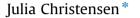
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Indigenous housing and health in the Canadian North: Revisiting cultural safety



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ABSTRACT

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

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1. Introduction

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

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

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http://dx.doi.org/10.1016/j.healthplace.2016.05.003 1353-8292/© 2016 Elsevier Ltd. All rights reserved. territorial population is Indigenous, in Yellowknife, Indigenous people account for only 22.2% of the population, and in Inuvik, 63.3% (Statistics Canada, 2011). Meanwhile, Indigenous peoples are overrepresented among the visibly homeless in all major Canadian cities, and comprise the majority homeless population in over half (Belanger et al., 2012). However, visible homelessness must also be situated within a wider, even more pervasive spectrum of chronic housing need that includes the more'hidden' experiences of chronic housing need, overcrowding, insecure housing tenure and staying temporarily with family or friends due to a lack of permanent shelter. Such housing insecurity continues to characterize the experiences of many Indigenous communities across Canada following the introduction of state-managed housing programs and rental schemes (Lauster and Tester, 2010; Walker, 2008).

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





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

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

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

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

2. Indigenous home, homelessness and the social

determinants of Indigenous health

Colonialism has, in myriad cross-generational ways, disrupted Indigenous homemaking practices by displacing Indigenous peoples from their ancestral lands, separating children from their families, and implementing exclusionary socio-spatial structures, all of which have undermined social determinants of Indigenous health, ranging from proximal determinants like housing and poverty, to the distal determinants of cultural continuity, self-determination, and an Indigenous sense of home (Czyzewski, 2011; Greenwood and de Leeuw, 2012; Reading and Wein, 2009).

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

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

Building upon this work (Christensen, 2013), I have argued that Indigenous homelessness across settler colonial contexts is a multi-scalar phenomenon, and occurs simultaneously a collective experience of 'disbelonging' as a result of the settler colonial project, and a very individual, intimate and embodied experience of literally being without secure shelter, and without a place to be. Download English Version:

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