



ALIGN
Association of
Community Services

Listening in a Good Way: Indigenous Perspectives on Disability Reflections, Key Insights, and Participant Perspectives

Alberta Disability Summit – Indigenous Cultural Understanding

November 27, 2025

Grey Eagle Resort & Casino, Tsuut'ina Nation

Summary of participant engagement completed by:

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December 23, 2025

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Listening in a Good Way: Indigenous Perspectives on Disability

Reflections, Key Insights, and Participant Perspectives

Acknowledgement

We acknowledge that the Alberta Disability Summit – Indigenous Cultural Understanding took place on the traditional lands of the Tsuut’ina Nation. We are grateful to the Elders, Knowledge Keepers, speakers, participants, and community members who shared their time, wisdom, lived experience, and stories.

This report reflects what we heard during the afternoon discussion sessions. The voices captured here represent collective experiences and shared insights offered in a spirit of learning, relationship, and reconciliation.

Purpose of This Report

This “What We Heard” summary report was created to:

- Share back what participants shared during the Summit
- Honour lived experience, community knowledge, and professional insight
- Identify common themes, barriers, and opportunities
- Highlight practical actions that can be taken now
- Inform future collaboration, advocacy, and system improvement

This report is not a policy document. It is a reflection of participant voices and a foundation for continued dialogue and action.

About the Alberta Disability Summit

The Alberta Disability Summit – Indigenous Cultural Understanding brought together:

- Indigenous leaders, Elders, and Knowledge Keepers
- People with disabilities and family members
- Service providers, provincial disability associations, and community organizations
- Government partners and system leaders

The goal was to strengthen understanding, highlight inequities, and explore how disability services can better support Indigenous children, adults, families, and communities across Alberta.

Participants from across Alberta shared their experiences, insights, and priorities. These conversations highlighted four key areas:

1. Access to Supports
2. Cultural Barriers & Worldviews
3. Geographic Barriers
4. Systemic Issues & Colonial Impacts

What We Heard – At a Glance

- Indigenous children, adults, and families want self-determination, choice, and meaningful involvement in how disability supports are designed and delivered.
- Relationship-based, culturally grounded approaches are essential; rushed, standardized, and medicalized processes undermine trust and outcomes.
- Colonial systems and policies continue to create inequities, particularly through narrow eligibility criteria, Western definitions of disability, and rigid service models.
- Geography and transportation are major barriers; many families receive no services because supports are unavailable, inaccessible, or require unsafe or financially burdensome travel.
- Indigenous-led, Nation-specific design is critical; pan-Indigenous adaptations of Western systems do not meet community needs.
- Better coordination across systems (FSCD, PDD, education, health, child intervention, and Nations) is needed to reduce duplication and improve wraparound support.

Families are challenged by complex, deficit-focused systems and want supports that reflect strengths, identity, family, and community.

Summary of Participant Discussions: Key Themes Across All Discussions

Across all four discussion areas, participants consistently emphasized:

- The importance of self-determination and choice
- The need for relationship-based, culturally grounded approaches
- Ongoing inequities created by colonial systems and policies
- Significant geographic and transportation barriers
- A strong desire for Indigenous-led and Nation-specific solutions
- The need for better coordination across systems
- Frustration with complex, medicalized, and deficit-focused processes and approaches

This section summarizes *what we heard, key takeaways, practical improvements, and opportunities for government to consider.*

Conversation Topic #1 – Access to Supports

Summary of What Was Heard

Families described disability systems that are difficult to understand and navigate. Many do not know what services exist, how to apply, or who to contact. Frequent changes in caseworkers disrupt trust and continuity.

Indigenous families face additional barriers, including transportation challenges, financial barriers related to reimbursements and parent portions, lack of culturally relevant services, and rules that do not reflect Indigenous kinship caregiving.

Long wait times often mean families receive help only once they are already in crisis.

Key Messages

- The system is confusing and overwhelming.
- Relationships matter—families want consistency and trust.
- Financial and administrative requirements create inequity.
- Indigenous family structures are not well reflected in current processes.

Conversation Topic #1 major themes included:

1. System Navigation Barriers

- Families struggle to know who to contact, what services exist, and how to apply.
- Language in forms is overly technical, not culturally aligned, and not written at a family-friendly literacy level.
- “Hidden menus” – families don’t know what to ask for because they don’t know what’s available.

- Online processes and technology requirements make access difficult, particularly in rural and on-reserve communities.

2. Relationship and Continuity Issues

- Frequent caseworker changes create instability and erode trust—making needs assessments superficial.
- Indigenous families often need time to build trust based on past trauma with systems.
- Service providers noted that strong caseworker relationships lead to more accurate assessments and more appropriate supports.

3. Cultural Misalignment

- Supports and assessments often do not reflect Indigenous family structures, kinship roles, or community-based caregiving.
- FSCD's rule that *only a parent/guardian can apply* is a major barrier for Indigenous kinship-based caregiving.
- Services available in the community are often not culturally grounded or not located near families.

4. Financial and Geographic Barriers

- Families frequently cannot afford up-front costs (FSCD reimbursement model).
- Transportation to urban centres for assessments or appointments is difficult—especially when multiple family members must travel together.
- On-reserve PDD availability is inconsistent or extremely limited.

5. Delays and Breakdowns in the Access Pathway

- Long wait times at every step—from intake to assessment to receiving funded supports.
- Lack of crisis-responsive supports; families often wait until crisis before looking for or getting help.
- Transition between FSCD → PDD is poorly supported, confusing, and often abrupt.

6. Service Options and Flexibility

- Limited choice of providers in rural or on-reserve communities.
- Families want autonomy and self-determination, including the option to hire family members as support workers.
- High caseloads prevent meaningful, timely support.

Key Takeaways

1. The system is experienced as confusing, inflexible, and bureaucratic.

Families feel they are navigating a maze of rules, changing policies, and inconsistent processes.

2. Indigenous families experience additional, layered barriers.

Including transportation, lack of culturally relevant services, kinship caregiving rules, mistrust of government systems, and geographic isolation.

3. “Timely support” means more than speed, it means being met where they’re at.

Families defined timely support as:

- crisis response when needed,
- consistent caseworker relationships,
- support without having to repeatedly retell their story,
- reducing the trauma of navigating a complicated system.

4. Relationship-based, culturally grounded approaches are essential.

Families value trust, continuity, and honouring Indigenous family structures.

5. Families want simplicity, transparency, and autonomy.

Having clear information, reduced red tape, and more control over choosing supports.

Practical Improvements That Do NOT Require Government Policy Changes

These are operational changes that could be implemented by service providers, FSCD/PDD regional teams, or organizations without altering legislation or high-level policy.

1. Improve Communication & Navigation

- Create plain-language, culturally aligned guides for FSCD and PDD processes.
- Offer phone or in-person navigation to walk families through steps.
- Develop simple checklists outlining the access pathway.

2. Strengthen Relationship-Based Practice

- Encourage caseworker continuity, internal handoff protocols, and warm transitions.
- Adopt trauma-informed onboarding, especially for Indigenous families.
- Increase proactive “check-ins” rather than waiting for crises.

3. Culturally Ground Service Delivery

- Partner with Elders, Indigenous service organizations, and community-based advocates.
- Ensure all staff have foundational training in Indigenous cultural understanding.

4. Increase Flexibility Where Possible

- Encourage contract managers and caseworkers to use existing discretionary flexibility.
- Allow family-selected providers wherever permitted (including Indigenous organizations and informal supports).
- Streamline reimbursable processes (e.g., direct billing where possible).

5. Support Transitions & Information Flow

- Offer transition workshops for families moving from FSCD to PDD.
- Provide earlier and clearer information about service options.

6. Improve Internal Coordination

- Create a soft-link or warm-connection protocol between FSCD, PDD, and CFS when families are involved in more than one system.
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Recommendations for Government Consideration

These are system-level changes that would meaningfully improve access and equity for Indigenous families and all Albertans seeking support.

1. Simplify Access & Reduce Bureaucracy

- Review and streamline FSCD and PDD access pathways.
- Reduce paperwork, remove duplication, and simplify language on forms.
- Implement a single point of contact for families navigating multiple systems.

2. Remove Financial Barriers

- Replace the reimbursement model with direct billing to reduce upfront financial burden.
- Remove or reduce parent portions for low-income or Indigenous families.

3. Expand Culturally Grounded Support

- Fund and develop Indigenous-led service providers.
- Support training for all disability services staff on cultural safety and Indigenous perspectives on disability.

4. Increase Access in Rural and On-Reserve Communities

- Fund mobile teams, telehealth supports, and local staffing models.
- Develop transportation and accommodation supports for medical or assessment travel.

5. PDD & FSCD Transition Improvements

- Create a formal, supported transition process starting at age 14 or earlier.
- Provide clear communication, early assessments, and consistent planning across programs.

6. Support Caseworker Stability

- Reduce caseload size to allow meaningful relationship building.
- Improve workforce retention strategies (wages, training, supervision).

7. Honour Indigenous Family Structures

- Expand eligibility for FSCD applications to include Kinship caregivers, extended family, and customary caregivers.
- Recognize the central role of community and family-based caregiving.

8. Increase transparency in available services

- Provide a clear, province-wide service menu for FSCD and PDD (removing the “hidden menu” effect).
- Make information public, searchable, and accessible in multiple languages.

Conversation Topic #2 – Cultural Barriers & Worldviews

Summary of What Was Heard

Western disability systems rely heavily on medical models and standardized assessments. These approaches often conflict with Indigenous ways of understanding disability, which emphasize strengths, spirit, identity, and relationships.

Participants shared that cultural barriers are often unintentional but deeply impactful, created through rushed intakes, standardized forms, and lack of cultural understanding.

Families want services that make space for ceremony, storytelling, language, and Nation-specific teachings.

Participants described a deep misalignment between Western disability systems and Indigenous worldviews, particularly in how disability is defined, assessed, and supported. They emphasized that services often unintentionally create barriers by prioritizing standardized processes over relationships, culture, and community.

Key Messages

- Disability is viewed differently across cultures.
- Cultural safety requires time, humility, and learning.
- One-size-fits-all approaches do not work.
- Culture should be foundational, not an add-on.

Conversation Topic #2 major themes included:

1. Misalignment Between Western Disability Models and Indigenous Worldviews

- Western systems rely on deficit-based, medicalized assessments that focus on what a person *cannot* do.
- Indigenous worldviews see disability as part of a person's spirit, gifts, roles, and relational identity, not something to be fixed.
- Families often must prove disability or trauma to access services, which conflicts with Indigenous approaches that honour strengths and holistic wellbeing.

2. Cultural Barriers Created Through Service Delivery

- Intake and assessment processes are fast-paced, form-heavy, and standardized, leaving little time for family relationship-building.
- Cultural parenting practices and family structures are often misunderstood or misinterpreted by service providers.
- Providers unintentionally encourage “good client-hood”—compliance with system expectations—rather than supporting good lives in community.
- Activities, program design, and expectations may not align with cultural norms or community protocols.

3. Structural and Systemic Barriers

- Accreditation and funding requirements often prioritize Western validity, limiting space for Indigenous ways of knowing.
- Tight timelines, high caseloads, and reporting requirements leave little room for culturally meaningful practice.
- Families are sometimes “forced” off reserve for services, disrupting community connection.
- Online applications and digital processes create further inequity for families with limited technology access.

4. Relationship, Trust, and Ethical Space

- Relationship building is essential but often rushed or skipped.
- Families respond well when service providers show self-awareness, reflect on their positionality, and enter ethical space respectfully.

- Elders, Knowledge Keepers, and Indigenous staff are key to building trust and cultural safety.
- Repairing historical and contemporary harms must be part of service engagement—relationship before intervention.

5. What Culturally Grounded Support Would Look Like

- Co-created services designed *with* Indigenous communities—not simply adding culture to pre-existing Western models.
 - Indigenous liaisons, Elders, and Knowledge Keepers embedded in programs and case conferences.
 - Flexible, relational, ceremony-informed processes—smudging, drumming, storytelling, art-based intakes, roundtable meeting spaces.
 - Strengths-based approaches that reflect Indigenous views of development, community, and identity.
 - Nation-specific teachings, rather than pan-Indigenous practices.
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Key Takeaways

1. The medical model does not reflect Indigenous perspectives.

Indigenous worldviews emphasize relational strengths, spirit, community roles, and holistic wellness—contrasting sharply with deficit-based eligibility models.

2. Cultural safety requires time, relationship, and self-awareness.

Rushed intake processes, standardized assessments, and high caseloads undermine culturally grounded practice.

3. Indigenous-led design is essential—not after-the-fact adaptation.

Indigenizing existing Western programs is insufficient. Communities want co-developed services that put culture at the centre.

4. Service providers can be both a bridge and a barrier.

Their approach, assumptions, and positionality strongly influence whether services feel supportive or colonial.

5. Culture is not an add-on—it is a core part of wellbeing.

Families thrive when identity, ceremony, kinship, and community protocols are respected and embedded into services.

Practical Improvements That Do NOT Require Government Policy Changes

1. Build Relationships Before Assessment

- Slow down intake; include space for story, connection, and ceremony.
- Ask families how they prefer to share information (storytelling, art, music, circle format).

2. Increase Cultural Safety Within Existing Program Rules

- Hire Indigenous liaisons; involve Elders and Knowledge Keepers early and often.
- Set up rooms in circle format, open with smudge, drumming, or land acknowledgment protocols.
- Seek cultural teachings specific to the Nation being served.

3. Shift from a Deficit-Based to Strengths-Based Approach

- Focus intakes on gifts, roles, abilities, not just limitations.
- Develop “All About Me” or strengths-first intake options.

4. Enhance Staff Preparation & Mindset

- Regular cultural humility training grounded in local Nations.
- Embed reflective practice: self-awareness, positionality, and bias identification.
- Encourage staff to act as cultural translators—bridging system language with community worldview.

5. Improve Service Delivery Flexibility

- Offer multiple intake formats: in-person, circle, art-based, oral storytelling.
- Build relationships with Indigenous community organizations for joint case conferencing.

6. Make Culture Visible in Daily Practice

- Normalize ceremony, language, and cultural protocols where appropriate.
 - Use Indigenous languages or teachings with permission.
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Recommendations for Government Consideration

1. Align Disability Policy with Social and Relational Models

- Reduce reliance on standardized, medicalized assessments.
- Allow eligibility evidence reflecting relational, community-based, and strengths-based understandings of disability.

2. Reform Funding and Accreditation Requirements

- Update ACDS and ministry service standards to recognize culturally grounded practice as excellence, not exception.
- Expand what “evidence” or “validity” means to include Indigenous knowledge systems.

3. Support Indigenous-Led Program Development

- Fund co-creation of Indigenous-designed disability supports, not retrofitted Western models.
- Support Nation-specific approaches, Elders-in-residence, and cultural liaisons.

4. Build a Culturally Safe Workforce

- Fund mandatory cultural humility, anti-racism, and Indigenous worldview training.
- Create pathways to hire, train, and retain more Indigenous disability workers.

5. Increase Access on Reserve and Reduce Forced Travel

- Invest in on-reserve assessment teams, mobile services, and community-based supports.
- Allow more flexible methods of intake and eligibility documentation.

6. Recognize Indigenous Family Structures in Policy

- Expand definitions of caregiver, decision-maker, and family for eligibility and service access.
- Incorporate customary caregiving into disability policy frameworks.

7. Centre Indigenous Knowledge in Service Delivery

- Create provincial guidance supporting the integration of ceremony, language, and traditional practices in disability services.

Conversation Topic #3 – Geographic Barriers

Summary of What Was Heard

Where families live significantly affects what supports they can access. Many rural and on-reserve communities lack local services entirely. Transportation barriers, poor road conditions, lack of vehicles, and unreliable internet prevent families from accessing care.

As a result, some individuals or families never apply for services at all.

Participants shared promising approaches such as mobile services, hiring community members, virtual assessments where appropriate, and delivering programs directly in communities.

Participants highlighted that geography—distance, lack of transportation, and limited local services—creates significant inequities for families, particularly for rural, remote, and on-reserve communities. Many families go without services entirely because supports are unavailable in their communities, are inaccessible or unaffordable, lack cultural relevance, or require travel that is unsafe or places an unreasonable financial burden on families.

Key Messages

- Geography creates inequity.
- Transportation is a major barrier—not a minor inconvenience.
- Services must go to families, not the other way around.
- Local Indigenous staffing builds trust and sustainability.

Conversation Topic #3 major themes included:

1. Lack of Local Services & Supports

- Many disability supports (FSCD, PDD, therapy, respite, assessments) are not available on reserve or in remote areas.
- Families often must leave their community—sometimes travelling hours—for even basic assessments or appointments.
- Because services are unavailable locally, many families never apply for supports at all.

2. Transportation & Travel Challenges

- Lack of personal vehicles, poor or unsafe road conditions, and inconsistent transportation options are major barriers.
- Families require transportation not just for the child, but for siblings and extended family members, as Indigenous caregiving is relational.
- Elders often lack accessible transport to participate in cultural supports or appointments.
- Workers who drive may be difficult to find or retain.

3. Impacts of Distance on Wellbeing

- Geographic isolation leads to emotional isolation—families feel disconnected from supports and community.
- Distance reduces access to culturally grounded practice, Elders, and community connection.
- Lack of childcare and personal support makes long-distance travel even harder.

4. Workforce & Infrastructure Challenges

- Staff recruitment and retention are particularly difficult in rural and remote areas.

- Lack of local infrastructure (health centres, office space, internet connectivity) limits service options.
- When services rely heavily on telehealth, families struggle with unstable internet and unreliable phone connections.

5. Creative Local Solutions Already Working

- Virtual psychoeducational assessments, with physicians travelling as needed for in-person components.
 - Hiring Indigenous workers and community members as support staff.
 - Mobile services or outreach teams that travel to nations and remote communities.
 - Group programming and community awareness sessions delivered locally.
 - Natural mentor networks—connecting families with shared experiences.
 - Partnerships that bring service providers into the community rather than expecting families to travel.
-

Key Takeaways

1. Geography is one of the largest determinants of service access in Alberta.

Where a family resides dictates what services they can receive—and in many cases, whether they receive any at all.

2. Transportation is not a minor inconvenience—it is a systemic barrier.

Road conditions, lack of vehicles, and inconsistent transportation services prevent families from accessing even “basic” supports.

3. Service models built around urban assumptions do not work for remote or on-reserve communities.

Families and Elders need services that come to *them*, not the reverse.

4. Local Indigenous staffing and community-designed services are essential.

Hiring within the Nation creates trust, cultural safety, and long-term sustainability.

5. Virtual/remote options help—but do not replace in-person, relationship-based support.

Technology barriers often limit effectiveness of telehealth alone.

Practical Improvements That Do NOT Require Government Policy Changes

1. Strengthen Community-Based Approaches

- Increase local hiring of Indigenous community members for support roles.
- Build partnerships with local Nations to host groups, sessions, and programs on reserve.
- Provide service in familiar, accessible community spaces (schools, band offices, health centres).

2. Bring Services to Families

- Organize rotating mobile teams for assessments, respite, therapy, and caseworker visits.
- Plan regular “service days” or “community clinics” in remote communities.
- Provide workers with mileage reimbursement and support to travel to families.

3. Improve Transportation Access Using Existing Resources

- Partner with Nations to coordinate local transport options (band vans, volunteer drivers, shuttle programs).
- Coordinate shared transportation for families travelling to similar appointments.
- Offer telehealth appointments supplemented with in-person touchpoints.

4. Reduce Barriers Within Agencies

- Build flexibility into service schedules to accommodate long travel times.
- Offer childcare during appointments or programming.
- Create natural mentor networks so families gain support from peers.

5. Enhance Communication & Awareness

- Make information on local service options easier to find.
 - Provide maps, guides, and “who to call” resources tailored to each region.
 - Work with Nations to increase community awareness on disability supports, inclusion, and strengths-based approaches.
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Recommendations for Government Consideration

1. Invest in On-Reserve and Local Service Delivery

- Fund Nation-based disability hubs or health centres that offer assessments, respite, therapies, and navigation supports.
- Support Indigenous-led agencies to deliver PDD/FSCD services directly in communities.

2. Establish Mobile Disability Support Units

- Province-wide mobile teams that bring assessments, supports, and navigation into communities regularly.
- Specialized mobile FASD, OT/PT, and mental health teams for rural and remote regions.

3. Address Transportation Inequities

- Fund dedicated transportation programs for disability services (scheduled vans, shuttles, mileage supports).
- Improve road infrastructure and winter maintenance in areas where families travel for services.
- Provide transportation for Elders and extended family members involved in caregiving.

4. Strengthen Workforce Capacity in Rural and Indigenous Communities

- Invest in training, wage parity, and retention strategies for rural and Indigenous disability workers.
- Create workforce pipelines to hire local community members into support roles.

5. Expand Telehealth Infrastructure

- Improve internet and mobile connectivity on reserve and in rural regions.
- Allow hybrid models (virtual assessment with in-community follow-up).

6. Remove Policy Barriers Related to Family Structure

- Expand FSCD's definition of "family" to reflect Indigenous kinship caregiving.
- Ensure eligibility and supports are not constrained by a nuclear family model.

7. Support Co-Designed Service Delivery

- Fund the co-creation of remote service models with Nations—not imposed or adapted from urban frameworks.
- Embed Elders, Knowledge Keepers, and Nation-specific cultural protocols into disability services delivered on reserve.

Conversation Topic #4 – Systemic Issues & Colonial Impacts

Summary of What Was Heard

Participants spoke openly about how colonial systems continue to shape disability services today. Policies, funding models, and eligibility requirements often exclude Indigenous ways of knowing, family structures, and caregiving practices.

Pan-Indigenous approaches erase Nation-specific realities. Rigid eligibility rules and medicalized definitions exclude many people who need support.

Families and communities want meaningful involvement in designing services and policies that affect them.

Participants described how the disability system—built on Western, colonial structures—continues to create inequities for Indigenous families. These inequities show up in policy, funding models, assessment requirements, service structures, and workforce limitations. Families emphasized the need for self-determination, Indigenous-led design, cultural grounding, and a shift away from medicalized and deficit-oriented systems.

Key Messages

- Colonial frameworks continue to influence disability systems.
- Policies often fail to reflect Indigenous realities.
- Indigenous-led design and leadership are essential.
- True change requires system collaboration and flexibility.

Conversation Topic #4 major themes included:

1. Legacy of Colonialism in Today's Systems

- Disability supports were built within Western worldviews, not Indigenous ways of being, knowing, or caregiving.
- Legislation and policy frameworks do not allow space for Indigenous practices, relational decision-making, or customary family structures.
- Pan-Indigenous approaches erase Nation-specific identities and create inaccurate data for future program development.
- Colonial systems (e.g., reserve boundaries, historical underfunding) still create geographical, relational, and structural barriers to service access.

2. Ongoing Inequities in Policy and Processes

- Eligibility rules such as the PDD IQ requirement exclude many Indigenous people with disabilities.
- FSCD's narrow definition of "family" limits the involvement of kinship, extended family, and natural supports central to Indigenous life.
- Strict timelines, rigid processes, and standardized assessments conflict with relational approaches rooted in respect and trust-building.
- Funding gaps for cultural programming, transition support, and staff training undermine culturally safe practices.
- Multiple intakes across systems create duplication and re-traumatization.

3. Structural Barriers Experienced by Families

- Families often lack clear understanding of support types due to system complexity.

- Communication tools required by systems (e.g., emails, online portals) are not always accessible; families rely on Facebook, Messenger, WhatsApp.
- Families frequently feel pressured to adapt to the system (“be good clients”) instead of having services adapt to them.
- Services are often not offered on Nation, forcing families to leave their communities or forgo supports entirely.

4. Opportunities for Indigenous Control and Leadership

- Families want services designed *with them*, not *for them*.
- Indigenous communities want greater control over policy development, program design, and service delivery.
- Community-based staffing—hiring from the Nation—creates trust, continuity, and cultural alignment.
- Natural supports and cultural strengths could be leveraged with financial support at lower cost than formal services.
- Ethical space, co-creation, and Indigenous-informed leadership were seen as essential for meaningful change.

5. What Indigenous-Led Disability Supports Could Look Like

- Nation-specific programs rooted in cultural protocols, teachings, and holistic approaches.
 - Full services available on-reserve, delivered by people who understand local worldviews.
 - Relationship-first, strengths-based intake processes—storytelling, art, and oral histories rather than medicalized forms.
 - Multi-year agreements that allow continuity of care and minimize disruption.
 - Integrated services across disability, school, child intervention, health, and community programs (“through the eyes of the child and family”).
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Key Takeaways

1. Colonial structures still dictate what “counts” as disability, who qualifies, and how families engage.

System models prioritize Western evidence, timelines, and documentation—not Indigenous relational and cultural knowledge.

2. Policies do not reflect Indigenous worldviews around family, caregiving, development, or identity.

This results in exclusion, misunderstanding, and unnecessary barriers.

3. Indigenous-led, Nation-specific design is critical—not pan-Indigenous adjustments to Western systems.

Indigenous-led, Nation-specific design shifts disability supports from being system-centred to being family- and community-centred, ensuring services reflect local teachings, relationships, and realities. This results in greater trust, stronger engagement, and supports that genuinely meet the needs of Indigenous children, adults, and families.

4. Relationships, self-determination, and trust are foundational but undermined by rigid processes.

Families want to be heard, understood, and respected—not processed.

5. Structural change requires collaboration across systems, not siloed mandates.

FSRD, PDD, education, child intervention, health, and Nations must communicate and integrate.

Practical Improvements That Do NOT Require Government Policy Changes

1. Strengthen Relational Practice and Ethical Space

- Allow extra time for building trust and understanding family context.
- Use Indigenous languages where possible; involve cultural translators or Blackfoot/Cree speakers.
- Use Nation-specific cultural protocols such as circle processes, Elders' involvement, or "All About Me" approaches.

2. Increase Family Voice and Self-Determination

- Provide plain-language guides on service types and choices.
- Let families choose how they communicate (WhatsApp, Messenger, phone, in-person).
- Ensure workers are matched thoughtfully with families, prioritizing fit and cultural familiarity.

3. Embed Indigenous Knowledge Keepers and Cultural Liaisons

- Include Elders in assessment, transition planning, and case conferences.
- Hire Indigenous staff across all roles—navigation, support, intake, and leadership.

4. Adjust Agency Practices for Accessibility

- Facilitate one "soft intake" that can be shared across teams.
- Involve community members in program design or feedback loops.
- Capture cultural needs in grant reporting and agency quality metrics.

5. Expand Use of Natural Supports

- Recognize cultural caregiving and extended family networks in service planning.
 - Use community strengths and existing supports as part of service delivery.
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Recommendations for Government Consideration

1. Reform Eligibility Requirements and Definitions

- Remove the PDD IQ requirement.
- Redefine FSCD “family” to include kinship, customary caregivers, extended family, and community supports.

2. Recognize Indigenous Knowledge as Valid Evidence

- Allow relational, cultural, and community-based information in assessments.
- Shift toward social and relational models—not solely medical criteria.

3. Invest in Indigenous-Led Program Design and Delivery

- Fund Indigenous communities to design, govern, and run disability supports.
- Develop policies that specifically avoid pan-Indigenous approaches.

4. Shift Funding Models to Support Cultural Safety

- Provide dedicated funding for cultural staff, Indigenous liaisons, Elders, and transition supports.
- Introduce multi-year agreements for continuity and relationship-based practice.

5. Improve System Integration and Collaboration

- Create a single access point for disability supports to reduce repeated intakes.
- Facilitate collaboration between FSCD, PDD, education, child intervention, health, Nations, and IGBs.
- Break down siloed mandates and build wraparound models.

6. Expand Service Availability on-Nation

- Fund on-reserve service hubs for disability and family support.
- Prioritize training and hiring Indigenous workers from the Nation.

7. Support Culturally Grounded Workforce Development

- Provide stable funding for staff cultural training.
- Support Indigenous leadership pipelines across disability and social services.

8. Use Language That Reflects Ethical Space

- Review names like “AISH” and “PDD” to align with culturally respectful terminology.
 - Ensure policy language reflects dignity, strengths, and Indigenous worldviews.
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Overall Reflections

Across all four discussion areas, participants emphasized that:

- Self-determination must be central to disability supports
- Relationships and trust are as important as services
- Cultural grounding improves outcomes and dignity
- Geography should not determine access to care
- Indigenous communities must be partners—not recipients—of system design

Participants expressed both frustration with current barriers and hope that meaningful change is possible through collaboration, humility, and shared leadership.

Next Steps

Based on what we heard, the following next steps were identified:

1. Share This Report Back

- Circulate this report to Summit participants, partners, and stakeholders
- Use it as a conversation tool—not an endpoint

2. Continue Relationship-Based Dialogue

- Create space for ongoing conversations with Indigenous communities, families, and service providers
- Honour that everyone is at a different place in their learning journey

3. Identify Actions That Can Be Taken Now

- Improve communication and navigation supports
- Strengthen cultural safety within existing programs
- Increase flexibility and relationship-based practice where possible

4. Inform Advocacy and System Conversations

- Use this report to inform discussions with government and system partners
- Highlight both immediate improvements and longer-term policy considerations

5. Explore Future Collaboration

- Consider Communities of Practice, sharing circles, or future gatherings
 - Support Indigenous-led initiatives and co-designed solutions
-

Conclusion

This Summit affirmed that improving disability supports for Indigenous children, adults, and families requires more than adjustments to existing systems—it requires a continued commitment to listening, humility, and shared responsibility. Participants reminded us that meaningful change begins with relationships, trust, and respect for Indigenous knowledge, family structures, and ways of being. While the challenges identified are complex and deeply rooted in colonial systems, the conversations also highlighted hope, innovation, and a strong willingness to work together differently. This report is offered as both a reflection of what was heard and an invitation—to continue dialogue, to act where we can now, and to walk alongside Indigenous families and communities in building disability supports that are culturally grounded, equitable, and responsive. The work ahead is ongoing, and it is work that must be done together.

We thank all participants for their honesty, generosity, and commitment to strengthening disability services in Alberta in ways that are respectful, inclusive, and grounded in Indigenous knowledge.



Appendix A – Key Messages for Government



Alberta Disability Summit – Indigenous Cultural Understanding

What We Learned at the Alberta Disability Summit: Indigenous Family, Community, and Service Provider Perspectives



Context:

Participants at the Alberta Disability Summit, shared lived experience and system-level insights on how disability supports impact Indigenous children, adults, and families across Alberta. The messages below reflect consistent themes across all discussion areas.

Key Messages:

- **Self-determination matters:** Indigenous families and communities want greater control over how disability supports are designed, accessed, and delivered.
- **Current systems create inequity:** Colonial policies, rigid eligibility criteria, and medicalized models continue to exclude Indigenous ways of knowing, family structures, and caregiving practices.
- **Relationships drive outcomes:** Relationship-based, culturally grounded approaches lead to stronger engagement and more effective supports than standardized, compliance-driven processes.
- **Geography limits access:** Rural, remote, and on-reserve communities face significant service gaps due to lack of local services, transportation barriers, and limited connectivity.
- **Pan-Indigenous approaches are ineffective:** Indigenous-led, Nation-specific design is essential; one-size-fits-all adaptations of Western systems do not meet community needs.
- **System fragmentation adds burden:** Limited coordination across FSCD, PDD, education, health, and child intervention creates duplication, delays, and re-traumatization.
- **Change is possible:** Participants identified practical improvements that can be implemented now, alongside longer-term policy considerations aligned with reconciliation commitments.

Overall Consideration: Meaningful improvement in disability supports for Indigenous families requires coordinated system change, Indigenous leadership, and policy flexibility that prioritizes equity, cultural safety, and community realities.

Appendix B – Alberta Disability Summit Participants

Full Name	Organization
Alison Burk	Progressive Alternatives Society of Calgary
Angela Woodcock	McMan Youth, Family and Community Services Association
Austin Riley	Volunteer & individual participant
Bernice Barefoot	Accredited Supports to the Community
Beverly Keeshig Soonias	ALIGN Association of Community Services
Brandie Wachter	Metis Nation of Alberta
Brandon Fox	Aiyiikakimaop For Children Blood Tribe Social Development
Casey Bellemare	Family Ties Association
Carmen Legge	Alberta Foster and Kinship Association
Chelsea Parker-Munroe	Enviros
Chris Simonson	McMan Youth, Family and Community Services
Clova Lehr	Alberta Council of Disability Services (ACDS)
Colleen Huston	Alberta Disability Workers Association (ADWA) & Disability Action Hall
Craig Ryan	Crossroads Family Services
Dawn Boustead	Children's Cottage Society
Debi O'Boyle	CarePros
Desi Ear	Good Stoney Nation
Drew Peal	Progressive Alternatives Society of Calgary
Erin Bilben	Renfrew Educational Services
Esther Walkey	Parkland Community Living & Support Society
Evans Yellow Old Woman	Siksika Support Services
Frankie Scout	Aiyiikakimaop For Children Blood Tribe Social Development
Gloria Brathwaite	McMan Youth, Family and Community Services
Greg McMeekin	Advocate for Persons with Disabilities
Greg Schmidt	Family Ties Association
Harley Sitting Eagle	Siksika Disabilities Program
Heather Baich	McMan Youth, Family and Community Services Association
Heather Saunders	Tsuu T'ina Education Department
Irwin Big Old Man	Siksika Disabilities Program
Jackie Peters	Enviros
Jeannine Tucker	Alberta Disability Workers Association (ADWA)
Jenny Brewer	Alberta Foster and Kinship Association
Jessica Greyeyes	Luna Child and Youth Advocacy Centre
Jonathan Robb	Centre for Autism Services Alberta
Julian Wigg	Chimo
Julianne Maggrah	Keynote Speaker
Kakoli Mitra	Alberta Council of Disability Services (ACDS)
Kate Hughson	Inclusion Alberta
Kate Paulson	Inclusion Alberta
Kathleen McHugh	Siksika Disability Services
Katie Boucher	McMan Calgary and Area
Kevyn Timmons	Renfrew Educational Services
Kirsten Gulkiewich	Family Ties Association

Full Name	Organization
Linda Little Chief	Siksika Support Services
Lisa Congo	Children's Cottage Society
Luciana Ferreira	Family Ties Association
Marilyn Standing Alone	Aiyiikakimaop For Children Blood Tribe SocialDevelopment
Meagan Bouvette	Metis Nation of Alberta
Medinat Oladimeji	Prairie Med Community Services Inc.
Michelle Theoret	Nightwind Treatment Centre
Nancy Doucette	Parkland Community Living & Support Society
Nancy Dyer	Care Wellness
Nicki Wilson	Renfrew Educational Services
Nina Smith	Aiyiikakimaop For Children Blood Tribe SocialDevelopment
Nonsi Mathe	Gateway Holistic Care Group
Pam McGladdery	URSA
Phoenix Waslyshen	Canadian Accreditation Council of Human Services
Rayna Fudge	McMan Calgary and Area
Rhonda Barracough	ALIGN Association of Community Services
Robyn Jackson	Connections for Families Society
Shane Sweet Grass	Aiyiikakimaop For Children Blood Tribe SocialDevelopment
SkyAnne Krupa	Catholic Social Services
Susan Spring Chief	Siksika Disabilities Program
Sylvie Horan	Enviros
Vladimir Galic	CarePros

Appendix C – Alberta Disability Summit Agenda

Alberta Disability Summit Indigenous Cultural Understanding

Grey Eagle Resort and Casino, November 27, 2025

- | | |
|--------------------|---|
| 9:00-9:30 | Welcome & Opening Prayer |
| 9:45-10:45 | Julianna Maggrah: <i>'Indigenous Perspectives on Disability'</i> |
| 10:45-11:00 | BREAK |
| 11:00-12:00 | Ethical Space & Fireside Chat, Takeaways |
| 12:00-12:45 | LUNCH |
| 12:45-1:30 | Collaboration Rooted in Relationship: A Panel Discussion |
| 1:30-2:30 | Sharing Perspectives & Shaping Our Path Forward:
Small Group Discussions |
| 2:30-2:45 | Reflecting Back with the Larger Group |
| 2:45-3:00 | BREAK |
| 3:00-3:30 | Looking Forward Together |
| 3:30-3:45 | Resources & ALIGN's Offerings |
| 3:45-4:00 | Conclusion and Closing Prayer |

Appendix D - Alberta Disability Summit (Slides)



The image displays eight slides from the Alberta Disability Summit, arranged in a 4x2 grid. Each slide features a photograph of a natural landscape (mountains, river, forest) on the right side and text on the left side.

- Slide 1:** Alberta Disability Summit Indigenous Cultural Understanding. Includes the ALIGN logo (Association of Community Services) and a speaker icon.
- Slide 2:** Welcome & Land Acknowledgement. Shows a person running on a rocky trail overlooking a lake and mountains.
- Slide 3:** Honouring the Day: Smudge & Opening in a Good Way. Shows a pile of dried smudge and a green plant.
- Slide 4:** Opening Remarks. Shows a scenic view of a river flowing through a forested valley.
- Slide 5:** Why This Summit Matters. Includes a list of aims and an ongoing initiative to elevate voices and promote accountability.
- Slide 6:** Who Are We Talking About and Why It Matters? Includes a quote from the UN Convention on the Rights of Persons with Disabilities (CRPD) and a reference to Article 7 & 8.
- Slide 7:** Today's Journey. Includes a list of agenda items.
- Slide 8:** Our goal for the Summit and future events is to serve as a continuous mechanism for fostering collaboration, gathering commitments, and enhancing accountability for disability inclusion and Indigenous cultural understanding across all sectors.

Defining Disability

- Indigenous understandings of disability vary across communities
- Many Indigenous languages have no direct word for "disability"
- Focus on gifts, roles, and responsibilities rather than deficits
- Some communities see the Western concept of disability as conflicting with Indigenous worldviews

Adapted from Nicole Inesse-Nash, *Disability as a Colonial Construct: The Missing Discourse in Conceptualizations of Disabled Indigenous Children*

9

Julianna Maggrah

11



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What is Ethical Space?

From a Cultural Perspective

- Acakh Pimatisiwin : Spiritual Life**
 - Acakh = spirit, soul, essence
 - Pimatisiwin = the way of life, living

Life is Guided by the spirit

- Ceremony/acceptance/language and culture = more sacred as they have more gifts/Living more in spirit
- Children are gifts, and they are on loan to us

"My kokum (grandmother) would not like this word. She says there is no word in our language for this. I was taught to see my disability as a challenge and at times a gift from the creator."

-Young Person

10

Mindfulness on the Land
~Julianna Maggrah

12

Alberta Disability Summit
Indigenous Cultural Understanding
ALIGN
Association of Community Services
BREAK

14

Fireside Chat

- Imposition of Western standards and language
- Spiritual lens often emphasizing strength and community
- How is intergenerational trauma linked to colonial systems?
- Reducing barriers, how do organizations do that?

30

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Carrying the Weight of History

- Colonization disrupted traditional roles for those with differences
- Residential schools, institutionalization, and assimilation policies caused deep harm
- Disconnection from land and community affects wellness

Takeaway: Disability services today still carry colonial legacies – structural racism, ableism, and the imposition of Western standards.

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Colonial Impacts

- Indigenous People are more likely to experience disability due to colonial impacts: poverty, environmental dispossession, intergenerational trauma and health inequities
- Disability compounds colonial barriers: People may face racism + ableism + jurisdictional confusion.

Takeaway: Reconciliation in disability services means dismantling layered systems of exclusion.

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Walking the Path of Reconciliation

- Reconciliation includes how we support those with visible and invisible differences
- Honouring Indigenous strengths includes dismantling colonial systems of care
- Community, kinship, and story must be centered in support practices
- Acknowledging the past
- Understanding and respect
- Addressing systemic issues
- Healing and support
- Building relationships

Takeaway: Services must not just "add" culture but shift power and design so Indigenous Knowledge leads service delivery.

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Self-determination is Fundamental

- Colonial systems took away decision-making power – both from individuals with disabilities and from Indigenous communities
- Reconciliation demands restoring self-determination and autonomy in services, funding and governance

Takeaway: Indigenous-led disability organizations, Elders, families and persons with lived experiences must shape solutions.

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Reconciliation is Action, Not Just Awareness

- Real reconciliation in disability services involves:
 - Funding Indigenous-led models;
 - Changing policies to address jurisdictional gaps;
 - Embedding accountability to Truth and Reconciliation Commissions (TRC) Calls to Action and UNDRIP (United Nations Declaration on the Rights of Indigenous Peoples).

Takeaway: Reconciliation requires systemic change, not symbolic gestures.

Trauma-informed and Healing Approaches

- Many Indigenous people with disabilities live with intergenerational trauma from colonial violence
- Mainstream disability services can retraumatize when they ignore histories of forced care, family separation, or mistrust of government systems

Takeaway: Healing, cultural grounding and relationship-based service delivery are essential.

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Overall Takeaway

Reconciliation in disability services means shifting from colonial, deficit-based systems toward Indigenous-led, culturally grounded approaches that honour strengths, rights, and self-determination.



Alberta Disability Summit

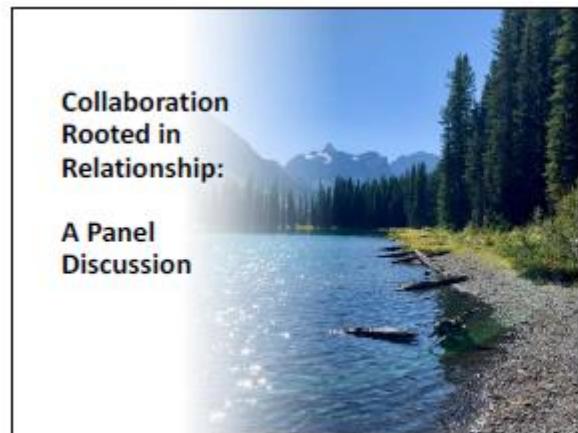
Indigenous Cultural Understanding

LUNCH BREAK

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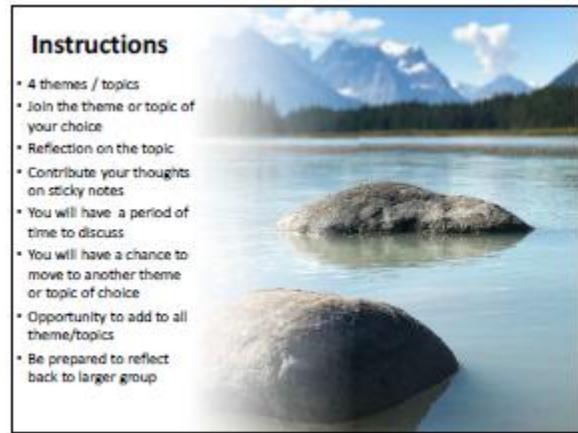
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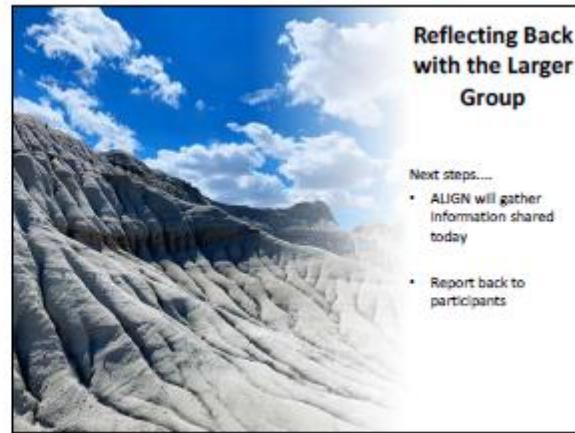
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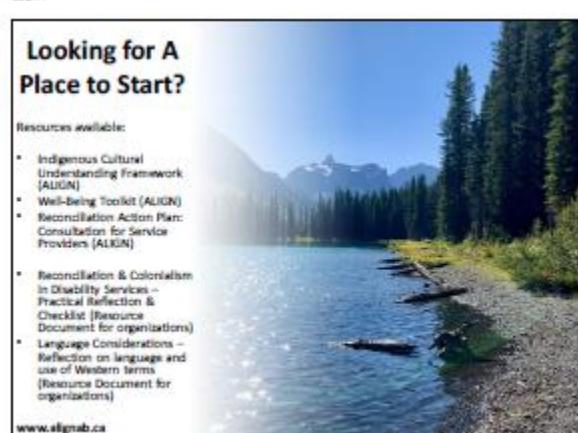
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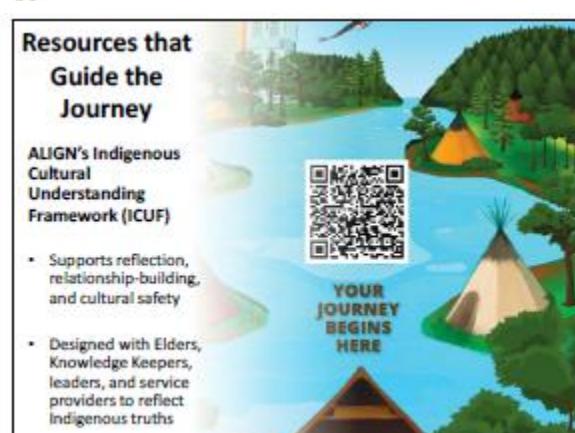
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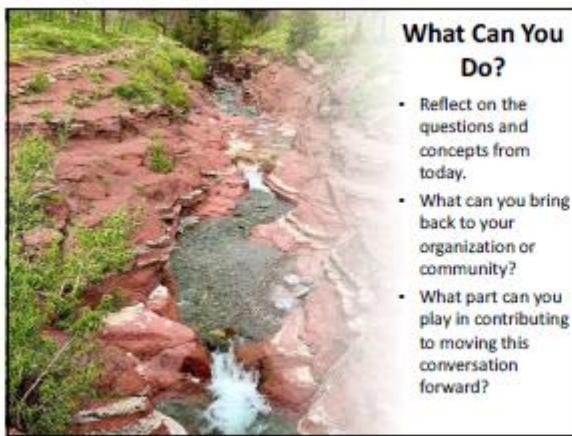
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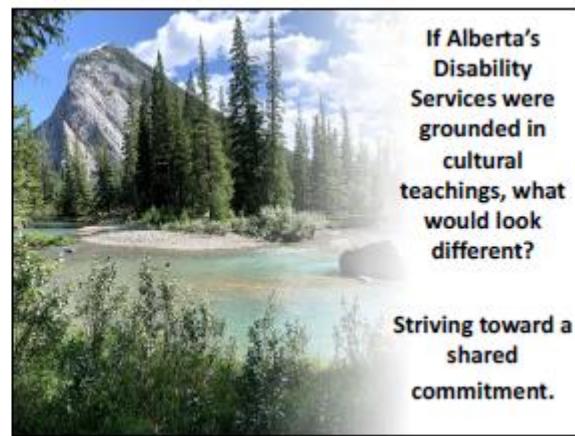
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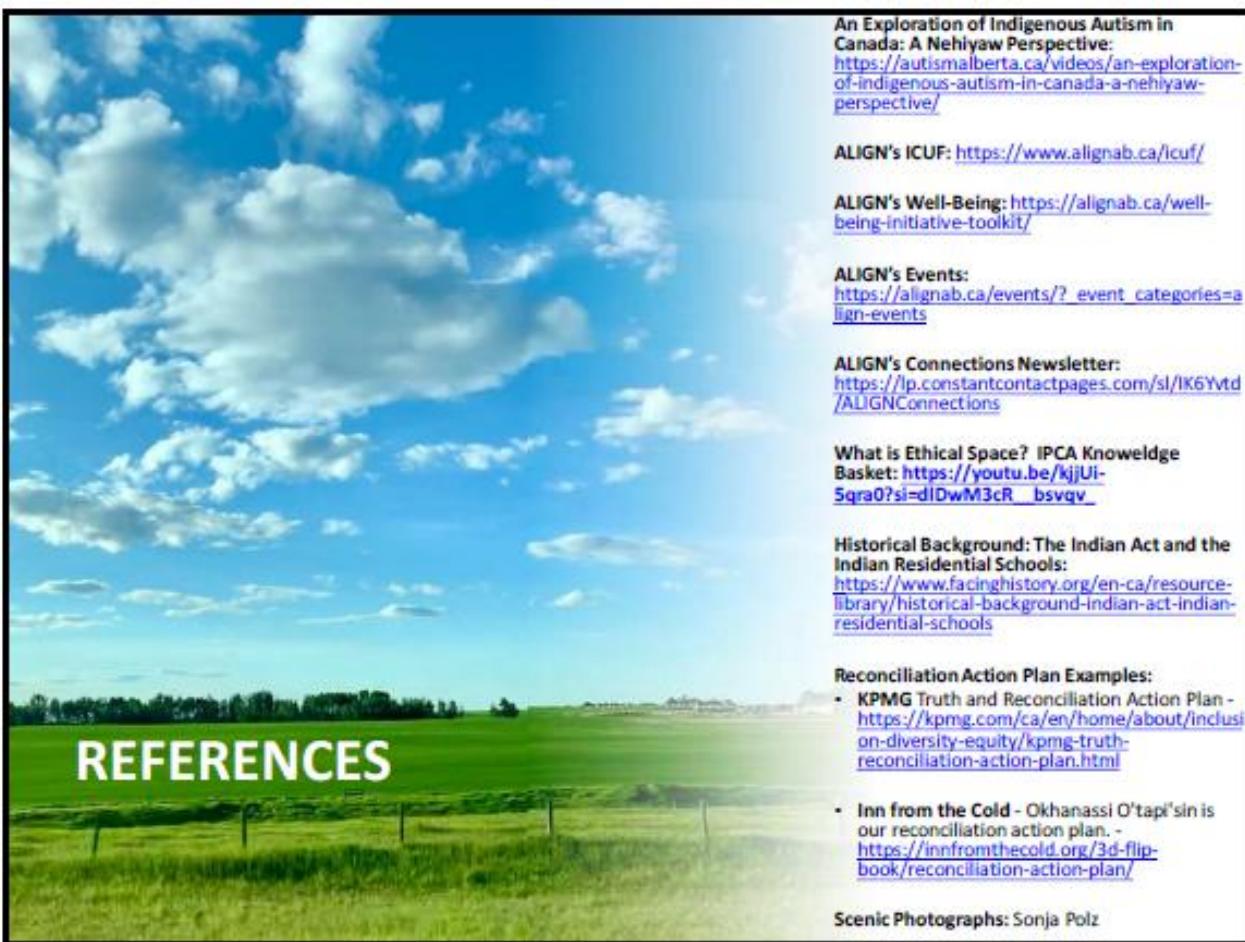
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