothers. This is a significant amount of women involved with FACS especially when placed in historical context of child removal as a form of assimilation and colonialism. When comparing the number of women who are currently involved with FACS (37%) to the percentage of women who were in foster care as children (44%), which signifies involvement with FACS, the numbers are comparative and uncover the cyclical nature of trauma and abuse. In respect to the high involvement of women with FACS, this is an example where the historical and past trauma is translated into the traumatic experiences of the present. In Aboriginal culture, children are regarded as the future, as gifts, and as possessing connections to the spiritual world (Castellano, 2002). In this respect the trauma Aboriginal people have suffered in regards to the removal and often death of their children through residential schools and forced child removal has been tremendous.

While the last residential school officially closed in 1996, the effects are prolonged. Children came back from residential schools unable to connect to their communities and form

healthy relationships. Similarly while many young adults who had attended residential schools as children were now having children of their own, they were incapable of parenting their children properly due to a lack of parenting skills as a result of residential schools (Castellano, 2002). In turn “the stage was then set for massive intervention by provincial child welfare authorities, characterized as the ‘sixties scoop’” (Castellano, 2002, p. 19). According to one staff member, Abbey House was seeing sometimes the second or third generation of women affected by child removal, as evidence of enormous trauma related to both lack of positive parenting role models as a systemic and structural effect of residential schools that has yet to be adequately addressed, and lack of understanding towards the diversity of parenting by FACS workers who may not accept or discriminate against different parenting skills as culturally relevant or positive.

It is due to the enormity of trauma and colonial violence experienced by Aboriginal people that services such as Abbey House are so essential. Only people and organizations that have a shared history and understanding towards the trauma experienced by Aboriginal women have the potential to meaningfully address the trauma experienced by women at Abbey House.

## **II. Why Aboriginal Specific Services Work**

**a. Support.** All of the women interviewed discussed their trauma to some degree, but most of the data on trauma was derived from the intake forms. The largest theme that was discussed among the previous and current residents that were interviewed was the support that Abbey House and the staff provided for them in relation to their needs. Abbey House provides support for a wide age group of women ages 16+. When looking at the age of women who applied to stay at Abbey House two intake forms were removed from the analysis due to missing data. Of the 92 intake forms analyzed the majority of women, 60 or 65%, were born between the

years 1971- 1990. The largest age group with 35 women or 38% of the total were born between 1981-1990. The second largest age group consisting of 25 women or 27% of the total were born between the years 1971-1980. All the other age groups of women were considerably lower with the third largest group consisting of 12 women or 13% born between the years 1961-1970; the fourth largest group consisting of 10 women or 11% born between 1951-1960; the fifth largest group consisted of 9 women or 10% born 1991 or later; and the smallest group consisted of one woman or 1% who was born 1950 or earlier (see Table 5).

#### Age of Women

	<= 1950	1951- 1960 (#)	1961- 1970 (#)	1971- 1980 (#)	1981- 1990 (#)	>= 1991	
Total (#)	1	10	12	25	35	9	92
Total (%)	1	11	13	27	38	10	100

Table 5 – Age of Women

In general Abbey House accommodates a great diversity of women. Each age group constructed for this analysis consists of a 9-year age span, an amount that can be reflected in a variety of needs even within each category. As spoken by one staff “It’s hard to be a master to every age group...Most of the time they know what they want or need and they are good at asking for it” (Abbey House Staff). According to one staff with the younger women especially, workshops were more adamantly encouraged through peer counseling. The staff at Abbey House discussed that they have found older woman to be more likely and more willing to attend programs as a product of different goals they may have in respect to their age and personal stage of trauma reflection.

One common theme highlighted through discussion with all the residents of Abbey House in respect to the support given was the differences between Abbey house and other

mainstream shelters or transitional housing. Uncovered from the intake forms was that many of the women applying to stay at Abbey House had previously stayed in a shelter, lived in a transitional housing, or in communal living at some point in their lives. Four intake forms were removed from the analysis due to no available data. Of the 90 left, 55 or 61% of women applying to stay at Abbey House had stayed at a different shelter, transitional, or communal living previously to Abbey House. One of the residents interviewed discussed her experience with a mainstream transitional housing organization and the lack of support and loss of her children that she experienced within this particular organization. Two other residents of Abbey House discussed how they had the option of staying at different mainstream transitional housing places when they were applying to stay at Abbey House but they did not feel comfortable in the non-Aboriginal setting. The two women who were not comfortable staying somewhere other than Abbey House said that it was the idea of a Native community that brought them to Abbey House; “I feel a bit uncomfortable like.... But when I’m with my own people its just... I don’t know... like a sisterhood type thing. Makes you feel at home” (Abbey House Resident).

The staff also discussed the feedback they received from women coming into Abbey House about mainstream organizations as often negative such as not being allowed to practice cultural traditions like smudging, lack of relationship development, that the environment was sterile, facing discrimination, inability to reconnect with the Native community, more like a business than a home, and that the women were not seeing people that looked like them or who thought like them. Basically the women of Abbey House said “they don’t feel comfortable being Aboriginal in a non-Aboriginal world [that] doesn’t acknowledge who they are” (Abbey House Staff). The support that is given to women staying at Abbey House in turn comes with the benefit

of a collective understanding towards the cultural position of Aboriginal women and the collective abuse and discrimination experienced by many Aboriginal women.

Due to the diversity of women and the variety of needs along with the incorporation of Native beliefs and the scheduling challenges that arise supporting women with different needs, Abbey House tries to remain as collectively run as possible with few mandatory programs and meetings. House meeting, which look at issues affecting the whole house such as cleanliness, chores, or changes with things such as staffing are mandatory, however in respect to most programs offered “we encourage and invite” (Abbey House Staff).

In addition to the practical challenges of having mandatory programs, the lack of mandatory programs is based on the incorporation of Native values that focus on support through culture beliefs. The lack of mandatory meetings is centered on the idea that the women who come to Abbey House are adults and thus should be treated like adults. Along with this preferred treatment towards adult women is the philosophy of incorporating equality into practice that was detailed by an Abbey House staff member; “the idea is that no woman is better than any other woman in this house... We’re not here to be heavy handed. We’re here to assist. We’re here to support” (Abbey House Staff). The equality-based philosophy that Abbey House uses acknowledges the fact that Aboriginal women are highly oppressed in society, therefore it is not beneficial towards the growth of Aboriginal women to oppress them further by treating them as children; “It doesn’t contribute to healing and growth to oppress people” (Abbey House Staff).

The residents interviews that had stayed at Abbey House were very vehement about the support that they received through the course of their stay. After speaking to both the residents and staff it became apparent that the support provided at Abbey House is individualized on a needs based approach as a cultural method of providing respect and understanding towards the

women of Abbey House, their personalities and individual tastes, and the various life stages that the women were coming from in respect to age, roles, and trauma. The supports available for the residents of Abbey House are reflexive of their role as women, teenagers, mothers, and community members. It is through the conceptualization of these roles that Abbey House provides individualized support for the different needs of specific women. In addition the support from the staff is also reflexive of the link between trauma and support where the different trauma or healing stage of each woman dictates the support provided.

As discussed above Abbey House functions through individualized support that caters to the needs of women by reflecting on the trauma that each woman has faced and how to best assess her needs. For most of the women interviewed this meant constant and daily support through everyday activities rather than support solely through large instances of crisis. The daily support included scheduling of appointments and transportation to appointments, talking to lawyers and FACS representatives, and simply being there during the day as a person for the women to talk to. One resident acknowledged and discussed the benefits of having a person in the office that she could talk to “most of the time you call a counselor you can’t get in for a week. If you’re having a bad day then what are you supposed to do. It’s kind of nice that they’re in there” (Abbey House Resident).

Support from Abbey House staff was evident on a variety of levels depending on the needs of the resident at any given time. This support varied from advocacy and relationship building, to logistical support, and to personal support. Offering support to women working with FACS was a theme discussed throughout many of the interviews. Of the five women interviewed three were involved with FACS during their stay at Abbey House. FACS and the role of Abbey House as the mediator between FACS and the residents of Abbey House became a major part of

discussion in the interviews conducted with women who were involved with FACS. The support provided by Abbey house in relation to FACS and with their children in general was often spoken of as defining of the women's stay at Abbey House.

Each of the women interviewed who were or had been involved with FACS discussed the tremendous help and support that Abbey House had given them during the process of gaining custody of their children, and the instrumental role Abbey House played during this process. The role of Abbey House in respect to the relationship between their residents and FACS centered around advocacy work on behalf of the women at Abbey House to develop more positive relationships with children welfare services. One staff discussed the relationship between Abbey House and FACS as a hard fought and continuous battle that is foundational upon lack of cultural understanding and the historical and current systemic and structural discrimination that is highly critical of Aboriginal parents especially Aboriginal mothers. The advocacy work of Abbey House staff on behalf of the women is crucial to breaking down barriers between Aboriginal and mainstream services for women, and the conceptualization of proper parenting as related to the neglect of Aboriginal people. According to one staff member there have been some improvements in terms of relationship development with FACS in respect to the development of understanding and trust; understanding towards historical and current discrimination experienced by Aboriginal women and trust that Abbey House prioritizes the safety of children similar to FACS.

In terms of logistical support this form included both support through daily activities and also relaying the advocacy work to practice. Support given to the women in respect to daily tasks was basic such as talking to FACS workers, scheduling meetings, making sure transportation to and from meetings was set up, and getting children involved in activities; all basic tasks that kept

things running smoothly while simultaneously cutting down on stress for the women. Through discussion with the women it became evident that it was the everyday little things that Abbey House staff did that made all the difference. By Abbey House taking over the logistical and scheduling part of the women's appointments, the residents were able to focus on themselves and growing as women and mothers that in the end would be more beneficial to them, their families, and their community. In addition to this basic support of everyday tasks and functioning is the translation of logistical support to advocacy. Two women described their experience with Abbey House and the role of the staff in getting their children back that included both attending FACS meetings with the residents as someone who could take notes, and act as the women's spokesperson by actually attending the court meetings and trials of residents.

The residents spoke of deep stress associated with being involved with FACS and how the staff of Abbey House made this easier through the different supports detailed above. In addition to this logistical support the residents also discussed the personal support by Abbey House staff and the staff's understanding towards the challenges and shifting circumstances that the residents may often find themselves in and the need for flexibility. The women and the staff spoke of the support offered at Abbey House as flexible to meet the needs of individual women, where the constant support provided is founded through an understanding of needs. On numerous occasions the women interviewed spoke about how Abbey House would bend the rules and offer flexibility in respect to their expectations as residents when it was best for the women. For instance one resident spoke of how her stay at Abbey House was extended in order for her to get her children back, a reason for extension that one staff said has happened numerous times. Another resident spoke of how she was allowed to stay out past curfew on nights when she worked. Another resident spoke of how she was able to skip mandatory house meetings due to

conflicts with work. One of the Abbey House staff spoke of this offered flexibility as helping to support residents in healthy decision making.

The constant support experienced through Abbey House in relation to FACS was something that the women discussed as being different from mainstream organizations that they had been involved with. One staff member discussed how Abbey House was different and beneficial for Aboriginal women because the staff understood how Aboriginal women talk, think, and react due to shared heritage and understanding and/or experiences of mainstream discrimination. Another staff member also discussed how important it was for the Aboriginal community as a whole that the women of Abbey House begin to heal as this healing process would be translated towards the healing of their children and the community. It was a unanimous feeling that Abbey House, its staff, and in translation the Aboriginal community truly cared about the well being of the residents at Abbey House.

Through the discussion of the benefits of having an every day support system the importance of life experiences and the integration of such experiences into the forms of support became a noted difference of Abbey House from many mainstream organizations that the residents enjoyed. As a method of peer counseling, both Abbey House staff discussed how they incorporated their personal life experiences into their support, a practice that was described as both reflexive of traditional storytelling as relational people, and also a necessary tactic in developing healthy relationships with the women they work with based on trust; “so they can come to us for parenting advice because we’re parents. They can come to us for relationship advice because we’re women” (Abbey House Staff). According to one staff member mainstream organizations may criticize this method of communication as not practicing boundaries. However as a highly oppressed group of women the staff at Abbey House have found that this informal

discussion encourages the residents to be more open, social, and trusting, things that residents at Abbey House may not have learned any other place. In addition the use of relational discussion supports and teaches the residents how healthy families and relationships function.

Despite the differences in age and needs there was a large amount of interest expressed in respect to different programs and opportunities offered by Abby House. As part of the intake form the women could indicate which programs, services, or skill development they were interested in; financial skills, social skills, life skills, educational upgrade, employment, physical health, and cultural awareness. Interest was fairly high in each of these categories of programs offered. For the analysis two intake forms were removed due to lack of data leaving 92 intake forms for the analysis. Only 6% of the women applying to stay at Abbey House expressed a lack of interest in all seven program opportunities offered. In increasing order of interest 46 or 49% of women expressed interest in learning about employment opportunities; 56 or 60% of women expressed interest in learning about physical health; 57 or 61% of women expressed interest in learning about social skills; 60 or 64% of women expressed interest in gaining life skills; 62 or 66% of women were interested in developing financial skills; 64 or 68% of women were interested in obtaining an educational upgrade; and lastly 66 or 70% of women were interested in gaining cultural awareness (see Table 6).

#### Interest in Programs

	Financial Skills	Social Skills	Life Skills	Education Upgrade	Employment Opportunity	Physical Health	Culture Awareness	None
# of Women	62	56	60	64	46	57	66	6
% of Women	66	60	64	68	49	61	70	6

Table 6 – Program Interests

Most of the skills that the women expressed interest towards were basic everyday skills that influenced the everyday lives of women. These everyday skills used for daily activities are often taken for granted. This lack of basic skills is reflexive of the trauma that many Aboriginal women face and also the structural and systemic discrimination that hinder the social and economic development of Aboriginal women. One of the staff members noted the importance of teaching everyday life skills encompassing basic things that many people may take for granted such as understanding how to cook a healthy meal, knowing how to clean, and how often to change bed sheets especially with youth who may not yet have these life experiences. Another staff member discussed the importance of working with and teaching new moms life skills that have to do with parenting. These skills include basic things such as registering children for school that some women may not have been exposed to. Reasons for this lack of skill are diverse and may include being apart of the foster care system as children and lacking a stable mother role figure in that sense, experiencing the effects of intergenerational trauma that may have impacted what women were or were not taught by their own parents or other adults, and structural discrimination that hinders Aboriginal mothers from asking questions on parenting for fear of reprisal. All of these reasons for lack of certain skills have foundations in colonial violence.

As most of the women who applied to stay at Abbey House were experiencing homelessness or were at risk of homelessness many of these women identified as being in desperate need of basic financial skills; things such as setting up the right kind of bank account and more specifically knowing their right to have an account. Abbey House takes care of these basic necessities by helping the residents understand their rights and make sure that the residents have access to them.

As mentioned above cultural awareness was the most requested topic of interest to women coming in to Abbey House. The large interest in cultural awareness highlights the lack of current culturally relevant mainstream services, a lack of understanding or discussion in Aboriginal communities, and the need for increased cultural teachings. In addition to the categories of interest discussed above in an open section women could write what they were most interested in learning at Abbey House. In this open section many women made comments and expressed interest in learning more about their background, native culture, native teachings, traditional teachings, and traditional medicines, pointing to the want and need that exists from Aboriginal women for the incorporation of culturally relevant services.

While Native teachings, beliefs, and values are foundational to the conceptualization of Abbey House, as an individualized and needs based organization it is understood that not all women have or want the same levels of cultural incorporation of teachings, and also that not all native women have or practice the same cultural traditions. Abbey House practices inclusivity and support based on diversity, understanding, and respect towards the different wants and needs of the residents at Abbey House. In this respect both the staff and the residents discussed that while the native teachings and programs offered by Abbey House and the NRNC were very well attended, if residents expressed interest in attending programs outside of these Native based organizations they were assisted and encouraged. Also the residents did not have to attend programs offered at the NRNC if they did not want to.

Much intergenerational trauma takes form in experiences of lack, or through experiences of loss that impact the support different women need. During the interview process all of the women expressed a lack of knowledge towards their cultural background, detailing how Abbey House provided a link to their culture that they had not had previously. One resident discussed

her experience of coming to Abbey House where as a young woman she had lost a family member who had been her only link to her culture, and that it was only through Abbey House that she was able to reconnect to the Aboriginal community. There is a lack of understanding and discussion surrounding the trauma experienced by Aboriginal people and how this needs to be reflected into support. Three of the residents interviewed stated that it was not until they came to Abbey House that they began to understand their experienced lack in respect to their culture.

In addition to the residents, one staff also discussed the benefits of working at Abbey House, that it gave her a better understanding of her background and where she came from even though her family practiced traditional Native culture. As Aboriginal people both the residents and staff have experienced a shared trauma through intergenerational trauma and structural and systemic discrimination. Even the staff members of Abbey House are encouraged to participate in culturally relevant programs such as speaking to Clan Mothers and Elders, stressing the importance of healing as a journey and self-care as the first step to helping others.

During the interview process all the residents shared how their continued healing process has addressed personal feelings of learned helplessness. Learned helplessness is an out come of hundreds of years of abuse that are in effect internalized (Wesley-Esquimaux & Smolewski, 2004). One resident expressed this learned helplessness through her behaviour with doctors, FACS workers, and other people of authority where as soon as someone began to discuss a challenge or a problem, say that something was wrong, she would automatically tune it out an unconscious habit that she had developed as a child. Another resident discussed her learned helplessness through her substance addiction. Abbey House helped her deconstruct this learned helplessness and she was able to develop away from her addiction. The staff of Abbey House discuss the importance of building residents up and deconstructing negative stereotypes such as

Aboriginal women as bad mothers or alcoholics that many Aboriginal women accept due to constant portrayals of inadequacy and the pervasiveness of these negative representations within mainstream society. An Abbey House staff described Aboriginal women as “strong and natural leaders”. Abbey House provides the space for women to reclaim that role and find themselves and their strength.

Three of the residents interviewed discussed the effects of this learned helplessness in relation to partner violence that they had been experiencing; “if someone tells you enough times that you’re a piece of crap, eventually you’re going to believe it” (Abbey House Resident). Much of the support work that Abbey House does for the residents is to break down these barriers and negative self perceptions and develop awareness and understanding towards the context of abuse, including systemic and structural forms of discrimination and historical trauma that impacts the lives of Aboriginal people. One of the residents interviewed framed this deconstruction of learned helplessness in respect to the abuse she experienced through her development of a sense of ‘own-ness’ where the support she received at Abbey House gave her the strength to reclaim her womanhood; “We had to clean up, we had to pay and it just gave me that sense of ... okay I can do this on my own. I don’t need to be in an abusive relationship to live life” (Abbey House Resident).

According to one resident, the largest part of getting over this idea of learned helplessness was through the development of understanding and truth through the discussion of the historical abuse Aboriginal people have been through and the current colonial violence. While truth does not excuse the abuse, the woman spoke of now being able to understand why they or their family members may have or currently be addicts, or had experienced childhood sexual abuse and later in life partner abuse. Rather the residents spoke of the truth as allowing

understanding towards the abuse and being able to place the abuse experienced within its historical context instead of internalizing the trauma resulting in self-blame; “If you don’t know the truth how can you accept it... the true history needs to be taught” (Abbey House Resident).

Intrinsic to the deconstruction of learned helplessness was the idea of offering support through the basic human necessity of a home and the idea that a home can and should be a safe space. The notion of Abbey House as a safe space was present throughout all of the interviews where residents spoke of both their children and themselves opening up; “nobody yells at me here, nobody is hitting anyone here” (Abbey House Resident). Another resident discussed how Abbey House provided a safe space that gave her the chance to develop safe habits in respect to being off the streets away from illegal substances and surrounded by safe and supportive people. One of the Abbey House staff also described how the residents were able to open up and act like themselves without fear of judgment or scrutiny.

**b. Family.** Inseparable from the support experienced by women at Abbey House is the construction of an extended family through the incorporation of Native values that are reflexive of the loss of traditional family through trauma. The traditional idea of an Aboriginal family has similarities to mainstream families as an institution of growth, value promotion, and the development of roles. However traditional Aboriginal families are centrally different through the conceptualization of an extended family and the influences this has on what is valued and how roles of family members are constructed. Castellano (2002) notes that while the traditional Aboriginal land based societies have shifted, including a geographical change of many Aboriginal people moving off reserves and into large cities for wage labour, “ the notion of the caring, effective, extended family, co-extensive with community, continues to be a powerful

ideal etched deep in the psyche of Aboriginal people” (p. 16), despite the lack and losses that Aboriginal people have and continue to face.

The development of an extended family was very important to the residents at Abbey House and was used as a tool of healing. An extended family is developed at Abbey House through the incorporation of Native values that highlight the importance of healing on a holistic level of body, mind, and spirit. Talking with elders about traditional teachings and life in general is a large part of that healing process at Abbey House. Four of the residents interviewed discussed how talking with Clan Mother Grandmother Rene was a highlight of their stay at Abbey House. Described as warm and fuzzy, full of advice, very gently, understanding, and able to answer questions “everything that, in my opinion, a Clan Mother should be” (Abbey House Staff). One resident spoke of Grandmother Rene as her favourite part of staying at Abbey House and as having a large role in her healing as an Aboriginal woman; “She taught me how to let things go and... to be okay with my feelings. And to be hurt and stuff like that. It’s okay to do all that, to bring it out not just keep it in and let it go. Be okay with it then let it go” (Abbey House Resident).

In addition to Grandmother Rene, one of the staff discussed how she would speak to Elders and her own personal extended support group on behalf of the residents of Abbey House. This staff discussed that despite being raised in the Native culture there is much about traditional practices that she does not know, especially when looking at the diversity among Native groups and communities. This staff member discussed how being able to talk to elders and ask them questions is very helpful; “women want to know things and maybe I don’t have the answer right then... but I can always go ask my mother about things that they’ve asked that I don’t

understand. Then she'll explain and then I can explain to them" (Abbey House Staff). Elders act as a link to traditional culture and teachings that the Aboriginal residents understand and accept.

The staff also describe their role with the residents as their Aunties; "you can call somebody your Auntie even though your not because we're all connected" (Abbey House Staff). Encompassing the role of Auntie gives the staff of Abbey House a place in the healing of the Aboriginal women who come through Abbey House that Aboriginal women understand. One Abbey House staff discussed the different kind of Aunties that Aboriginal women cover including the sweet Auntie who "you can tell anything to and she'll always take your side right, wrong, or indifferent"; and also the tell you how it is Auntie the one who will "tell is to you straight even though you don't like to hear it, but you know she's right and you know she cares or she wouldn't bother to say it in the first place". The role of Aunties at Abbey House allows for the development of healthy family relationships. As Aboriginal women understand the role of Aunties they are more likely to accept the help and support given through that role.

The residents interviewed spoke of being ever grateful to what Abbey House had given them in terms of their children and providing space for their children to open up and blossom. Abbey House promotes family growth through basic things such as extending the length of a persons stay as a stipulation for women getting their children out of care. Two residents who were able to get their children back during their stay at Abbey House expressed how much they were grateful to Abbey House and the staff for supporting them and helping them through that custody process; "I lost my kids in a transitional apartment building... then I came here and everything just started falling into place" (Abbey House Resident). In addition to this support with the residents children the residents also discussed the different parties and celebrations that they would attend at the NRNC for Halloween and Christmas, and the celebrations Abbey House

would have for their children's birthdays; things that foster environments where children can play and have fun and that are often taken for granted.

The development or re-integration of women at Abbey House with their Native culture as a method of developing familial relationships was very important to all the women who were interviewed. A central theme discussed by the women was the importance of family and the development of an extended family of support that included both relationship development between women in the house, between women and staff, and also between the women and the larger community at the NRNC. Intrinsic to the development of Aboriginal families at Abbey House is the conceptualization of Abbey House as the women's home.

One staff discussed how much of the feedback received from women coming to Abbey House was centered around Abbey House as feeling like a home rather than a shelter compared to other mainstream places women had been to previously; "this is more like a home than a shelter where everyone has to stay in their bedrooms" (Abbey House Staff). Rather one woman spoke of the community living at Abbey House as nice in respect to having someone to talk to at night when it can get lonely, and in effect having developed almost a whole new family. In regards to the community living style at Abbey House, three of the residents spoke of the challenges they faced in transitioning to this type of living. However the same three residents also noted that the experience turned out to be very positive for them in their ability to create relationships and function as a family unit; "it only took me a week and I was comfortable and letting loose" (Abbey House Resident), where the women would all pitch in to clean and take care of the house, along with watching each other's children and becoming close friends.

Many of the women including staff discussed how their interests towards their Native culture had shifted throughout their life. As children and young women three residents expressed

how they had little interest in learning about their cultural background, and that it was only until they were older that they wanted to learn more. This shift from disinterest to interest is reflexive of the trauma and erasure discussed previously in respect to residential schools and how the after effects of the sixties scoop has continued to have direct and indirect effects on Aboriginal people and the development of healthy families and relationships. Family and the focus on children was a very important aspect of healing that the residents of Abbey discussed. All of the women interviewed including both staff and residents were mothers. Among the residents interviewed all of them had their children living with them at Abbey House at some point during their stay, if not their entire stay. Of the 94 women who applied to stay at Abbey House 68 or 72% identified as mothers, 24 or 26% of the women did not identify as mothers, and 2 or 2% of the women were pregnant with no other children. In respect to looking at the age groups of the children three intake forms were removed due to missing data. The largest age groups of children were under 2yrs where 25 women or 27% had children under two, and 2-6yrs where 25 women or 27% had children between the ages of two and six. The second largest age groups of children women had were 7-11yrs where 19 or 21% of women had children between the ages of seven and eleven, and 12-17yrs where 19 women or 21% of women had children between the ages of twelve and seventeen. The smallest age group of children was 18+ where 14 or 15% of women had children who were eighteen and older (see Table 7). When looking at the number of children each woman had, of the 68 women that had children one was removed from the analysis due to lack of available information on the number of children. Of the remaining 67 women 42 or 63% of the women had 1-2 children; 17 or 25% of the women had 3-4 children; and 8 or 12% of the women had 5 or more children (see Table 8).

## Age of Children

	<2yrs	2-6yrs	7-11yrs	12-17yrs	18+
Total #	25	25	19	19	14
Total %	27	27	21	21	15

Table 7- Age of Children

## Number of Children

	1-2	3-4	5+	Total
Total #	42	17	8	67
Total %	63	25	12	100

Table 8 – Number of Children

While 72% of the women who applied to stay at Abbey House identified as having children, the status of their children in respect to being able to stay at Abbey House with their mothers irrespective of mother eligibility varied. In order to analyze the status of the children of potential Abbey House residents, focus was kept solely on the 68 women who said they were mothers. Of these 68 women, 8 intake forms were removed due to the women having children who were all 18years or older as this age group is not allowed to live at Abbey House as children. Of the 60 women who had children that were eligible to stay at Abbey House 29 women or 48% of the women had children that would stay at Abbey House with them if they were deemed eligible; 18 or 30% of the women had children that would not stay at Abbey House if they were deemed eligible; and 13 women or 22% had some children that would stay with them in addition to other children that would not stay with them as in the case of different guardians or foster care if they were deemed eligible (see Table 9).

Status of Children			
Children Yes (%)	Children No (%)	Children Both (%)	Total
48	30	22	100

Table 9 – Status of Children

After analysis of the intake forms and the discussion had through the interviews it became evident that the involvement of children in Abbey House and the development of healthy mother child relationships was crucial to the healing journey of many women. One staff discussed how it is often hard working with residents and their children especially when you see women having their children taken away from them. Despite these challenges Abbey House tries very hard to maintain and build mother child relationships because they understand these relationships to be foundational to the healthy development of families and connected to the growth of the Aboriginal community.

Fournier and Crey (1997) discuss some of the direct effects of the child welfare system in respect to traditional Native family development where Aboriginal adults that were removed from their families as children through adoption and foster care have mixed experiences of re-integration or lack thereof when seeking to re-connect with their traditional origins. The effects of child welfare services are also indirectly experienced where children who are now adults themselves experience the effects of their parents being removed from their families and communities. Now these adult children of parents who were removed want to be reconnected with their culture but they may have no one to connect with due to the loss of culture experienced by their parents. Or alternatively their families may have been too traumatized or do not understand their experiences of abuse and therefore do not pass down traditional practices.

As discussed previously the high involvement of children who are adults now in child welfare services has had tragic consequences towards the development of healthy family relations. Due to this experienced loss Abbey House has provided that link to Native culture by helping adult women in developing extended familial relationships. Four of the residents interviewed discussed in detail their relationship with the NRNC and how they were welcomed into the community. Abbey House becomes that bridge for women back to the community; “bringing them into the community means they’re brought in... that women can return to and be accepted” (Abbey House Staff). The residents spoke of beginning to form feelings of belonging as they were welcomed into the Native community as part of an extended family. Through community integration Abbey House promotes the development of healthy relationships. Aboriginal women are then able to teach these healthy relationships to their children.

In addition to developing relationships between the different residents at Abbey House and the extended family developed through the Aboriginal community, the staff discussed how the relationships they develop with residents from Abbey House continue even after the women leave due to their high involvement within the community. One staff noted how she is regularly invited to the homes of previous residents. In addition another staff spoke of the relationships she developed with the children of previous residents many of whom greet her with fondness and excitement when they see her. During an interview one resident discussed her relationship with the staff at Abbey House in relation to her struggles being a young mom as an amazing experience; “I never got help like that from my own family so to be able to come here and get like a whole new family was just awesome” (Abbey House Resident).

### **III. Why Abbey House is Unable to Move Forward and Grow as an Organization**

**a. Challenges.** The last theme that both the residents and staff of Abbey House discussed was the challenges that the residents faced in their roles and lives that influenced their time at Abbey House, and what they were able to take from their stay. The challenges that faced the residents ranged from personal to structural, looking at both challenges they faced as individuals and women, and the challenges facing Abbey House in general that prevented Abbey House from growing as an organization

The greatest challenge that the staff of Abbey House discussed was the lack of funding as an effect of discriminate policies that all other challenges stemmed from. Abbey House is federally funded through the Homelessness Partnering Strategy (HPS) administered by the Ontario Federation of Indian Friendship Centres (OFIFC). According to one of the Abbey House staff while low funding is being experienced across non-profit organizations, funding for Aboriginal services in the friendship centres is always low, and has recently been cut further. While there exists no one reason for this lack of funding, it was speculated by the staff of Abbey House as a separation of policy verse practice. One staff member discussed how the Federal government service Canada stated that the province must fund Aboriginal organizations that are in the field of homelessness, however that has yet to happen; “and when I brought it to the attention of the federal government service Canada again and that particular manager who I met at a conference... he’s done nothing about it” (Abbey House Staff). There exists an all around lack of follow through that is related to lack of accountability towards Aboriginal needs as a structural and systemic issue of discrimination. Aboriginal organizations are simply not funded at the same level as mainstream organizations; “ and off reserve Aboriginals are given a pittance even though I think the numbers are up to 85% of Aboriginal people live off reserves” (Abbey

House Staff). While policy says that Abbey House should be receiving funding, there are structural issues that result in neglect.

In respect to the neglect of Aboriginal needs, one of the staff outlined what she believed to be the reason why Abbey House is continually passed over. One reason was that the region wears blinders in respect to Aboriginal homelessness due to incredibly high needs in the area of homelessness in general. As large organizations such as the YMCA have been addressing homelessness longer and have more resources to contribute than the NRNC and Abbey House as an extension, Abbey House is continually passed over in terms of funding compared to larger mainstream organizations; “The Feds to the Province to the Region, each has its own reasons for doing it, but that’s what makes it systemic” (Abbey House Staff).

Concomitantly the staff at Abbey House also discusses a shift in the current homelessness model to Housing First that has resulted in less funding for Abbey House. Previously to this model people would “enter the shelter system and you move on in to some supportive living environment, maybe transitional housing, and then eventually get into subsidized housing” (Abbey House Staff). The Housing First model skips all those in between steps and says that “everyone is entitled to their own home” (Abbey House Staff). The idea of everyone having their own home is a beautiful concept however focus on Housing First organizations leaves places like Abbey House who desperately need support without funding a loss that directly impacts Aboriginal women.

The lack of funding is translated into various challenges that plague Abbey House. The largest challenge in terms of funding is an issue of staff in terms of both numbers and qualifications. At the moment Abbey House has only two staff members. For a period of time Abbey House had only one staff member. This low level of staffing poses challenges for the staff

that work there and also for the women who stay there. One of the staff members discussed the challenges she faced as one of the two staff members. With Abbey House having a steady resident rate the house is almost always at capacity; “when we have a full house it’s... well it’s very hard to spread yourself around” (Abbey House Staff), which can make it very stressful at times especially if one of the staff members is out at a meeting, or calls in sick, or has a family emergency. There is no back up staff that can come in.

In addition lack of staff is challenging in terms of roles of staff at Abbey House. In theory at Abbey House there is one peer counselor who is the front line worker that addresses the concerns of the women and talks to them first through one on one or group interaction, and also takes care of budgets and service plans; “basically they keep the ship running... make sure things stay as calm as possible” (Abbey House Staff). Along with the support worker is the Administrator/ Director who has the role of proposal writing, fundraising, advocacy work, and everything else that is needed for Abbey House to maintain and grow as an organization. However as discussed above situations do arise where the support worker may not be at Abbey House, than the administrator is back to the frontline work which impacts the amount of advocacy and fundraising work that administrator can do. Along with this is the fact that the residents at Abbey House enjoy talking to both the support worker and the Administrator; “I try not to do the one on one with the women... The being said, they like to talk to me. And when opportunities present to teach and help and assist that I have the capability of doing, I’m going to take that opportunity” (Abbey House Staff).

The issue of lack of staff comes down to having a lack of qualified staff where funding impacts the level of qualified staff that can be hired. While the peer counseling work of the support worker is highly beneficial for the women – just having someone to talk to during the

day is appreciated – there is a need at Abbey House for a qualified in house counselor that can work daily one on one with women through their struggles and healing and just be there if someone is experiencing a crisis that the other staff may not be qualified to adequately and most beneficially address. The issue is not that the current staff at Abbey House are not dedicated, it is evident that they truly care about the women they support, however the residents of Abbey House often need more structural and emotional support than the current staff can provide due to issues of qualification. Two of the residents interviewed spoke of the challenges they faced in getting over their abusive partners and building themselves back up, and the need for a full-time counselor in house for that process.

Another staffing issue that Abbey House faces is that staff hours are strictly Monday-Friday, 9am-5pm which poses a number of challenges. The residents of Abbey House are encouraged to be out of the house during the day; working if they have a job or being involved in programs at the NRNC. Most women spoke of being fairly busy during the daytime, it was nighttime that posed a challenge; “that being said when they come home its their down time... when a lot of processing happens. And if there’s a staff person that can assist in that processing that helps a lot” (Abbey House Staff). One resident spoke of the lack of nighttime staff as her least enjoyable part of Abbey House due to the lack of supervision; “the way she used to scream at her baby in the night when no one was here. I didn’t like that” (Abbey House Resident).

The lack of funding that is translated into lack of appropriate staff is further translated into capacity issues that dictate who Abbey House is able to provide a home for. Abbey House has a ten bed capacity which means only 10 people can stay at Abbey House at any given time including women and their children. However there are limitations on who these ten people can include. With one family suite only one large family or two smaller families can be

accommodated. With two bathrooms upstairs and one only having a shower, sink, and toilet, Abbey House can only accommodate two moms with babies or one mom with two babies; “You can’t have babies in a shower you know. They need a tub” (Abbey House Staff). Also while the age demographic is widespread accommodating women 16+ Abbey House can not provide accommodation for women who do not want to be around children as the house is often full of children; “So that might be difficult for an older person” (Abbey House Staff).

With the combination of low funding, lack of staff in numbers and qualifications, high needs, and a large population in need of support with a low holding capacity, Abbey House has to maintain a strict screening procedure and non-negotiable criteria on who as a community organization they can welcome into Abbey House. Due to the issue of lack of qualified staffing the women that come to Abbey House have to have a certain amount of independence. Women with high physical and mental health needs such as severe anxiety issues can not stay at Abbey House due to a lack of professional counseling in house with the specific skill sets necessary to work with those groups of women and their very specific needs. Another large barrier capacity wise is physical accessibility, where Abbey House is not wheelchair accessible. One staff member also discussed the challenge in having to turn away Aboriginal men and fathers who have no place to stay, and young 15 or 14 year old teenage girls who are homeless.

The lack of staff also translates into a lack of services that Abbey House can offer in house. Abbey House as an umbrella organization under the NRNC offers numerous services at the NRNC that residents of Abbey House can participate in such as Healthy Babies Healthy Children, and Canada Prenatal Nutrition Program. However a few of the residents interviewed discussed how it would have been more beneficial for them if there had been more programs offered in house. One resident discussed how when she was at Abbey House she was not yet

comfortable going to the NRNC and had hoped to be able to deal with some of her underlining trauma at Abbey House. Therefore the programs offered at the NRNC were not relevant for her needs. In addition while all the residents appreciated the atmosphere of being around other Aboriginal women and the shared cultural beliefs and values especially with visits by Grandmother Rene, two of the women expressed the need for more culturally relevant teachings and cultural facilitations in the house as opposed to having to go to the NRNC.

As an organization Abbey House is plagued by structural and systemic challenges that are centered around historical forms of discrimination and colonial violence. One of the main challenges facing the staff of Abbey House was building lasting connections and relationships to gain more support from mainstream organizations and institutions, and also the wider Aboriginal community including the NRNC. In terms of continually building connections the staff discussed the challenges that face Abbey House as an organization that exists under the umbrella of a larger organization that being the NRNC and inconsistencies in terms of support and goals. In order for Abbey House to be successful and continue to grow as an organization they need to be able to rely on the NRNC; “when we reach out we need a reach back” (Abbey House Staff). In terms of building connections with mainstream organizations, much of this development has been centered on a better understanding of the abuse experienced by Aboriginal people. As discussed earlier, working with FACS has been a constant struggle for Abbey House where “the actual workers come with preconceived notions about what is acceptable and what is unacceptable in terms of parenting that are actually judgments and have nothing to do with the capacity of the parent” (Abbey House Staff).

Child removal is a large problem facing the women who stay at Abbey House. By looking at the statistics discussed above it is evident that the removal of Aboriginal children is

not an inherent issue of Aboriginal culture but a systemic discriminatory policy that fails to deconstruct the structural issues that both reduce the capacities of Aboriginal parents and also fail to place lack of certain parenting skills that encompass some Aboriginal families into the historical context of colonial violence. When looking at the time frame of abuse that has been forced onto Aboriginal families and communities the historical abuse of residential schools is an all too real present social reality with the last one closing in 1996. However focusing entirely on residential schools, which has become the sole part of mainstream recognition of abuse, barely scratches the surface of structural abuse and colonial violence. The forced marginalization and colonial violence of pushing Aboriginal people to reserve's that took place before the residential school legacy along with the sixties scoop; "which our people have renamed the millennium scoop" (Abbey House Staff), and the forced sterilization of Aboriginal women are rarely discussed in relation to the present abusive and discriminate realities that make up the lives of Aboriginal women.

#### **IV. Summary of Findings**

Abbey House as an organization that addresses violence by providing a safe and supportive home is very beneficial to Aboriginal women. While some of the residents noted that Abbey House is lacking in certain perspectives such as not enough in house programming and services for their needs, all of the residents also and more vehemently spoke of the wonderful atmosphere and the support that was given to them. Native cultural values and beliefs such as sharing, teamwork, the importance of community, and non-judgmental support was everywhere in the daily activities and lives of the residents at Abbey House.

Each of the themes uncovered in the research including trauma, support, family, and challenges are interrelated and based on Native beliefs as relation people. Each of these themes stem from the effects of colonial violence. The different traumas experienced by Aboriginal women are a result of historical and current colonial violence that keep Aboriginal people from moving forward and healing. It is from this sentiment that the forms of support given by the staff of Abbey House are conceptualized. Much of the support is based on daily needs, however the needs that women have are related to the trauma they experienced and how that trauma is situated within the larger social force of colonial violence. The Aboriginal women who come to Abbey House are plagued with trauma from a plethora of abuse. To address this trauma Abbey House incorporates Native culture, beliefs, and values into the support they give that is translated into the development of new more beneficial and supportive relationship through the creation of new and extended families and supports and by showing the importance of community through the NRNC and the residents and staff at Abbey House.

The findings point to the necessity of Abbey House by showing why Abbey House as a organization works for Aboriginal women, and also the need for it to continue to expand in order to adequately support Aboriginal women based on their needs. As the needs of Aboriginal women who experience trauma are different than non-Aboriginal women who experience trauma in respect to colonial violence it is evident that a different approach with Native culture as central is necessary and highly beneficial for Aboriginal women within the Native community.

## 5. DISCUSSION AND IMPLICATIONS OF FINDINGS

The challenges facing Aboriginal people in respect to homelessness and abuse are deeply rooted and colonially situated. When analyzing the interviews one part of the discussion that particularly stood out to me was the discussion I had with one woman who expressed:

In my experience Canadian culture is acting as the abusive man toward the woman. And there's a climate, a culture that says blame the victim. When something's difficult rather than looking at ourselves and seeing how we can do better, it's an atmosphere of it's your fault somehow. It's your fault you're poor. It's your fault you're homeless. It's your fault you're abused. It's your fault you haven't gotten over it. And it's interesting to me because they're characteristics of abusive men that mirror societies view of Aboriginal people. You haven't cleaned enough, you haven't cooked at the right time, you've looked wrong, you've said something with the wrong tone of voice, you sneezed when you shouldn't have therefore I hit you. And you deserve it. If you hadn't done those things I wouldn't abuse you. There's a very nasty element in Canadian society that Canada is completely unwilling to address (Abbey House Staff).

This quote stood out because it shows the normalization process of colonial violence against Aboriginal people that is translated into violence against Aboriginal women. Violence against Aboriginal women has its foundation in dominant Canadian culture and invisibilizes Aboriginal people as persons. This invisibilization has dire effects for Aboriginal women as it normalizes violence against Aboriginal women. Colonialism has greatly impacted the gender roles and

relationships between Aboriginal women and men. This is not to imply that Aboriginal people and their roles and responsibilities would have been left static and unchanging. Aboriginal people like all people are not static or the 'stoic Indian' that they are often romanticized as representing. As a culture and a population Aboriginal people change, like all people; "but colonialism has directed their development in ways that indigenous peoples would not have chosen" (Fontaine, 2007, p. 117).

It is because of this continued history of colonial violence that organizations such as Abbey House are so pertinent to this process of decolonization. According to Fontaine (2007) the voices of Aboriginal women are often structurally marginalized within the decolonization process of Aboriginal people, where women are asked or demanded of by male leaders to "put so-called 'women's issues' on the back burner in the interests of collective de-colonization" (p. 114). However evident through this research is that women's issues are community issues. It is counter productive to try and address colonization without addressing the homelessness, partner violence, and childhood trauma that are so defining of women's experiences as a result of colonialism. Abbey House looks at 'women's issues' by expanding this limiting representation and helping the women who stay at Abbey House understand the personal challenges they have faced as existing within the larger spectrum of colonialism.

It is evident through discussion with both the staff of Abbey House and the residents that the staff members care about the well-being of the women that come to Abbey House. Along with the advocacy, teaching, and support by Abbey House staff and the NRNC the residents of Abbey House were so thankful for the basic respect and understanding that they received from Abbey House along the lack of judgment they felt directed at them; "They're really good here. They're nice and they treat you with respect. They don't treat you like... they don't pass

judgment. I love that” (Abbey House Resident). Abbey House works with Aboriginal women and the larger Aboriginal community to develop relationships built on mutual respect, trust, and understanding. It is due to the very specific colonial violence that Aboriginal women have and continue to face that makes organizations such as Abbey House so absolutely necessary.

It is important to note that Aboriginal people specifically women are highly resilient people and have been resisting colonial violence since early colonization. The staff of Abbey House regard Abbey House as central to this process of recognizing and healing from colonial violence and the support and stability that they as staff members promote for the residents of Abbey House as tools of this healing. Despite the resiliency and dedication of the staff to the Aboriginal women they serve, the challenges facing Abbey House are numerous and directly impact the quality of support they can give to Aboriginal women in need of a place to live. With only two staff members working at Abbey House it becomes a challenge to meaningfully support and assist the women of Abbey House while still performing the administrative duties and the daily activities that are necessary for Abbey House to run as an organization.

Evident both through talking with the staff and residents is that the staff go above and beyond their responsibilities and roles as staff members for the residents of Abbey House. Extra support includes staying at Abbey House over holidays in order for residents to have visitation rights with their children, extended lengths of stay so women have a home to bring their children into, and helping women physically move to different cities through use of their extended support systems. As mothers themselves the staff members at Abbey House have numerous responsibilities at home with their own families as well as at Abbey House. The residents of Abbey House note the sacrifice that the staff members of Abbey House are often more than willingly to do to help the residents gain extra chances with their families and to heal in any way

that they can. The small continued sacrifices that the staff of Abbey House do for the residents while necessary for Abbey House to operate at its continued level, are hard on the staff both physically and mentally. The small sacrifices add up and can be exhausting leading to burnout. What is needed at Abbey House is simply more of everything that stems from lack of funding as an effect of colonial violence. More funding, more qualified staff, more in house programs, more community transparency, more community support, and more mainstream recognition because Abbey House in both theory and practice work for the Aboriginal women it serves.

The Aboriginal women of Abbey House do not want to go to mainstream organizations and spoke of not feeling welcome or that their needs were not being addressed or even regarded as valid. In relation to the historical and current trauma faced by Aboriginal people and Aboriginal women even Abbey House is not enough. Abbey House is a start but Aboriginal women and communities want, need, and deserve more. The Aboriginal women that I spoke with wanted to be able to develop connections and be active members of society. However so many barriers exist that keep these women from meeting those goals that come down to the fact that the needs and voices of Aboriginal people are systematically ignored. The Aboriginal community through organizations such as Abbey House is reaching out to society, yet without any meaningful reach back from mainstream organizations and people expressing true care, compassion, and understanding then little in terms of intergenerational healing from colonial violence can be accomplished.

### **I. Limitations.**

This research had many limitations in respect to the size of the study and the logistical limitations surrounding this thesis. It would have been beneficial to be able to interview more

previous residents of Abbey House and employees from the NRNC that support Abbey House residents, however due to time constraints this was not able to happen. Another limitation of this research is that it does not look at the relationship between Aboriginal males and homelessness, the factors that contribute to Aboriginal male homelessness, or a comparison of Aboriginal male homelessness statistics to homelessness in general in the Niagara region.

## **II. Recommendations for Future Research.**

It would be beneficial for further research on Abbey House or Aboriginal organizations similar to Abbey House to provide a comparative analysis of Aboriginal homelessness and the factors of the homelessness at Abbey House such as partner violence and child removal to mainstream statistics. As this research was looking at Abbey House through the context of the women's own experiences I did not fully compare the statistics derived from the intake forms to national statistics or statistics on homelessness in the Niagara Region in general. Due to the lack of literature surrounding transitional housing for Aboriginal people, specifically detailing the needs of Aboriginal women it is hoped that this research despite its limitations can be used to create more understanding of the benefits surrounding Aboriginal specific services. The voices of Aboriginal women and their personal experiences are defining of this research with the hope that by framing the women as knowledge producers this study can be used by Aboriginal women, people, communities, and organizations for the benefit and growth of Aboriginal women, people, communities, and organizations.

## 6. CONCLUSION

I was truly impressed with Abbey House and the dedication of the staff at helping women get back on their feet and meaningfully address the underlying issues that brought the residents to Abbey House. I am often very skeptical of mainstream social services in that programs are often created merely to address the symptoms of trauma or abuse rather than looking at structural problems; in a sense individualizing additions, abuse, and trauma. Abbey House does not do this. Abbey House individualizes support in a sense by understanding that all women are different, have different characteristics, and different needs. However Abbey House addresses the personal needs of their residents through support that uncovers the structural and colonial violence that impacts the trauma women experience on a collective level. Abbey House does an excellent job at situating everyday experiences of trauma within larger social forces. Not all women who reach out to Abbey House understand the history of their family and their community as a result of intergenerational trauma and as one woman said, “if you don’t know the truth how can you accept it. History... the true history needs to be taught” (Abbey House Resident), which is necessary in both mainstream and Aboriginal communities.

Abbey House is highly beneficial for Aboriginal women. In order for Abbey House to continue to serve the Aboriginal community in a manner that is both beneficial and reflective of the current needs, it is imperative that Abbey House has the funding it needs to be not just sustainable but to grow within the community. More Aboriginal women need support than Abbey House has the capacity to offer. Abbey House needs to grow and develop in order to be reflexive of those needs. While homelessness and partner abuse are highly gendered traumas it is important to understand the colonial context that shapes the lives of Aboriginal people. Colonial

violence affects both men and women so it is hoped that the expansion of Abbey House could more meaningfully and thoroughly address the structural and systemic discrimination for a more inclusive healing of Aboriginal communities.

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## APPENDIX A

### Questions for Clients

1. What were the circumstances that first brought you to Abbey House?
2. Why did you choose Abbey House?
3. Would you describe your experience at Abbey House to me from when you first arrived until you left?
4. What did you like best? Least?
5. What services offered at Abbey House did you use?
6. What were the most relevant services for you at Abbey House?
7. Do you think having Aboriginal exclusive transitional housing is necessary or not?
8. How has Abbey House helped in your process of healing?
9. Why were the Aboriginal specific services helpful in this healing process?
10. Where do you think you would be now had you not stayed at Abbey House?

## APPENDIX B

## Questions for Staff

1. Can you tell me a bit about Abbey House and the services it offers?
2. Are any of the services mandatory? If so which ones?
3. Why is it necessary for these services to be mandatory?
4. What is your role at Abbey House?
5. What are some of the challenges you face in this role?
6. What are the challenges facing Abbey House in general?
7. What are the leading causes that bring women to Abbey House?
8. What is the purpose of providing Aboriginal specific housing for women?
9. How does Abbey house assist Aboriginal women?
10. What are the limitations surrounding Abbey House?
11. What services are necessary to continue to work well and sustain Abbey House?
12. What is the role of the Aboriginal community with respect to Abbey House?
13. What do clients benefit or enjoy most about Abbey House?
14. Do clients ever require or request a service that Abbey House does not have the capacity to offer? If so, what?
15. Do many of the residents who stay at Abbey House have children?
16. What have been the problems thus far in getting funding or larger community and government support for Abbey House?
17. How has Abbey House impacted your life, focusing both on good and bad changes or experiences?
18. What do you hope to see for Abbey House in the future?
19. Where does the funding for Abbey House come from?
20. How do the services offered at Abbey House incorporate Native values or culture?

21. How have the conditions specific to Aboriginal people (residential schools; sixties scoop which still continues; the over-incarceration of indigenous people) affect the women who use Abbey House?

## APPENDIX C



Brock  
 University  
 Research Ethics  
 Office Tel: 905-688-  
 5550 ext. 3035  
 Email: reb@brocku.ca

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## Social Science Research Ethics Board

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### Certificate of Ethics Clearance for Human Participant Research

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DATE: 12/20/2012  
 PRINCIPAL INVESTIGATOR: KUBIK, Wendee  
 Women's and Gender Studies  
 FILE: 12-110 - KUBIK  
 TYPE: Undergraduate                      STUDENT: Jen Elgie  
    SUPERVISOR: Wendee Kubik  
 TITLE: Program Evaluation of Abbey House Part ! - Interviews

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### **ETHICS CLEARANCE GRANTED**

Type of Clearance: NEW

Expiry Date: 12/31/2013

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The Brock University Social Sciences Research Ethics Board has reviewed the above named research proposal and considers the procedures, as described by the applicant, to conform to the University's ethical standards and the Tri-Council Policy Statement. Clearance granted from 12/20/2012 to 12/31/2013.

The Tri-Council Policy Statement requires that ongoing research be monitored by, at a minimum, an annual report. Should your project extend beyond the expiry date, you are required to submit a Renewal form before 12/31/2013. Continued clearance is contingent on timely submission of reports.

To comply with the Tri-Council Policy Statement, you must also submit a final report upon completion of your project. All report forms can be found on the Research Ethics web page at <http://www.brocku.ca/research/policies-and-forms/research-forms>.

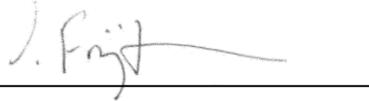
In addition, throughout your research, you must report promptly to the REB:

- a) Changes increasing the risk to the participant(s) and/or affecting significantly the conduct of

- the study;
- b) All adverse and/or unanticipated experiences or events that may have real or potential unfavourable implications for participants;
  - c) New information that may adversely affect the safety of the participants or the conduct of the study;
  - d) Any changes in your source of funding or new funding to a previously unfunded project.

We wish you success with your research.

Approved:



Jan Frijters, Chair  
Social Sciences Research Ethics Board

**Note:** Brock University is accountable for the research carried out in its own jurisdiction or under its auspices and may refuse certain research even though the REB has found it ethically acceptable.

If research participants are in the care of a health facility, at a school, or other institution or community organization, it is the responsibility of the Principal Investigator to ensure that the ethical guidelines and clearance of those facilities or institutions are obtained and filed with the REB prior to the initiation of research at that site.

## APPENDIX D

**Intake**

Applicant Name \_\_\_\_\_  
 Date \_\_\_\_\_  
 Date of Birth \_\_\_\_\_  
 Referred \_\_\_\_\_ by: \_\_\_\_\_ (Agency) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone \_\_\_\_\_

**Native Status**

Status      Non-Status      Metis      Bill C-31      Unknown

**Marital Status**

Single    Common Law      Married      Separated      Divorced      Widowed

**Children:**

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Sex F/M School Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Sex F/M School Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Sex F/M School Grade \_\_\_\_\_

(If necessary, list on the back of this sheet)

**Are there any children not in your care or who will not be residents?**


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**Where are you presently living?**

Shelter      House /Apartment      Temporarily with family/friends      Hotel /Motel      Other

**Do you consider yourself one of the following?**

Homeless                      At risk of homeless                      Are you facing eviction

Needing residential support to leave domestic violence (Abbey House is second stage housing after stay at Domestic Violence Shelter)

Are there any safety issues/concerns regarding current or past personal relationships?

Restraining orders      Peace Bonds      Custody orders                      CAS conditions

Other

If so please explain, received and expires:

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**Risk of Abuser                      Low      Moderate                      High**

Explain: \_\_\_\_\_

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Description of abuser (If necessary provide photo)

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**Make and Model of car** \_\_\_\_\_

**What other agencies/service providers are you currently involved with?**

Probation & Parole F.A.C.S                      Mental Health Services                      Counseling

Legal Services                      Public Health Services                      Employment Services

F.A.C.S. Addictions Services

Other \_\_\_\_\_

**Accommodation History:**

Did you ever stay in a shelter or live in a transition home/communal living before?

Yes  No

If yes, please complete the following section

Name of Establishment Month/Year Length of Stay

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

How long did you reside at this address? \_\_\_\_\_

Do you currently have a lease? Yes No

If yes is your lease yearly or monthly? \_\_\_\_\_

When does your lease expire? \_\_\_\_\_

What is the total cost of your current accommodations? \_\_\_\_\_

Describe the reasons or events for you currently needing residential assistance/support:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you feel needs to happen or change for you to overcome your current situation?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you like to learn more about any of the following programs offered?

- |                    |                 |             |           |
|--------------------|-----------------|-------------|-----------|
| Financial Skills   | Social Skills   | Life Skills | Education |
| Upgrade Employment | Physical health |             | Cultural  |

awareness

Other

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Explain the life changes you would like to happen during your stay in this transitional home.

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What makes up your support system, or can you express your needs? ( i.e. childcare, transportation, emotional support)

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**Education Background/Goals:**

[Diploma] \_\_\_\_\_ GED \_\_\_\_\_  
College

[Diploma] \_\_\_\_\_ University

Are you a survivor of residential school?  Yes  No

Are you an intergenerational survivor of residential school?  Yes  No

Were you ever in foster care?  Yes  No

Are you adopted?  Yes  No

Have you ever been sexually abused in childhood?  Yes  No

What was the relationship of abuser to you? \_\_\_\_\_

Have you ever been physically or emotionally abused in childhood?  Yes

No What was the relationship of abuser to you? \_\_\_\_\_

Do you currently attend school?  Yes  No

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Contact person at school:

\_\_\_\_\_

Telephone# \_\_\_\_\_

Do you attend:  Part-Time  Full-Time

Last Grade completed \_\_\_\_\_

## **EMPLOYMENT:**

Position: \_\_\_\_\_ #Hours worked/week: \_\_\_\_\_

Describe your job interests or career goals:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **Health**

Doctor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Health Card # \_\_\_\_\_

**Personal Health Conditions:** (Check if

yes) Allergies: Food Environment

Medicine

Identify: \_\_\_\_\_

Diabetes Type 1 Type II

Thyroid Hyperthyroidism Hypothyroidism

Heart Condition: Identify \_\_\_\_\_

Blood Pressure (High) Hypertension Low

Arthritis: Osteoarthritis Rheumatoid

Fibromyalgia Respiratory problems \_\_\_\_\_

Epilepsy \_\_\_\_\_

Cancer \_\_\_\_\_

Communicable diseases: Identify \_\_\_\_\_ Physical

Please explain: \_\_\_\_\_ Date: \_\_\_\_\_

Have you ever had an eating disorder?  Yes  No

Please describe: \_\_\_\_\_

Have you ever practiced self-harm?  Yes  No

Date of last self-harm incident? \_\_\_\_\_

Substance use: Chemical Alcohol

Identify: \_\_\_\_\_

How many days have you been clean? \_\_\_\_\_

What was your age of first use? \_\_\_\_\_

Are you currently pregnant? \_\_\_\_\_ If yes, how many weeks? \_\_\_\_\_

Other (Please specify) \_\_\_\_\_

**Are you and your children's immunization up to date?**  Yes  No

**Please list any medications you have been prescribed or are taking (Dates):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Children/Youth Health (complete for each child staying in transitional housing)**

Allergies: Food Environment Medicine

Identify: \_\_\_\_\_

Diabetes Type 1 Type II

Thyroid Hyperthyroidism Hypothyroidism

Heart Condition: Identify \_\_\_\_\_

Blood Pressure (High) Hypertension Low

Arthritis: Osteoarthritis Rheumatoid  
Fibromyalgia Respiratory problems \_\_\_\_\_

Epilepsy \_\_\_\_\_

Cancer \_\_\_\_\_

Communicable diseases: Identify \_\_\_\_\_

Physical Disabilities: Identify \_\_\_\_\_

Mental Illness: Identify \_\_\_\_\_

Have you ever tried to commit suicide?  Yes  No

Please explain: \_\_\_\_\_ Date: \_\_\_\_\_

Have you ever had an eating disorder?  Yes  No

Please describe: \_\_\_\_\_

Have you ever practiced self-harm?  Yes  No

Date of last self-harm incident? \_\_\_\_\_

Substance use: Chemical Alcohol

Identify: \_\_\_\_\_ How many days have you been clean? \_\_\_\_\_

What was your age of first use? \_\_\_\_\_ Are you currently pregnant?

\_\_\_\_\_ If yes, how many weeks? \_\_\_\_\_ Other (Please specify) \_\_\_\_\_

## **Financial Information**

### **Income Source**

From where does your current income originate?

Employment                  Student Loans                  Ontario Works                  Student  
Grants ODSP                  Employment Insurance                  Other

Indicate when the benefits will stop \_\_\_\_\_

Have you ever filed for Bankruptcy?  Yes

No If yes, when, where, and how much?

## **List all debts**

<u>Account</u>	<u>Amount Owed</u>	<u>Monthly Payments</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## **Do you owe money on utilities?**

Gas                  \$ \_\_\_\_\_  
Hydro                \$ \_\_\_\_\_  
Water                \$ \_\_\_\_\_  
Oil/Propane        \$ \_\_\_\_\_  
Telephone           \$ \_\_\_\_\_  
Land Line            \$ \_\_\_\_\_  
Cell                  \$ \_\_\_\_\_

**Have you been served with an eviction notice?**  Yes  No

The applicant certifies that all information in the Income? Expense Information

Form and all information furnished in support of this statement are true and complete to the best of the applicant's knowledge and belief.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Other information that you feel would be helpful to staff in designing a program that will effectively meet your needs?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Recommendations:**

Eligible

Not eligible

Declined Referral

Information

Resource/Services

Housing applications: \_\_\_\_\_

ONH Priority Status (Homeless)

Priority status (Domestic

Violence) Rent assessment to be completed

Releases of information required Probation and parole (in lieu of formal C.P.I.C.)

Other \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Additional Information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. I certify that all the information supplied is true and correct to the best of my knowledge.

2. I hereby agree to provide the Abbey House with signed releases of information deemed necessary to verify the information supplied in this application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Directors Signature: \_\_\_\_\_

## APPENDIX E

# Letter of Invitation For Clients

November 18, 2012

**Title of Study: Program Evaluation of Abbey House**

**Student Principal Investigator: Jennifer Elgie, Student, Centre for Women's and Gender Studies, Brock University**

**Faculty Supervisor: Wendee Kubik, Associate Professor, Centre for Women's and Gender Studies, Brock University**

I, Jennifer Elgie, student, from the Centre of Women's and Gender Studies, Brock University, invite you to participate in a research project entitled Program Evaluation of Abbey House.

The purpose of this research project is to evaluate the programs and services offered at Abbey House in conjunction with the Niagara Regional Native Center. Should you choose to participate, you will be asked to participate in an interview where I, Jennifer Elgie, will ask you questions about your experience at Abbey House.

The expected duration of the interview will be 30-45 minutes. The interview will be audio recorded.

This research should benefit the programs and services offered at Abbey House in order to better assist the needs of the Aboriginal community.

This research will be done collaboratively with Abbey House and the Niagara Regional Native Center.

If you have any pertinent questions about your rights as a research participant, please contact the Brock University Research Ethics Officer (905 688-5550 ext 3035, [reb@brocku.ca](mailto:reb@brocku.ca))

If you would like to participate, please contact me (see below for contact information).

Thank you,

Jennifer Elgie

Jennifer Elgie  
Student  
289-969-2904  
[je09fk@brocku.ca](mailto:je09fk@brocku.ca)

Wendee Kubik  
Associate Professor  
906-688-5550 ext. 5997  
[wkubik@brocku.ca](mailto:wkubik@brocku.ca)

This study has been reviewed and received ethics clearance through Brock University's Research Ethics Board **12-110-KUBIK**.