OrgCode would like to thank its many Indigenous partners that continue to implement the SPDAT products using approaches that enhance cultural safety and assist us in improving the tools. In addition to our partners in Edmonton, Winnipeg and Hamilton that shared their experiences and suggestions with OrgCode, we are especially grateful for the additional contribution of Ms. Betty Edel with End Homelessness Winnipeg for her review of this document and her continued support of our efforts to improve our approach and our products.

We hope that this knowledge sharing document will assist in the future use of these tools with Indigenous persons. Any errors identified within the document are the sole responsibility of OrgCode Consulting, Inc.
Introduction

OrgCode acknowledges that the SPDAT products – as imperfect as they are – have been developed and tested to improve local efforts to prevent and end homelessness in communities. Recognizing that no one tool can possibly meet the needs of all people served by agencies and communities, it is the goal of this guidance document to share how these products have been implemented by some agencies to enhance cultural safety for Indigenous participants.

This document has been created to share information regarding the use of the SPDAT suite of tools in a culturally sensitive manner when engaging with Indigenous Persons. In consultation with our Indigenous partners in Edmonton, Winnipeg and Hamilton, OrgCode has compiled the following guidance document with the goal of sharing insights on how the SPDAT suite can assist communities in preventing and ending homelessness.

In generating this guidance document, Indigenous partners emphasized that there is no pan-Indigenous culture or teachings and so approaches will differ from community to community. It is also important, therefore, to acknowledge that efforts to align the implementation of the SPDAT products with local teachings will likely be unique for each community in Canada, the United States and Australia.

To share some of the approaches used across the country, similar practices and approaches used by Indigenous partners were identified and documented in the development of this guidance. As more consultation and engagement with Indigenous
service providers and Indigenous people continue, this guidance will likely be enhanced in the future. Feedback is welcome on an ongoing basis to improve the guidance.

**How the SPDAT Suite of Tools can Assist**

It is the reality today that Indigenous populations are experiencing homelessness at a greater rate, and in different ways than other people in Canada, the United State of America, or Australia. For example, in Canada more than one in 15 urban Indigenous people are experiencing homelessness, compared to one out of 128 non-Indigenous Canadians. This means that urban Indigenous people are eight times more likely to be or become homeless than non-Indigenous urban individuals. With this knowledge, *The Definition of Indigenous Homelessness* should be considered when working with an individual who self identifies as Indigenous (for example in Canada, self-identifying having First Nations, Inuit or Métis ancestry). It is only through the use of this definition, and the understanding of the potential layering of the twelve dimensions of Indigenous homelessness that communities/agencies can provide good quality service to Indigenous participants. Without an awareness and understanding of the impacts of colonization upon Indigenous communities and individuals, we will never succeed in our task of ending homelessness.

Delivered using a trauma-informed approach, the SPDAT tools can be valuable for collecting a reliable data set to assist in decision making for all populations. It is only through gathering the information in a space of mental, physical, emotional, spiritual and cultural safety that the most accurate results will be generated. Wherever resources permit, those who self-identify as Indigenous should be provided with the option of having the SPDAT information gathered by an Indigenous service provider.

**Some Practical Considerations in Introducing the Tools**

*Timing the Introduction of Prescreen and Assessment Tools:* SPDAT prescreen and assessment tools assist in identifying and prioritizing households that require more targeted and intensive housing based supports in order to return to a housing stability. Efforts to assist people in resolving their housing crisis are a valuable use of resources and acknowledges people’s resilience. With this in mind, it is of the utmost importance that the SPDAT products are utilized at the right time, in the right place, and by the

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right person. The right time is after allowing the individual the opportunity to resolve their own housing crisis with minimal assistance from a service provider or agency.

**Location and Staffing Considerations:** The right place for the introduction of prescreen and assessment products is defined by the participant, with both their safety and that of the worker at the forefront. Efforts to increase comfort and safety must consider how the space is set-up and how people are treated from entry into the location to exit. The right person is, in most cases, someone who reflects the community that they are supporting. It is important for agency staff to represent those to whom they are providing services. To that end, whenever possible, Indigenous workers and agencies should be gathering the information to inform the SPDAT. For all agencies, here are some questions to consider:

- Do participants see themselves reflected in the staff and décor?
- Are participants treated like relatives or clients?
- Are participants offered coffee, tea, etc. and are various medicines available?
- Is there the opportunity to smudge – before, after and/or during – the engagement (when culturally appropriate)?
- Is time provided to debrief with participants so that they are not expected to carry emotional, spiritual and mental pain out the door with them?
- Is information about where other supports can be accessed freely provided?

**Introductory Script:** Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. If your community has Indigenous-specific service providers, it is important that the script highlights the following information:

*that the participant may, if they self-identify as Indigenous, have their information gathered by a worker from an Indigenous service provider.*

**Training Recommendations for Staff:** The following training topics have been identified as important in being able to implement assessment tools in a more culturally appropriate manner with participants and in sharing the results during referrals and case conferencing activities with other partner agencies.

- Indigenous cultural sensitivity/awareness
- knowledge of local Indigenous people and history
- trauma informed care
- understanding of the Definition of Indigenous Homelessness
• SPDAT training

Suggested Training Format When Instructing Workers on the Application of the SPDAT Tools with Indigenous Persons

• Opening (Elder, Knowledge Keeper)
  o local person
  o organized by the community seeking training (wherever possible)
• Presentation and discussion of Definition of Indigenous Homelessness. This is an important education tool about Indigenous homelessness, especially for non-Indigenous workers
• Opportunity for discussion
• SPDAT specific training
  o use of the Definition of Indigenous Homelessness to inform the SPDAT tool
• Closing (Elder, Knowledge Keeper)

Key Points to Remember When Applying the Tools with Indigenous Persons

• The VI-SPDAT/SPDAT tool doesn’t have to be completed in one sitting
• As an assessment tool that relies on multiple methods of gathering information, the full SPDAT provides the most flexibility in gathering knowledge about the participants’ strengths, realities and challenges related to housing and support needs. Although the VI-SPDAT can provide workers with questions and words that have been validated with people with lived experience, it must be realized that asking question after question provides less opportunity for workers to create safety and rapport.
• The information to complete the VI-SPDAT/SPDAT can be gathered through a narrative shared by the participant and isn’t reliant upon asking the questions in the order that they are presented.
  o The questions may be reordered if it is more culturally acceptable (Medicine Wheel Grouping of VI-SPDAT Questions shared below, for example) then apply scores to the VI-SPDAT/SPDAT
• Reframing the questions for clarity is acceptable as long as the intent behind the reframing remains consistent to the original question
The Twelve Dimensions of Indigenous Homelessness should be considered in questions relating to trauma and history of housing/homelessness. Once again, this definition may prove to be especially important for non-Indigenous workers to ensure greater understanding on Indigenous homelessness. Factoring in stories of family and community proves to be important during the assessment process. It will be important to understand the effects and impacts of generations of historical trauma in the gathering of the individual's/family's story.

An Example from One Agency...Using the Medicine Wheel to Discuss the VI-SPDAT Questions

Provided as an example of how the life areas incorporated in the SPDAT Suite can be better understood based on local teachings, a Medicine Wheel Grouping of the Canadian VI-SPDAT questions is outlined below. Although the Medicine Wheel has been an accepted tool in discussing health and healing in many communities, it must be recognized that not everyone uses the Medicine Wheel in the same manner. Due to this, it will be important to explore the medicine wheel teachings that are used in your territory. Although the use and significance of the Medicine Wheel is culture and territory-specific, the circle helps to demonstrate the connectedness of physical, emotional, mental and spiritual realities for participants. It also assists in identifying life areas and opportunities where improved balance and wellness can be achieved.

**Medicine Wheel Domains**

Red: physical
Black: emotional
White: spiritual
Yellow: mental

Questions that explore the area of Physical well-being focus on the ability to take care of physical needs, the body and physical wellness. For example, the following questions were identified as providing insights into Physical well-being. Footnotes provide suggestions on how an exploration of the areas can be delivered with enhanced cultural safety for Indigenous participants.

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3 As mentioned, the medicine wheel is interpreted uniquely by each community/culture/territory. The order of the colours may not be the same – nor are the attributes. It will be important to examine how the information gained through the SPDAT aligns with the one used in your community/territory.
1. Most days can you:
   a. Find a safe place to sleep
   b. Access a bathroom when you need it
   c. Access a shower when you need it
   d. Get food
   e. Get water or other non-alcoholic beverages to stay hydrated
   f. Get clothing or access laundry when you need it
   g. Safely store your stuff

2. Where do you sleep most frequently?

3. Over the past 12 months, what is the total length of time you have been homeless?

4. In the past three years, how many times have you been homeless?*

5. Thinking about those last three years and the different times you were homeless... if you add up all the months you were homeless, what is the total length of time you have experienced homelessness?

6. Have you ever owned a house or had an apartment lease in your name?

7. Have you ever been evicted?

8. In the last 6 months, how many times have you:
   a. Gone to the emergency room/department?
   b. Taken an ambulance?
   c. Been hospitalized as an inpatient?
   d. Used a crisis service or hotline for such issues as family or intimate partner violence or suicide prevention?

* One Indigenous partner identified that since people experiencing chronic homelessness may lose track of time, it is more appropriate to assist the participant by asking: “where are you staying now, and before that... and before that...”. Such an approach not only assists participants in tracking their incidents of homelessness but can assist in helping them realize who has helped them on the journey rather than them realizing how long they have been stuck in homeless.
e. Talked to police because you witnessed a crime, were the victim of a crime, were the alleged perpetrator of a crime, or because they asked you to move along because of loitering, sleeping in a public place or anything like that?

f. Stayed one or more night in jail, a holding cell or prison?

9. Since you have been homeless:
   a. Have you been beaten up or assaulted?
   b. Have you threatened to harm yourself or harmed yourself?
   c. Have you threatened to beat up or assault someone else?
   d. Has anyone threatened you with violence and/or made you feel unsafe?
   e. Has anyone tried to control you through violence or threats of violence whether that be a stranger, friend, spouse, relative or parent?

10. Do you have any legal stuff going on right now that may result in any of the following:
    a. Being locked up?
    b. Having to pay fines that you cannot afford?
    c. Impact your ability to get housing?
    d. Impact where you could live in the community?

11. Have you ever been convicted of a crime that would make it difficult to access or maintain housing?

14. Is there anybody that thinks you owe them money like a family member, friend, past landlord, business, bookie, dealer, bank, credit card company, utility company or anyone like that?

15. Do you get any money from the government, a job, working under the table, day labor, an inheritance or a pension, or anything like that?

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5 A number of partners identified that Indigenous participants may be more hesitant to answer this question. Regardless of the significance of self-harm as an indicator of vulnerability in the journey back to housing stability, this may be a question connected to shame and therefore participants may not want to talk about it. Within your community/agency, it will be important to talk about this in light of local teachings on how to address this question.
16. Do you ever gamble with money you cannot afford to lose or have debts associated with gambling?

21. Are you 60 years of age or older?

22. Do you have any physical health issues such that you would require assistance to access or keep housing?

23. Are you currently pregnant?

**Questions that are related to Emotional well-being and needs explore such things as social relationships and connections with others or your community**

12. Does anyone exploit, trick, manipulate or force you to do things you do not want to do?

13. Do you ever do things that may be considered to be risky or harmful like run drugs, share a needle, sleep rough, exchange sex for money, drugs, protection or a temporary place to stay, or anything like that?

18. Do you have a collection of belongings that get in the way of your ability to access services or housing?

19. Would you say that your current homelessness was caused by any of the following:
   a. A relationship that broke down?
   b. An unhealthy or abusive relationship?
   c. Because family or friends caused you to lose your housing?

20. Do most of your family and friends have stable housing?

**An exploration of Spiritual well-being examines factors that impact people’s sense of meaning, purpose or connection to their culture, community and/or their world.**

25. Do you use alcohol or drugs in a way that it:
   a. Impacts your life in a negative way most days?
   b. Makes it hard to access housing?
   c. Would require assistance to maintain housing?
26. Are there any medications that, for whatever reason:
   a. A doctor said you should be taking but you are not taking?
   b. You sell instead of taking?
   c. You use in a way other than how it is prescribed?
   d. You find impossible to take, forget to take or choose not to take?

27. Has your homelessness been caused by any recent or past trauma or abuse?\(^6\)

When exploring Mental well-being, it will be important to examine such things as activities that bring participants happiness as well as any concerns regarding emotional wellness.

17. Do you have planned activities, other than activities for survival, at least four days per week that make you happy and fulfilled?

24. Do you have any concerns with your mental health or brain function (due to past head injury, learning disability, etc.) such that you would require assistance to access or keep housing?

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\(^6\) Given the placement of this question in the tool and the amount of information shared during the engagement(s) to complete the tool, one Indigenous partner identified that the service provider could demonstrate that they have been listening to the client’s story by summarizing what was heard as an introduction to this question. For example, "... so I heard you say you were taken from your family in your home community at 8, brought to the city for foster care and ran away because they were mean to you, people started to abuse you and you started using drugs/drinking at age 9 and have lived on the street since then. Would it be fair to say your homelessness was caused by trauma in your life?"