

Acknowledgements

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CUAI



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Executive Summary

Intergenerational trauma (IT) and its negative impact on the Aboriginal community are undeniable. In order to make effective and long-term changes in relation to IT, organizations require the stability of at least three to five years of sustainable and confirmed funding. Long term, sustainable support translates to long term, effective and positive impact on the social issues associated with IT.

It is the non-profit/voluntary sector that works primarily with the Aboriginal community, from front-line service provision to high-level policy applications. From an economic perspective, this sector contributes significantly to the overall Canadian economy; from a social policy perspective, non-profits have the greatest potential to influence and apply positive changes towards the impact of IT. Any high-level discussion around policy changes and funding structures must involve the voluntary sector because, as many organizations operate in a front-line capacity and therefore close to the experience, represent the views of its clients (stakeholders), members and sources of support.

The Calgary Urban Aboriginal Initiative (CUAI) has been in existence since 1999, following the "Removing Barriers: A Listening Circle" process. CUAI facilitates eight Domain groups, each with a focus on a sector as identified through the Removing Barriers process. The eight areas of CUAI's work is: Employment, Education, Funding, Health, Housing, Human Rights, Justice and Social Services. Over time, the Funders Domain has witnessed directly the disadvantage to programs as funders move from multi-year funding to yearly project funding, though observations substantiated through discussions and need assessment sessions hosted by the CUAI. Organizations who struggle to diversify their funding sources typically experience huge swings in revenue. This volatility undermines the organization's stability and capacity to provide consistent, quality programs or services, to develop an effective strategy plan, and to retain invested, experienced staff, conditions that negatively impact program quality and client wellbeing.

Canadian social policy has been instrumental in creating institutions to assimilate Aboriginal people and society, resulting in a collision of doctrines that have disrupted the physical, mental, emotional, and spiritual wellbeing of individuals and communities for generations. The impact of intergenerational trauma (IT) and the effectiveness of subsequent culturally and socially relevant programs developed as a result is a core issue facing the Aboriginal community.

Although CUAI's work is focused on urban issues, we recognize that this policy recommendation has potential to reach in the Aboriginal community overall.

The intensity and scope of IT on individuals is often underestimated, poorly understood and seldom recognized as the root of most social challenges facing Aboriginal people. IT is fundamentally generational in nature, and in order to effect real and measurable change, responses by government, funders and service providers require models and strategies that focus on longer-term supports and commitments than presently subscribed.

Over the last decade, there has been a marked shift away from the provision of core funding to annual and/or project-based supports among funders. This policy shift has occurred as departments and funding agencies attempt to streamline their resources in response to steadily decreasing allocations from federal and/or provincial reserves. This move drastically and critically affects the overall success and effectiveness among programs and services, especially those directed towards Aboriginal peoples. The systematic move away from core funding occurring at essentially the same time that the impact of IT is finally being recognized compromises any real long-term positive impact programming may have on Aboriginal individuals, and serves only to perpetuate a model of short-term gain that focuses more on financial accountability and less on measurable change of the core issue.

Addressing the long-term impact of IT requires a paradigm shift. To date, work within the Aboriginal community around IT has been piecemeal, slow, negligible in some respects, and not addressing the core issues. It is not necessarily that the need for long-term approaches is not understood, but rather that upper-level policy structures such as project-based and short-term funding approaches have seriously limited real impact programs and service providers are able to offer. The fundamental approach of providing short-term funding to deal with long-term, intergenerational issues simply does not work. In order to achieve sustainable positive impact on IT, organizations require a long-term strategy supported through relevant policy developed with, and between, government and community. Specifically:

- Government, funding and board policy must make healing and IT a priority issue in order to effect real change
- Through changes in policy, funders must make available long-term and sustainable supports in order to effect real change in the long-term

Knowledge about the overall health and wellbeing of Aboriginal peoples has been largely individualized and examined outside of a historical and political context. Inequalities must be made a political/policy issue in order to reform current funding structures, policies, and inadequate structural supports (i.e. housing, environment, health, etc.) in order to change the status quo.

FACT	The non-profit/voluntary sector in Canada is four times larger than the agricultural sector; twice the size of the mining and oil & gas extraction industry; eleven times larger than motor vehicle manufacturing.
FACT	Revenues total \$112 billion and play a substantive role in the Canadian economy.
FACT	Canada has the 2nd largest non-profit/voluntary sector in the world.

(Source: Imagine Canada 15)

To address IT and root cause issues facing Aboriginal people and communities, it is necessary for policy makers, funders, and not-for-profit boards to reframe their thinking, programming, and policies to support longer term and holistic/integrated services.

A healing framework, developed within the political, social and value context of Aboriginal people, is necessary to address IT in the long-term. Healing leads to decreases in the social afflictions manifested by IT, such as addictions, self harm, abuse of others, violence, dysfunctional and criminalized behaviours, lower socio-economic status, etc. This requires a fundamental systemic and paradigm shift from a focus simply on short-term outcomes as indicators of success, towards the long-term, more intangible elements of social integration, mental/physical health, and cultural wellbeing as feasible goals.

Recommendations

1. Formal commitment of stakeholders at the executive level towards changing policy.

Many departments and funders are aware of the need to engage in policy work; however, many have yet to make the actual commitment of resources and dedicated capacity to create the organizational and operational structures required for sustained policy-oriented activities, more specifically in the areas affecting urban Aboriginal populations.

2. Formal recognition of the effects of intergenerational trauma among Aboriginal people as a valid response to historical experiences.

All levels of government, funders, organizations, and service providers must recognize the effects of intergenerational trauma as the primary contributor to the current state of conditions among Aboriginal people, and apply this recognition to policy, funding frames, criteria and programming that intentionally move away from short-term, annual supports to long-term, sustainable or multi-year funding.

3. Inclusion of Aboriginal people as stakeholders in high-level policy dialogue, process and development affecting the urban Aboriginal community.

Aboriginal people, with relevant backgrounds, must be included in any high-level policy dialogue, process and development as full participants, and not simply in an advisory capacity. Provincial government must engage with urban Aboriginal communities and those organizations working with urban Aboriginal populations to establish relevant priorities, resource and funding allocations and action to address critical inequalities in all economic and social conditions as a result of intergenerational trauma.

4. Required education at all levels focusing on intergenerational trauma, and relevance to urban Aboriginal programs and services.

Mandatory education around understanding the effects of intergenerational trauma for all levels of, but not limited to, policy-makers, funders, service providers, and practitioners who work directly or indirectly with urban Aboriginal peoples. Formal recognition of the link between historical and intergenerational trauma and existing social, economic and health inequalities.

5. Aboriginal frameworks included as part of policy and funding structures.

Policy provisions that make culturally appropriate mechanisms and approaches mandatory as part of any funded programs, drawing on a holistic, culturally appropriate paradigm.

6. Engage in self-assessment, in collaboration with Aboriginal input, of existing policy affecting urban Aboriginal populations.

Policy-makers and funders complete a self-assessment or review of existing policy and criteria in areas that directly impact urban Aboriginal individuals or community. Social and health policy must focus on three interlinked objectives: 1) solving urgent health and social problems; 2) promote human capacity building; 3) informing mainstream organizations of responsibilities to urban Aboriginal people.

