METIS ELDERS: CIRCLE HOUSING RESEARCH PROJECT

A STUDY TO DETERMINE RESPECTFUL SUSTAINABLE HOUSING OPTIONS FOR METIS ELDERS IN SASKATOON

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Executive Summary

Although all agree that there is a crisis in Aboriginal housing in Saskatoon, there has been very little information available on the housing needs specifically of Métis Elders. Part of the reason is that for many years, stakeholders have been concentrating on addressing the growing young Aboriginal population. Moreover, the number of Aboriginal Elders is, not surprisingly, small although these numbers have been steadily increasing over the last few years. This means that while Saskatoon Aboriginal housing authorities and governments grapple with the demands of a rapidly growing young Aboriginal population, the housing needs of Aboriginal Elders continue to be overlooked or simply ignored.

To address this issue with the hope of influencing public policy housing development specifically geared to Aboriginal Elders and in particular, Métis Elder housing, this project undertook an examination through the eyes of stakeholders working in the field and most importantly, through the voices of the Métis Elders themselves.

The Research Team undertook this task using a multi-level approach by conducting a literature review, through community networking and information exchange, organizing a Métis Elders gathering, field research to document the housing situation of Métis Elders, locating and presenting models of successful Elder housing projects, and offering recommendations for the future for Métis Elder housing in Saskatoon.

The research project not only examines issues specific to Métis Elder needs, but also how to develop or enhance established relationships and capacities to address the gaps. Most importantly, it provides suggestions on how to increase effectiveness of housing stakeholders to serve the Elder community. Although stakeholders have made some efforts to implement a respectful meaningful approach to addressing Elder housing needs, the reality is that this community has not had their voices heard. This project attempts to listen to their voices.

The resulting report, *Métis Elders Circle Housing Research Project*, clearly demonstrates that the needs of Métis Elders are not being fully met. Métis Elders are not a homogeneous group and the research shows a clear need for a variety of housing options for Saskatoon's Métis Elders. The research found there are four basic divisions: those who live alone; those who live with a spouse; those who live with others; and those who are the primary care givers for their grandchildren. These groups are further fragmented by the health of the individual or spouse and by the presence of other people in the household. There is evidence that the conditions of life of Métis Elders can change very quickly and have an immediate effect on the housing situation. Stakeholders are not prepared for these sudden changes of circumstance.

It was found that few Métis-specific Elder housing models exist. Those that do service Métis Elders are small in number and are not highlighting the cultural traditions, practices and customs of the residents. For Saskatoon Métis Elders, housing is more than a shelter. It is a place to share with family and friends. It can be a place to bring up children. It is a place to carry on traditional activities. It is a place to connect and be a part of nature. It is a place to pray. The research shows that Métis Elders housing should be the kind of space that supports not just the physical person but also the cultural aspects of our Métis Elders.

The Final Report will be shared with the Aboriginal and non-Aboriginal housing stakeholders, Métis Elders, community members and interested parties. Through this innovative project, it is hoped the gathered knowledge is directly transferable to creating successful meaningful housing options for Métis Elders.

Acknowledgments

The Research Team would like to acknowledge the invaluable assistance provided to them by the Métis Elder respondents who took the time to provide candid, insightful and honest feedback. In addition, the Research Team would like to thank the numerous stakeholders who discussed the issues and provided guidance to the Research Team. In particular, the Research Team want to thank the multi-talented Métis musicians, Cree translator and those who prepared the traditional food for the Métis Elder gathering held in Saskatoon, Saskatchewan. Without the participation and cooperation of all parties, this research could not have been successfully completed.

Special acknowledgement is made to Ms. Jacinthe Taylor, Project Coordinator of Bridges and Foundations, who provided ongoing support to the Research Team. In addition, the Research Team would like to thank the Bridges and Foundations Project on Urban Aboriginal Housing under the leadership of Dr. Alan Anderson, Ms. Priscilla Settee and Mr. Keith Hanson that recognized the importance to better understanding of the gap between available Métis Elder housing options and what is needed to meet the needs and expectations of the growing Métis Elder community in Saskatoon.

1. Research Problem

1.1. Introduction

This project examines Métis Elder housing options in Saskatoon, including issues specific to physical and cultural needs, but also how to develop or enhance established relationships and capacities to address the gaps. Most importantly, it provides suggestions on how to increase effectiveness of housing stakeholders to serve the Métis Elder community of Saskatoon. The project was undertaken through the eyes of Métis Elders, describing their lives, perceptions and beliefs. Although this qualitative approach has evident methodological limitations, it is critical to understanding and hearing the voices of our Métis Elders.

The Research Team, Dr. Cathy Littlejohn, Dr. Jerry Hammersmith, Ms. Wanda McCaslin, and Mr. Jim Durocher undertook this task under the guidance of Chenew Holdings Inc. which provided coordination, supervisory and technical support. The Research Team developed linkages with stakeholders and Métis Elders who were interested in sharing their knowledge and interest in housing options. The Project builds upon the Métis housing network that was launched in the 1970s in Saskatoon by Aboriginal Elders now gone. Through the network already established and through the Research Team's personal relationships, the Métis Elders Circle Housing Research Project was an opportunity to better understand the dynamics of Métis Elder housing issues.

This project supports the goal of seeking a better understanding of the gap between available housing options, community and what is needed to meet the needs and expectations of the Aboriginal Community in Saskatoon. As such, it is hoped the project would assist in the development of building functional, sustainable relationships between Aboriginal and non-Aboriginal organizations to design and develop culturally supportive communities and quality, affordable housing options.

1.2. Research Objectives

While the Research Team is well aware and cognizant of research objective overlaps, particularly given the holistic methodological approach undertaken in garnering Métis Elder views and voices, nevertheless the project categorized and sought to specifically:

a) ascertain policy visions and objectives for Aboriginal housing initiatives

The Research Team will identify relevant policy visions and objectives of Aboriginal housing initiatives from government, non-government and Aboriginal concepts of housing. To undertake this portion of the project, the Research Team provides defining principles on what people and institutions think Aboriginal housing should be. The Research Team will review documents on what are the key success and failure factors, and use that information to formulate a hypothesis for evaluation of current practices, procedures and policies and development of Recommendations.

b) ascertain the "population being served" and "expected population" forecast of Saskatoon Métis Elders:

It is critical to ascertain the "population being served" and "expected population" of Métis Elders. This will provide the necessary backdrop to the research objectives and as such, the research data includes Saskatoon Métis Elders' population in proportion to Saskatoon general Métis population; the Saskatoon Aboriginal Elders population including First Nation, Métis, and Inuit and the non-Aboriginal general Saskatoon Elders population.

c) ascertain the "needs being served" and "expected needs" forecast for Saskatoon Métis Elders

Through quantitative measures, the Research Team will ascertain Saskatoon Métis Elders' needs being served and includes outcomes such as expectation of future needs. As such, the Research Team will capture gender, martial status, household

makeup/composition and description, health and disability needs and services; sources and nature of income; diet needs; recreation needs, activities and accessibility. The approach is anchored within the holistic Aboriginal context of social, political, health, financial, recreational and other needs of Métis Elders in Saskatoon.

d) ascertain the level and reflection of Métis customs, practices and traditions in current housing developments

The Research Team will identify relevant Aboriginal/Métis values and practices relating to housing that is highlighted explicitly by Métis Elders. The Research Team reviews housing development and structures currently undertaken in Saskatoon for Métis Elders against the identified cultural needs.

e) ascertain the linkages amongst the relevant agencies crosssectioned with Aboriginal housing initiatives

The Research Team will provide a linkage analysis by canvassing through a social map. As such, samples of professionals impacting or potentially impacting housing initiatives will be provided.

The Research Team will analyze and correlate data received and provide commentary on gaps and potential partnerships available. Relationship building and identification of potential partnerships is a critical component of this section of the research and will be highlighted in the Conclusions and Recommendations section of the report.

f) ascertain factors for enhancing housing options and community capacity

The Research Team will describe factors needed to enhance the building capacity of existing Saskatoon Métis housing delivery organizations and institutions in the future. Moreover, factors that are not conducive to enhancing housing options and community capacity are reviewed. Further commentary will be provided in the Conclusions and Recommendations.

g) ascertain housing models and mechanisms in use by housing delivery institutions with recommendations of models of success.

The Research Team will identify housing models and options, both successful and unsuccessfully implemented by Aboriginal and non-Aboriginal corporations delivering services to Aboriginal peoples. Recommendation of successful models inclusive of potential private and public sector partnerships will be identified in the Conclusions and Recommendations.

1.3 Background

As constitutionally recognized in Section 35(1), *The Constitution Act, 1982*, ¹ Aboriginal peoples of Canada are comprised of the Indians, Métis and Inuit. The Métis are Aboriginal peoples separate and distinct from other peoples with their own customs, practices and traditions. The Métis remain the only Aboriginal Nations currently not recognized as being within federal jurisdiction, which raises unique challenges including impacting on issues tied to Métis specific research. For example, a central registry of Métis Nation peoples across Canada (or within each of the Provinces, Cities, Towns, or municipalities) does not exist. Rather, the "official" number of Métis Nation people in Canada is determined by Statistics Canada. Over the years, there have been many challenges to "official" numbers asserted by non-Métis institutions. Métis organizations have consistently stated the "official" numbers do not capture or reflect the community.

Part of the difficulty also lies in the fact that Métis identity is a complicated cultural, political, social and historical entity. To survive, at times, Métis people have denied their identity. After the Riel Resistance Métis children were taught that it was dangerous to be Métis. Métis people were shoved to the fringes of Saskatchewan society, living on Road Allowances and moving from place to place, following available employment. Distrust of governments grew as the scrip process deprived the Métis of their land and survival depended on <u>not</u> becoming known to government officials. Métis nationalism was kept

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¹ Constitution Act, 1982, Schedule B to the Canada Act, 1982, (U.K.), 1982, c. 11

alive by the political activities of a few and Métis pride flourished in private community gatherings.

It was not until the 1930's, about the time that some of the present Métis Elders were born, that Métis nationalism came out in the open and people celebrated their customs, practices and traditions. Some also joined organizations that worked for the advancement of Métis people. It was only at that time that it became safe to once again state publicly that you were Métis. In some families, though, the "selective forgetting" of the previous generations kept the younger generation from knowing they were part of the Métis community. In some communities, the older generations made sure the Métis family ties remained hidden, if ever talked about. To say that you are Métis is a political act and it is not easy for some even to this day. It defies what has been taught for years in the families who were trying to protect the young ones from racism and systemic discrimination.

The true number of Métis people in this city, province and country remains an issue to be grappled with, although Métis have always asserted they best know who is or should be recognized as a part of their community. For years Métis political organizations, fighting to meet the needs of Métis individuals and communities, have had to contend with the demand from non-Aboriginal organizations and governments to provide statistics to justify much needed projects. However, officials funding projects disputed information based upon the Metis' own knowledge of their people, because the data did not correspond to the "official" count. In fact, Métis organizations have been accused of inflating the numbers. By rejecting Métis analyses of the population of the Métis community, services were based on "pan-Aboriginal" assumptions derived from the readily available information on First Nations and Inuit peoples.

Knowledge remains within the Métis communities themselves including who is or isn't a part of their Nation. It is only within the gatherings of Métis people that the trust exists to result in people providing information that can then be used to build successful, meaningful capacities and relationships that are Métis-specific.

Understanding the above background is critical to qualifying the statistical findings indicated below in the report and to provide a context to the perpetuated misconceptions about the Métis community that blur, even today, the understanding of the non-Aboriginal policy-makers in all areas of services, including housing development options.

1.4 Aboriginal Population of Canada

According to the 2001 Census, nearly 1,000,000 people identified themselves as being Aboriginal, that is, they were North American Indian, Métis, or Inuit. About 62 percent of this population was North American Indian, 30 percent Métis, and five percent Inuit. Of the geographical distribution on a national basis, approximately 71 percent of all Aboriginal peoples live in an off-reserve community. Of the off-reserve households, approximately three quarters live in urban areas with the largest population, 41 percent in large metropolitan cities, 31 percent live in non-metropolitan cities and the remaining 28 percent live in rural areas.

The Aboriginal population was an average age of 13 years younger than the general population. This means, when compared with the non-Aboriginal population that there will be a large increase within the Aboriginal working-age population over the next decade. The Aboriginal birth rate is about 1.5 times that of the non-Aboriginal population.

While the province of Ontario has the highest absolute number of Aboriginal people (188, 315 people), they accounted for less than 2 percent of the province's total population. Second was British Columbia at 170,025 Aboriginal people or 4.4% of its population.

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² Statistics Canada, 2001 Census: analysis series. *Aboriginal peoples of Canada: A demographic profile*. The remaining 3 percent were either persons who identified with more than one Aboriginal group or registered Indians or band members who did not identify as Aboriginal.

The highest concentrations of Aboriginal people are found in the North and western provinces. Eighty five percent of Nunavut's population (22,720) and 51 percent of the Northwest Territory's population is Aboriginal. In Manitoba and Saskatchewan, 14 percent of the total provincial population is Aboriginal - 150,040 and 130,190 respectively.

Almost half of all Aboriginal people (49 percent) live in urban areas. At the same time, the proportion of Aboriginal people who live on Indian reserves and settlements is decreasing (31 percent in 2001 versus 33 percent in 1996). Aboriginal people are more mobile than other Canadians.

2. Methodology

2.1 Research Design

While not an exhaustive study of Métis Elder⁴ housing options, the project undertook various research methodologies. As such, the researchers have taken a mixed method approach to the project. Both primary and secondary research was conducted. Selected literature research was conducted to ascertain policy visions and objectives for Aboriginal housing initiatives, ascertain populations, capacities and gather information on Elder housing models specific to Métis Elders. Documents were supplemented with relevant statistical data. In terms of primary research, the Research Team conducted

³ *Ibid*.

⁴ It is well understood by the Research Team the term "Elder" has a distinct meaning that recognizes wisdom, experiences and knowledge of practices, customs and traditions. "Elders" are well respected within Métis communities as the teachers and wise ones. As this Research project was not geared to specifically address who is viewed as a traditional "Elder" by the community and in order to maintain respect for those many traditional "Elders" the Research Team knows were a part of the project, it was deemed critical to be respectful to this group and as such, deemed it necessary to be inclusive in our terminology. As a result, the term Elders used within the report includes traditional "Elders" and those based on chronological age.

extensive surveys through a personal approach format over a three and a half month period.

2.2 Data Collection Instrument

The data collection instrument of the Métis Elder Survey is attached as Appendix A.

2.3 Procedures

With an official start date of January 12, 2004, the Research Team undertook development of data collection instruments, including research of Aboriginal housing initiatives and processes, dialoguing with Métis Elders and vetting documents through key Métis Elders and Aboriginal housing community members.

Upon completion of this phase of the project, the Research Team was faced with the task of administering the questionnaire in an ethical, respectful manner beginning in April, 2004. Despite having a tight timeline and correspondingly tight turnaround time, the Research Team was pleased to garner ninety-seven (97) Métis Elder questionnaire responses.

2.3.1 Elder Gathering and Permission

The research project was approached with a Cree Métis ethical perspective accordingly the Research Team organized a cultural gathering of Métis Elders at La Petite Ville in Saskatoon, Saskatchewan on April 7, 2004. Approximately forty Elders attended the gathering whereby the Research Team members provided the framework of the project and information regarding the goals of the project. Thereafter, the Research Team formally asked the Elders' permission to undertake the research. Moreover, the Research Team asked for Elders' support by providing their personal input into the process. By following proper protocol, the Elders received the request, and approved it. They heard first hand about the research that was going on and they made it known they wanted to be involved and were very pleased to learn their voices would have a platform from which

to be heard. At the gathering, an overwhelming number of Elders made themselves known to the Research Team and indicated not only their own interest but also names of other Elders whom they recommended the Research Team could contact.

The gathering, while not a time for conducting survey questionnaires, interviews or eliciting specific information from the Elders, was an important and critical step in the research process. The gathering was a time of music and feasting to commemorate the occasion. All of this was accomplished in an atmosphere of laughter, joking, music, and socializing. Tea, bannock and jam completed the cultural gathering of Métis Elders.

2.3.2 Elder Survey Questionnaires

To identify Métis Elders, the Research Team worked with Aboriginal housing organizations, Elders attending the cultural gathering and other Elders as identified by the respondents. The methodology of the Métis Elders survey questionnaires followed established ethical protocol. The interviews were conducted in the Cree language where appropriate. As well, to follow proper protocol, the Métis Elder survey questionnaire was conducted in a relationship/household approach. As a result, personal door-to-door visits were undertaken to garner information. The Research Team Resource member, who is a fluent Cree speaker, oversaw all aspects of this phase of the research project.

All of the participants in the survey questionnaire were interviewed with the same data collection instrument that was developed in a two-phase process. First, each Research Team member developed a series of questions independently of each other. Then the Research Team Resource member who is well versed in Cree/Métis protocol examined the questions for appropriateness.

Particular questions were crafted to elicit information to assist in determining policies currently available or needed to support Métis Elders in housing options. In conjunction with this series, a set of questions was developed to provide a picture of the physical health of each individual. In this section of the survey, the Research Team compiled a

list of physical aides available to the disabled and those with various health conditions including diabetes. This list was incorporated into the data collection instrument to determine whether Métis Elders were accessing aides currently available. It is important to note that the Research Team resource member was consulted as to the appropriateness of questions regarding Elders' health and physical aides highlighted in the survey questionnaire.

To assess the current and future needs of Métis Elders, the Research Team canvassed support services that each Métis Elder had or wanted, including medical personnel, medical monitoring equipment, transportation and residence maintenance arrangements. With the concurrence of the Research Team resource member a question regarding income was included although the resource member cautioned that some respondents might not answer the question. However, it was deemed acceptable as long as it was clear that answering the question was voluntary.

The Research Team canvassed the level of schooling attained and any other training that the Métis Elders had. This was done to find out the degree of literacy of the respondents. Métis people in Saskatchewan did not obtain universal schooling for all children until 1954. Accordingly, our current generation of Métis Elders may have very limited reading skills, and therefore might require more assistance with things such as medications.

Questions surrounding the Métis Elders' home community and their experiences coming to Saskatoon were inserted into the survey questionnaire to provide background and give context to the community connections of the Métis Elders. It is important to know how long the Métis Elders have been residents of Saskatoon, at what period in their life that they moved, and what brought them to the city.

Most importantly, the Research Team reviewed the emotional, mental and spiritual issues that Métis Elders identified as being important in future housing options. As such, questions on customs and traditions such as access to traditional foods and medicines

were included. Questions about spirituality were considered extremely important because it has been found that many traditional people cannot meet the Aboriginal Spirituality ceremonial needs in urban surroundings. The Research Team saw the importance in being able to understand the complete life of urban Métis Elders. It was decided that the Research Team would gather data on numerous activities under the category familiar to many Elders, as "Activities." These items cover activities from woodworking, to training courses, baking to singing, with an open-ended response category for the respondent to provide additional commentary to capture cultural aspects of housing options.

The last two sets of questions were geared towards features about their homes. In consultation with a group of Métis Elders, the Research Team developed one question that asked about items in the home. Focus was centered on items that might make life easier for some Elders and meet some of their physical needs. The second question, which the Research Team referred to as "design features", looked at items that could be placed in or built into the building or apartment to better meet the needs of the Métis Elder. The Elders were further solicited in an open-ended question to record what changes that they would like, at this time, in their current housing, to make their lives more comfortable.

After the first and second phase of survey development as indicated above, prior to dissemination, the Survey Questionnaire was processed through a final vetting by the Research Team resource member, selected Métis Elders, and staff at SaskNative Rentals Inc. As a result of the final vetting, the Research Team added two questions to provide a more in-depth understanding of the Métis Elders' household composition.

As indicated previously, Métis Elder survey respondents were identified by the snowball technique. An initial list of Métis Elders was prepared and as each Métis Elder was interviewed, he/she was asked if he/she was familiar with other Métis Elders who might be interested in participating in the survey questionnaire.

One Métis woman who has worked extensively over the years with Métis Elders conducted all of the interviews. This was done not only to maintain consistency in the way the questions were asked but also to ensure the quality of the data. The interviewer was chosen very carefully as the interviewer had to be a person who understood the appropriate protocol in speaking with Métis Elders. The interviewer was not only well versed in Métis customs, practices, traditions and protocols but was also very familiar with Aboriginal housing in Saskatoon and knew the available support services in the city.

When the interviews were completed, the Research Team proceeded to analyze the data. After responses to each question were analyzed and frequency distributions it was determined that certain cross-tabulations should be completed to examine the comparison of responses across different groups within the sample. Since the purpose of the research was to determine direction for housing policy-makers, comparisons were made on the lives of Métis Elders in different household compositions. In some instances, differences in the experience of men and women were captured by the Research Team.

2.3.3 Storage of Data

All Métis participant responses within the survey questionnaires and interviews were assured their responses would be kept strictly confidential. Moreover, responses would be used only to obtain a portrait of Métis Elder housing options, development of community capacity and sustainable affordable housing models. Accordingly, all information concerning the identity of the Métis Elder participants will be destroyed after dissemination of the Final Report to stakeholders. Responses will be summarized, referenced and retained for a determinate period.

2.3.4 Dissemination of Results

After dissemination approval is received from Bridges and Foundations, the Final Report will be shared with the Aboriginal community, Aboriginal housing institutions including

stakeholders, potential public and private sector partners and the Métis Elder respondents who indicated an interest in receiving the Final Report. The dissemination procedures directed to Métis Elders will include a Métis Elder gathering to present the Final Report. At that time, the Research Team will present the material using the oral tradition format and will be available in both the Cree and English language.

2.4 Data Analysis and Evaluation

As indicated previously, in both the qualitative and quantitative research, this project examines Métis Elder housing options in Saskatoon, including issues specific to physical and cultural needs, but also looks at how to develop and enhance established relationships and capacities to address the gaps. Most importantly, it provides suggestions on how housing stakeholders can increase effectiveness in serving the Métis Elder community of Saskatoon. The project described the lives, perceptions and beliefs of Métis Elders through their eyes and words.

Not surprisingly, the survey questionnaire findings, using aggregate data, indicated a variance amongst some of the issues important to Métis Elders as they are not a homogeneous group. To repeat, there are four basic divisions: those who live alone; those who live with a spouse; those who live with others; and those who are the primary care givers for their grandchildren. Using a case study approach, there is evidence that the conditions of life of Métis Elders can change very quickly and have an immediate effect on the housing situation.

There were also common themes threaded throughout all of the respondents and research, particularly in relation to cultural practices, customs, and traditional needs and expectations. Thus, the Research Team provided a comprehensive overview of all responses collected and a more in-depth subset analysis of the data. As such, each of the main categories will be subdivided according to the various factors.

3. Results

3.1 Formal Vision and Objectives

Selected Aboriginal Elder housing funding policies, both past and present, and relevant policy focus from governments were gathered and analyzed. The Research Team concentrated on Aboriginal political, social, economic factors and needs with a view to the development of partnerships and community capacity-building. The documents were located through Internet searches, organizational contacts, government agencies and library collections and findings were also incorporated into the report Conclusions and Recommendations.

In the past, all levels of non-Aboriginal and Aboriginal governments have been working toward strengthening policies to support Aboriginal housing initiatives. In the late 1960's, non-profit housing arose through the recognition of socio-economic needs and ever-changing urban population compositions. In 1970, the federal government launched an initiative entitled "the Demonstration Program" which sought to focus funding on housing needs in major urban areas.

In 1974, CMHC reviewed Aboriginal housing initiative funding and as such, reviewed urban Aboriginal housing institutions. The resulting outcome was the decision that established housing programs served the needs of Aboriginal peoples. The call for CMHC to set up a separate Aboriginal program was rejected. However, the government agreed to increase the housing unit allocation for Aboriginal housing agencies. Under this new program, mortgage interest assistance was provided in the form of non-repayable subsidies over the life of the mortgage. As a result, Aboriginal housing agencies grew in number and size. In 1984 important changes were made to ensure additional units guaranteeing that tenants of Aboriginal ancestry would not pay above 25 percent of their income for shelter under the federal programs.

The government housing initiatives were critical components of recognizing the *sui generis* unique natures of Aboriginal housing options and needs of the peoples. However,

these innovative approaches for assisting in development of new Aboriginal housing stopped in 1993. Since that time, policies have shifted to withdrawing from social housing whereby private markets have focused on more "profitable" forms of residential construction. Where housing is allocated purely on market basis, people with low incomes are shuffled into houses that can be in a state of disrepair. The result was a vacuum in the construction and maintenance of affordable housing in Canada particularly as it relates to Aboriginal housing.

More recently, policies have shifted once again to review housing needs but with a focus on addressing the homelessness situation in Canada. As such, numerous initiatives have arisen across Canada to address homelessness concerns. This has not, however, translated into large housing development focused specifically for Aboriginal peoples. Instead, the policy is still mostly one of withdrawal from the social housing field. This has left a gap that has not been met by the private sector to date. Today, demand for all kinds of rental units maintains higher rents even among the less desirable properties. In the last couple of years, government encouragement is being provided through support of various initiatives such as this research project to develop new approaches to obtain successful affordable social housing development. It is hoped by the Research Team that this policy trend continues forward to recognize that access to affordable accommodation is a necessity to address the housing crises found in our Aboriginal communities across Canada.

3.2 Population and Forecast of Saskatoon

The Research Team gathered data from Statistics Canada, City of Saskatoon, Aboriginal Population Growth Forecast Information and similar statistical sources that are available.⁵

As context, it is important to note that from a provincial starting point, there are 80,290 non-Aboriginal households (not population) off-reserve in Saskatchewan. Of that starting point, there are 19,040 Aboriginal households that comprise 19 percent of the

total provincial proportion of Saskatchewan households. Of the 19,040 provincial Aboriginal households, Métis comprise 7,945 households, North American Indian at 10,615, Inuit at 55 and 420 Aboriginal households are unspecified.

As indicated in the following chart, Aboriginal population in Saskatoon is comprised of approximately 9.1 percent of the total Saskatoon population of 222,630⁶. Of the Aboriginal population, Métis are officially viewed as comprising 8,305 people of the total city population. ⁷

Summary of Saskatoon Aboriginal Population

Source: Aboriginal Identity Population, 2001 Counts, for Census Metropolitan Areas and Census Agglomerations (Statistics Canada data series 97F0024XIE2001007)
Aboriginal Peoples of Canada: Highlight Tables 2001 Census
This represents population counts and reflects both owner and rental tenure.

Aboriginal Identity Population

City	Total Population	Aboriginal Population		Métis	Inuit	Non Aboriginal	
							Total
							Population
Saskatoon	222,630	20,280	11,290	8,305	125	202,355	9.1%

When comparing population to Renter Households in Saskatoon, the Research Team found an overwhelming majority of Métis population seems to fall within the Rental Household category. In other words, for Métis of Saskatoon, an overwhelming number of the official population counts are not homeowners but renters. The Research Team's findings from the Métis Elders survey questionnaire support this as all (100%) of the

⁵ While the Research Team relied upon these sources of information, absolute values are limited given the inherent difficulties of calculations as explained further in the report. ⁶ Calculations gathered by National Aboriginal Housing Association in preparation for

[&]quot;A New Beginning: the National Non-reserve Aboriginal Housing Strategy" paper presented March 2004. The data used in the National Aboriginal Housing Association report was drawn from a special request to Statistics Canada to generate a series of tables specifically on non-reserve Aboriginal households that was augmented with data from the Aboriginal Peoples Survey as part of the 2001 census.

⁷ Calculations are made on basis of rank on absolute Aboriginal Population and Relative Incidence of Aboriginal population.

Métis Elder respondents had accommodations in rental structures rather than home ownership.

Saskatoon Total Households, Métis Population & Métis Rental Households

City	Total	Métis	Métis
	Households	Population	Rental Households
Saskatoon	80,815	8,305	2,225

3.2.1 Aboriginal & Non-Aboriginal Elder Population

Of the population of Saskatoon, there are 43,965 individuals aged 55 and above. Of this group:

Saskatoon Senior & Elder Population⁸

City	Total	Non-	Aboriginal
	Senior	Aboriginal	Elder
	Population	Senior	Population
		Population	_
Saskatoon	43,965	43,045	920

Saskatoon Aboriginal Senior & Elder Population by Age Bracket⁹

Age	All Senior	Aboriginal	Non-Ab.
Bracket	Population	Elder	Senior
		Population	Population
55-64	17,725	530	
65-74	13,570	250	
75-84	9,440	120	
85+	3,680	20	
Total	43,965	920	43,045

3.2.2 Métis Elder Population

As previously indicated, calculating Métis statistics is a rough science at best. Métis organizations across the country have been disputing Métis populations with officials of

⁸ Statistics Canada, Saskatoon Population Profile and Aboriginal Population Profile

Statistics Canada since the preparation for the 1986 Census. With each Census announcement of Aboriginal population statistics, we have been informed that this time the official numbers are accurate. The recent 2001 Census announcement was no different except that the statisticians found that they had to explain a seemingly unexpected jump of 43% in Canada's Métis population in five years, since the last Census.

Andy Siggner, the Senior Advisor on Aboriginal Statistics for Statistics Canada, addressed the perplexing result in a paper, "A Demographic and Socio-Economic Profile of the Métis in Canada" paper. He looked for a rational explanation for the increase. He first looked at the fertility rate and found that for the Métis, instead of increasing in the years in question, had declined. Although still higher than the fertility rate of non-Aboriginal people, it was lower than the North American Indians or Inuit. Therefore, it could not explain why the Métis population spiked and the other Aboriginal groups' population did not. Siggner then stated that the increase in the Métis population statistics could not all be attributed to demographic factors.

Siggner suggested that the increased awareness of Métis issues coming from court cases related to Métis rights, constitutional discussions in the early 1990's, as well as better enumeration of Métis communities have all contributed to the increase in the population identifying as Métis.

Siggner looked further at the situation. The overall annual growth rates of the Métis population as a whole could not be accounted for by natural increase. According to Statistics Canada, there were only about 80,000 Métis women of childbearing ages of 15-49, and the overall Métis population growth over the 1996-2001 period was just about 90,000. Demographers use the theoretical growth of a population due to natural increase as 5.5% a year. However, the Métis identity population's average annual growth was about 7.4% per year from 1996-2001. Statistics Canada admits that the increase cannot be

¹⁰ Delivered at "Métis People in the 21st Century" Conference in Saskatoon, June, 2003

⁹ Ibid.

due to immigration and still Statistics Canada searches for an answer which does not involve them saying that they have underrepresented the Métis in previous censuses, as the Métis leaders have suggested.

Siggner determined what part of the Métis population is, by Statistics Canada data, growing. He found that instead of the age cohorts declining with age due to mortality, Métis age cohorts are growing at a very high rate. This means that the population already born, instead of declining, is increasing, according to Statistics Canada data.

Siggner suggested "ethnic drift" or "ethnic mobility" as possible explanations for these confusing data. These terms are used by academics to describe people changing their ethnic affiliations from one census to the next. According to Siggner, the shift to Métis identity in certain age cohorts can be explained by: a growing pride in being Métis; court cases such as the *Powley* and *Blais* cases¹¹; the recognition of Métis leader Louis Riel as a father of Confederation; and possible Métis enumeration processes, etc. Siggner has attempted to make intellectual sense out of what had appeared to Statistics Canada as an anomaly.

This does not diminish the fact that Statistics Canada is reporting a 43% increase in the Métis. In fact, Siggner is attempting to legitimize Statistics Canada numbers. Regional data show increased Métis populations in areas which have not been regarded as part of the Métis Homeland, such as New Brunswick, Nova Scotia and Ontario. However, the fact that Saskatchewan Métis population increased by 22% in the last five years, cannot be explained by new people outside of the Métis Homeland.¹²

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¹¹ R. v. Powley, [2003] 2 S.C.R. 207, R. v. Blais, [2003] 2 S.C.R. 236.

¹² The analysis of the Métis statistics of 2001 show that even the experts in demography and enumeration, Statistics Canada, have not been able to enumerate the Métis people of Canada with accuracy and consistency. While the government agency has over the years discredited the statistics provided by the Métis organizations, it has not been able to show that its scientific methods give an accurate picture of the Métis population in a particular community or region.

The total population of Métis in Saskatoon for the 2001 year is 8,305¹³. Using this as a starting point and applying the expected growth rate of 5.5 percent per year, by the year 2011 the total Métis population is officially forecasted to increase to 14,187 people. As such, the yearly breakdown of forecasted population of Métis in the City of Saskatoon for the ten years after the 2001 survey would be:

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2002: 8762;
                                          2007: 11451;
2003: 9244;
                                          2008: 12081;
2004: 9752;
                                          2009: 12746;
2005: 10288;
                                          2010: 13447;
2006: 10854;
                                          2011: 14187;
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For Saskatoon, when taken as a percentage of the total Aboriginal population in the city, those over 55 years of age comprised approximately 4.5% (43,045 non-Aboriginal seniors and 970 total Aboriginal Elders¹⁴). If the percent rate were consistent in the Métis-specific population, according to Statistics Canada numbers, of the 920 total Aboriginal Elders in Saskatoon, once again there would be 374 Métis over 55 residing in Saskatoon in the 2001 year. In other words, approximately 41 percent of the Aboriginal Elders in Saskatoon are Métis.

The national proportion of Métis Elders, according to Siggner, is 4% of the total Métis population. Obviously, the proportion of Métis Elders in Saskatoon is higher than the national average. Moreover, the Research Team's estimate of Métis Elder population, based on our own knowledge of the Métis community, would be much higher than the official numbers or expectations. However, if at the minimum, there are between 600-700 Métis Elders, in Saskatoon, in ten years, this population is a size that allows us to test models and develop policy to address the needs of this population. Further, this size of

¹³ National Aboriginal Housing Association in preparation for "A New Beginning: the

National Non-reserve Aboriginal Housing Strategy" paper presented March 2004. The data used in the National Aboriginal Housing Association report was drawn from a special request to Statistics Canada to generate a series of tables specifically on nonreserve Aboriginal households that was augmented with data from the Aboriginal Peoples Survey as part of the 2001 census.

¹⁴ Statistics Canada, Saskatoon Population Profile and Aboriginal Population Profile

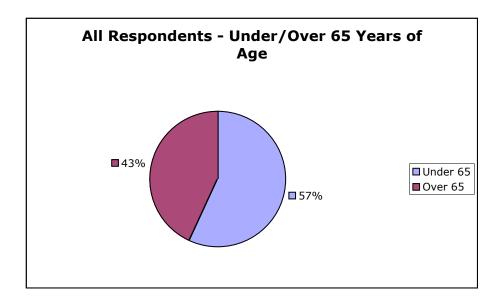
population offers a good opportunity to document the successes and failures of models and policy.

3.3 Métis Elder Needs and Expectations

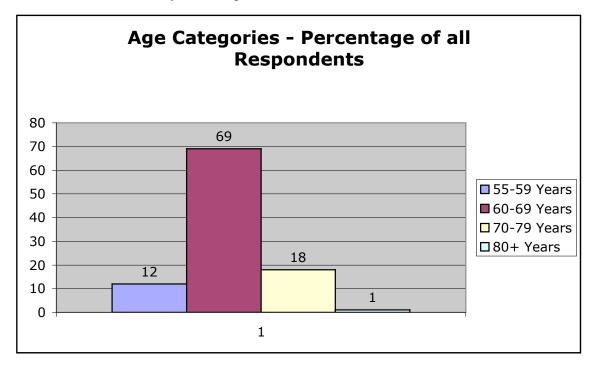
Ninety-seven Métis Elders shared their experiences with us. These 97 individuals represented 74 separate households. To discover the "needs being served" and the "expected needs", the Research Team chose a sample from the population aged 55 years of age to 90 years of age. Those interviewed, who were over 65 years of age at the time of the interviews, were the people who could tell us if their needs were being met. Participants between 55-65 years of age were seen to be the future Elders who could look at the situation from the point of view of what they "anticipated" or "expected to need" in the future.

Age

The Métis Elder respondents were between 55 and 89 years of age. As might be expected, the numbers of respondents decreased with age. Of those reporting their age, 57% were below 65 and 43% were over 65 years of age.

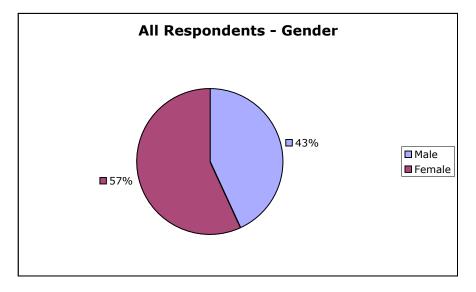


Only 1% of respondents was in the eighties age bracket while 18% were in their seventies. The majority of the sample (69%) was in the sixties age bracket while 12% were between 55 and 60 years of age.



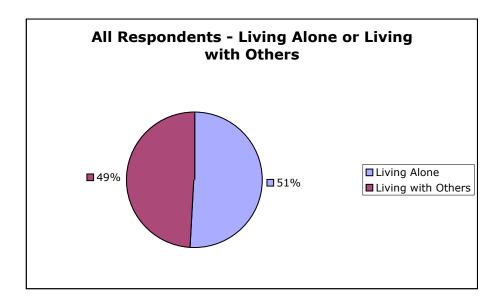
Gender

The interviewees were 43% male and 57%, female. These figures are almost the same as the percentage by gender (males, 42%; females, 58%) as reported for Saskatoon's Aboriginal Elders in the 2001 Census.

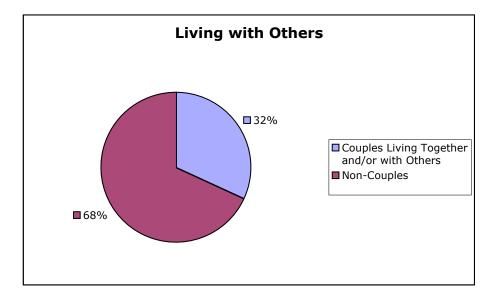


Household Composition

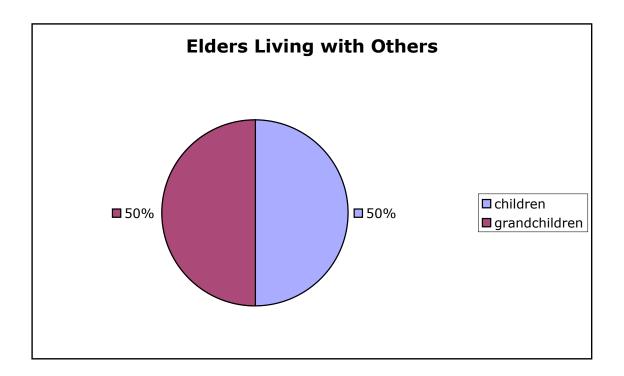
Over half of all households (51%) had a single resident. In the rest of the households represented in the sample, Metis Elders lived with others.



Of those living with others, couples made up 32% of households, either living together by themselves or with others.



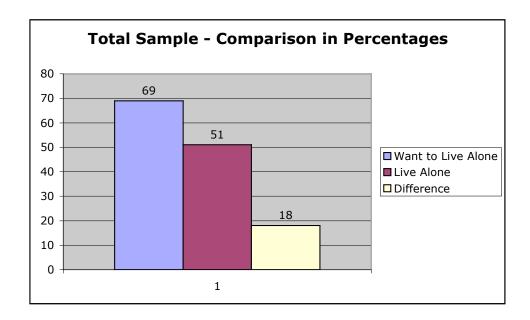
Fifty per cent of Elders living with others lived with the first generation being either their children or foster children. The remaining half of Elders living with others are living with the second generation being grandchildren.



Of the 50 percent of Elders living with the second-generation grandchildren, 36 percent of them do not have the grandchildren's parents in the same household. As a result, of the total sample of all Métis Elder respondents, 8 percent are full-time primary caregivers of the second generation.

Elders' Preference for Household Composition

When asked who they would like to live in the home, 69% of the respondents said they preferred to live alone.



The largest percentage of Métis Elders, who would like to have people living with them (15% of the total sample) said that they would like to live with their grandchildren. Another 12% of the sample would like their own children to live with them while 2% would like to have their whole family with them. Four per cent said they would like to have companionship some but not all of the time.

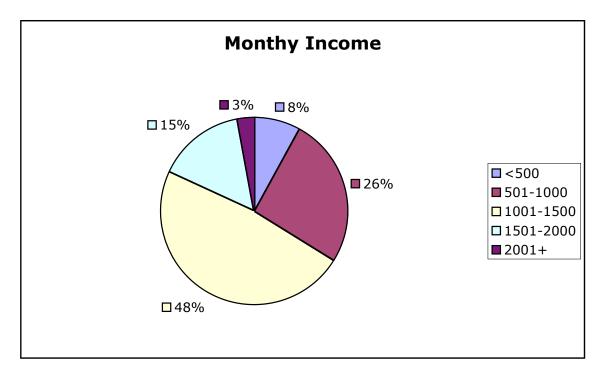
Sources of Income

Of those reporting their sources of income, we found that 42% of Métis Elders in the sample received Old Age Security (OAS) and 46% were receiving Canadian Pension Plan (CPP). Only 6% reported that they were getting the OAS Supplement. Seven per cent were on a Disability Pension while 21% stated that they were receiving another form of pension. Almost one in four (25%) of the sample receive wages from employment.

Another 6% are paid for services. Eight per cent (8%) receive Social Assistance, while 1% reported Family Allowance payments and 1% reported no income. 15

Monthly Income

Individual income was reported for the interviewee and spouse (if applicable). We found that 8% of individuals, reporting, had a monthly income of less than \$500. About one in four (26%) had a monthly income between \$501-\$1,000. The largest group (48%), said that their monthly income was between \$1001-\$1500. Fifteen per cent (15%) received a monthly income of \$1501-\$2000. Only 3% had a monthly income of \$2001 and above.



Affordability is a critical consideration in housing options for Métis Elders. Affordable should mean that rent is geared to income level and tenants should have some flexibility with respect to such things as damage deposits.

The research showed that Métis Elders live on fixed incomes with the majority falling within \$1001 to 1500 per month. Even as combined income, respondent Métis Elder

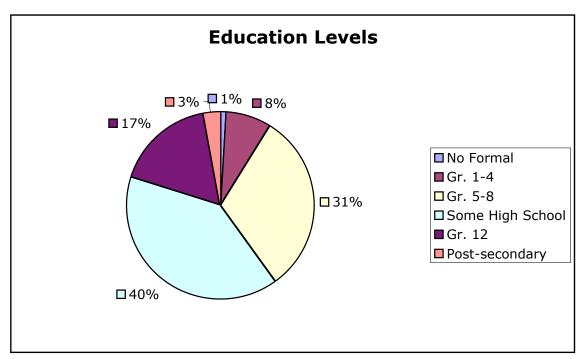
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 $^{^{15}}$ Note: these numbers do not total 100% as the participants could make multiple responses.

couples did not exceed \$3000. Using the accepted level of 30% of gross income to spend on housing, even the most affluent Métis Elders captured in the survey questionnaire (3 percent of all respondents) can afford between \$600 to \$900 per month for housing.

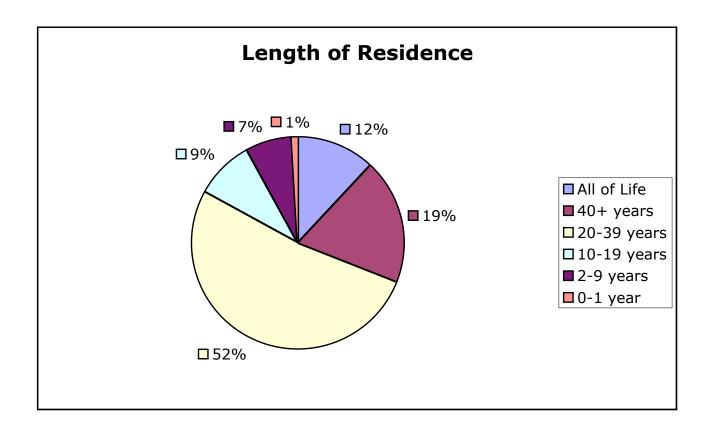
Education Level

Those reporting level of schooling indicated the following: 1% of the sample reported no formal education; 8%, grades 1-4; 31% grades 5-8. Therefore, 39% of the sample of Métis Elders had 8 or less grades of formal schooling. Another 40% had some high school, while 17% have completed 12 grades. Three per cent said that they had some post-secondary training. Training completed included: Cabinet Making, FISC, retail sales, Teachers College, Child Care, Horticulture, Computers, 3 years University and M.Ed degree.



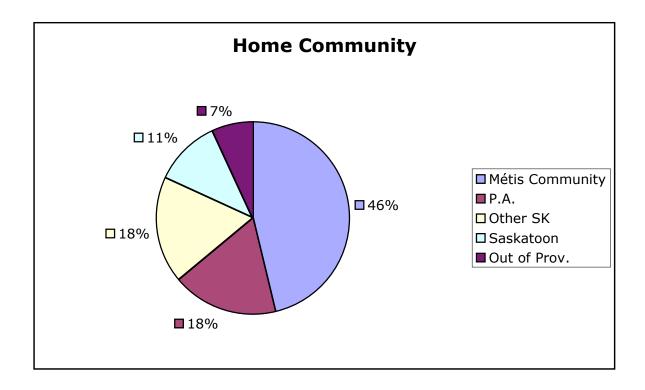
Length of Residence in Saskatoon

Twelve per cent, of the sample, have lived in Saskatoon their whole lives. Almost one in five (19%) have lived in Saskatoon over 40 years. Fifty-two per cent of Métis seniors, in this sample, have lived in Saskatoon between 20 to 39 years. Another 9% have lived here between 10-19 years. Only 7% of respondents have arrived in the last nine years with 1% new arrivals, in the last year.



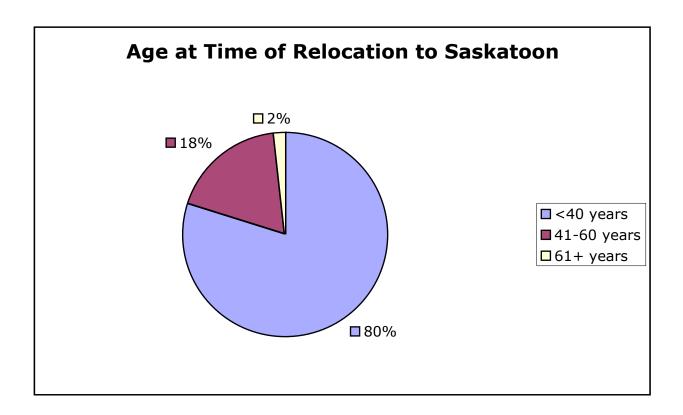
Home Community

Almost half of those responding (46%) came to Saskatoon from one of the recognized Métis communities in Saskatchewan. These communities include: Beauval, St. Louis, Cumberland House, Lebret, Batoche, St. Laurent, Ile a la Crosse, Gabriel, Duck Lake, and Green Lake. Prince Albert was the home community of 18% of respondents. Other Saskatchewan locations accounted for 18% while 7% came from out of province. The rest reported that Saskatoon was their home community.



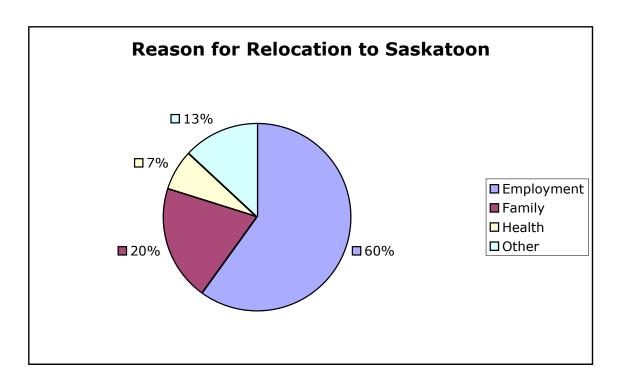
Age of Elder Moving to Saskatoon

Eighty per cent of Métis Elders in this study moved to Saskatoon when they were under 40 years of age. Eighteen (18%) per cent moved during their 40s, 50s, or 60's. Only 2% moved to Saskatoon as seniors.



Reason for Coming to Saskatoon

The majority of the sample (60%) came to Saskatoon for employment. Family, already living in the city, brought 20% of the sample to Saskatoon. Seven per cent came for their or a family member's health or medical reasons. Individual reasons for relocation accounted for 13% of Elders' moving. These included: to be close to the children; better housing; for retirement; adventure; and just for a change.



Health

Health conditions were reported for most Elders and their spouses. Individual Elders had differing levels of wellness. Most (98.9%) are living with chronic conditions. "Chronic conditions" as defined by Statistics Canada are "health conditions that have been diagnosed by a health-care professional and have lasted or are expected to last, at least six months. "16 When looking at the relationship between Health and Housing, it has been stated: "Many studies have established that living in appropriate, affordable and safe housing of good quality contributes to seniors' quality of life." "Appropriate housing" is defined as "housing that is designed and supported as per the specifications of those who live in it." Moreover, adequate, affordable, and appropriate housing is a prerequisite for good health" 18

The research found that arthritis and failing eyesight were the most prevalent health conditions, among the Saskatoon Métis Elders. Arthritis is the most common affecting

¹⁶ Statistics Canada, Catalogue no 89-589-XIE, 2003, p. 13)

¹⁷ Canadian Health and Renewal Association, (CHRA) Calgary Conference, October, 2003, p.16

¹⁸ CHRA, 2003, p.16

52% of individuals but 68% of households. Failing eyesight affects 51% of individuals but 66% of households. High blood pressure is a disease of 28%, almost one in three of the Métis seniors and is present in 36% of households. Slightly over one in four (26%) suffer from diabetes which affects 35% of households. Bad hearing is a problem for 23% of the sample of Métis Elders and affects 30% of the total Elder households. Heart problems exist for 16% of Métis Elders in 22% of the Elder residences. One in five households (20%) is affected by respiratory/asthma conditions, which involve 15% of individuals responding. Stomach and bowel conditions affect 11% of Elders and 15% of households. Cancer is a factor in the lives of 5% of the sample and impacts on 7% of households. Four (4%) per cent, of respondents, have had hip/knee replacements. This affects 5% of households. Another 1% of the sample and households have had amputations and 1% has osteoporosis.

Métis Health Conditions – Individuals vs. Households

	Arthritis	Failing	Blood	Diabetes	Failing	Cardiac
		Eyesight	Pressure		Hearing	
Individual	52%	51%	28%	26%	23%	16%
Household	68%	66%	36%	35%	30%	22%

	Respiratory Asthma	Stomach Bowel	Cancer	Hip/Knee Replacement	Amputations Osteoporosis
Individual	15%	11%	5%	4%	1%
Household	20%	15%	7%	5%	1%

In comparison to other Aboriginal people, the Métis Elders have a higher level of medical access. Métis contact with health professional is far greater than that reported by other urban Aboriginal people.¹⁹ However, Métis Elders have a lower rate of access to

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¹⁹ Statistics Canada, 2003, Catalogue no. 89-589XIE, p.15

traditional medicines (16%) than do other urban Aboriginal people (31%) who had access to traditional medicines, healing and wellness practices in their community.²⁰

The contact between Métis Elders and nurses is much less common than among other urban Aboriginal people. As such, only 11% of Métis Elder households were attended by a nurse. In comparison to all Aboriginal households, approximately 23% of Aboriginal people had contact with a nurse.²¹ Métis Elders, particularly those living alone, want and could benefit from more contact with a health professional, particularly in regards to diet and medication. Having a nurse employed, perhaps part-time, in a Métis Elder facility would be highly beneficial.

The research finds it advisable for housing authorities to consider working with health districts to create a position specifically geared to the health and housing issues of Métis Elders. The structure could be similar to the Community Health Representatives who for many years have served First Nations communities. As such, the Health Representatives are community members that can teach, advise, demonstrate and explain issues related to a Métis Elder's particular health situation in a culturally appropriate way.

Services

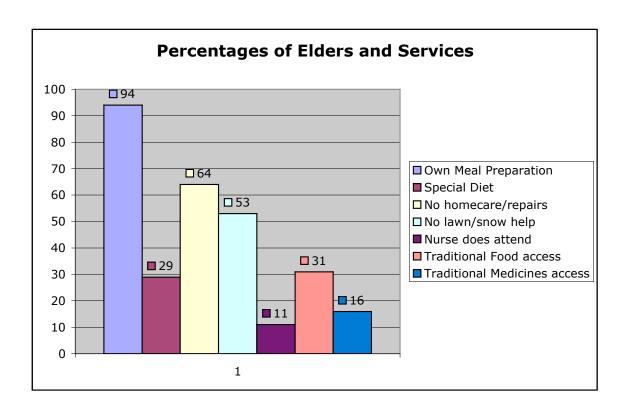
A number of questions related to services needed and received by Elders were asked. It was found that 97% of households have a regular doctor. One individual reported needing a doctor. Twenty-nine per cent reported having a specialist. In the majority of cases this specialist was an ophthalmologist. Eighty per cent reported having an optometrist. Another 61% stated that they had a regular dentist.

When asked who prepared their meals, 94% said that they prepared their own meals. Twenty-nine per cent reported being on a special diet. Specific diets listed were: low calorie; wheat and dairy allergies diet; low cholesterol; feeding tube; diets for stomach

²⁰ According to 2001 Aboriginal Peoples Survey (APS), Statistics Canada, 2003 Catalogue no. 89-589XIE, p.17

²¹ According to 2001 Aboriginal Peoples Survey (APS), Statistics Canada, 2003

and diabetic conditions. A high number of households (64%) reported that there was no one to help with home care and repairs. Over half (53%) of Métis Elder households have no help with lawn care and snow removal. A nurse visits only 11% of all households. Thirty-one per cent of respondent households have access to traditional food and 16% have access to traditional medicines.



Although not viewed by many of the Métis Elders survey respondents as necessary or wanted, often even ordinary housekeeping services are debilitating particularly for those Elders with chronic condition. "Home supports such as housekeeping and personal care, are not luxuries; rather they are vital supports that directly contribute to the health and well-being of residents."²²

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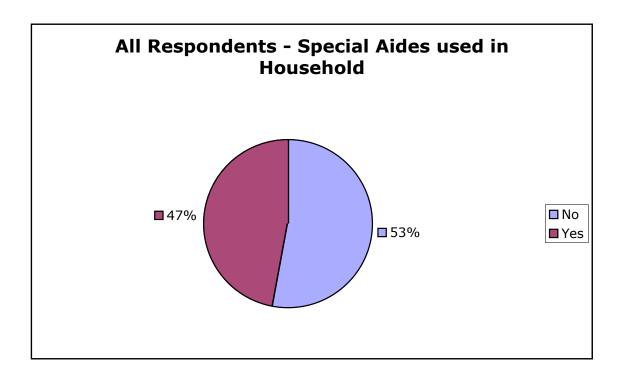
²² CHRA, October 2003, p. 17

Furthermore, Métis Elders in the survey sample indicated in many instances they did not have assistance to help with minor home maintenance and repairs. In responding to the question, "If you could change anything you wanted in your home to make it more comfortable for you what would it be?" a number of Métis Elders mentioned services such as painting and minor repairs. In addition, if the health conditions of the Métis Elders change (which is expected to occur), a large number of the Métis Elders do not have assistance to install any needed special aides. Accordingly, the research indicates the need for a services person to attend to the minor maintenance and repair needs of Métis Elders' residences.

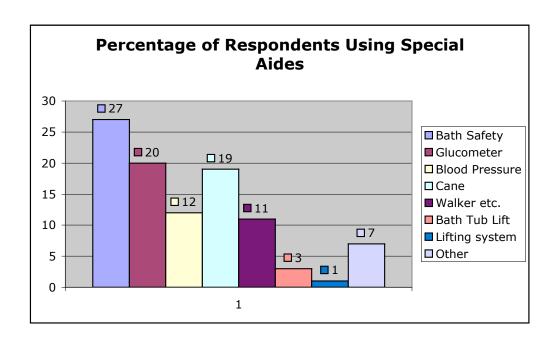
Métis Elders stated that many of them did not have someone to do lawn care or snow removal. One Métis Elder living alone in his eighties indicated he would like the walks kept shoveled in the winter-time. Home care, lawn care and snow removal are safety issues and accordingly, with 75% of Métis Elder households having people with arthritis and other mobility disabilities, uncleared sidewalks can be a safety hazard. Services for repair and yard care year round should be looked upon as a right rather than a privilege as it is a vital service to the enhancement of Métis Elders' quality of life and longevity.

Equipment in Use

More than half (53%) of the households do not have any special aides in use.

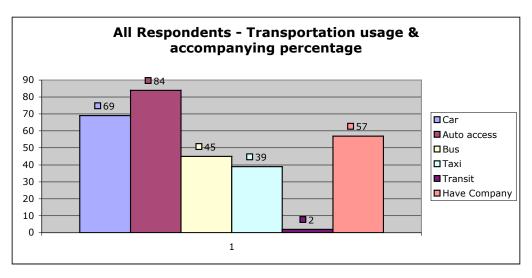


Of those respondents reporting use of special aides in the household, a cane is used in 19% of households. Bath safety aides are used by 27% of households. A glucometer is in use in 20% of households. Blood pressure monitors are utilized in 12% of households. Walkers are in use in 11% of the households, as are wheelchairs and geriatric chairs. Bath tub lifts are in 3% of households and home care lifting systems are utilized in 1% of the households. Respondents indicated that a home care lifting system, bath safety aides, a bath lift and geriatric chair were things that some households needed.



Transportation

Of the respondents, 69% can drive a car. A large portion (84%) of the respondents, have access to a vehicle. Less than half (45%) of the respondents or their spouses take the bus. Thirty-nine per cent use taxis. Only 2% of the respondents use the transit for disabled people. More than half (57%) report that they have someone to drive them or attend with them to appointments or to get groceries. This means that over four out of ten Métis Elders do not have anyone to accompany them to appointments or for other occasions.



Activities

The results showed that Métis Elders are very active. Cultural activities dominate the way that they spend their time. Métis culture is grounded in social activities. Métis songs, stories, history and cultural ways are passed on at gatherings. These gatherings very often centre around food. Food cooked out of doors is especially important as many of the Métis Elders come from communities where camping out is still practiced. The importance of barbecuing reflects an urban adaptation of this continuing cultural activity. The research showed that eighty-four per cent of respondents said that they barbecue.

As the Métis cultures are oral cultures, the history, culture and social norms of the Métis peoples are passed on to the next generation through person to person contact. Visiting is more than getting together. It is the way that the culture is maintained and transmitted. Visiting is a vital way for Métis Elders to reinforce and promote their cultural realities. Visiting is an opportunity to pass on the songs, stories and develop traditional skills like fiddling, and jigging. It is an opportunity to share traditional foods and medicines. The research shows that eighty-one percent of the Métis Elder respondents like to go visiting in other parts of the city.

Spirituality is also very important to Métis Elders. Dual traditions are not uncommon as Métis Spirituality is inclusive. This is reflected in the research findings. Seventy-two percent of the Métis Elders go to religious services at spiritual centres and 35% attend Aboriginal spiritual ceremonies.

Métis women have long been recognized as talented seamstresses. From the time of the Red River Settlement, the coats, moccasins, and other articles sewn and decorated by Métis women were much sought after trade goods. Métis women created articles of clothing which combined European and First Nations designs and materials. Métis women have passed the skills of design and creativity to their children through the years and this was reflected in the fact that in the research survey sample, 68% of the Métis women sew. Within the sample as a whole 12% reported that they produce Métis traditional crafts. Another 7% said that they do woodworking. Woodworking has been a

valued skill of the Métis community over the years. The first manufacturing operation in Western Canada was the production of Red River Carts in the Red River in the 1820's. Métis craftsmen not only created these essential vehicles but also adapted the design of European two-wheeled carts to the particular conditions of Western Canada.

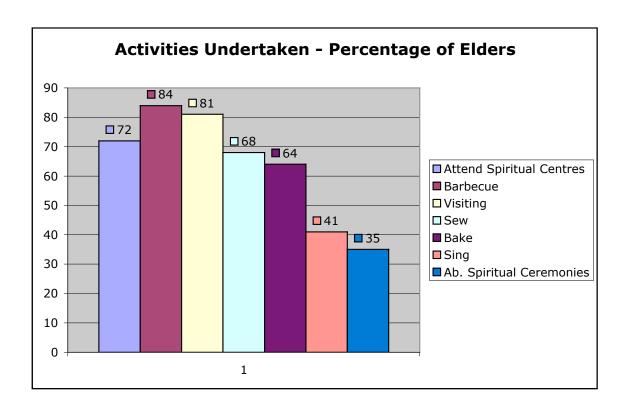
Food is the centre of Métis cultural activities. Métis people pride themselves on their hospitality. Sharing food is a sign of respect and inclusiveness. It is not surprising that in the Métis Elder survey sample, 65% still bake. The sample also showed that, despite living in the city, the Métis Elders continue to hunt and fish to be able to provide traditional foods for their tables and for the tables of others. Some Métis Elders of Saskatoon have the opportunity to engage in these traditional activities as 35% go fishing and 19% go hunting.

Métis culture revolves around music. Music has played a particular role in Métis culture. In the oral culture of the Métis, the balladeers have been the tellers of the stories. They have recorded the important events. They have disseminated the stories throughout the Métis Homeland. The fiddlers have commemorated important events with fiddle tunes composed for the occasion. Dances are also a tie to the ancient history of the Métis people. They are connected to events in the history of the community. The Métis Elders of Saskatoon are continuing the traditions: 43% sing; 41% go to dances; and 30% play a musical instrument.

The Métis Elders also participate in the activities of the larger community: 64% attend bingo; 62% attend sports events; 28% go to senior citizens centres to participate in events; 22% go to the pub; and 8% take courses.

A number of Métis Elders indicated they would like to become involved or more involved in cultural activities. The greatest interest was in advancing Métis traditional arts and crafts through sharing, learning and honing cultural skills.

A snapshot of a few of the activities Métis Elders undertake is as follows:

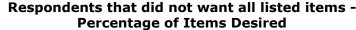


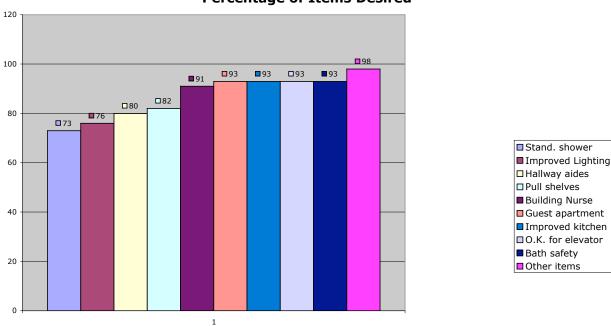
Design Features

When asked what items that they would like to have in their home if they were planning for the future Elders, fifty-three per cent of household respondents stated that they would like all of the survey questionnaire listed items. For example, washer/dryer; microwave; Cable TV; aides to help standing and working in the kitchen, bathroom, bedroom, hallway; storage space; stand alone shower (not in the tub); better lighting; a freezer; more security; a bigger kitchen, room for company; a guest apartment in your building; ground floor accommodation; an elevator; a nurse in the building; pull-out shelves in cupboards; and baseboard lighting.

Of the various items, seventy three percent of the total Métis Elder respondents want a stand-alone shower. Seventy six percent saw the need for baseboard lighting or better lighting in general. Eighty percent wanted aides for standing in hallways. Eighty two

percent wanted pull out shelves in cupboards. Ninety one percent saw the need for a nurse in the building. Ninety three percent wanted a guest apartment in the building. Ninety three percent saw the need for a bigger kitchen or for aides in the kitchen. Another ninety three percent are comfortable using an elevator. Again, ninety three percent saw the necessity for bath safety aides in the bathroom. Ninety eight percent want a freezer, more security, room for company in their home/unit and cable TV.





The research revealed that Métis Elders are living with a number of chronic diseases and in many cases the diseases are ones that could be accommodated by design changes in the homes of Métis Elders. By far the most prevalent health conditions are arthritis (over two thirds of households) and failing eyesight. Accordingly, there are design features that can be specifically targeted to address medical conditions in order to make life easier for the Métis Elder.

When Métis Elders with hip/knee replacements, osteoporosis and amputations are added to the sample group with arthritis, three quarters of the total Métis Elder households are affected. For those living with these conditions, things such as pull-out cupboard drawers, low cupboards, level entry ways, wide doorways for easy access of wheel chairs and walkers, big bathrooms for wheelchair accessibility, ramps, and railings are important housing design options.

For those with failing eyesight, appropriate lighting equipment is a priority. The placement and the type of window and window coverings should be chosen carefully. The type of lighting and fixtures must be considered because with some eye conditions, the Research Team was advised there is sensitivity to light. Colors could be used in a way to enhance the light. It is possible to design with baseboard lighting or track lighting on the floor to assist the person with poor sight to find their way without the glare of the overhead light. Overhead lighting is often a poor choice for people who have limited sight.

For those Métis Elders with asthma/respiratory problems, central vacuum and air conditioning are not a luxury but viewed as a necessity in building design. The research demonstrated that there is no one-size-fits-all housing solution for Métis Elders. Due to the differences in medical conditions, the requirements of building designs dictate that "appropriate" housing be varied. The research also indicates the need for information in the application process on such things as medical chronic conditions to enable housing authorities to tailor appropriate housing options to the individual clients.

Housing planning committees need to call on the expertise of the groups for the disabled and the Canadian Arthritis Society, the Saskatchewan Institute for the Prevention of Handicaps and other resource centres to formulate appropriate designs for particular medical conditions.

Métis Elder Comments on Current Physical

Structure Needs

The following were direct responses to the question, "If you could change anything you wanted in your home to make it more comfortable for you what would it be?

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"Happy where I am."
"Paint, linoleum, fence, eaves troughs."
"Lots of repairs done."
"Everything on one level."
"Walks shoveled in winter."
"Extra bedroom for company."
"Everything on one floor."
"Needs painting."
"Nothing."
"No stairs. Everything on the main floor."
"Make kitchen and dining room bigger."
"We have everything we need and want right now."
"Everything is okay."
"A Back door."
"No rugs."
"All bigger."
"Walks should be kept shoveled in the winter."
"A railing out front."
"Everything on main floor."
"Washer/dryer on main floor."
"Someone to cut the grass."
"Cupboards are bad."
"Flooring."
"When things requested rugs removed, taps, repairs to be completed by SNR."
"Motion lights."
"Central vacuum/air conditioner."
"Everything on one floor."
"Larger storage."
"Larger dining room."
"Larger fridge and stove."
"Set up for wheelchair clients."
"Change laundry room."
"Change nothing."
"Have a washer/dryer and freezer all on the main floor."
"A new rug in the living room."
"Both railing and Aides in the Bathroom."
"Patio-main floor-wheelchair accessible."
"Main floor-washer/dryer."
"Dishwasher."
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"Extensive housecleaning services, lawns, major renovations."
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[&]quot;Steps to reach upper cupboards with safety guards."

[&]quot;One floor level-no basement, or stairs."

[&]quot;More handrails throughout the house."

[&]quot;Decks for access to the outside-health reasons/enjoy nature/plants."

[&]quot;Larger space." (4 responses)

[&]quot;Decks on ground floor or balconies."

[&]quot;Pets allowed on the premises." (5 responses) for companionship and safety.

[&]quot;More storage."

[&]quot;Larger facilities." (3 responses)

[&]quot;Bigger kitchen."

[&]quot;Better access to upper cupboards."

[&]quot;Better Equipped for people with disabilities."

[&]quot;Closer to shopping area and services." (2)

[&]quot;Bigger Bedrooms"

[&]quot;Unable to do yard work/ need an apartment."

[&]quot;More room when I have visitors."

[&]quot;Garden spots."

[&]quot;Bigger rooms."

[&]quot;Bigger Bedrooms and kitchen."

[&]quot;A place to grow flowers/flower beds."

[&]quot;No stairs."

[&]quot;One large room for functions." (6)

[&]quot;Hot Tub and Exercise Room for aches and pains." (4)

[&]quot;Exercise equipment." (4)

[&]quot;Help to clean units." (2)

[&]quot;Washer and dryer in suite."

Household Composition & Other Indicators

As noted, the Research Team found that Métis Elders reside in four distinct types of households being living alone; living as couples; living with others and living as caregivers to their grandchildren. When the Métis Elder survey responses were categorized by the four household compositions, the issues important to each of the subsets and as such, the impact on housing options is shown.

Living Alone

The research shows that over half of Métis Elders in Saskatoon live alone and more women than men live in single person households. Of this category, the educational level of the Métis Elders is relatively low. A significant number (63%) of them have less than Grade 9 education. For men within this category, 73% fall below a Grade 9 education level.

As Grade 9 is universally accepted as the level of functional literacy, the research shows that many of the Métis Elders living alone are not functionally literate to follow instructions on such things as medicine bottles, pharmacy medical material, or other materials given to them doctors to assist in coping with a medical condition.

A large number of the Métis Elders living alone survive on a very low fixed income. Almost one in three female Métis Elders (30%) living alone have a monthly income of less than \$1000. Similarly, 27% of male Métis Elders live on less than \$1000. A large group of both male (55%) and female (44%) Métis Elders live on a monthly income of between \$1001-1500. The remaining 26% of female Métis Elders living on their own and 18% of male Métis Elders living alone have a monthly income of more than \$1500. Slightly over half of all the Métis Elders who live alone are under 65 years of age. However there are differences between the male and female samples. While only 21% of female Métis Elders are over 70 years of age, 45% of male Métis Elders living alone are over 70 years of age. One male Métis Elder over 80 years of age is living alone.

In relation to the health of Métis Elders living alone, the research found that only one male Métis Elders and two female Métis Elders did not have health problems. The most prevalent health problem among Métis Elder men living alone is failing eyesight, followed by cardiac/heart problems and/or high blood pressure. Most male Elders have multiple problems.

A few examples of individual Métis Elder respondents captured by the survey questionnaire interviewer include:

He has arthritis, stomach and bowel problems, has had a knee/hip replacement and can't see very well. He lives on less than \$1500. per month. He sometimes uses a cane. A nurse does not visit him. He cooks for himself. He uses taxis and the bus but he has access to a vehicle and someone to go with him to appointments and to buy groceries. He plays bingo, goes to the pub, sings, attends Church, goes to sporting events and visits around the city. He would like all of the items listed in his home. He would like help in the winter to keep his walks shoveled and would appreciate a railing in the front.

He is in his seventies. He has an income of between \$1501.-2000. per month. He has arthritis and bad hearing. He has a regular doctor, dentist and optometrist. He makes his own meals and has access to traditional food. He has no help with lawn care, snow removal, home maintenance or repair. He has bath safety aides, but is not visited by a nurse. He has his own car. He plays bingo, plays a musical instrument, barbecues, attends Church and goes visiting. He is not interested in having a bigger kitchen although he would like all the other items suggested. The one thing that he would change in his own home is that he would like it painted.

He is in his seventies. He is living on OAS and CPP with a monthly income of between \$1500-2000. He is living with heart problems, arthritis, high blood pressure, diabetes, and bad eyesight. He has a regular doctor, specialist, optometrist and dentist. He makes his own meals and is on a special diet for diabetes. He uses traditional foods and traditions medicines. A nurse visits his home. He uses a cane, glucometer and home blood pressure monitor. He drives his own car. He plays a musical instrument, goes fishing, goes hunting, has barbecues, attends Church, participates in Aboriginal Spiritual ceremonies, goes to sporting events and visits. He is not interested in aides to help standing and working in the house nor in having more storage.

He is in his early sixties and lives on a disability pension, which provides under \$1000. per month. He has heart problems, high blood pressure and bad eyesight. He has a regular doctor and a heart specialist, an optometrist and dentist. He prepares his own meals. He is on a special diet. He does not have help with repairs or home

maintenance or lawn care or snow shoveling. He has bath safety aides, a glucometer, and home blood pressure monitor. He uses taxis and the bus and has access to a car and someone to drive him for groceries and appointments. He bakes, sings, goes to Church and visits. He is not interested in aides for working in the kitchen, bedroom or hallway or a stand -alone shower. He would like to live closer to shopping and have more space.

Female Métis Elders living alone have many of the same conditions as male Métis Elders living alone. The following are some examples of their lives.

She is between 60 and 64 years of age. She lives on less than \$1000 a month. She has heart problems, high blood pressure and bad eyesight. She has a regular doctor, a heart specialist, an optometrist, and dentist. She prepares her own meals for her special diet. A nurse visits. She has no help with home maintenance or repairs or lawn care in the summer and snow removal in the winter. She has bath safety aides, a glucometer and home blood pressure monitor. She takes the bus and taxis and has someone available to take her to appointments. She bakes, sings, attends Church and goes visiting. She would like to have the items in her home except for the Aides for standing and working in the kitchen, bedroom and hallway. She does not want a stand-alone shower.

She is in her seventies with primary school education. She receives less than \$1000. a month in the pension. She would like her grandchildren to live with her. She has arthritis, diabetes, bad eyesight and bad hearing. She has a regular doctor, an optometrist and dentist. She prepares her own meals. She has help with home maintenance and repair and to take care of the lawn and remove the snow. A nurse does not visit her. She does not have access to traditional medicines or food. She uses a cane and has a glucometer. She has access to a vehicle and can drive. She sometimes uses the bus. She plays bingo, goes to dances, bakes, sews, goes fishing, attends Church, goes to sporting events and visits in other parts of the city. She would like to have all of the design features in her home, especially all of the safety aides but not until her condition warrants them. Right now, there is nothing she would change in her home.

She is between 60-64 and earns her living by working. She takes home less than \$1000. a month. She has heart problems, arthritis, high blood pressure stomach/bowel trouble, bad eyesight and bad hearing. She has a regular doctor, an eye specialist and an optometrist but no a dentist. She cooks for herself. No nurse visits her. She has no help with her lawn or snow shoveling and no help with house repairs and general maintenance. She does not use any special aides around the house. She has someone to take her to appointments and for groceries. She bakes, sews and visits. She would like to participate in Aboriginal Spiritual ceremonies. She would like to have all of the mentioned items in her home except for a stand- alone shower. In her present home she would like to have larger facilities, more storage and pets for companionship and safety.

She is in her seventies and receives between \$1001-1500. each month from her OAS and CPP. She has arthritis, bad eyesight and bad hearing. She has a regular doctor, and an optometrist. She prepares her own meals and follows her own diet. A nurse visits. She does not have help with home maintenance and repair. She uses a cane. She does not have anyone to take her for groceries or appointments so she uses the bus or taxis. She plays bingo, goes to dances, sews, plays a musical instrument, sings and attends Church. She would like all of the suggestions in her home eventually, but right now, she would like to have everything on the main floor.

The research shows that Métis Elders living alone are very independent but there are areas for improvement that would make their housing more appropriate. For example, one Elder indicated she would feel more secure and less lonely if she had a pet for company. However, many rental facilities do not allow pets and as such, the Métis Elder respondent living alone would benefit from a waiver of this restriction.

The research has shown that Métis Elders would like to have living quarters all on one floor. With arthritis, failing eye sight, and cardiac/heart problems as the most prevalent health conditions of Métis Elders, having to go up and down stairs as a part of daily living is a health risk to many particularly to those Métis Elders living alone. Moreover, the installation of alarm systems for Métis Elders living alone was viewed as a necessary item to have in the household.

Couples

Twenty per cent, of the sample of households, were couples living on their own. For 47% of couples, living on their own, both spouses were in their sixties. One third of couples had one spouse in their sixties and one spouse below sixty. Thirteen per cent of couples were in their seventies and 7 % of Métis Elder couples living on their own were in their eighties.

For those reporting their income, 50% of couples had a combined income of between \$1000-\$2000 per month and the other 50% had combined incomes of between \$2000-3000.

The following are examples of the lives of Métis Elder couples.

They are in their seventies. They have lived in Saskatoon all their lives. She had no formal education and he had some high school. Their combined income is between \$1000-2000 per month. They are both in poor health. Between them they have heart problems, arthritis, asthma/respiratory problems, diabetes, bad hearing and bad eyesight. They have a regular doctor, and an optometrist. They prepare their own meals and have someone to help them with home repairs and maintenance and with lawn care and snow removal. They use a cane and home blood pressure monitor but they report that they need bath safety aide, bathtub lifts and a geriatric chair. They drive a car and have access to a car. They have someone to drive them to appointments. They play bingo, sew, barbecue, go to senior centers for activities, attend Church and go to visit. They would like all of the items asked for their home but currently, a new rug in the living room and bath railing and aides in the bathroom would make their home more comfortable.

They are in their sixties. They have lived in Saskatoon between 20-40 years. He lives on the OAS and CPP and she has the supplement for wives of seniors. They have a lot of chronic conditions. They have heart problems, arthritis, high blood pressure and diabetes. The have a family doctor, a specialist, an optometrist, and a dentist. They prepare their own meals following a diabetic diet. They have access to traditional foods and medicines. They do not have someone to help them with repairs and home maintenance or to take care of the lawn or shovel snow. They use a glucometer. They drive a car and have access to a vehicle. They do not have anyone to go with them to get groceries or go to appointments. They bake, sing, go to sporting events, barbecue and visit in other parts of the city. They would not be interested in aides to help standing and walking or a stand-alone shower. They would be interested in all the design features. To make their home more comfortable now, they would like a patio on the ground floor which was wheel chair accessible. They would like a main floor washer/dryer, dishwasher and extensive home cleaning services for walls, lawns, and major repairs. They would like steps to reach upper cupboards with safety guards.

It is important to realize that couples living together give companionship, share responsibilities, and are available to go places together. However, in most of the Métis Elder couple household compositions, there is twice the number of health issues with which to deal. The couples in the survey were very clear on what their immediate needs were for making their housing more appropriate. Many of the items mentioned relate directly to failing standard of health. Elder recommendations included steps to reach the upper cupboards with safety guards although this can be a hazard. It may be preferable for this couple to have a kitchen that was designed without upper cupboards or cupboards that were accessible from the floor and with pull-out drawers for ease of use.

For many of the Métis Elder couples, the idea of having domestic help to assist in household cleaning chores was seen as a luxury and viewed as an option only for people with physical limitations for necessity, peace of mind and basic comfort. The research shows that for people who have always done their own cleaning and pride themselves on the high standard of cleanliness they maintain, not being able to do their own cleaning is a source of great distress. However, the research also indicates some Métis Elder couples view a support system as enhancing their ability to remain independent and improve their quality of life.

Living with Others

Of those Métis Elders who live with others, 96% live with family members. Four percent live in a designated seniors home. Twenty per cent of Métis Elder couples share their residence with others. Nineteen (19%) per cent of Métis Elder households have children in residence all of the time. Eleven per cent (11%) of Métis Elder households is comprised of three generations. In eight per cent (8%) of all Métis Elder households, grandparents are the full time primary caregivers of their grandchildren.

The following give examples of the life of Métis Elders living with family members.

They are both in their early sixties. Their household is a three- generation household with sons, daughters and grandchildren. This is the way they like it. Their preference would be for their children, their children's spouses and their grandchildren all to live with them. The Elders have between them arthritis, diabetes and bad eyesight. They have access to a regular doctor, a dentist and optometrist. They prepare their own meals, and are not on a special diet. They do have help with the lawn and snow removal and care and maintenance of the house. They have access to traditional meats and berries and traditional medicines. A nurse does not visit them. They have no special aides but need bath tub lifts. They have access to a car and have someone to drive them to appointments and to get groceries. They play bingo, do Métis traditional arts, bake, sew, play a musical instrument, sing, barbecue, go to a senior citizens centre for activities, attend Church and participate in Aboriginal Spiritual ceremonies, go to sporting events and go to visit in other parts of the city. They would like all of the items listed for homes in the future including an en suite washer and dryer. The most urgent things

needed in their home to make it more comfortable are: everything on one level; an exercise room and equipment; and help to clean the units.

She is a woman in her seventies. She lives with her son and granddaughter. This is her preference. She has heart problems, high blood pressure, diabetes and bad hearing. She has a regular doctor, and an optometrist. She prepares the meals and she is on a diabetes diet. A nurse visits her but she does not have help with home repairs and maintenance. She doesn't have help with lawn care or snow removal. She does not have access to traditional foods or medicines. She uses bath safety aides and a glucometer. She has access to a vehicle but she doesn't have anyone to drive her to appointments or to get groceries. She plays bingo, sews, goes to a senior centre for activities, attends Church and participates in Aboriginal Spiritual ceremonies, goes to sporting events and goes to visit in other parts of the city. She would like all of items listed but for now is happy with the way things are in her home.

They are in their early sixties. They live with their son and grandchild. Their preference would be to live on their own. They are suffering from heart problems. One has had a triple bypass. They have bad hearing and bad eyesight. They have a regular doctor, an optometrist, and a dentist. They do not have help with home repairs or maintenance or lawn care and snow removal. No nurse visits and they are not on a special diet. They have access to traditional foods but not traditional medicines. They do not use any of the aides available. They have access to a car and can drive. They do not have any one to go with them to appointments or to get groceries. They play bingo, bake, sew, sing, barbecue, attend Church, participate in Aboriginal Spiritual Ceremonies, and go to visit in other parts of the city. While they say that they have everything they want and need for now, they would like to have the items listed as the time comes when they will need more help.

She is in her early sixties. She lives with her three foster children. She would prefer to live alone. She has arthritis, asthma/respiratory problems, diabetes, bad eyesight and bad hearing. She has a regular doctor, an optometrist, and a dentist. No nurse visits. She prepares her own meals. She does not have help with the house repair and maintenance. She does not have help with lawn care or snow removal. She has access to both traditional foods and medicines. She doesn't use any special aides. She drives a car and has access to a vehicle. She doesn't have anyone to go with her to appointments or to get groceries. She goes to bingo, dances, to the pub, takes course, does traditional Métis arts, bakes, sews, goes fishing, barbecues, attends Church goes to sporting events, and goes to other parts of the city to visit. In the future she would like to have all the items mentioned as well as a T.V. monitor to see who is at the door. To make her present home more comfortable she would like to have a larger storage room, a larger dining room, a larger fridge and stove, central vacuum and air conditioning, and the suites to be set up for wheel chair clients.

The research shows that many Métis Elders are living with others out of necessity. Even with people living with them, many Métis Elders have no one to help them take care of repairs and general maintenance of the house. Many do not have anyone to go with them for appointments or to do other chores. Many of these Métis Elders are as much in need of support systems as Métis Elders living alone. It cannot be assumed that because family is living with someone that the needs of the Métis Elders will be met. To maintain their independence and their pride Métis Elders living with others need to have access to the same support services as those living on their own.

The research shows that housing options need to differ for the Métis Elders living with others as space is a critical issue. Many Métis Elders specifically stated that they needed a larger living room or dining room. They said that they needed more storage space. The housing requirements of a three-generation family differ considerably from those of a single or two Elders living on their own. Each family is unique and the requirements of one will not fit the needs of the other. The research shows that it is important for those looking at the housing options for Métis Elders, a single bedroom 600 square foot apartment will not serve this categories needs. The range of housing options must provide for the possibility of an extended family living in the Métis Elders home as it is the reality of many Métis Elders in Saskatoon.

Full Time Primary Caregivers to Grandchildren

Eight per cent of all Métis Elder households have full time responsibility for their grandchildren. Such households are referred to by the term, "grandfamilies"²³

"The role of grandparents in society is being redefined as new extended family members are added, which opens up family boundaries to new members as these families change and evolve. Instead of playing a peripheral role in the lives of their natural grandchildren, many grandparents find themselves becoming responsible for raising them and/or other children from 'new extended family' 124

These families present the designer of Métis Elder housing with a different set of issues. For these Métis Elders it may be of utmost importance to live near a school and playground. Moreover, the house may need safety items to protect toddlers. The health concerns of the Métis Elders may be supplemented by health problems of children, which require specific adaptations such as wheel chair access. The Métis Elders may have special support needs such as babysitting while going to medical appointments.

The following represent examples of the lives of grandparents with sole responsibility for grandchildren.

They are a couple. One is in her sixties and the other in his seventies. They live with a grandchild. This is their preferred household type. Their combined monthly income is between \$1500-2000. They have multiple conditions including arthritis, high blood pressure, asthma/respiratory problems, cancer, diabetes, a hip/knee replacement, and bad eyesight. They have a regular doctor, a specialist, an optometrist, and a dentist. No nurse visits. They prepare the meals themselves with no dietary restrictions. They have no help with home care and repairs or with lawn care or snow removal. They have access to traditional foods and medicines. They use a cane, glucometer, and bath safety aides. They drive a car and have access to a vehicle. They have someone to go with them to appointments or to get groceries. They play bingo, bake, sew, go fishing, go hunting, barbecue, attend Church, go to sporting events and go to visit in other parts of the city. They would

²³Dorothy Bird, GIFT, in conversation, August 8, 2003. In Saskatoon, the organization Grandparents Involved Full Time (GIFT was formed to respond to the need of grandparents who found themselves taking care of their grandchildren on a permanent basis

²⁴ *Ibid.* Dorothy Bird, GIFT, in conversation August 8, 2003

like all of the items in the future but their most immediate need is to have everything on the main floor.

She is in her early sixties. She lives with her grandson and this is the way she wants it. She is on a Disability Pension, which provides a monthly income of between \$501-1000. She has arthritis, high blood pressure, asthma/respiratory problems, cancer, and bad eyesight. She has a regular doctor, an optometrist, and a dentist. No nurse visits. She prepares the meals. She has help with lawn care and snow removal but does not have help with home care and repairs. She does no have traditional foods or medicines. She uses a cane, a walker, a wheelchair, bath safety aides, and a home blood pressure monitor. She uses taxis and the bus but does not use buses for those with disabilities. She has someone to go to appointments with her and to get groceries. She plays bingo, bakes, sews, goes fishing, barbecues, attends sporting events and visits. She would like all of the items listed except for a stand- alone shower.

She is in her early sixties. She lives with her two grandchildren. She wouldn't have it any other way. Their monthly income is between \$1001-1500. Sources of income are DSS and family allowance. She has heart problems, arthritis, high blood pressure, asthma/respiratory problems, stomach/bowel problems, bad eyesight, and bad hearing. She has a regular doctor, a specialist, an optometrist and a dentist. No nurse visits. She prepares her own meals and is on a special diet for her stomach. She has access to traditional food but not traditional medicine. She uses a walker, a cane, bath safety aides, a glucometer, a home blood pressure monitor. She cannot drive but has access to a car. She sometimes uses a taxi but does not use the buses for those with disabilities. She bakes, sews, sings, barbecues, attends Church, participates in Aboriginal Spiritual Ceremonies, and goes to sporting events. She would like all of the things listed but her immediate priorities are motion lights, having everything on the ground floor and central vacuum and air conditioning.

They are a couple in their sixties. Her works full time and she works on a casual basis. They live with two grandchildren. They want their grandchildren to live with them. The Métis Elders are in relatively good health with high blood pressure as the only condition they have. They have a regular doctor and dentist. They prepare their own meals. They have someone to care for the home maintenance and repairs, also snow removal and lawn care. They don't have access to traditional food or medicine. They don't use any special aides. They have access to a car and drive themselves. They have someone to go to appointments with them and go for groceries. They play bingo, go to dances, go to the pub, bake, barbecue, participate in Aboriginal Spiritual ceremonies, go to sporting events, and go to visit in other parts of the city. They would like to do Métis traditional arts and sew. They would like all of the items on the lists in their home but their concern at the moment is to have everything on the main floor.

The Métis Elders four distinct household types pose challenges for those building housing for Métis Elders. Métis Elders have very different housing needs than might be assumed. Some Métis Elders need to live near a school and a playground. Some Métis Elders need a place with two or three bedrooms. Size is an important factor for many Métis Elders. A larger kitchen and dining room are important to many as they have other people living with them.

Summary of Survey Questionnaire Results

The research indicated showed:

- 1) There are four distinct types of households within the Métis Elder population. Each household type has distinctive housing implications;
- 2) Métis Elders have varying levels of wellness;
- 3) 98.9% of Métis Elders have one or more chronic conditions;
- 4) Arthritis or rheumatism is the most common condition affecting 68% of all Métis Elder households;
- 5) Failing eyesight is a factor in two thirds of Métis Elder households;
- 6) Just over half of all Métis Elders live alone;
- 7) Over two thirds (69%) of Métis Elders would like to live alone;
- 8) 8% of the Métis Elders are primary caregivers for the second generation;
- 9) The overwhelming majority (83%) of Métis Elders have lived in Saskatoon over 10 years;
- 10) Most of the Métis Elders moved to Saskatoon in their 40's;
- 11) Six out of ten of the Métis Elders came to Saskatoon for work;
- 12) About half of the Métis Elders are from traditional Métis communities;
- 13) Almost three quarters (73%) of the Métis Elders are living on less than \$1500 each month:
- 14) Almost all (97%) of the Métis Elders have a regular doctor;
- 15) A large number (80%) of Métis Elders have an optometrist;
- 16) Over half (61%) of Métis Elders have a dentist;
- 17) The vast majority of Métis Elders prepare their own food even though 29% are on Special Diets;
- 18) Almost one in three (31%) of Métis Elders have access to traditional foods;
- 19) A small number of Métis Elders have access to traditional medicine;
- 20) More than two thirds of Métis Elder households have no help with repairs or home maintenance;
- 21) Over half (53%) of Métis Elder households have no help with lawn care or snow removal:
- 22) A nurse visits 11% of Métis Elder households:
- 23) Almost half (47%) of Métis households have special aides in use;
- 24) Four out of ten Métis Elders have no one to go with them to appointments or to get groceries.

- 25) Métis Elders enjoy a number of activities including barbecuing or visiting throughout the city;
- 26) Almost three quarters (72%) of the sample attend spiritual centers in the city;
- 27) Over one in three (35%) Métis Elders specifically participate in Métis Spiritual ceremonies:
- 28) Music is a big part of Métis Elders' lives: 43% sing, 41% go to dances and 31% play a musical instrument;
- 29) Métis Elders are very aware that their housing needs will change as their physical condition changes.
- 30) Métis Elders indicated that as needs arise they hope to acquire the appropriate special aides.
- 31) Most of Métis Elders would like to have all of the design features that were listed in the survey questionnaire.
- 32) Métis Elders often mentioned they would like to have their residence on one level;

The research shows that it is vital for housing stakeholders to team up with health agencies, social agencies, and other service providers to ensure the housing situation of Métis Elders is addressed in a holistic manner.

3.4 Reflection of Métis Culture

In Saskatchewan in particular, the Métis have been treated as a conquered people. Living through the aftermath of the Riel Resistance, the Road Allowance communities, denial of Aboriginal title and their constitutionally protected rights, Métis Elders have a bond to each other that is hard for others to grasp in a meaningful manner. Humour, music and tenacity have helped them to survive. Many were taught to survive by denying who they were. Others lived defiantly asserting their rights. These Métis Elders have lived to see many of their friends and relatives go to war and not return. Many have been active in the "new" political movements reviving the spirit of Métis nationalism that had previously lain dormant. They value independence and individuality. Furthermore, they have been hard working, tax paying, contributing members to the City of Saskatoon for a long time.

Métis culture has many traditions, practices and customs and one of the most powerful is the Métis music. The fiddle draws people together and reaches the heart of Métis people. Music is part of the story telling of the culture. The traditional tunes like Drops of Brandy or the Red River Jig carry an historical message which unites people in the realization that the roots of the music are in the days when the Métis Nation controlled the economy of the West, in the fur trade, in the buffalo hunts and in Batoche to name a few events. The fiddlers have recorded the important events of Métis contemporary history. Tunes like "The Road to Batoche" or "My Kokum's Wapoose Stew" document the way it was. Métis Elders indicate their need for the traditional music. They need to connect with the past through the music, which has been with their people for generations. Singing, playing a musical instrument and dancing were all part of the lives of the Métis Elders the Research Team interviewed. Telling stories of the past is also an important aspect of Métis culture. The research has overwhelmingly shown that for our Métis Elders of Saskatoon, visiting and music are a vital part of their well being.

The research has also shown that spirituality is important to Métis culture and our Métis Elders. A place to pray is important to Métis Elders.

Socializing, visiting, food (whether a barbecue or bannock and tea) are very important to Métis Elders as a venue to pass on their wisdom to others. Accordingly, the Research Team found that housing options for Métis Elders must recognize the traditions, customs and practices as these reinforce cultural ties and strengthen the Métis community as a whole.

3.5 Linkages and Identification

The Research Team met with key individuals in the Saskatoon Housing community, enlisted their support in retrieving relevant documents, studies and models and engaged in discussions at gatherings, conventions, and other meetings to identify potential partners.

Meetings and discussions were held with executive and staff of Saskatoon Housing Initiatives Partnership (SHIP), with discussions of shared goals and interests with respect to Métis housing, particularly Métis Elders housing in Saskatoon. The Executive Director of SHIP has agreed to seek out and arrange meetings/discussions with respect to various types of housing partnerships between SaskNative Rentals Inc. and various members of the Saskatoon & Region Home Builders Association (SRHBA).

Several encouraging linkages were made at functions including SHIP events with builders, trainers, realtors, financial people and companies interested in potential partnerships in the construction of Métis Elders housing. SHIP functions also provided opportunities to strengthen linkages with Aboriginal Institutions and Housing Authorities, as well as the Saskatoon Housing Authority.

Meetings and discussions were held with both executive and staff of the SRHBA. Several potential partnership projects were discussed conceptually, however, it was agreed that specific partnership discussions and plans would have to await the identification of specific proposed projects. Much interest was expressed in and encouragement offered for the planning, development, construction and operation of a Métis Elders housing complex in Saskatoon.

It was agreed that this type of project would present an encouraging opportunity for the initiation of SaskNative Rentals Inc. and private contractor partnerships upon and through which a variety of ongoing partnerships could continue to be built and evolve. Very positive private sector responses came out of dialogue including suggestions that partnerships should involve "Métis Benefits Packages", to enhance Métis recruitment, training, employment and business opportunities in the housing arena. Efforts are currently underway to continue dialogue and meetings with private sector contractors to discuss future potentials.

Representatives of the Mennonite Central Committee (MCC) of Saskatchewan provided a sharing of Mennonite insight in dealing with the housing challenges confronted by Elders in that community as well as discussion of various solutions that works there. MCC offered initial advice and encouragement with respect to the structuring, operation and administration of residences. MCC also offered to participate in ongoing

consulting/advisory relationships in the next stages of development of additional Métis Elders Residences in Saskatoon. The representative of Mennonite Central Committee agreed to assist in organizing a meeting with his executive wherein potential partnerships and eventual project financing through Mennonite Trust could be discussed.

Discussions with SaskHousing personnel yielded encouragement with respect to their willingness to consider funding proposals for Métis Elders housing and to assist in assuring that Métis employed in housing projects be able to gain recognized apprenticeship credits toward trade qualifications.

In addition to the numerous non-Aboriginal linkages and relationship-building undertaken, the Research Team undertook discussions with the President of the Métis Urban Housing Association of Saskatchewan (MUHAS) as well as with representatives of the five other Métis Non-Profit Housing Associations that are members of MUHAS. Such discussions enabled the sharing of information with regard to both problems and solutions related to Métis Elders housing in all Urban Centres in Saskatchewan.

Contact with realtors has led to current discussions with respect to the possible purchase and renovation of two buildings that have the potential to be developed into respectful sustainable affordable Métis Elders residences. Discussions with regard to other potential Métis Elders housing options were also held with representatives of the Central Urban Métis Federation Inc., being a recognized entity of the Métis Nation of Saskatchewan.

3.6 Factors of Housing/Community Enhancement

The existing inventory of Métis Elders housing stock in Saskatoon is limited. In terms of factors of housing within a community enhancement model the following section looks at tools and infrastructure including a Summary of costing estimates for Aboriginal housing

in Saskatoon. This section outlines Saskatoon Métis housing need, shortfalls and cost of remedies.²⁵

Saskatoon Métis Housing Need and the Cost of Remedies

Housing Need

- There is a much larger representation of family households in the urban Métis population than in the non-Aboriginal population. This holds important implications for the types of housing units funded and built.
- Urban Métis renter households live in lower quality dwellings. 16.5% dwellings are in need of major repair, compared with 9% in non-Aboriginal households.
- Métis households have a higher incidence of affordability problems than do non-Aboriginal households, with 37% spending more than the norm of 30% of family income for housing, while 15% (1 in every 6) experience a severe rent burden, paying 50% of income for rent.
- Although non-family households are a smaller proportion of Aboriginal households, they experience a greater incidence of severe rent cost burden, 20% of non-family Aboriginal renter households spend 50% of income for rent.
- The average income of Aboriginal households is 87% that of non-Aboriginal households.

Cost of Remedies

The current Federal/Provincial Centenary Affordable Housing Program framework identifies a targeting criteria of *average market rent* as the basis for grant eligibility and specifies a maximum federal grant level of \$25,000 per unit to be equally matched by provincial and/or local sources. Research by the National Aboriginal Housing Association clearly demonstrates the current targeting criteria cannot provide affordable housing for aboriginal people in Saskatoon.

²⁵ The data upon which the shortfalls, costs, and remedies are based on are summarized in National Aboriginal Housing Association, "A New Beginning: the National Non-reserve Aboriginal Housing Strategy" March, 2004.

- When a lower affordable rent target is set, based on 30% of minimum wage, the grant requirement exceeds the maximum of \$50, 000.
- Program criteria (average market rent and maximum of \$50,000 grants) are insufficient to support the production of rental units affordable to low-income Saskatoon Métis households. A more realistic amount is in the order of \$70,000 \$75,000.

Analysis of Saskatoon Housing Conditions (Need for Repair)

Non-Aboriginal Households

Aboriginal Households

Total in	In Need of	In Need	Total in	In Need of	In Need of
Need of	Minor	of Major	Need of	Minor	Major
Repair	Repairs	Repairs	Repair	Repairs	Repairs
30%	24%	6%	47%	34%	13%

Analysis of Housing Need for Repair for Métis Households in Saskatoon

Need for Repair for Métis Households in Saskatoon

Need	Minor	Major
Repairs	Repairs	Repairs
46%	34%	12%

Incidence of Severe Shelter Cost Burden in Saskatoon (Rent over 50% of Income)

Non-Aboriginal Households

Aboriginal Households

Total	Less	30% -	50% -	Total	Less	30%-	50% -
	than	49.9%	100%		than	49.9%	100%
	30%				30%		
23,615	14,525	5,615	3,475	4,830	2,415	1,400	1,020
		38%	15%			50%	21%

Incidence of Severe Shelter Cost Burden for Métis in Saskatoon (Rent over 50% of Income) *Excludes households paying >100%

Métis Households

Total	Less than 30%	30% - 49.9%	50% - 100%
1,965	1,145	520	295
		41%	15%

Renter Households by Structure Type in Saskatoon

Non-Aboriginal Households

Aboriginal Households

Total	Single-	Total –	Total	Single-	Total –
Household	detached	All other	Household	Detached	All other
S	House	dwellings	S	House	dwellings
25,405	3,920	21,485	5,555	1,435	4,115
	15%	85%		26%	74%

Summary of Costing Estimates in Saskatoon

A. Bachelor (Single Person) Units in Saskatoon Estimated new Development Costs and Required Capital Assistance Targeted to Average Market Rent vs. Low Income (minimum wage) rents

Construction Cost Estimates	For Saskatoon
Land Cost	\$5,000
Hard Construction Cost	\$40,000
Soft Costs (Incl. GST)	\$ 7,000
Total Construction Capital Cost	\$52,000
Operating Cost Estimates (annual)	\$3, 545

Capital/Equity required for achieving rents at alternate levels of affordability Based on achieving AMR benchmark

Monthly rent at Oct 2003 average	\$371
Max Financing (lesser DCR of lend value)	\$8, 151
Required Capital/Equity ²⁶	\$43, 849

Based on minimum wage 30% rgi benchmark

Monthly rent at Minimum wage affordable @30%	312
Max Financing (lesser DCR or lend value)	\$876
Required Capital/Equity ²⁷	\$51,076

B. Three-bed (Family) Units in Saskatoon

Estimated new Development Costs and Required Capital Assistance Targeted to Average Market Rent vs. Low Income (minimum wage) rents

Construction Cost Estimates	For Saskatoon
Land Cost	\$11,000
Hard Construction Cost	\$79,000
Soft Costs (Incl GST)	\$13,000
Total Construction Capital Cost	\$103,000
Operating Cost Estimate (annual)	\$4, 133

Capital/Equity Ratio required to achieve rents at alternate levels of affordability **Based on achieving AMR benchmark**

Monthly Rent @Oct 2003 average	\$635
Max Financing (lesser DCR or lend value	\$34, 352
Required Capital/Equity ²⁸	\$68, 648

Based on minimum wage 30% rgi benchmark (assume 1.5 earners h/h)

Monthly rent at minimum wage affordable @30%	\$468
Max Financing (lesser DCR or lend value)	\$13, 804
Required Capital/Equity ²⁹	88, 437

²⁶ Required capital/equity is calculated by first determining the minimum level of financing the project can carry, based on net rent revenues and standard lending criteria. This level of financing is then subtracted from the total cost to indicate how much cash must be invested for the project to be viable at identified rent levels.

27 *Ibid.*28 *Ibid.*

²⁹ *Ibid*.

3.7 Housing Models and Mechanisms

One Métis-specific Elder housing model exists in Saskatoon. The only local example is La Petite Ville which is home to some of the Saskatoon Métis Elders. Many lessons have been learned from the experience of building, designing and living within Saskatoon's first and currently only specific Métis Elder residence. It is time to build on the strengths of La Petite Ville to develop a holistic model incorporating the voices of the Métis Elders.

Within Saskatoon, culturally-based Elder housing is an accepted concept, for example St. Volodymyr Villa and the Luthercare Communities. Increasingly, Elder services are recognizing the presence of Aboriginal clients in their clientele. Sherbrooke Community Centre Saskatoon provide special services to Aboriginal residents. The policy is stated as follows:

The Aboriginal residence is human rights exempt as Aboriginals require specific needs that the general population do not. It really means a lot to the residents, trust builds up. The workers are still required to be qualified. Only Aboriginal workers are within the Aboriginal residents. The centre is in the process of establishing a partnership with the First Nations daycare. The First Nations day care had gone to visit the aboriginal residents a few times, the residents absolutely loved it. The centre also has activities and lounges for family to maintain a continued visitation pattern. It also makes them feel very welcomed and at home.

The staff dress casual and often do not use name tags. The staff also play an aging age wherein they are given a scenario (age, disability, etc.) to give them an idea as to the feeling of being spoon fed, lonely, having to use a wheelchair, etc.

The Sherbrooke Centre also has many partnerships such as with Joe Duquette High School, SIGA, Wanuskewin, First Nations University etc.

Sherbrooke Community Centre provides a living environment which includes:

- ∋ Green house (bird and plants)
- → Pool
- → Sitting Room
- ∋ Animals run free
- ∋ 3-wheeled chariots (for exercise)
- → Computer Room (visitors and family)
- → Hand waxing (arthritis)
- ∋ Fire Place
- → Wood working
- Expiritual care centre (Catholic and Aboriginal Spirituality)
- ∋ Agenda of events activities
- ∋ Activities for family
- **∋** Smoking Room
- ∍ Tea Room
- ∋ Mail room with individual mail boxes
- ∋ Roof Top Garden

The Sherbrooke Centre breaks the mould of Eurocentric senior residences in many ways. It is resident directed. All decisions are made on consensus. The residents may live at risk as they would at home if that is their decision, which often makes them happy. They choose when they would like to eat, when they would like to go to sleep, when they would like to return to the centre if on an outing etc. The centre is a human habitat which makes them feel like they are at home as opposed to in an institution. To give the residents a feel of responsibility, they pay their own bills and do their own cleaning. They are also given the opportunity to have jobs, garage sales and school to make money and to feel useful/productive. Many of the aspects of Sherbrooke Community Centre model incorporate the respect for cultural experiences and enhancement of independence that offer concrete ways that Métis Elders housing options could be considered and designed.

Models exist for other senior populations that offer promising practices for the consideration and creation of successful housing approaches specific for Métis Elders.

³⁰ Sherbrooke Community Centre Saskatoon, information package

Another example of a successful housing complex that approaches the issues of senior housing in a holistic manner is the Edwards Place in Calgary.

Edwards Place is a 149-unit apartment building for low-income seniors in inner-city Calgary. In 2000, Edwards Place launched a supportive services program to met the health and social needs of frail elderly residents and thereby prolong their ability to live independently. A community resource co-ordinator provides needs assessment and advocacy services, linkages to required health and social services and assistance in relocating individuals in need of more supportive living environments.

An evaluation of the program in 2002 reported a decrease in the number of residents having to move to nursing homes and other forms of acute care, along with decreases in the number of visits to the hospital emergency rooms and hospital admissions. Evaluators attribute these changes to better and more timely access to medical and social services facilitated by the community resource co-ordinator.

The evaluators credit the program's success to the on-site community resource coordinator; the positive relationships developed between each resident and the coordinator, which informs the design and quality of individual case plans; the positive relationships with the various service providers; and the careful delineation and coordination of responsibilities among service providers.³¹

Additionally, a successful model of housing to address the needs of those with disabilities is TenTen Sinclair Housing Inc. located in Winnipeg.

TenTen Sinclair is a 75-unit, wheel chair accessible apartment building in Winnipeg. The facility opened its doors in 1975 with a view to providing people with disabilities with affordable, transitional accommodation along with the life skills to function independently in an integrated community setting. The building is staffed by a social worker, occupational therapist, home economist and several co-ordinators. To provide an integrated learning and living environment, 25 units are reserved for non-disabled individuals

Although the program has not been formally evaluated, individual success stories, along with residents' and service providers' observations, suggest that combining accessible and affordable housing with learning programs has a positive impact on the health and well-being of its residents. Key to TenTen Sinclair's success includes its independent living philosophy and tenants' motivation to exploit the opportunities available to them 32

³² CHRA, 2003, p.10

³¹ CHRA, October, 2003, p. 9

A model of building adaptation is found in the Manitoba's Northern Housing strategy. Although the adaptation is to a particular geographic region, it offers an instructive example of how builders can turn their minds to building to meet the needs of the prospective residents and their changing conditions.

Manitoba's Northern Housing Strategy was developed by the Manitoba Housing and Renewal Corporation (MHRC), in partnership with five northern Aboriginal organizations, to address housing needs in the northern part of the province. Housing in northern Manitoba, as in other northern areas of Canada, represents a critical area of need. The Northern Housing Strategy offers great promise for improving housing and thus the health, social, and economic conditions in northern Manitoba. To overcome the many problems associated with conventional building methods in the north and to provide "the best house for the best price", panelized housing technology, which features pre-manufactures, well-insulated panels, was selected for the construction of a northern model house. Using this technology is expected to improve individual health, enhance training and employment opportunities, and increase economic development. The actual design features of the home were created with input from those who will eventually live in the dwellings. Examples of these features include large bedrooms, separated into different zones, a structure that anticipates "building on", northern entry, and many features relating to accessibility. Ensuring that homes are specifically designed to accommodate the individual, family and community circumstances and conditions of northern and Aboriginal peoples is expected to have a positive impact on other determinants of health for residents. The success of the Northern Housing Strategy so far is credited to several factors: recognition that personal and community consequences of housing deficiencies have impacts on individual and community health and concomitant costs; the ability of the partners to temporarily set aside jurisdictional issues to first identify solutions; the ability of different departments and levels of government to collaborate; funding provided by the province and the federal government through the Affordable Housing Initiative; and meaningful consultation and collaboration with Aboriginal organizations and future housing consumers.³³

For grandparents with full-time primary childcare responsibility for their grandchildren, there are models of facilities built specifically to meet their needs. There is a small neighborhood in New York city that was designed and built with grandfamilies in mind. It incorporates geriatric needs, day care, playgrounds and handicap devices. In Toronto, a complex exists for varied renters, combining seniors and students living together. It has a meal room which serves meals, and a shared common room. It is currently in the settling in stage but each group is learning from the other.³⁴

³³ CHRA, 2003, p. 15

³⁴ Dorothy Bird, founding president of GIFT, in conversation April, 2004

Other examples exist in our communities of ways to meet the needs of seniors. For example, transportation is a problem for many Métis Elders as many have to depend on the bus and taxis. In relation to using creative approaches to addressing needs issues such as transportation, the provincial government has contributed \$55,000 from the Centenary Fund towards the cost of a \$85,648 specially equipped vehicle. Through the Centenary Fund, Saskatchewan communities will receive more than \$2.3 million, over three years, towards the replacement of special needs transportation vehicles. This is another lesson to be used by the stakeholders serving the housing options of Métis Elders of Saskatoon.

3.8 Recommendations of Models of Success

The Métis Elders Circle Housing Research Project has collected primary and secondary data on the context of Métis Elder Housing in Saskatoon. The data have led to the development of a model of Métis Holistic Housing for Elders. Our model would include:

A. Community Area Development

- A physical environment that reflects the best of Métis cultural experiences. The environment would have Métis symbols built into the floor tiles, the wall coverings and the design. Sashes, buffaloes, canoes, fiddles and images of the natural world would be part of the visual experience;
- ➤ There would be a patio with barbecues which is conducive to story telling and sharing of traditions, customs and practices;
- There would be a kitchen available for Métis Elders to use to bake and prepare meals for each other;
- ➤ There would be a Spiritual Centre with facilities for Aboriginal ceremonies to be performed;
- There would be spaces for Prayers including smudging, Pipe Ceremonies in private or groups with a bowl and pipe and sweetgrass; A Circle space; a place for fasting; a Sweat Lodge on the property for communal prayer and/or healing; and teaching;

- There would be a space for feasts and gatherings;
- There would be a space to facilitate jiggers, musicians and drummers to attend;
- ➤ The Common Room would be a place to dance jigging and traditional dancing
- ➤ There would be a Common Room equipped with microphones with the ability to plug in amps; big windows; projection capacities; a round table which could be assembled to accommodate different sized groups;
- The space would capture the out of doors in doors to provide the chance for residents to be among things of nature and to tend them;
- It would allow pets and children to be resident, full time or part-time;
- ➤ It would have a green house for those with a green thumb with wheelchair accessibility;
- ➤ It would have an exercise room;
- The common room would have large wheelchair accessible bathrooms;
- ➤ There would be smoking rooms;
- Newsletters for residents to read about their friends and to use their writing talents;
- It would include a van and a designated person to take people to appointments;
- ➤ Policies would take into account that some of the Elders may be the sole care givers for their grandchildren; there would be accommodation for a Métis Elder that becomes responsible for grandchild;
- The building would have a circular drive to the front door for easy access;
- ➤ The entry to the building would be lined with display cases honouring the lives of the Elders in residence: Veterans' pictures, stories and medals; quilts made by residents; Métis cultural artifacts and treasures; personal histories and biographies of new residents.
- ➤ There would be a resource room with printed and audio-visual materials covering issues of concern to the residents;
- The Métis Elder housing delivery agency would develop and distribute including current updates, a services resource package to assist Métis Elders.
- ➤ The Métis Elder housing delivery agency would appoint a resource person at their agency to answer Elder questions including telephone calls and make regular visits to the residents.

- The resource room would be open to host community meetings;
- ➤ There would be a wood working and crafts space;
- A tea room would be available all of the time with the necessary equipment and teas. The kitchen would be easily accessible with equipment and ingredients to cook bannock during the day.
- ➤ The staff at all levels would be primarily Métis;
- ➤ Doors, cupboards, etc would be built with recognition of the needs of people with arthritis;
- ➤ Lighting would be planned with the assistance of the CNIB for those with poor eyesight in mind;
- > The living space of the individual Métis Elder would be tailored to the cultural, physical, social, and spiritual needs of the individual;
- ➤ The Community Centre would keep a supply of special aides in-house which would be available as an Elder needed their use,
- ➤ There would be an Elders' Circle of consultants to determine issues of Métis cultural protocol within the operation of the building.
- ➤ There would be a common garden for summer cultivation with underground sprinklers and with plots separated by an accessible walkway so that wheelchairs and people on walkers and canes could tend the garden;
- ➤ A Saskatoon or berry patch would be part of the garden;
- The residents could grow and have the opportunity to harvest their garden crops to sell at the farmers market or at special events at the Centre. The harvest could also have spin-off crops such as Saskatoon Jam for sale. The Centre could develop its own line of products called something like "Fresh from the Métis Elder Farm";
- The Centre would have a special place for music in its organization. Métis fiddle music could be piped through the PA system; one or more Métis dance groups could be part of the Centre's main attractions; fiddle and other musical instruments could be demonstrated and taught through the Centre; youth groups of fiddle players and dancers could be organized through the Centre; singing would be a regular activity;
- ➤ The outside area could be landscaped incorporating barbecue pits, rocks and ponds stocked with fish.

- ➤ A nurse and health educator would have offices in the building with regular scheduled attendance;
- The Centre might include a daycare or even be attached to an elementary school;
- Residents would be encouraged to be as independent as they could to make most of the decisions about their life

B. Design Developments

Housing for Métis Elders needs to be culturally-sensitive;

Designs should be based on one level living;

Pet regulations should be waived for Métis Elders living alone;

Designs should take into account the needs of people with chronic conditions such as arthritis, bad eyesight, heart problems, asthma/respiratory problems; Housing authorities should understand and be sensitive to medical needs when renting to Métis Elders;

Builders should seek direction from organizations such as the Saskatchewan Institute for the Prevention of Handicaps, the Canadian Institute for the Blind (CNIB), the Canadian Arthritis Society, the Heart and Stroke Association, the Lung Association, etc. who understand the special needs of people with various chronic conditions;

Alert alarms should be made available to all Elders, particularly those Elders living alone;

A holistic approach to Métis Elder housing necessitates the collaboration of housing authorities with health personnel, social services, security services, services for the disabled, etc.;

Métis Elder housing stakeholders should partner with GIFT to understand the needs of Grandparents involved full time in the care of grandchildren;

To enhance the quality of life for Métis Elders, support services must be made known and assistance provided to access said services;

A pilot project should be developed which incorporates the best practices for Elder housing with a Métis cultural focus to examine the effect on the overall health and well-being of Métis Elders.

4. Final Conclusions and Recommendations

The research indicates that Métis Elder Housing options are not just about shelter but must also support Métis Elders in their quest for an independent lifestyle in a culturally appropriate manner. When Métis Elders are approached according to traditional protocol, they have a lot to say about their lives and their living conditions. It is essential stakeholders respect the contribution and voices of the Métis Elders by taking the knowledge shared and translating it into respectful Métis Elder housing options.

At the same time there is clearly a crises in the development of specific Métis Elder housing options in the City of Saskatoon. More recently, through this research project, interest has been expressed between Aboriginal and non-Aboriginal stakeholders with a view to partner together to develop a Métis Elder housing project that captures the best practices discussed in the report.

Despite the recent development of bridging between the stakeholders and high levels of interest of the various stakeholders, there remains a danger that the groundwork prepared could grind to a glacier pace. To address the concerns and build upon the networking and linkages in place, there must be ongoing venues to undertake meaningful dialogue that can be translated into respectful sustainable affordable housing for Métis Elders in the City of Saskatoon. Accordingly, the Research Team is recommending an agenda for action for all stakeholders to include:

1. The Research Team recommends that stakeholders implement a housing strategy that is culturally appropriate and representative of Métis Elders. Government housing agencies should involve Métis Elders in the creation and implementation of the strategy and the process should be collaborative and respectful of the diversity in the Métis Elder community.

- 2. The Research Team recommends that at every stage of housing development from planning to completion phases, there must be Métis Elders in all levels of development.
- 3. The housing stakeholders should refine current housing strategies to better meet the housing needs of Métis Elders. This may include reviewing current strategies and, where appropriate, engaging government, Aboriginal housing authorities, Elders and partner stakeholders in an advisory capacity.
- 4. The Research Team recommends that housing strategies for Métis Elders include partners from heath, social services, security and disability government departments.
- 5. The Research Team recommends that government stakeholders establish a communications strategy for partnerships amongst Aboriginal and non-Aboriginal housing stakeholders.
- 6. The Research Team recommends the development of a set of protocols to be engaged around housing initiatives targeting Métis Elders.
- 7. The Research Team recommends better promotion of housing development initiatives that Aboriginal and non-Aboriginal stakeholders could partner under.
- 8. Establishing personal relationships and human contacts between Aboriginal and non-Aboriginal stakeholders is one means of overcoming the gaps and barriers to achieve culturally inclusive partnerships between the parties. The need for an Aboriginal housing initiative officer that seeks to facilitate these relationships cannot be underscored enough. It is also vital that the Aboriginal housing initiative officer show how these partner relationships will benefit the Aboriginal and non-Aboriginal community.
- 9. The Research Team recommends the development and maintenance of a database of Aboriginal and non-Aboriginal housing stakeholders to encourage communication efforts between the parties.
- 10. The Research Team recommends the development of a list of Aboriginal linkages. This could include Aboriginal stakeholders, Aboriginal media and community organizations that could be utilized to advertise successful partnerships between Aboriginal and non-Aboriginal housing stakeholders.

- 11. The Research Team recommends that Aboriginal internships with housing stakeholders be canvassed as a step to relationship building between the parties. This may include job rotation between the stakeholders, job shadowing, and mentoring programs.
- 12. It is recommended that housing stakeholders' awareness of Aboriginal peoples of Canada be improved and enhanced. Moreover, it is recommended stakeholders increase the levels of staff that have actively participated in learning and improving their understanding of Aboriginal people.

The challenges faced by Aboriginal and non-Aboriginal housing stakeholders in developing respectful sustainable relationships through affordable housing are not unique to the industry. One of the main themes found throughout the research project and Métis Elder participants' responses is that no housing initiative or relationship building between stakeholders will be effective unless it takes a holistic culturally appropriate approach in the initiatives.

APPENDIX A

BRIDGES AND FOUNDATIONS METIS ELDER CIRCLE HOUSING RESEARCH PROJECT

CHENEW HOLDINGS INC.

METIS ELDERS CIRCLE INTERVIEW SCHEDULE

Métis Elders Circle Housing Data Collection Form Interview Schedule

Interview	
#	

Male ~Female ~

Age: Over 90 ~ 80-89 ~ 70-79 ~ 65-69 ~ 60-64 ~ 55-59 ~ Living Alone ~ Living with Spouse ~ Living with Others~ List:

Sources of Income: OAS ~ CPP ~ Supplement ~ Disability Pension ~ Other Pension ~ List:

Employment ~ Paid for services ~ Other Sources ~ List:

Highest Level of Schooling: None $\sim 1-4 \sim 5 \sim 6 \sim 7 \sim 8 \sim 9 \sim 10 \sim 11 \sim 12 \sim 0$ Other Training:

Monthly Income:

under \$500.~ \$501.-\$1000 ~ \$1001-1500 ~\$1501-\$2000 ~ over \$2000 ~

Home Community:

Length of Time Living in Saskatoon: Lifetime ~ over 40 years ~ 20-40 years ~ 10-19 years ~ 5-9 years ~ 1-4 years ~ in the last year ~

Age when moving to the city (if Applicable): under 40 ~ in my 50's ~ in my 60's ~ after I was a senior ~

Reason for coming to the city (if Applicable): family ~ education ~ employment ~ health/medical care ~ adventure ~ Other ~ List:

Own or rent accommodation property

Spouse:(if Applicable)

Home Community:

Length of Time Living in Saskatoon: Lifetime ~ over 40 years ~ 20-40 years ~ 10-19 years ~ 5-9 years ~ 1-4 years ~ in the last year ~

Age when moving to the city (if Applicable): under 40 ~ in my 50's ~ in my 60's ~ after I was a senior ~

Reason for coming to the city (if Applicable): family ~ education ~ employment ~ health/medical care ~ adventure ~ Other ~ List:

Age: Over $90 \sim 80-90 \sim 70-79 \sim 65-69 \sim 60-64 \sim \text{under } 60 \sim 10^{-10}$

Sources of Income: OAS ~ CPP ~ Supplement ~ Disability Pension ~ Other Pension ~ List:

Employment ~ Paid for services ~ Other Sources ~ List:

Highest Level of Schooling: None $\sim 1-4 \sim 5 \sim 6 \sim 7 \sim 8 \sim 9 \sim 10 \sim 11 \sim 12 \sim 0$ Other Training:

Monthly Income:

under \$500.~ \$501.-\$1000 ~ \$1000-1500 ~ \$1501-\$2000 ~ over \$2000 ~

Household Composition

Do any of the following live in your home?

	YES	NO	HOW MANY?
Daughters			
Sons			
Sons' Spouses			
Daughters' Spouses			
Grandchildren			
Other Relatives			
Others			

Would you like to have any of the following live in your home?

	YES	NO	HOW MANY?
Your Children			
Your Children's			
Spouses			
Your Grandchildren			
Other Relatives			
Others			

Health Concerns:

Do you or your spouse (if Applicable) have:

Condition	Yes	No
Heart Problems		
Arthritis		
High Blood Pressure		
Asthma/respiratory problems		
Cancer		

Stomach/Bowel Problems	
Diabetes	
Knee/ Hip Replacement	
Bad Eyesight	
Bad Hearing	
Amputation	
Other List	

Do you have a regular doctor Yes ~ No ~ Need ~ Do you visit a specialist? Yes ~ No ~ Need ~ If yes, who?

Do you have an optometrist? Yes ~ No ~ Need ~

Do you have a dentist? Yes ~ No ~ Need ~

Do prepare your own meals? Yes ~ No ~ Need ~

Do you have help with home care and repairs? Yes ~ No ~ Need ~

Do you have help with lawn care and snow removal? Yes ~No ~ Need ~

Does a nurse visit you? Yes ~ No ~Need ~

Are you on a special diet? Yes ~No ~ Need ~

If yes or need, describe:

Do you have access to traditional meats, berries, etc. Yes ~No ~ Need ~

Do you have access to traditional medicines? Yes ~ No ~ Need ~

Do you or your spouse (if Applicable) use:

A Walker Yes ~ No ~ Need ~ Cane Yes ~ No ~ Need ~

Wheelchair Yes ~No ~ Need ~
Crutches Yes ~No ~Need ~
Bath Safety Aides Yes ~No ~Need ~
Glucometer Yes ~No ~Need ~
Home Blood Pressure Monitor Yes ~No ~Need ~
Lift Chairs Yes ~ No ~Need ~
Home Care Lifting Systems Yes ~ No ~ Need ~
Bath Tub Lifts Yes ~ No ~ Need ~
Geriatric Chair Yes ~ No ~ Need ~
Other Aides Yes ~ No ~ Need ~
List:

Transportation

Do you or your spouse (if Applicable) drive a car?

Do you have access to a vehicle?

Do you use the bus?

Do you use taxis?

Yes ~ No ~

Activities

Do you or your spouse? Play Bingo Yes ~ No ~ Like to ~ Go to Dances Yes ~No ~Like to ~ Go to a Pub Yes ~ No ~Like to ~ Take courses, training Yes ~No ~ Like to ~ Do Metis Traditional Arts: Beading, Rug hooking, Sash Making Yes ~No ~ Like to ~ Bake Yes ~ No ~ Like to ~ Sew Yes ~ No ~ Like to ~ Play a Musical Instrument Yes ~No ~Like to ~ Do Birch Bark Work Yes ~No ~Like to ~ Wood Work (whittling, building things) Yes ~No ~ Like to ~ Make Baskets Yes ~No ~ Like to ~ Sing Yes ~No ~ Like to ~ Go Fishing Yes ~No ~ Like to ~ Go Hunting Yes ~No ~ Like to ~ Bar-be-cue Yes ~No ~ Like to ~ Go to a Senior Centre for Activities Yes ~No ~Like to ~ Attend Spiritual Centres in the City Yes ~No ~ Like to ~ Participate in Aboriginal Spiritual Ceremonies Yes ~No ~Like to ~ Go to Sporting Events Yes ~No ~ Like to ~ Go to Visit in other parts of the city Yes ~No ~ Like to ~ Others (List): Yes ~No ~ Like to ~

Which of the following items would you like to have in your home?

1. Washer/dryer	Yes ~	No~
2. Microwave	Yes ~	No~
3. Cable TV	Yes ~	No ~
4. Aides to help standing and working in		
-the kitchen	Yes ~	No ~
-the bathroom	Yes ~	No~
-the bedroom	Yes ~	No ~
-hallway	Yes ~	No ~
5. Storage Space	Yes ~	No ~
6. Stand Alone Shower (not in the tub)	Yes ~	No ~
7. Better Lighting	Yes ~	No ~
8. Freezer	Yes ~	No~
9. More security	Yes ~	No ~
10.Other List:		

Design Features

1. Would you like a bigger kitchen?	Yes ~ No ~
2. Do you need a room for company?	Yes ~ No ~
3. Should there be a guest apartment in your building?	Yes ~ No ~
4.Do you prefer to live on the ground floor?	Yes ~ No ~
5. Would you be comfortable using an elevator?	Yes ~ No ~
6. Would you like a nurse in the building?	Yes ~ No ~
7. Would you like pull-out shelves in cupboards?	Yes ~ No ~
8. Would you like baseboard lighting?	Yes ~ No ~

If you could change anything you wanted in your home to make it more comfortable for you what would it be?

Thank you for your participation. You have been a big help to our study.