



**Aboriginal Housing Management Association**  
*Over 25 years of Indigenous housing expertise.*



# **Exploring Inclusive Housing For Indigenous Peoples Living With Diverse Abilities: An Environmental Scan**

2023

# EXECUTIVE SUMMARY



Aboriginal Housing Management Association (AHMA), in collaboration with Community Living British Columbia (CLBC), is dedicated to improving Indigenous housing and supporting Indigenous peoples with diverse abilities in British Columbia (BC). This environmental scan was undertaken to explore Indigenous housing and how it intersects and supports Indigenous peoples with diverse abilities in BC. Diverse ability is recognized as an individual who has been diagnosed with an intellectual or developmental disability which may include Autism Spectrum Disorder and Fetal Alcohol Spectrum Disorder (FASD).

The scan consisted of three phases:

1. a review of academic and grey literature;
2. an AHMA provider survey; and
3. key informant interviews with AHMA providers, Indigenous peoples with a diverse ability who have lived experience in accessing supports or services from CLBC and/or their family members and key stakeholder groups.

An extensive review of academic and grey literature was conducted, examining available resources on inclusive and culturally safe housing for Indigenous peoples with diverse abilities, including unpublished reports, articles, and information from AHMA provider websites.

A survey was distributed to AHMA providers, aiming to better understand whether these providers were offering housing or services to Indigenous individuals with diverse abilities. It also assessed their awareness of, and role in facilitating access to CLBC supports and services.

Key informant interviews were conducted with AHMA providers, Indigenous individuals with diverse abilities who have first-hand experience accessing CLBC services, their family members, and key stakeholder groups. These interviews explored

the accessibility of housing supports and services for Indigenous peoples with diverse abilities, identified challenges and gaps, and generated ideas for envisioning a culturally safe housing model.

The scan revealed that Indigenous peoples with diverse abilities face multiple barriers in accessing housing that aligns with their needs. Currently, there is a significant gap in research and literature examining the experiences of Indigenous individuals with diverse abilities both on and off-reserve in Canada. Several overarching themes emerged that highlight the gaps, barriers, and challenges to inclusive housing for Indigenous peoples with diverse abilities in BC including CLBC eligibility, limited access to safe and affordable housing, lack of awareness of CLBC supports and services, provider funding and referral process, racism and stereotyping and system gaps.

Research conducted as part of this report also defines culturally supportive inclusive housing and presented a model and framework for enhancing culturally supportive inclusive housing for Indigenous peoples with diverse abilities. This work also included a framework for cultural safety for non-Indigenous service providers. These findings will be published separately.

Indigenous peoples with diverse abilities face unique challenges in seeking housing that is culturally safe and respects their right to self-determine their own housing journey. There is a critical need to advance collaborative partnerships across various provincial system-level partners, including child welfare, education, health, and housing, to better support Indigenous peoples with diverse abilities, particularly for Indigenous youth and those with complex care needs. Recommendations to further advance next steps towards better supporting Indigenous peoples with diverse abilities need to be actioned to address the underserved needs of this population.



## KEY FINDINGS

First Nations, Métis and Inuit peoples in Canada experience higher levels of disability compared to non-Indigenous Canadians (Hahnmann et al., 2019). In 2017, First Nations peoples over the age of 15 living off-reserve reported higher rates of learning (7.2%), memory (5.4%), and developmental (2.2%) disabilities compared to non-Indigenous people (Hahnmann et al., 2019). There remains little research to date which has examined Indigenous peoples experiences of disability, including their experience in accessing housing support services (Hahnmann et al., 2019). Furthermore, despite the need to transform housing services to be more culturally safe, including housing for Indigenous peoples living with diverse abilities<sup>1</sup>, there remains little research to date which has examined this issue within a Canadian context, and even less done in full partnership with, or led by, Indigenous people (Bruno, et al., 2023).

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<sup>1</sup> There are many different opinions and preferences on language and how people self-identify. We are following CLBC's terminology of "diverse abilities" through out this document. Diverse ability is recognized as individuals with an intellectual or developmental disability which may include Autism Spectrum Disorder and Fetal Alcohol Spectrum Disorder (FASD) (Community Living British Columbia, 2018; Ministry of Social Development and Poverty Reduction et al., 2022).

## Limited Research on Indigenous Peoples with Diverse Abilities & Housing

Few research studies address the intersection of Indigenous people with diverse abilities and housing needs in Canada (Hahnmann et al., 2019; Dsouza, 2020), and statistics are limited and inadequately captured in official censuses or government surveys (Buvinic & Mazza, 2005; Meekosha, 2011; Mikkelsen, 2014; Rivas-Velarde, 2015). Scholars have highlighted that literature focused on Indigenous housing often does not address the needs of people with diverse abilities, while the literature focused on people with diverse abilities often does not fully engage with historical oppression of Indigenous people (Barker & Murray, 2010; Bevan-Brown, 2013; Connell, 2011; Hickey, 2008; Hollinsworth, 2013; Meekosha, 2011; Meekosha, 2008; Rivas Velarde, 2014, 2015). The lack of data and literature at these intersections leads to Indigenous people being subsumed into mainstream discourses of people with disabilities (Dsouza, 2020; Gerlach, Matthiesen, Moola, 2022; Hahnmann, 2019; Stienstra, 2018).

As a result, we know little about the lived and living experience of Indigenous people with diverse abilities in Canada accessing housing and services. Within the Canadian context, the overall lack of accessible, safe and suitable housing for Indigenous people is inextricably linked to the ongoing dispossession of land, intergenerational trauma, systemic racism, high rates of child apprehension, and persistent funding shortfalls for Indigenous initiatives (Anderson & Collins, 2014; Bingham et al., 2019; Firestone, et al., 2021; McCaskill et al., 2011; Patrick, 2014; Thistle, 2017; Truth and Reconciliation Commission of Canada, 2015).

Indigenous scholar Jesse Thistle (2017) emphasizes that “racism and discrimination aimed at Indigenous peoples are firmly entrenched in Canadian society, producing impenetrable systemic and societal barriers, such as a lack of affordable and appropriate housing, insufficient and culturally inappropriate health and education services, [and] irrelevant and inadequate employment opportunities” (p. 7).

First Nations, Metis and Inuit people in British Columbia are overrepresented in homeless populations across the province (Patrick, 2014; The Homelessness Services Association of BC, 2021), and, as recent research shows, face increased rates of eviction rates, and eviction into homelessness (Xuereb and Jones, 2023; First United, 2023).

## Indigenous Perceptions of Disability

Indigenous peoples' conceptions of disability and cultural beliefs around human uniqueness are largely absent from initiatives around housing for people with diverse abilities. Perceptions of what is considered a “disability” vary widely across Indigenous communities but tend to differ from the “medical worldview” (Hollinsworth, 2013; King, Brough and Knox, 2014; Ineese-Nash, 2020, Rivas-Velarde, 2018; Stienstra, 2018). Numerous scholars have highlighted that service provision for people with diverse abilities regularly defaults to the medical worldview, which is characterised as having a “label and fix focus” and centered on the diagnostic criteria in the DSM-V, developed by the American Psychiatric Association (2013) (Lindblom 2014, 2016; Ouellette-Kuntz et al., 2006; Shochet et al., 2020). Concepts of disability and impairment were not and are not part of Indigenous languages (Gilroy and Donnelly, 2016; Stienstra, Baikie, and Manning, 2018; Stienstra, 2018) and it is well documented that many Indigenous communities find the term contradictory to their beliefs around impairments (Ariotti, 1999; Connell, 2007; Durst, et al., 2006; Fitzgerald, 1997; Gotto, 2009; King, 2010; Rivas Velarde, 2014). Living on the land for generations has enabled Indigenous understandings of wellness that are more expansive than the Western concepts of health, illness, and what is considered an impairment (Radu, 2018). As Quinlan (2018) highlights: “Indigenous frameworks of wellbeing are holistic and dynamic, including physical, emotional, intellectual, and spiritual dimensions that intersect and fluctuate throughout a person’s lifetime” (p. 5). For example, a Cowessess First Nation community report (2021) outlined Nehiyaw (Plains Cree) cultural understanding and worldview of autism. The report explored several culturally informed definitions of autism:

- ka-kamawaci-iyinisit (given a unique quiet spiritual intelligence).
- pihtos-mânitonihk-iyinisit (given a different way of thinking in one's own spiritual thinking).
- ê-mihkosit pihtos mânitonicihkan (given a different way of spiritual thinking).
- ê-mihkosit pihtos ê-si-waskawiht (given the gift of moving a different way or being [characteristic/behavior])

**“People with diverse abilities have faced a history of discrimination when it comes to access to housing and inclusion in their communities. Limited housing options that accommodate people with diverse abilities, unstable housing tenures, combined with discriminatory housing practices in competitive rental markets all work to prevent people with diverse abilities from having access to appropriate housing.”**

Indigenous approaches to disabilities are necessarily varied across cultures and worldviews, with some cultures celebrating diverse abilities as part of the uniqueness and diversity of humanity (Ariotti, 1999; Fitzgerald, 1997), including people with disabilities as a valued community member recognized for their contribution rather than their impairments (Gotto, 2009), and/or viewing disability as a gift from the Creator or an affliction from an ancestor or spiritual powers (United Nations, 2013, as cited in Stienstra, 2018). However, cultural variance in the perception of “disability” are rarely considered within diagnostic processes and service provision. As a result, First Nations values and relationships, along with cultural and social practices, are often not reflected in disability services, leading to further disempowerment and marginalisation (Puzska et al., 2022).

The lack of understanding and acknowledgement of Indigenous cultural and social practices can manifest in numerous ways. For example, scholars have long documented that many services are inaccessible for Indigenous persons with disabilities who often need to leave their communities and move to bigger towns or cities where they can access support services (Durst, 2006; Stienstra, 2015). This relocation or displacement often deprives them of the support of their families, cultures, and communities (Stienstra, 2018). Additionally, numerous scholars also cite discriminatory behavior or stereotyping from non-Indigenous service providers, leading to sub-par care for Indigenous people (AFN, 2017; Gerlach, 2022; Quinlan, 2018). Scholarship also demonstrates the ways that independent living movements can conflict with Indigenous values of collective responsibility and practices of interdependency (Puzska, et al., 2022a; Varvarezou, 2020).

## Challenges and Barriers to Housing & Services

People with diverse abilities have faced a history of discrimination when it comes to access to housing and inclusion in their communities. The barriers that people with diverse abilities face in accessing affordable and adequate housing are well documented. Limited housing options that accommodate people with diverse abilities, unstable housing tenures, combined with discriminatory housing practices in competitive rental markets all work to prevent people with diverse abilities from having access to appropriate housing (ARCH Disability, 2017; Dsouza, 2020). Public policy and programs that unnecessarily segregate people with diverse abilities, along with patchwork funding systems, also pose major barriers (Jorwic, 2021).

Particularly for renters with diverse abilities, limited options exist in the competitive rental market and affordability can be a significant challenge (Breslow, 2019).

Recent research highlights two housing crisis transitional phases that adults with diverse abilities face. The first is the transition into adulthood (age 18-30 years), where many people with diverse abilities may face a gap in housing and support services (hal-lab, 2021). Young adults often need to transition from school-based supports to an underfunded and uncoordinated adult service system (hal-lab, 2021). The lack of appropriate housing options further exacerbates this challenge. Social housing waitlists are years long throughout Canada, with the majority of people waiting two years or more (Statistics Canada, 2022b).

The second important transitional phase is the transition into seniorhood (50-55 years) when people need to sustain their housing once their primary caregivers are no longer able to provide care, pass away, or when a broader support network is lacking. It is common for people with diverse abilities to live at home well into adulthood with their family functioning as their fundamental source of support (Weiss, Lunskey, and Lowe, 2020).

Research also demonstrates that transitions between services at these key moments are poorly planned, that the support during waiting periods is fragmented, and that there is a lack of coherence between service providers and interventions phases, all of which contribute to poor quality of life for people with diverse abilities and their caregivers (Boshvoff et al., 2019; Brewer, 2018; Rivard, et al., 2023; Smith-Young et al., 2020). Variable services pose a challenge as well. Research shows that even with people who manage fairly well independently, ongoing supports are needed as new stressors emerge throughout the life span. Difficulties can be managed and minimized with ongoing supports, but if services are transient or time limited, people can be left with few supports in times of crisis (Weiss, Lunskey and Lowe, 2020).

Further complicating access to housing, services and support are eligibility requirements for government funded services. These eligibility requirements have persistent barriers, particularly for individuals with Autism (see Autism Alliance of Canada, 2019; hal-lab, 2021; Sinneave Family Foundation brief on Supported Independent Living, 2019). Receiving an accurate diagnosis is a necessity for being eligible for services. Research highlights the complications of this journey for people with diverse abilities as youth and as adults. For youth, the importance of high-quality early intervention services for the well-being of children with diverse abilities and their families' or caregivers' has been extensively documented in the scientific literature.

Surveys of families' experiences navigating the process describe a long, complex, and difficult journey (Boshoff et al., 2019; Brewer, 2018; DePape & Lindsay, 2015; Rivard et al., 2019; Ooi et al., 2016; Smith-Young et al., 2020). As Rivard et al. (2023) highlight, barriers to accessing assessment and intervention services for children with diverse abilities include both organizational- and system-level factors such as waiting lists, information scarcity (e.g., about available services), distance and lack of transportation, and understaffing (see also Martinez et al., 2018).

For adults, a recent survey found affordability and a lengthy wait for assessments to be major barriers. With assessments often costing thousands of dollars and no public funding to assist with this cost, many survey respondents could not afford to get assessed. There is also a shortage of specialists who can offer assessments, and survey respondents reported that they would have to wait months or years to see a specialist (AutismBC, 2022; Boyle, 2023).

There is unequivocal support in the literature on the importance of individualized programs and services that support the unique strengths, preferences, and needs of each individual and provide personalized accommodations and services for them and their caretakers (see Lai and Weiss, 2017; Puszka et al., 2022b; Weiss, Lunsky and Lowe, 2020). The availability of support services is generally limited, however, making it challenging to find any housing that meets peoples' basic support needs (Resnik and Galloway, 2020). Other challenges highlighted in literature and reports are the need for: community integration in housing programs and design; health services coordination; behavioral and mental health support; respite for caregivers; career support; social opportunities; support at home; and family support. (see Resnik and Galloway, 2020; Weiss, Lunsky and Lowe, 2020; Puszka, 2022b; Rivard et al., 2023; Standing Committee on Indigenous and Northern Affairs, 2018).

**One participant from BC noted having to hitchhike to the city to have regular testing performed and she never feels safe, but there is no public or affordable transportation for her to use and no health services in her community.**

## **Systemic Barriers for Indigenous People with Diverse Abilities**

While many of these barriers exist for anyone with diverse abilities, they are particularly onerous for Indigenous people in the context of colonization, residential schools, and child apprehension. The institutions people need to interact with have historically caused, and presently cause, harm to Indigenous communities (Durst, 2006). Accessing services can be viewed as high-risk for Indigenous families due to the long history of child apprehension in Canada (Blackstock, 2011). In many cases disability-related services are organized in partnership with child protection agencies that continue to apprehend Indigenous children at an alarming rate (Sinha, et al., 2011). A report for the Assembly of First Nations also highlights diagnostic processes and a lack of cultural understanding as another avenue for the separation of Indigenous families (Sinha, et al., 2011). Services and diagnostic processes are necessarily viewed with suspicion by many Indigenous families for this reason.

Lack of culturally informed services and cultural understandings of diverse abilities (Antony et al., 2022; Lindblom, 2017; Shochet et al., 2020; Thompson, 2012), and barriers to diagnosis, early diagnosis, as well as misdiagnosis are highlighted in scholarship and reports (Burstyn et al., 2010; Canadian Academy of Health Sciences, 2022; Canadian Autism Partnership Project, 2017; Inman, 2019; Lindblom, 2014; Ouellette-Kuntz et al., 2006, as cited in Bruno, et al., 2023). Multiple research projects and reports describe the experience of Indigenous individuals navigating myriad authorities and organizations when trying to access care, resulting in delays and the feelings of hopelessness, frustration, and despair (Demas, 1993; Durst 2006; Ineese-Nash, et al., 2017; Ineese-Nash, 2020). Other research documents that when support services are accessed, there is often immense labour by the individuals and families to maintain multiple relationships with service providers and to coordinate treatment schedules (Ineese-Nash, 2020). This is further complicated if people live in rural or isolated areas, often requiring transportation to an urban center to access services.

Scholars have long documented that many services are inaccessible for Indigenous persons with disabilities who often need to leave their communities and move to bigger towns or cities where they can access support services (Durst, 2006; Stienstra, 2018). Engagement sessions with Indigenous women and gender-diverse people with varying abilities and disabilities and their caretakers noted particular mobility and accessibility barriers for Indigenous women accessing basic services (Quinlan, 2018). Costs of travel are significantly higher for people with disabilities in remote and isolated communities and can lead to dangerous alternatives.

For example, one participant from British Columbia noted having to hitchhike to the city to have regular testing performed and she never feels safe, but there is no public or affordable transportation for her to use and no health services in her community. Participants suggested looking at policy and program implementation with an intersectional, gender-based lens to find ways to meet the needs of Indigenous women with diverse abilities. A main suggestion was appointment systems and easier access to services for remote and isolated communities. This would help to prevent the need to choose between relocating or the long and often unsafe commute individuals and families need to take to access services in urban centers (Quinlan, 2018).

## Jurisdictional Barriers

In terms of housing, Indigenous people with diverse abilities are at the intersection of international rights charters, federal and provincial legislation. Of particular importance are the complications in accessing essential health and social services that arise from the patchwork of Federal and Provincial responsibilities. Provincial and Federal responsibilities differ in areas of service provision in health, social services, and education for First Nations persons with disabilities. First Nation reservations are under the Indian Act and are considered federal jurisdiction with the federal government responsible for matters relating to First Nations people living on-reserve.

Health and social services, including disability services, are a provincial responsibility. Both levels of government often pass the obligation on to each other, creating barriers in service access and navigation challenges, and often leaving reservations without any services (Antony, et al., 2022; Bruno, et al., 2023; Lindblom, 2017).

Housing provision is also complex. The federal government delegated legal authority over housing to First Nations under Section 73(1)(m) of the Indian Act. Many First Nations have entered into agreements with Canada under the First Nations Land Management Act to create land codes setting out a band's authority over housing (Olsen, 2016). A report for Inclusion BC focused on inclusive housing for Indigenous people with developmental disabilities connects the experience in Canada to the "jurisdictional quagmire" created by the Indian Act (Dsouza, 2020). As they describe: "The lack of clarity around what happens if someone moves off-reserve sets up jurisdictional disputes between provincial and federal governments over providing care for Indigenous people with disabilities" (Dsouza, 2020, p. 9; see also Demas, 1993; Shackel, 2008; York University, 2014).



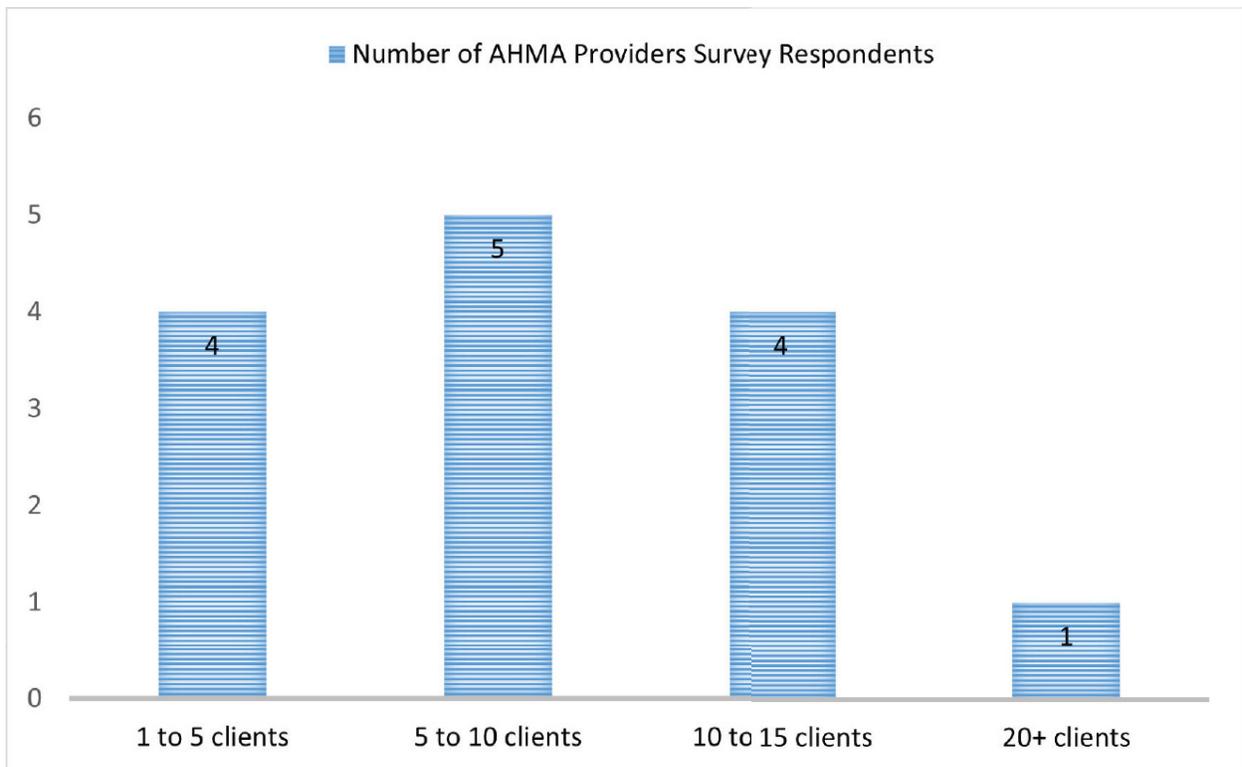
# AHMA PROVIDER SURVEY RESULTS

A survey was conducted to better understand if AHMA providers were providing housing or services to Indigenous peoples living with diverse abilities and if they were aware of or facilitate access to CLBC supports or services. The survey included 20 participants from 20 organizations who were AHMA members. A majority of the organizations primarily worked with Indigenous populations including families, elders, seniors and youth while a few worked specifically with homeless populations and women and children fleeing violence.

AHMA Provider Housing for Indigenous Peoples with Diverse Abilities: Among the respondents to the online AHMA provider survey, 70% (n=14) had reported that they currently provide housing to Indigenous peoples with diverse abilities. Among the providers who reported they provided housing to Indigenous peoples with diverse abilities, 28.5% (n=4) housed 1 to 5 individuals, 36% (n=5) housed 5 to 10 individuals, 28.5% (n=4) housed 10 to 15 individuals, and 7% (n=1) housed 20 or more individuals with diverse abilities.

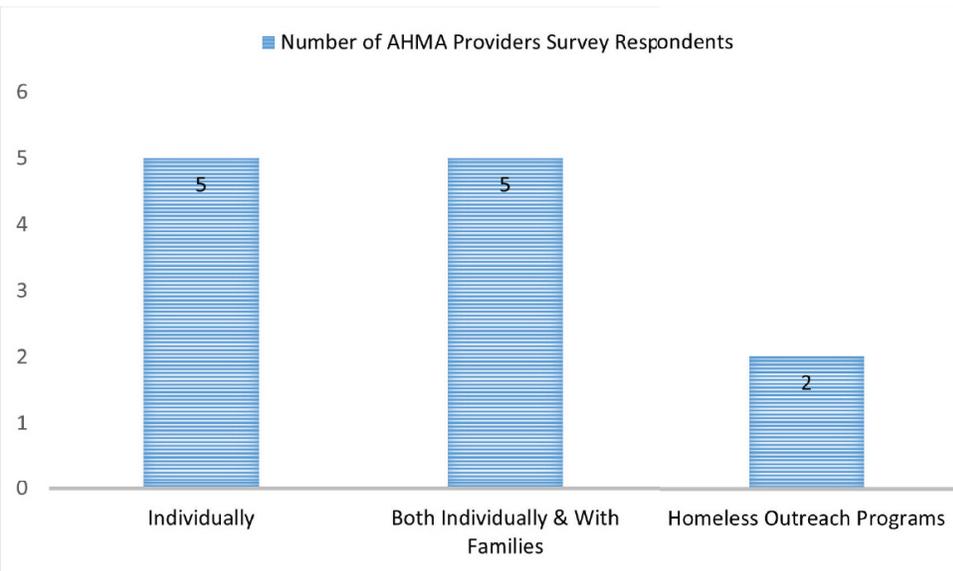
**AHMA provider survey, 70% (n=14) had reported that they currently provide housing to Indigenous peoples with diverse abilities.**

## Number of Indigenous Clients With Diverse Abilities AHMA Provider Survey Respondents Are Providing Housing To:



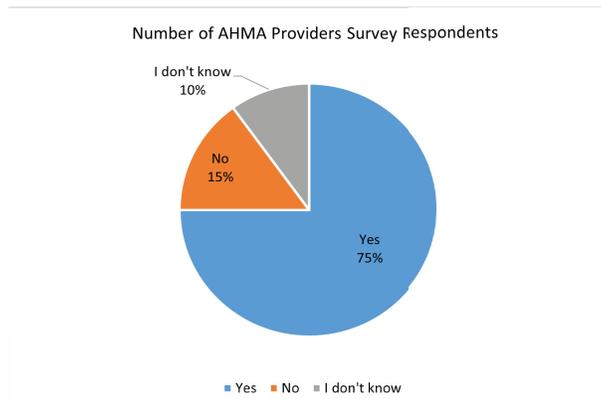
**AHMA providers who provided housing to Indigenous peoples with diverse abilities reported they are housed in individually (n=5), both individually and with families (n=5), and through homeless outreach programs (n=2).**

## How Indigenous Clients with Diverse Abilities Are Being Housed By AHMA Provider Survey Respondents:



**Awareness of CLBC Supports:** Among the respondents to the online AHMA provider survey, 75% (n=15) of providers were aware or familiar with supports available to Indigenous peoples with diverse abilities from CLBC. Furthermore, 60% (n=12) of respondents currently or previously assisted clients in accessing CLBC supports.

## AHMA Provider Survey Respondents Familiarity with CLBC:



## Ideas for Improving Access to CLBC Supports

- Foster more connections between CLBC and AHMA provider organizations to establish partnerships and support networks for CLBC clients.
- Collaborate with AHMA housing organizations to house CLBC clients.
- Share more information on the referral process to ensure their clients can access CLBC supports and services.
- Improve communication with CLBC client family contacts to ensure they are provided with regular updates and information about their family members' care and services.
- Extend financial support to all CLBC clients, not just those with community inclusion hours.
- Improve the availability of assessments and financial support for individuals over the age of 19.
- Increase the availability of liaison positions within organizations to provide support for CLBC clients, reducing the burden on existing administrative budgets.
- Explore partnerships for complex needs programs and housing for Indigenous peoples, expanding accessibility and services.

# GAPS, BARRIERS, AND CHALLENGES TO INCLUSIVE HOUSING FOR INDIGENOUS PEOPLES WITH DIVERSE ABILITIES IN BC

Based on key informant interviews conducted as part of the environmental scan, several overarching themes emerged that highlight the gaps, barriers, and challenges to inclusive housing experienced by Indigenous peoples with diverse abilities in BC. As outlined in Table 3.4 below, these themes include CLBC eligibility, limited access to safe and affordable housing, lack of awareness of CLBC supports and services, provider funding and referral process, racism and stereotyping, and system gaps.

**Themes and Subthemes for Gaps, Barriers, and Challenges to Inclusive Housing for Indigenous Peoples with Diverse Abilities**

Theme	Sub-Theme
CLBC eligibility	<ul style="list-style-type: none"> <li>• Requirement to be diagnosed before 18</li> <li>• Waitlists &amp; costs for diagnosis</li> <li>• Assessments traumatic &amp; culturally unsafe</li> <li>• Paperwork challenging to navigate</li> </ul>
Limited access to safe and affordable housing	<ul style="list-style-type: none"> <li>• Affordability</li> <li>• Limited housing options</li> <li>• Long waitlists</li> </ul>
Lack of awareness of CLBC supports and services	
Provider funding & referral process	<ul style="list-style-type: none"> <li>• Patchwork funding - Lack of sustainable funding</li> <li>• Referral process</li> </ul>
Racism & stereotyping	<ul style="list-style-type: none"> <li>• Reluctance to access services and supports</li> </ul>
System gaps	<ul style="list-style-type: none"> <li>• System too challenging to navigate</li> <li>• Jurisdictional mandate gaps</li> <li>• Youth aging out of the child welfare system or youth-specific services</li> <li>• Lack of quality data for decision-making</li> <li>• Inequity in BC Housing Registry</li> </ul>

## Theme 1: CLBC Eligibility

The criteria and requirements to become eligible for CLBC supports and services was identified as barrier experienced by Indigenous peoples with diverse abilities.

### *Requirement to be diagnosed before the age of 18*

The requirement to have been diagnosed with an intellectual disability prior to the age of 18 to be eligible to access CLBC supports and services, and having all processes completed before 19, was identified as a major barrier to supporting Indigenous peoples with diverse abilities. These requirements were seen as a barrier particularly for Indigenous youth in the child welfare system who were reliant on MCFD to be responsible for getting assessment completed. The importance of having youth assessed in a timely manner to ensure they did not miss out on CLBC supports and services if eligible was expressed as pressing:

“We work really hard to get assessments done in a timely matter and then at age 15 or 16 to update those assessments and start the CLBC eligibility process... and making sure that we’re on top of those timelines...so we don’t miss youth that might be eligible. We don’t want them to age out without knowing if they are CLBC eligible or not. When they’re not eligible for CLBC supports though, that is incredibly frustrating because we know they need the help and once they turn 19 our hands are tied to provide further supports.” (P10)

“So by the time that child is 14, mom and dad you better be on your boots and make sure that you’re working through MCFD, with your social worker, and getting prepared. By 16 years of age, you need to be already bridging those aspects with CLBC to get everything done on board, on time, with the paperwork you need. The paperwork is incredibly important because sometimes that takes one or two years.” (P2)

The timelines to get assessments and diagnosis were seen as challenging as some participants shared how they encountered youth who were not assessed at the ages recommended and risked not getting everything completed before the age of 19.

Getting youth diagnosed before they age out of care was viewed as critical as once they become an adult, it is hard to ensure they would receive the proper support need for the rest of their life. Delays in getting a diagnosis before turning 19 was seen as a major risk factor which can result in missing out on CLBC services due to the age limitations in the eligibility criteria. Regarding the CLBC eligibility criteria, one participant shared:

**“I think it’s very narrow...there’s a big gap between the ones who are not deemed eligible that still have high needs, that don’t meet the requirements to be eligible... it’s way too narrow it needs to be expanded” (P10).**

## *Waitlists and costs for assessments*

Long waitlists and costs for getting an assessment were also identified as significant challenges in meeting the CLBC eligibility criteria. Many participants reported delays in getting assessed due to the long waitlists:

“...the wait lists are ridiculous. We have one youth that we’ve got on absolutely every list and every private clinic that we can to have diagnosed because we know there’s absolutely no way he’s not CLBC.” (P3) “You have to be very vigorous in getting the diagnosis, so once the school raises it then it’s up to you. You have to go to your family doctor and then you wait for a pediatrician and then you’ve got to wait at the children’s hospital. I’ve heard that the wait is 4 years. So, that’s actually another point is, getting our people diagnosed... I mean that’s so sad that, the wait time is taking that long.” (P2)

**In addition to the long waitlists, participants noted that there are significant costs associated with obtaining a diagnosis. These costs for assessments may not always be covered by insurance and are not currently covered by the First Nations Health Authority Health Benefits program. The financial burden creates a barrier to accessing the necessary assessments for CLBC eligibility.**

## *Assessments Traumatic & Culturally Unsafe*

The process for assessments was identified as being culturally unsafe, making it a traumatic experience for those seeking diagnosis. Some participants reported witnessing or hearing of culturally unsafe and racist experiences during assessments conducted by psychologists. One participant shared an experience when supporting an Indigenous youth who had no family to advocate for them:

“It is a very traumatizing process...having a psychologist do the DSM—4 assessment to determine if it’s a developmental intellectual disability or an alcohol related...fetal alcohol syndrome...but we’ve had complaints about the psychologist being culturally unsafe to the point of being racist.” (P4)

In addition, the process of the assessment itself was expressed as not being trauma-informed and could cause risk of emotional harm as a result, as reported by one participant:

**“I’ve been part of the aftermath of assessments, and they are not trauma-informed, they are very unkind. Sometimes we have people with really limited cognitive, behavioral and emotional capacity and then they get told for the first time why they are in care and it’s the most devastating thing that I’ve seen. To learn of the atrocity or the physical or sexual abuse, they don’t treat it as trauma-informed and so that’s one of the things that I’ve thought was really abusive about some of those processes... So there are things with that assessment and the way that young people with diverse abilities are treated.” (P6)**

### ***CLBC Eligibility Paperwork Challenging to Navigate***

The application and paperwork required for CLBC eligibility were discussed as challenging and complex to navigate, particularly for youth who had little or no support. This was viewed as a barrier for individuals who are not familiar with the process or those who do not have supportive advocates to help them through the paperwork. One participant expressed how finding and sourcing the correct paperwork can be overwhelming:

“You’re an eighteen-year-old kid with FASD and an IQ of 70 with nobody to help you...They [CLBC] don’t have time to help you figure out where to get your records from, right? Worst case scenario...seeing youth who had bounced through multiple foster homes and didn’t even know what their names might have been or what schools they went to in their early years to look for the records...” (P4)

**“the number one issue is the affordability issue, that’s number one”**

## **Theme 2: Lack of Awareness of CLBC Supports and Services**

Another barrier identified was a lack of awareness of CLBC supports and services, particularly for First Nations communities living on-reserve. Several participants shared how many Indigenous communities had limited knowledge about CLBC and the resources, supports, and services they offer. One participant explained, “In my experience...there’s not a lot of knowledge about CLBC services in our communities... there’s a big disconnect between the two.” (P10). The interviews also brought to light potential misconceptions about the nature of CLBC services. Some participants suggested that there was still a prevalent belief that CLBC provided all-encompassing solutions, such as housing and complex care facilities. As one participant put it, “some people still think that... CLBC does everything, like ohh you’re CLBC eligible therefore you go to CLBC”. Overall, the lack of awareness of CLBC supports and services may lead to underutilization of services that could better support Indigenous peoples with diverse abilities.



## Theme 3: Limited access to safe and affordable housing

Limited access to safe and affordable housing was identified as another barrier experienced by Indigenous peoples with diverse abilities.

### *Affordability*

Affordability is a significant issue for Indigenous peoples with diverse abilities, including those on Persons with Disabilities (PWD) assistance. One participant expressed "the number one issue is the affordability issue, that's number one" (P12). Participants expressed how the high rental costs are a significant barrier to inclusive housing for Indigenous peoples with diverse abilities. Rents can be prohibitively high, and the allowances and benefits provided by disability assistance fall short of covering rent and basic necessities. A mother of an Indigenous person with diverse abilities shared how the amount provided by PWD is not enough to cover her son's basic necessities:

"For Indigenous [people who are] disabled, we're automatically putting them into the low-income category, there's just not enough money...Right now my son receives, I believe it's \$1,450...that's all he has to live on. Now \$1,200 goes towards his living accommodations. So that leaves about \$300 to deal with...he's got rent paid for but there's nothing else attached to it. No phone, no medication, no clothing, he's got \$300 to split between everything so it's next to nothing" (P8)

The lack of affordable housing was viewed as pushing individuals into housing precarity and closer to homelessness. This is further exacerbated for Indigenous peoples with diverse abilities who have multiple complex needs. The lack of available housing options and long waitlists can leave them in vulnerable situations, as described by one participant:

"Market housing is just out of reach. Persons with disabilities (PWD) shelter amounts are nowhere near capable of paying rent for them... the complex individuals are at high, high risk of homelessness...there's a housing shortage for every single scale right now, so the very complex ones... often end up homeless..." (P10)

### *Limited Housing Options*

Limited availability of housing options was another challenge identified by participants. Indigenous peoples with diverse abilities faced difficulties in finding suitable housing that was safe, inclusive, and meets their specific needs. Given the limited availability of housing options, in particular for those on PWD and low income, several participants shared how they have experienced or witnessed Indigenous peoples with diverse abilities being placed in unsafe housing environments.

"At times I have felt a little unsafe...I lived downtown before and I wanted to get out of downtown, I just felt a little unsafe. I still am quite taken back by their desire to house many different types of people, you know." (P11) "I was a little bit leery but they were the only really low-income housing available. I did call CLBC to see if they had anything that she could apply to because she's in recovery...I was a bit worried about her being in one of those units where it's close to downtown... It's kind of scary. I put on her application that I wanted her to be on a top floor because I was scared for her safety being on the bottom floor, that's worrisome." (P1)

"For safe options, you know, I feel like options that are available are not really in the best location or maybe the safety within the physical building is not necessarily the safest place. So for people with a diverse ability, they may be around a population dealing with other complex issues and stuff but they tend to be even more vulnerable than... others who may be in the same situation right... So just feel like the options are still limited." (P7)

### *Limited Housing Options for Indigenous Peoples with Complex Needs & Substance Use*

While a lack of housing options was identified as a concern facing all Indigenous peoples with diverse abilities, participants noted that housing options for individuals who also have complex needs, such as mental health conditions, addictions, or behavioral challenges are severely limited. These individuals often faced difficulties finding suitable housing. One provider expressed a particular need for housing for youth with complex needs:

"I'm seeing service gaps for Indigenous youth with developmental disabilities and multiple complex needs. So the ones that are segregated from their family, they have mental health conditions, they have addictions, there are no housing options available. They're on every waitlist or they're too complex for this program, that program is full, and then, you know, because they're aggressive or because they say violent things, or maybe they have a history or criminal record they are not accepted. They're not suitable for roommates, so there is a big gap there." (P10)

Requirements to be substance use free also emerged as another barrier. Many housing providers have policies or require clients to be drug and alcohol free, making it even more challenging for this vulnerable population to secure housing, as shared by one provider:

"I think a big barrier, especially with getting into housing, is substance use. A lot of our people have complex needs and take part in substance use, especially if they've been homeless or are currently homeless. They are already vulnerable, so they are pulled into a lot of really unsafe situations and a lot of places won't take them if they're using or have any kind of substance use issues. So that's become an issue for a lot of clients that come through our doors." (P5)

The shortage of appropriate housing options for Indigenous peoples who have diverse abilities and complex needs put this demographic at a high risk for homelessness.

### ***Limited Housing Options in Rural, Remote, and On-Reserve First Nations Communities***

Limited housing options in rural, remote, and for those living on-reserve, along with a lack of Indigenous providers, were also identified as challenges facing Indigenous peoples with diverse abilities as it forces people to move away from their home communities to more urban areas to secure housing and access services. Two participants further highlight this challenge:

“For Indigenous individuals, it’s more challenging to support individuals with housing depending on whether or not they want to live on Nation or off Nation. So we do offer home share on and off reserve but the recruitment has been a challenge...So people are having to move away and sometimes that means you’re moving really far away from where the rest of your family is at to get the right match for the needs that you have and so then that becomes a challenge.” (P9)

“Well I think that they don’t do enough work with rural and remote communities, I think that they want to bring everybody here to Prince George and so I think that’s one of the things that takes them away from their culture and some of those natural family supports.” (P6)

Related to limited housing options in rural, remote, and on-reserve First Nations communities was also the challenge of ensuring that housing is within close proximity to CLBC services.

### ***Long Waitlists***

Long waitlists for getting access to secure housing was another major challenge identified. Participants reported Indigenous peoples with diverse abilities often having to wait for an extended period of time before securing housing. Some participants reported being put on multiple waitlists, sometimes for years at a time, which further emphasized the frustration and vulnerability faced by those waiting for suitable housing. The waitlists to get into ideal culturally safe and inclusive environments were the most pressing, as expressed by one provider:

“We don’t have enough suites at any given time... we can have 2 waiting or we can have 10 or more waiting and then by the time you get to them, they’ve gone on elsewhere to find housing because we don’t have a really big turnover. So that’s the hard part, is that we’re only getting a drop in the bucket of the youth that we could be serving.” (P3)

The need for secure and affordable housing far outweighs the availability within the current market, resulting in long waitlists to get placements and secure housing.

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**“Gaps in terms of service delivery, it is more difficult in remote areas...So I find the remote communities are where there needs to be some innovation around the development of a particular individuals program needs, rather than having them have to leave their community for a day, or a couple of days, to access services that they may need in the nearest largest center. So in terms of gaps, particularly for Indigenous people who want to remain in their communities, it is difficult to develop those services when there’s no service provider already there.” (P7)**

## Theme 4: Provider Funding and Referral Process

Another challenge identified in providing inclusive housing to Indigenous peoples with diverse abilities relates to provider funding and the referral process.

### *Patchwork & Short-Term Funding Struggles*

Participants shared how housing providers, especially smaller agencies, face significant challenges when it comes to securing sustainable funding. One provider, who offers a promising and culturally safe approach to housing, expressed this ongoing challenge, stating:

“It’s such a struggle to get the funding for a small agency like ours. You got to get BC Housing and AMHA, you have to have everybody connected in order to be able to make it work... and it’s a big job just on the funding. I mean now we’re working on a family housing... situation and it’s the same thing like where’s the money going to come from? You spend half your life writing proposals and, you know, the government says that they... want more housing for low-income people... well then start helping the agencies that want to do this work.... To not have to fight for funding, it’s just a daily grind, for anything that we want to do... it’s just such a struggle and it shouldn’t have to be. I think we’re doing really good work here but we have to fight for every dollar that we get, and it shouldn’t have to be like that.” (P3)

The reliance on short-term or patchwork funding was expressed by participants as an ongoing concern as it leads to uncertainty, the need to continuously seek funding to operate, and hinders the ability to provide consistent services. The stress and burden on housing providers to constantly search for funding opportunities to maintain or upgrade their facilities and services has implications for providing quality service to Indigenous peoples with diverse abilities.

### *Referral Process*

The CLBC one-way referral process, where CLBC refers clients to providers for services, was expressed as being another barrier between AHMA providers and Indigenous peoples with diverse abilities who are seeking supports and services from a particular provider. One Indigenous housing provider shared how they can support and encourage their clients in requesting CLBC supports and services, but they cannot guarantee that the services will come from their organization:

“One of the things that we often say to our folks who are working with us as youth is if they have a chance to say who they want to work with, we let them know that if you are eligible with CLBC hours and you’d like to continue your relationship, you can ask for us, but we can’t guarantee it.” (P6)

Indigenous housing providers expressed the need for a more open, two-way referral process which would be more efficient in ensuring a continuation of care with existing clients.

**“I think a big barrier, especially with getting into housing, is substance use. A lot of our people have complex needs and take part in substance use, especially if they’ve been homeless or are currently homeless.”**



## Theme 5: Racism & Stereotyping

Racism and stereotyping emerged as a barrier to inclusive housing for Indigenous peoples with diverse abilities. Participants expressed how Indigenous peoples with diverse abilities face racism, discrimination, and stereotyping when seeking housing or other supports or services from non-Indigenous providers.

"In the non-Indigenous sector, places where folks live, if I just think through the myriad of complaints that...racism and that system of racism in the non-Indigenous world is quite bad still. If you have a diverse ability, that old stereotype of the drunk Indian comes to mind, so even if you're not using or drinking, if you have a disability people treat you like that, particularly youth." (P4)

Even if individuals are not using substances, they are often subject to discriminatory treatment due to perceived negative stereotyping and unconscious bias. This perception can be particularly harsh on youth with diverse abilities who may find themselves unfairly labeled and marginalized.

### *Reluctance to Access Services and Supports*

The experience of racism and discrimination is not limited to housing but extends to other areas of Indigenous peoples lives. Participants revealed that many Indigenous peoples with complex needs are reluctant to seek medical support and assessments due to previous mistreatment. This apprehension stems from the way they have been treated in various areas of their lives, including when accessing supports and services from government organizations and healthcare facilities. The trauma associated with these experiences further exacerbates their challenges and can result in not seeking care or only seeking care from places that are culturally safe. One Indigenous housing provider shared how the far too common experience of racism when accessing services has resulted in Indigenous clients only wanting to access services through their organization:

"We have clients that come to us in every department honestly and they only want to work with us because they don't feel safe going to other places or they've had a bad relationship even when it comes to getting medical support, they're scared. For complex needs, they're scared to go into the doctor's office to get that assessment done because of the way they've been treated. With housing, unfortunately, the reality is we've heard from every single area of their lives that they've been discriminated against and that's why they've slowly come to us... a lot of the time it's because they don't feel comfortable going into these places and there is a lot of trauma, especially from government organizations." (P5)

## *Systemic Racism and Its Impact on Culturally Safe and Inclusive Services*

An emerging concern among participants was related to the deeply rooted nature of racism within the system, leading to a lack of culturally safe and inclusive services. One participant articulated this issue by stating:

"We've got houses of people who have been subjected to systemic racism who should have more dignity, who should have more services and support, who are entitled to them. I strongly believe because they are Indigenous and because there are some unconscious biases that exist in those systems, that our people get left out." (P6)

Participants shared the urgent need to address these ingrained biases and systemic flaws to ensure better support for Indigenous peoples, particularly those with diverse abilities, in receiving the services and support they need and are entitled to. The presence of unconscious biases within these systems perpetuates the exclusion of Indigenous individuals and underscores the imperative of dismantling these barriers to create more inclusive and culturally safe environments.

## Theme 6: System Gaps

There were several system-level gaps and challenges that were identified that hinder inclusive housing for Indigenous peoples with diverse abilities. Participants shed light on the complexities and shortcomings within the systems meant to serve this population.

### *Systems Complex to Navigate & Access*

Participants highlighted the complexity and difficulty in navigating various systems related to housing and support services, especially for Indigenous peoples with diverse abilities who may also have complex care needs or are accessing multiple systems for services. Determining what systems to engage with to access services was seen as challenging to navigate and acted as a formidable obstacle for Indigenous peoples with diverse abilities, as detailed by a participant:

"I think just in terms of navigating from one system to the next...For instance, if we're looking at somebody who has some housing needs, no matter where they live, whether it's their home community or if they've moved to an urban centre, having available and safe housing ready, particularly for somebody with a diverse ability, who needs the support and help navigating systems anyway. Then you add in talking to this person but that's not about housing and talking to this person about employment, and talking to CLBC because I have a diverse ability, but I need to go over here to talk to someone else because they're the housing people right? So I find having multiple doors to be able to access services is nice in a way but in other ways I feel like it just becomes too daunting to try and figure out." (P7)

The complex web of systems and services required to support clients with diverse abilities who also have complex care needs was seen to increase the risk of the most vulnerable clients falling through the cracks and get stuck in a cycle of homelessness, as shared by one housing provider:

**“Especially our vulnerable CLBC folks, they get in that ministry of children and family care or they get lost in the special needs care, it’s just too much to navigate. This system, it’s got a lack of humanity attached to it... if only they could come down and see who’s living in the encampments and who’s on the streets, they would see that a lot of their pathways started out innocently wanting services and then eventually you’ve got folks who are unable to navigate, even seeking out housing and basic needs.” (P6)**

### *Jurisdictional Mandate Gaps*

Jurisdictional mandate issues were also identified as a barrier facing Indigenous peoples with diverse abilities. The federal and provincial responsibilities in the area of service provision in health, social services, and housing for First Nations peoples with diverse abilities was seen to cause challenges on providing a continuity of services for on-reserve and off-reserve populations. Furthermore, navigating the division of responsibilities between healthcare and CLBC disability support services poses a challenge. Service coordination was discussed as being complex, especially for Indigenous peoples with diverse abilities who have overlapping complex care needs in areas such as mental health, substance use, and disabilities, as shared by one participant:

“It’s a bit tricky... when people have mental health and addictions issues, that falls under the purview of healthcare, not CLBC. But if they have a disability, then CLBC is supposed to provide support so they can actively participate in the rest of society. It’s been a bit of a tricky dance to try and figure out who should do it... Those jurisdictional issues should not be, take par-amoutncy over the safety and wellbeing of individuals but from a purely regulatory perspective it does.” (P4)

The jurisdictional mandate gap was expressed to be magnified when it comes to Indigenous people with diverse abilities who also have complex care needs.

One participant shared how Indigenous clients make up a significant portion of complex care needs clients and many of them also came through the child welfare system where the continuity of services and care during the transition from youth to adulthood was not provided, thus resulting in the most vulnerable falling through the cracks:

“...almost all came through foster care so they don’t have natural supports in place which is a huge protective factor and they don’t have an identified organization or person or place to help them navigate and so they are the ones that are ending up on the street, I think a lot in Downtown Eastside and vulnerable to the gangs, vulnerable to the sex trade, and exploitation that way, and vulnerable to the drug, the toxic drug supply. So I’m deeply concerned about that because I think it’s a result of a long-standing structural and systemic inequity.” (P4)

### *Youth Aging Out of the Child Welfare System or Youth-Specific Service*

A system-level gap identified is the transition phase of when Indigenous youth with diverse abilities age out of the child welfare system or youth-specific housing services. Participants raised the issue of Indigenous youth transitioning out of child welfare system and disengaging from supports and services once they become an adult. The transition of care from the child welfare system to independent living or alternative housing supports and services was viewed as a critical transition phase for Indigenous youth with diverse abilities.

“The number of Indigenous young people who are lost in the system, right? Most are coming from MCFD [Ministry of Child and Family Development] care and then once they left the care of MCFD, they weren’t engaging with CLBC and so they are dropped from services...Since the delegation of Aboriginal Child and Family Services to delegated agencies, we have seen an uptake with CLBC which is amazing because they are not just looking at getting their kids to 19, they are actually looking for their kids to be supported beyond that. The biggest problem is just that transition.” (P6)

This transition phase was also discussed in the context of youth-specific housing programs which are catered specifically to youth with designated age restrictions for services. Participants highlighted how services designed for youth, ages 16 to 27, left those approaching the upper age limit feeling unprepared and anxious about their future. This age limit created a sense of urgency and exacerbated concerns about “aging out” once again, reminiscent of their experiences within the child welfare system, as expressed by one participant, “I had one youth come up to me and say, ‘I feel like I’m ageing out again’. That’s the last thing that we need... because we are just perpetuating that trauma all over again for them.” (P3)

Even within the most promising models of culturally safe and inclusive housing for Indigenous youth, the age restrictions create gaps within the system of care and were described as potentially re-victimizing youth who had already been traumatized when they transitioned out of the child welfare system.

### ***Lack of Quality Data for Decision-Making***

The lack of quality data and Indigenous self-identification were identified as a barrier to making informed decisions and advocating for necessary resources and services for Indigenous peoples with diverse abilities. Data collection methods for Indigenous identification were highlighted as a concern. While verbal self-identification was a common practice to identify Indigenous clients, some participants expressed concerns about its accuracy. There were concerns that individuals may not feel comfortable disclosing their Indigenous status, leading to potentially skewed data or underreporting. Furthermore, the lack of accurate, quality and timely data hinders evidence-based decision making, policy-development, and the allocation of resources to address the specific needs of Indigenous peoples with diverse abilities. This was also found to impact funding requests to government:

“We don’t have great data on our Indigenous population and we don’t have great data on what we currently need for housing, so it makes it really hard to go to the government and ask for money for housing or for services when I’m just putting my hand out and saying I need it because I know I need it...” (P9)

The lack of quality data for decision-making poses a substantial barrier to addressing housing challenges for Indigenous peoples with diverse abilities. Without accurate and comprehensive data, it is challenging to advocate for the resources and support needed to improve housing conditions and services for this demographic.

### ***Inequity in BC Housing Registry***

Another system-level barrier to inclusive housing for Indigenous peoples with diverse abilities is the way the BC Housing Registry reviews and processes applications for housing. Participants shared how the registry depersonalizes each application to the point of an individual become merely a number which makes it difficult to find placements for clients with diverse abilities who may not be perceived as ‘ideal’ tenants from the perspective of a housing provider. One participant further details:

“When you fill out a form and put it in the registry, you’re a form...you’re a piece of paper in the registry. Then you get your interview based off of what’s spit out and the operators get to choose based off of your priority. Then the makeup of the building, I appreciate that we want to make sure the buildings have this nice cohesive glow to it but we’re always going to have individuals who cannot present in the best of light. Should it not be that we just wrap more support around them to make sure that they are successful? Not nix them from that building, move them down the list, and make them go through another interview and nix them from that building again. The challenge is, for some of our individuals, we won’t even put their name on the registry since they’re never going to get picked.” (P9)

**The impersonable nature of the BC Housing Registry was viewed to be a barrier to finding and securing safe and inclusive housing for Indigenous peoples with diverse abilities. This process was seen to go against the fundamental importance of relationality and relationship building when working with Indigenous peoples. Furthermore, the process was viewed to increase the risk of Indigenous peoples with diverse abilities in not finding safe and inclusive housing due to their unique needs and circumstances.**



## RECOMMENDATIONS

**This section will outline recommendations arising from the environmental scan on Indigenous housing and how it intersects and supports Indigenous peoples with diverse abilities in BC. The recommendations, categorized into key areas of focus, have been developed based on the findings of the environmental scan and key informant interviews. These recommendations aim to help support next steps towards to better supporting Indigenous peoples with diverse abilities.**

## Education & Training

### ***Cultural Safety Training on Respectfully Working with Indigenous Peoples with Diverse Abilities:***

CLBC, in partnership with Indigenous disability advocate organizations, should develop a comprehensive cultural safety training program focused on working with Indigenous peoples with diverse abilities. This training should include teaching colonial history, how to create culturally safe environments, and how to respectfully engage with Indigenous peoples with diverse abilities. The training should be provided to CLBC service providers and partner organizations, including MCFD, education, housing, and justice service providers.

### ***Mandatory Cultural Safety Training for All Housing Service Providers and CLBC Staff:***

AHMA and CLBC should collaborate on developing cultural safety in housing training for non-Indigenous housing providers. This training should include learning about Indigenous history, cultural practices, and how to create culturally safe housing environments for Indigenous peoples with diverse abilities.

### ***Developing Cultural Safety in Housing Training for Non-Indigenous Housing Providers:***

In order to foster great uptake of cultural safety in housing, CLBC should implement mandatory cultural safety training for all of its housing service providers and staff. This should also extend to those who work directly with Indigenous CLBC clients.

## CLBC Eligibility & Assessments

### ***Advocate For Changes to CLBC Eligibility Criteria:***

Advocacy for changes to CLBC eligibility criteria is recommended. The current requirement for a diagnosis of an intellectual disability prior to the age of 18 should be reformed. This reform aims to eliminate barriers and ensure that Indigenous peoples with diverse abilities, particularly youth in care, are not excluded from lifelong support due to this narrow eligibility criterion.

### ***Establish a Mandatory Requirement for MCFD to Facilitate Access to Diagnoses and Assessments for Indigenous Youth in Care:***

In order to safeguard the future well-being of Indigenous youth with diverse abilities, it is strongly recommended to institute a mandatory requirement for MCFD to actively facilitate access to diagnoses and assessments for Indigenous youth in care. This mandatory approach is essential to ensure that no Indigenous youth with diverse abilities within the child welfare system miss out on the lifelong support they may require. By enacting this requirement, MCFD can guarantee that every Indigenous youth under its care receives the necessary assessments and diagnoses, ultimately promoting a more inclusive, equitable, and supportive path forward for Indigenous youth.

### ***Cover Costs for Assessments:***

To further support Indigenous peoples in meeting CLBC eligibility criteria, the costs for assessments to get a diagnosis should be covered by the First Nations Health Authority Health Benefits program. Currently these assessments are considered an exclusion and not covered. CLBC should work with FNHA to advocate for the costs for assessments to be included in the Health Benefits program. This will help to eliminate the financial barriers associated with getting an assessment.

### ***Recruit and Hire Indigenous Psychologists to Support Diagnosis and Assessments Required for CLBC Eligibility:***

CLBC should hire dedicated Indigenous psychologists to work directly with Indigenous people to provide diagnoses and assessments required for CLBC eligibility. This will increase cultural safety in the diagnosis and assessment process along with help to reduce the current waitlists experienced by Indigenous youth and families.



### ***Advocate for All Psychologists to Take Cultural Safety and Trauma-Informed Training:***

CLBC should work with health system partners to advocate for all psychologists working with their clients or potential clients to be required to take cultural safety and trauma-informed training. This will help to create more culturally safe diagnoses and assessment experiences for Indigenous peoples with diverse abilities.

## **Outreach & Engagement**

### ***Conduct Outreach to Indigenous Communities To Enhance Greater Awareness of CLBC Supports and Services:***

A robust outreach strategy is recommended for CLBC, in order to enhance awareness of CLBC supports and services among Indigenous peoples and communities. This approach should involve knowledge sharing with Indigenous organizations, communities, and partner organizations. The goal is to promote a comprehensive understanding of CLBC's supports and services for Indigenous peoples with diverse abilities and facilitate meaningful community engagement.

### ***Conduct Engagement to Indigenize the Term 'Diverse Abilities':***

A robust outreach strategy is recommended for CLBC, in order to enhance awareness of CLBC supports and services among Indigenous peoples and communities. This approach should involve knowledge sharing with Indigenous organizations, communities, and partner organizations. The goal is to promote a comprehensive understanding of CLBC's supports and services for Indigenous peoples with diverse abilities and facilitate meaningful community engagement.

## **Partnerships & Collaborations**

### ***Collaboration with Indigenous Organizations:***

CLBC should actively foster and strengthen partnerships with key Indigenous organizations such as AHMA, BC Association of Friendship Centres, First Nations Health Authority, First Nations Health Directors Association, and others. These collaborations should focus on institutional-level partnerships, knowledge exchange, and the exploration of program opportunities aimed at supporting Indigenous peoples with diverse abilities. A central aspect of this recommendation is to promote greater organizational partnerships and collaborations to better support Indigenous peoples with diverse abilities.

### ***Strengthen Partnerships with Government Organizations and Indigenous Delegated***

Building on existing partnerships, CLBC should enhance its collaboration with government organizations, with a special emphasis on the Ministry of Children and Family Development, and Indigenous delegated agencies. The goal is to ensure that a coordinated, holistic approach is taken to provide support to Indigenous individuals, particularly Indigenous youth.

### ***Establish Mandatory Transition Plans for Indigenous Youth Aging Out of Care:***

CLBC and MCFD should collaborate to develop mandatory transition plans to support Indigenous youth with diverse abilities as they approach aging out of care and entering adulthood. These mandatory transition plans should be designed to provide robust support during this critical phase, ensuring a smooth and well-supported transition into adulthood supports and services.

### ***Promote Interdisciplinary Collaboration Through Annual Symposium:***

To promote interdisciplinary collaboration, CLBC should host an annual symposium around the theme of "Supporting Indigenous Peoples with Diverse Abilities." This event should be designed to bring together multiple systems-level partners, including health, justice, education, child and family services, and Indigenous organizations and communities. The symposium aims to create a platform for the sharing of information on existing programs and services, the promotion of new collaborations and partnerships, and the facilitation of greater understanding of how to support Indigenous peoples with diverse abilities in BC.

### ***Increase Data Collection and Quality:***

CLBC should collaborate closely with its provincial partners to access and share data that will lead to more effective support for Indigenous peoples with diverse abilities. An innovative approach involves exploring opportunities to conduct a First Nations Client File Data Linkage. This data linkage can enhance the identification, validation, and understanding of First Nations clients, thus leading to more targeted services and support.

### ***CLBC Eligibility & Assessment Before 18:***

Collaborate with system partners to create awareness of CLBC eligibility criteria, including requirements for having assessments for an intellectual disability done before the age of 18 to be eligible for CLBC services:

- Collaborate with system partners in the education, criminal justice, child welfare, and health system to educate, inform, and create awareness among Indigenous youth and families about CLBC eligibility and assessment requirements.
- Partner with the First Nations Health Directors Association to disseminate information about CLBC supports and services to First Nations communities.
- Create new Eligibility Support Navigator positions located within partner organizations in housing, education, child welfare, and criminal justice. These positions will work directly with Indigenous youth, families, and service providers to guide and navigate them through the CLBC eligibility process, ensuring that all Indigenous individuals who meet the eligibility criteria can access the services they require.

### ***Collaborate with New Housing Developments:***

CLBC, AHMA, and BC Housing should continue to engage and collaborate with new housing developments. The objective is to secure CLBC units within these developments to promote inclusive community living. Efforts should be made to ensure that the housing is accessible and accommodating for Indigenous individuals with diverse abilities.

### ***Collaborate to Enhance Inclusivity in BC Housing Registry:***

CLBC and AHMA should work with BC Housing to better support Indigenous peoples with diverse abilities who prefer to live in culturally safe and inclusive housing. A recommendation is to add a checkbox to the BC Housing Registry application form to allow applicants to specify their preference to live in culturally safe and inclusive housing, enabling a more self-determined approach to housing placements.

## **Indigenous Housing Provider Recruitment**

### ***Campaign to Increase Indigenous Housing Providers:***

CLBC should collaborate with AHMA, and partner organizations including BC Housing, to launch a comprehensive Indigenous housing service provider recruitment campaign. This campaign should be inclusive, with particular attention given to recruiting more rural and remote Indigenous housing providers.

The goal is to enhance the availability of culturally safe and inclusive housing options for Indigenous clients.

### ***Review Housing Provider Eligibility Criteria and Process:***

CLBC and AHMA should partner to review existing housing provider eligibility criteria and application processes. This review should aim to make the criteria and application process more accessible and user-friendly. The goal is to encourage more Indigenous housing providers to apply to become registered housing providers for CLBC clients.

### ***Open Referral Process For CLBC Services:***

Collaboration between CLBC and AHMA should extend to the referral process. The process should be reviewed with the intention of establishing open referrals. In this system, AHMA providers can refer clients directly to CLBC, ensuring that Indigenous clients can access services offered through their organization without unnecessary delays or complications.

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## Programs and Services

### *Indigenous CLBC Facilitators:*

To enhance the support provided to Indigenous CLBC clients and their families, CLBC should create 'Indigenous CLBC Facilitator' positions within its organization. These positions should be dedicated exclusively to supporting Indigenous clients. They will play a critical role in navigating the system, advocating for clients, and ensuring culturally safe and respectful service provision.

### *Landlord Support Program:*

CLBC and AHMA should collaborate to develop a 'Landlord Support Program.' This program will aim to better support Indigenous individuals with diverse abilities in navigating the residential tenancy process and establishing positive and productive relationships with landlords. The program should provide resources, training, and advocacy services to both tenants and landlords.

### *Advocate for Stackable Portable Rent Supplement Program:*

AHMA and CLBC should partner and collaborate to advocate for stackable portable rent supplements. This program should ensure that rent supplements are not tied to specific housing units but remain with the client wherever they decide to move. This portability provides clients with the flexibility to choose their preferred housing provider without losing essential financial support.

## Phase Two: Implementation Action Plan & Pilot Strategy

### *Develop an Implementation Action Plan:*

CLBC and AHMA should work collaboratively with partner organizations to develop an implementation action plan to action the recommendations in this report along with develop new initiatives to better support Indigenous peoples with diverse abilities in housing. The action plan will provide a clear roadmap for executing the recommendations and initiatives including timelines, responsibilities, key performance indicators, and mechanisms for monitoring and evaluating progress. By creating an actionable strategy, stakeholders can ensure that the vital work of supporting Indigenous peoples with diverse abilities in housing moves from recommendations to tangible and transformative actions.

### *Develop a Pilot Strategy for ILCSIC Housing Model:*

AHMA, CLBC, and partner organizations should collaboratively work together to develop a pilot strategy to actualize the report's proposed housing model, Indigenous-Led, Culturally Supportive Inclusive Co-Housing (ILCSIC). This strategy should focus on creating a pilot ILCSIC complex. The pilot program will serve as a practical and evaluative platform to test the feasibility and effectiveness of the ILCSIC model in meeting the housing needs of Indigenous peoples with diverse abilities. This pilot strategy should be developed collaboratively with key stakeholders, including Indigenous communities and partner housing organizations.





# CONCLUSION

The purpose of this environmental scan is to examine Indigenous housing and how it intersects and supports Indigenous peoples with diverse abilities in BC. Through a three-phased approach including a literature review, AHMA provider survey, and key informant interviews, the findings reveal that Indigenous peoples with diverse abilities face multiple barriers in accessing housing that aligns with their needs. There remains a significant gap in research and literature that highlights the experiences of Indigenous people with diverse abilities both on and off-reserve in Canada. Emergent themes are similar across literature reviews and research in Canada, Australia, and New Zealand, and align with the themes that emerged in this environmental scan. The overarching themes that emerged, such as eligibility issues with CLBC, limited access to safe and affordable housing, insufficient awareness of CLBC supports and services, challenges associated with provider funding and referral processes, racial stereotyping, and systemic gaps, underline the urgent need for change.

This initial report highlights the critical importance of promoting Indigenous-led housing options as a way forward to create more culturally supportive housing options for Indigenous peoples with diverse abilities. However, in respecting the principle of self-determination and the right of Indigenous peoples with diverse abilities to self-determine their own housing journey, it is essential to continue to have ongoing partnerships and collaboration with non-Indigenous housing providers. Given the diversity of housing preferences and choices, there will always remain a requirement for non-Indigenous housing providers to provide culturally safe and inclusive housing to Indigenous clients. Therefore, fostering collaboration between Indigenous and non-Indigenous housing providers is of paramount importance. This collaboration must prioritize the establishment of culturally safe and inclusive care to ensure that Indigenous individuals can access housing and support services while retaining agency over their housing decisions.

It is clear that the journey towards equitable, culturally safe housing for Indigenous individuals with diverse abilities is an ongoing process that demands the collective efforts of multiple provincial system-level partners, including child welfare, education, health, and housing. This collaboration is essential to provide the necessary support, particularly to Indigenous youth and those with complex care needs. The recommendations outlined in this report serve as a roadmap for action, outlining concrete steps that must be taken to address the underserved needs of this population.

Two separate reports developed as part of this research project including: Future Model: Culturally Supportive Inclusive Housing for Indigenous People with Diverse Abilities and Cultural Safety for Indigenous Peoples Living in Non-Indigenous Housing will expand upon definition of culturally supportive inclusive housing and presents a model and framework designed to enhance the availability of such housing for Indigenous individuals with diverse abilities.

In conclusion, the insights and recommendations contained within this report aim to inspire meaningful change, both at the policy level and within the organizations that provide vital support to Indigenous individuals with diverse abilities. There is a critical need for action to make advancements at addressing the gaps, barriers, and challenges identified in this report. By taking these actions, a collaborative effort can be made to better support housing that respects the right for Indigenous peoples to self-determine their own housing journey, thus, creating a culturally safe and inclusive home environment for Indigenous peoples with diverse abilities.



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