

DATE: March 27, 2018

COMMUNITY: Downtown Eastside residents, all of whom are involved in the TORO project (Tenant Overdose Response Organizer) with the DTES SROC. (See below).

PARTICIPANTS:

N=17

ORGANIZATIONS:

All participants are TOROS with the Downtown Eastside SRO Collaborative Society.

Participants:

3 Female-identified; 14 male-identified

All participants are either past or present drug users. All live in SROS in Vancouver's Downtown Eastside.

Age range: Late 20s to mid 60s.

Meeting Minutes:

Intros – Instructions were to tell us a “rose” and “thorn” (or “high” and “low”) from your week.

- **Participant 1** - launch of the Right to Remain project was best thing that happened
 - Worst: someone fell out of 7th floor or regent
- **P2** – People getting used to him in GU now. Installed his sharps box in main foyer and got about a third full in a week. Needles all over floor in washroom, Steve cleaned it up. People think it's now his job to clean them up. He will come grab them. He has gloves. Needs tongs to do it. He has thick rubber gloves and doesn't seem worried.
 - Bad thing: R2R launch: had an incident where someone confronted him and said he wasn't doing a good job. Got into an argument with this person. Made a point that you shouldn't treat anyone like that. Who the hell was it? Felt like slapping him but he stopped himself, went home, and cooled off. Contemplated quitting but quitting over some asshole not worth it.
 - It's good, I'm happy here. I haven't met everyone but people seem like good people.
- **P3** - cheques coming on time now. No handles in washroom and toilets always flooded at Regent.
- **P4** - Pass and he'll come up with something
- **P5** - Negative: haven't had much time to spend with partner Chad. Pen exploded in purse, ink everywhere, really upsetting.
 - Postive: got to see her granddaughter last Thursday. Brought her to her Dads place and she finally gave her dad a kiss. Learned how to do Cedar weaving from someone from her band.
- **P6** – Astoria. Good thing was the cedar weaving. Also nice to hang out with the little one at the aquarium. Negative: it's raining.
- **P7:** At empress. Positive: no ODs lately. Negatives: so wrapped up in own problems for the last week. Having a really tough time but doesn't want to cry about it.

- **P8** – Empress. Quiet last couple of weeks, no ODs. Highlight: plowing through his room making sure its more liveable. Invites everyone for dinner!!
 - Lowlight: not being able to make it to the right to remain. A friend who has been staying with him set his day off yelling at him in his own home. Didn't want to go anywhere after that and had some 'me' time.
- **P9**: red door. Good week, quiet. No ODs. Moved into a bigger room.
 - Lows: there was a body in the alley the other day. Stabbing behind Balmoral. You could see it from fire balcony. Someone set off sprinkler upstairs to flooded the washroom. Fire department and stuff all had to come. Weed shop underneath complained about it. Flood went all the way through to the basement. Lots of people coming inside cause of the rain. The manager is back now so Liam is doing less work and everything is totally messy now. Hates living in a messy situation.
 - Steve at GU had the same issues.
- **P10**: lives at Regent:
 - Bad thing: guy falling out of the window. Happened to see the guys shadow as it was falling which was a lot.
 - Good: 3 animals, getting to be a bit much. Getting into the swing of things with how to handle it.
- **P11**: Lives at united rooms
 - Didn't have any ODs the past two weeks. High point was coming here and seeing all your smiling faces again.
 - Low point: forgot both of his sons birthdays and was pretty hard on himself about it.
- **P12**: Regal on Granville. End of all SROs!! Low: the people who are gross and don't know how to flush a toilet. Like living in a zoo with a bunch of monkeys with shit everywhere. No ODs though.
 - High: Painting buckets with other TOROS for needle disposal in their buildings.
- **P13**: Brotherhood, sisters, brothers. High is seeing all his brothers and sisters. Got cheap drugs! Something good we're all trying to do.
 - Low: late as hell. But he's here.
- **P14, P15, P16, P17** – joined a little later for the discussion groups, but missed the debrief.

Dani: The province is doing a BC poverty reduction strategy thing. Hired a group of people called SPARK BC. Social planning and research council? Their job is to reach out to orgs who work with people who work with people with a lived experience of poverty. As a group, (3 groups) answer 2 questions and come back together to report back. We have to focus on what ideas come out of these discussions in order to prioritize and choose our top 3 solutions to this crisis. It's all related btw poverty and OD crisis. We think the TOROS have a unique contribution to this discussion. It's a chance to have your voices heard loud and clear.

- **P4**: wouldn't work unless its connected
- **P13**: vulnerability is key word. No one gives a fuck about the people using needles. It's really hard to stay positive. You gotta keep doing the work and it's not an 8 hour basis, It's any time when someone really needs it and you need to give them help. You always gotta be on call.

RESULTS FROM WORKSHOP:

QUESTION 1: What are the issues facing you and people living in poverty right now?

A. Lack of income

Income assistance – you can barely live off it. Barely covers rent, not enough money left for food. Very low income are extremely rent burdened!! We estimate among our SRO tenants, that they have a 70% rent burden on average. (They are paying 70% or less of their income on rent). It puts you in a constant state of worry and compromise. If you eat, no money for smokes; If rent gets paid, no money for your phone. Never any money for leisure activities.

We're all poor and trying to survive and we need to do criminal activities to put food in your mouth and drugs in you. Income for living support. There is not enough income to live and get food, clothes, proper places to live. Welfare/social assistance has not kept pace with the cost of living and it is not anywhere near enough to survive on even for people living very cheaply.

Income earning limits on people who are on disability and welfare are also a huge barrier. So I can't get a great work experience opportunity because I can only earn so much on welfare. It keeps me down.

B. Lack of Shelter and/or bad living conditions for those that have poor shelter

When people get out of jail they don't have a place to live and a lot of people go right to the street. Horrible and unhealthy conditions in SROS and there are no other choices. No working bathrooms, garbage, rats, cockroaches, bedbugs. Being housed also comes with its stress. Constant fear of losing housing, you finally get housing and you are constantly worried about okay when will I lose it. No long term stability. I'm afraid to ask for accommodations from my landlord (ie: mould treatment) because the backlash may lead to my losing my housing.

Life is also lonelier because I can't have family or friends come visit me, it is very isolating, partly because SRO landlords control visitation with unfair guest policies. Photo ID requirements for entering some buildings are a barrier in everyday life, and sometimes your ID gets stolen or confiscated. Just another barrier.

C. Illness & Cleanliness needs

Pneumonia. Not sure if because living environment. Been sick 8 months, mould problem in the hotel too. Flood underneath tile is wet and floor mush. Couldn't retiling if I wanted to. It's hard to stay healthy when living in these conditions.

Access to laundry, access to clean drinking water (can't drink the water at the Regent right now! It's contaminated), access to showers and baths. All of these provide barriers in other areas of life.

D. Hunger

Welfare barely covers food costs. Impossible to live off of 200 or less a month for food, even shopping at bargain, buying expired food, plus using food bank, it's just not possible.

E. Mental Illness and Addiction

Often self-medicating to deal with everything else. Addiction gives you a break from reality and where you are. Escape. It is SO difficult to stop using drugs when you are living in poverty and it is difficult to escape poverty when you are in addiction. We use substance to cope. We must make it easier and safer to access clean drugs with quality control. Unsafe drugs are the biggest issue.

12 steps is wrong. Doesn't work for everyone. Not forcing a model on people, more individual attention. People with mental illness might have a tougher time with treatment. More choice in your options of care. Really difficult to get up in the morning and know you're going to a class that doesn't work for you. There should be an effort to get employment as you get into treatment.

F. Stigma and Criminalization

Criminalizing poverty and drug users – they go hand in hand. Outlawing/controlling panhandling, street sales, it is constant harassment by authorities. The law is not on our side. We want jobs, not prisons.

G. Welfare Access

It is hard to get on welfare. Process over the phone or computer is so impersonal and you have no idea what the status is of your application. I didn't have a phone long enough to go through phone call process to get on welfare. When you buy the cheapest phone you can only get minutes, and you end up using ALL your minutes while being on hold with MSW (ministry of social work) or CRA, etc, to try and get disability/welfare stuff worked out. It's so discouraging.

H. Transportation

Too expensive! Makes it impossible to access opportunities outside of the neighborhood. Prevents you from being self sufficient, it's hard to get jobs. "The lack of bus pass really fucks up my life". Mobility is a huge issue, it controls where you can live, work and play.

I. Lack of Job Opportunities

You need shoes and good clothes to get a job anyways "to at least let them know, hey I'm a person". Some staffing places give you boots and stuff. Average guy pushing a cart though can't leave his stuff anywhere. No storage. Security is a huge issue, you can't work because you can't leave your stuff. We have a constant fear of losing small basic things that we have to survive. Lots of resources (temp agencies) are outside of concentration in DTES. Hard to access without transportation which is too expensive. Dangerous, hard jobs that no one else wants to do.

J. Institutionalization (ie: Jail and Rehab)

If you go to jail or the hospital, you worry that your room will be rented out while you are gone so that your landlord can make double income on it. There is not enough support for when people are coming out of jail, or drug users coming out of detox, (or abuse survivors leaving abusive relationships!)

Being denied care/help because of staff people's expectations of sobriety. Not able to enter treatment because I don't trust people to take care of my stuff while I'm gone. Every time I've done this people take your stuff and take your animals.

K. Caring and Trust

Both sides of the coin. You end up caring for people in your building because there are inadequate support available for them. But it's also hard to trust some people, because everyone is living on the edge. People steal for survival down here.

QUESTION 2:

a) What would address these issues and help you and people out of poverty?

A. (5 dots)

Welfare needs to be increased to match the cost of living AT THE SAME TIME that rent is controlled to protect (especially low income tenants) from major increases once landlords find out they can charge more because welfare went up! Welfare increases mean nothing without housing stability/SOME kind of rent control. The 100\$ increase from fall of 2017 got sucked right up into rent. No one saw the benefits from that. Only landlords.

B. (6 dots)

Build more housing. Housing that is permanent. Force landlords to rent the empty rooms, or tax those empty rooms heavily. Lower the price of housing, get it off the market. Government needs to do health and safety inspections in SRO buildings to prevent them from deteriorating – they must hold private landlords accountable. Buy the buildings! Fix them and gear it to income. We need common rooms and community programming, but not like a non-profit housing jail. We also need laws changed to support unity among tenants, protect tenants from landlord backlash, immunity from eviction, community lawyers, networking with tenants supported by the government.

C. (3 dots)

Need health care that is mobile and to your door, lots of people are shut in. No barriers to help, food programs in the building.

D.

Food programs in our buildings (see above) and Not chicken four days a week for food! Meal vouchers for people – for everybody from addiction to higher welfare, better housing with kitchens! SROs have to turn one room into a kitchen and one room into laundry.

E. (4 dots)

Controlled substances, free, clean drugs would help. Legalizing drugs is the only legal shift that will stop the overdose crisis and help people who really want to leave addiction behind.

Counselling that has choice, freedom and is drug user friendly – non judgemental! Better education on what resources that are available and bringing down barriers to access them. Access to counselling with PEERS who have the same lived experience. More support to get to appointments. More and better run treatment centres. Immediate access. When you're ready it needs to be available. More outreach centers run on a companionship or buddy system, peer model.

F.

More freedom to do things we enjoy – workout gym, free hobbies, free garage to work on cars or other projects. Internet cafes that are accessible for low income people. Happiness.

G.

Difficulty getting on welfare: Remove stigma, no waiting. Print the cheques.

H. (5 dots)

Improve access to transit. Transit should be Free! For everyone who is low income, not just people in disability. Not necessary to go to an agency to get cards to use for bus, that's just one more barrier and errand poor people have to run. Need services to support people to get you to appointments.

I. (4 dots)

Job training opportunities for people who want to transition off welfare – they have them in Alberta. Schooling and training. Trade training. Everyone wants to be involved in something and have more responsibility for something. Leadership and responsibility. People want responsibilities and feel like they're useful. Small jobs like check washrooms.

J.

Brotherly and sisterly love. Needs something with positive reinforcement rather than punishment. This leads you further away from positive stuff. If jail costs 70k a year, why not pay people a fraction of that to give them support so they don't need to resort to crime.

Equal rights for dads during child apprehension. Keep parents connected to kids, even if addiction is an issue. This will help reduce addiction moving forward.

K.

Proper upbringing. Proper foundations. Proper teachings all the way through. Care and attention.

Being raised by people who care and love them and each other. Orphans have a lot of issues. People who have no love are fucked up and do stupid things. People who are loved are successful.

b) What emerged as the top 3 solutions?

Out of this discussion, the items that received the most dots fell equally across 1) increase of social assistance; 2) Building social housing and improving SRO housing conditions; 3) lack of job opportunities; 4) transportation barriers; 5) the need for better treatment, counselling and peer networks among drug users. Most participants emphasized how much all of these are interconnected with each other, it is difficult to prioritize or talk about them separately because they all depend on each other so much. We decided to pull 1 and 4 in this list together, because increase in social assistance means also removing transportation barriers by making bus passes available to all low income people.

Our top 3 priorities are:

- 1) Increase in social assistance + rent control to protect landlords of benefiting from that increase.
- 2) Building social housing and improving SRO housing conditions. This must come with improving inspections to prevent other Balmoral hotels from happening.
- 3) Improve non-judgemental and barrier free counselling, health and addictions services. Drug users especially need and desire peer-based models.

