

Government of Alberta Children's Charter Public Consultation

Focus Group Summary Notes: Boyle Street Community Services

Facilitated by the Edmonton Social Planning Council

September 16th, 2013

THINKING ABOUT POVERTY

How does poverty affect you in your community?

Probe Questions:

How does poverty affect you and people you know?

"Well, see I used to work 24 years as a carnival worker, so I was working, but now that I'm on a medical I see the crunch of that #. I used to make \$1000 a week, and now I make \$200 and that has to pay for everything. We are trying to raise a little girl who doesn't really see the poverty, we don't like her seeing that, but it's hard. We have to find ways to make resources last a whole month. I've seen a lot of difference between what I used to do and what I do now. It's something you live with every day. For me, now it's trying to get back to work, but I don't know if that will happen being on medical, the doctor says I might be on it for the rest of my life. I don't know how to get out of it. The people I know, they've had it rough. They've been on the streets their whole life, doing things they didn't want to do, and it's a lot of work to live in poverty."

"I grew up in Boyle Street, extremely poor. I know what it's like to line up at the Bay downtown, getting your school supplies because you have a voucher. Only allowed to get this pencil, not that pencil. It was very demeaning. Not having enough food, having to put plastic bags on your feet. I understand poverty. It demeans you. Beats you down, you're never as good as everyone else. And with that, there is also addictions that come with that. That leads to lack of sleep. Speaking of children, the adults get drunk and fight, then the kids can't sleep, or they get beaten...Then they can't concentrate at school and end up getting in trouble with their teachers— it's a vicious cycle. Social services gives you enough money for a house that is substandard. Lots of issues – utilities, etc. If you have to pay for power, that's not too bad, but gas, sometimes you can pay for gas in summer, but then in winter you can't. If you end up living in a place without utilities, welfare takes your kids... Cost of food. Ridiculous. Cheaper to buy pop than milk. I run the Health for Two program and we give milk to mothers with newborn children for up to 2 months. Where do they get their milk after that? The families try all kinds of things to get milk, but it's expensive. Food is expensive. It's cheaper to live on fast food. But they usually don't have deep freezers, utensils to make nutritious foods. So they are stuck with the fast food type of diet. Not healthy. Then they usually end up being overweight and with medical conditions, like diabetes. Rickets is starting to come back.

We give people enough for substandard housing, but what do they do with the rest of their time? They don't have money for recreation. They can get a pass to a public recreation facility, but what about getting a locker? If they don't get one, their stuff might get stolen. Also, how do they get there? When I was a kid, I used to walk to the swimming pool. It was much cheaper to get in, like 25 cents. I used to hide in the lockers and stay all day. Only pay once, of course, but that was the only way I could get any recreation."

“If you have a criminal record, you can’t get a job. Everyone wants a criminal record check, or child welfare check. If you’re not bondable, jobs are extremely limited. Push-a-broom type jobs. Some people think they are on welfare because they are lazy, maybe they can’t get a job. Not enough *port a potties* for the homeless. Where do you go? Can’t go in businesses because you can’t buy anything. Then you go on the street and people think you are disgusting. I get families who are couch surfing, because they can’t find a place that’s affordable. If you’ve got a room, they’ll give you \$600 a month. One bedroom on average is \$700 to \$800 a month to rent. Our welfare system is actually creating the problem with inadequate supports. It’s hard to find housing if you don’t have a good record of residency. The cost of housing is outrageous.”

“Once you pay your rent, you have no money for groceries.”

“Our welfare system is actually creating homelessness because of the inadequate supports that they provide. It doesn’t take into account the cost of living. For example, bus passes. If you’re only getting \$400 a month, how do you expect to pay for bus passes?”

“Damage deposits. If you are on Alberta Works, they’ll give you \$372 for damage deposit which isn’t enough.”

“Speaking from a clinical, bureaucratic perspective. I’m sleepless at night. YESS (Youth Empowerment and Support Services) will only take kids who will be on the street for 7-10 days. Catch them early enough. Knowledgeable about teenagers on the street. I have a client who is HIV positive and she’s not allowed to go to YESS because she’s been out for more than 10 days. As for finding alternative housing, it hard to walk from one part of the city to another when it’s 30 below. Emergency shelters are changing their mandate to be more like group homes. People are staying longer with the idea of getting them stably housed. (Newly homeless youth, rather than chronically homeless.) They do not provide enough spots for new youth who have just gotten onto the street. Chronically homeless youth aren’t housed by government at all. How dare we leave children on the street?”

“People are sleeping on couches. Do you think I could find any place to live? Nothing that I could afford on my own. Nothing that I could get with my credit. If I can’t even rent, how do you expect people on the street who have no credit to afford anything.”

“Lots of my clients are living in bug infested places.”

“When I was little, I didn’t know poverty even existed. Parents worry – try to hide it. Some kids don’t know, but some kids are bothered by it. When they go to school – holes in their shoes they face the stigma of living in poverty. For families, they need help but don’t want to ask for it because of the community stigma.”

“I grew up in a rollercoaster of poverty, the cycles. When I was really little, we grew up in a nice big house. Then in elementary, pretty much living off of nothing. But my mom made sure, on the outside, that we weren’t living in poverty. But on the inside, it was apparent. I went to school with nice clothes, but when I went home we ate tomato soup 24/7. Now as an adult, it’s kind of cycling around again. And you know, that whole, cost of living. You know, it’s so high right now. It’s making it really difficult as a single person to afford to live. The poverty line is still 30,000, which to me sounds ridiculous. Alberta Works doesn’t give you enough to get out of that slump, it keeps you there and holds you there. Being in

poverty denies you so many things. Constant battle for families which is as simple as making sure kids have milk or shoes.

“How many of these families are dual income households and where do they go when they need help? There are only so many agencies and programs out there to support them and if you live in certain parts of the city, you have limited or no access to these agencies. I have a family I am working with right now. She fled domestic violence. Expected to find a house, put kids in school. She has been living in a hotel for a month and needs bus passes to get to school. Vicious cycle, where can she go? Can’t even get kids a bus pass to get to school. So they sit in a hotel room. Luckily we were able to help out this family.

I have another family. Unrealistic timelines. I’ll help you if you get a job, find daycare, all within a week. How are you supposed to send resumes, look presentable, if you don’t have a home and no phone. How can you start that job in a week? It’s frustrating for families and frustrating for me to see families struggle and not be able to come up with better solutions for them.”

“There are some families who do get hotels, but there are some that don’t. It’s shocking how many families have come for help, that are now homeless, that have their children taken away because they have nowhere to live. How much does that cost the system?”

“I am one of the nurses. I work at the needle exchange. Most of what I have to offer comes from the medical side of things. I think, the way our system is set up if you just slip on one area, then it’s a downward spiral from there. I did my final practicum here and when I first came here, I noticed that there were so many men – had a bad divorce, bad accident, couldn’t afford to pay child support and because of that the maintenance enforcement program took away their driver’s license, they lost their car, house, children. This is how they ended up here and once they lost all hope they got involved with drugs.

I saw a patient who was housed and had a really bad blood clot. Nobody would admit him to hospital because he’s an injection drug user. He was moaning and having showers all the time, so his roommate kicked him out. Finally got a prescription – which costs \$1400. We do have a compassion fund here, but we don’t have a lot of money, it’s for emergencies and \$1400 is a lot of money.

I was on a Hepatitis C project for 2 years. There tons of people on the streets have hep c. The majority of them smoke crack because it’s easy to access and it’s a social drug, crack is widely used on the street. If you get burns or cracked lips, you can transfer hep c from one person to another. You have to be clean and sober for six months to get treatment for hep c. If they’re waiting, they end up back in the same environment, doing drugs. In 2 years, I was only able to get one person on treatment. Worked with them for a year and a half advocating for housing and a doctor.

I found it difficult to work with the doctors because they didn’t seem to understand the special needs of people in poverty. They just seemed to think they were like everyone else. Also, some of the hospital staff in emergency departments don’t want to help people who are HIV positive or smell bad. The issue with smelling bad is the lack of access to laundry facilities. Some paramedics are also reluctant to treat them but they are getting better. We usually take their badge number when they do a good job, to encourage it.

I had a client who was screaming at the top of her lungs that she would scalp someone. She had a history of hurting others. With the mental health crisis, the mobile mental health team won't come down here.

I tried to get her help, but got the run around. I was told that she was trying to access a bed because she's homeless. That was the response.

I took a client to Alberta Hospital. The doctor finally saw her and it was only because I badgered the doctor. Because they wouldn't come and pick her up. The policy wouldn't allow for that. I had to take her there and sit with her for a whole day, until I finally got the doctor to say there was a problem."

"Transportation is a huge problem for many people."

TARGET POPULATIONS

What are the most important approaches to reduce poverty? How can we remove barriers, improve inclusion, and enable everyone to participate more fully in their community?

Probe Questions:

What can be done by community groups, individuals, and governments to prevent and reduce poverty in Alberta?

"I think the Government needs to listen to users of the service before they start cutting programs and services. I don't think they have a really good idea of the impact of the decisions they make. All the programs are getting cut, then twice a year they are painting light poles to improve the look of the streets. Our community voices need to be heard more. This is what we need to do to move forward. The voices of the people who are living it, working it, involved in it every day, their voices need to be heard."

"Front line workers should be given greater access to programs and services so that they can provide better supports. They have limited ability to make decisions and often times they hit barriers themselves that delays getting help for the individuals and families they are serving."

"I would like to see the community better understand and support people in poverty. We need to have community heroes who can speak up for the rights of the poor. This is a way that the general public will take notice and be more accepting."

"The City of Edmonton has a number of really good resources but many folks are not aware of them. For instance, 211 provides great information but many of the folks that come here don't know about it or what to say to the operator on the other end. The [Edmonton Journal's list of] ten free things [to do] in Edmonton every Friday night. I'd like to see one document that compiles all the resources together so that it is easier to access the information."

"Our clients are way over policed. For example, there are a big crack down on homeless people who were smoking. They had a crackdown on smoking 5 feet away from my work building. Police walked past the staff smoking to issue tickets to the clients who were."

“Medically, I know everyone gets frustrated because emergency rooms are so backed up. The system is set up that way. We are blaming all these people without a family physician. You don’t have a medical card, you don’t have ID. Just the process of getting identification is difficult for some.”

“There is not a lot of support for males who have children. I have a male client who has a baby. The baby used to be in his mother’s care living in a two bedroom. All the money he would earn went to the rent. We have a pregnancy project and it’s specifically for people who are pregnant. I’m trying to give him stuff, like milk coupons. But it’s very stressful, because he hurt himself and now he’s unsure how he’s going to be able to provide for his child.”

“The shelters are overwhelmed. People can’t get in because they are full. Only one shelter that will let them in if they are really intoxicated. And why do people have to sleep on mats, why can’t they sleep in beds.”

“The 10 year plan to end homelessness does work. There are successes. But we are dealing with a diverse population. How can we say it’s going to work? Some people have been on the streets for 10 years. Putting them in a 1-bedroom apartment freaks them out. Some have been living in a group home surrounded by their brothers and sisters. If you haven’t lived homeless, you can’t really know.”

“Increase detox and treatment services. Again in the inner city, people’s needs are immediate. If you’re like, ok, keep phoning. Time passes by so quickly in the inner city. There aren’t enough resources available. We are setting people up for failure. There are no alternatives.”

“I have clients who are on the street but need long term care, but they can’t seem to get in for a variety of reasons. They are not seniors, and they are dealing with addictions and are therefore not a priority for long term care.”

“Why not offer opportunities for young moms to work from their homes in jobs that will pay them a good wage like Medical Transcription. They could stay home and raise their children, but at the same time earn money in order to support their families. I think we need to think about things differently, in order to help people get out of poverty.”

“We need treatment programs that accept whole families. When adults have additions, the kids end up going into care. Why can’t we have a treatment program that allows you to take your kids with them?”

“We need to be realistic and understand that agencies can’t get staff to do what was done 10 years ago, but now with more clients. They maybe aren’t cutting programs, but they certainly aren’t increasing it. They have to stop and realize that they are making poverty worse.”

“Another issue, refugees. When you come to Canada, it’s so overwhelming. You have all of this information thrown at you with the expectation that you’ll complete the paperwork. Well, some of these folks lose their paperwork and then have to spend countless hours trying to fix the problem. The system is extremely complicated and overwhelming for newcomers.”