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## **Input for BC Poverty Reduction Strategy Meeting Submitted by Seasons House Emergency Shelter Quesnel Shelter and Support Society, Quesnel BC**

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### **Homelessness and Individuals with complex health needs:**

Homelessness is on the rise across our country and is a direct result of poverty. We have many marginalized populations who are literally “falling through the cracks”. In Quesnel, 70-80 percent of the people we serve through our shelter, housing and drop in services identify as First Nations. Many of these individuals go between living in our overcapacity shelter, living on the street, or couch surfing with occasional stays in QUESST. A specialized supported housing facility with culturally appropriate programs such as Mental Health and Addictions counselling, physicians and health supports, specialized employment programs, and support groups that help enhance self-esteem, connection to community, mental health and build on individual strengths is needed.

### **Seniors housing and services:**

Many seniors are living below the poverty line and are not able to afford housing in our community. There is a great need for affordable, assisted and transitional housing for seniors in our community. Wait lists for existing services are far too long, creating lengthy, un-necessary, unhealthy stays in the hospital or in the shelter or the transition house. The shelter and transition house are not equipped with adequate staffing or facilities to meet the needs of this population. Seniors with complex issues such as mental health and addictions are often falling through the cracks. Our current local senior facilities do not accept individuals with diagnosed mental illness and are very reluctant to take on persons with addictions. Specialized support services need to be provided to this especially vulnerable population. In addition, home care supports and in home funded services need to be expanded for our elderly citizens. Seasons House has great difficulty finding supported housing for our seniors experiencing dementia and other complex issues and they are often left to live with us with unnecessary increased risk.

**Emergency Shelter for Women Survivors of Violence who suffer with Mental Illness and/or Addictions:**

There is a need for a low barrier shelter and second stage housing for women who suffer with substance use disorder or mental illness. Currently, these women cannot access our local transition house due to potential safety concerns around children residing in the house. The only option available now, is for them to go Seasons House which is a co-ed, low barrier emergency shelter. This environment is less than optimal for women who may have just experienced a significant trauma such as sexual assault or domestic violence. As our local homeless shelter is over capacity every night, these women are forced to sleep in overflow areas with unknown males. This is unacceptable. Many of these women are likely already the survivors of historical abuse, and continue to suffer injustices in this current systemic failure. They are caught in a systemic cycle of poverty that must be addressed by providing adequate housing, income and support services to meet their needs.

**Access to Detox and Treatment:**

There is ample research that indicates people living in poverty experience higher rates of substance use. We need a detox unit in Quesnel. Currently we do not have a detox locally and we need to find transportation support to get people to detox outside of our community. Quesnel, as well as most communities across our province, is experiencing epidemic levels of opiate use. Current wait times for detox beds are too long. So far in 2017, 1422 people have died of overdose. This problem is not isolated to bigger centers. Our shelter staff have reversed 37 overdoses in the past year, preventing death. Many more overdoses have been reported out in the community where naloxone has been administered. We urgently need an overdose prevention site in Quesnel. We have already experienced a number of preventable deaths in our community. Individuals who were loved and cared about by family and friends. Following detox, quick and timely access to treatment facilities is very important. Currently, the wait to get into a treatment facility is many months long, leaving people to struggle out in community on their own and more often than not, fall back into addiction. More treatment spaces and facilities should be a priority of our government given the current state across our province. Adequate substance use services and treatment will give people a fighting chance at escaping poverty and having the opportunity to lead healthier and more productive lives.

**Transportation:**

Transportation is a huge barrier in our community. Because we live in a more rural area, many health services and treatments are not provided in our community. We regularly have people from the community coming to us to help them with transportation barriers to services outside of our community. We do have the northern health bus but often there isn't time to get the proper paperwork and letters from a physician necessary. Even the low fee that is charged by the NHB can be difficult for someone who lives in poverty to come up with. Public transportation within our community is limited. We have workers who make minimum wage who report to us that they work up the hill and get off work in the late hours and have to walk back to town, or have their childcare at the opposite end of town, creating barriers to

maintaining employment. For individuals who have limited supports and work part or full time on minimum wage, alternate modes of transportation is often not an option.

**Applications for PWD, Income Assistance, rental subsidies:**

We spend a huge amount of our time at Seasons House filling out applications with people for Income Assistance etc. People are regularly sent here for this type of help and we have become the “catch all” agency. Individuals who are living in poverty and who are marginalized often don’t have access to a telephone or computer. The income assistance application that has recently changed is onerous, time consuming, and difficult even for staff. We are not funded to provide these services, yet there is no other available service to do this. We need outreach workers funded in our community to do this work, and we need MEIA staff available to do applications with people who are unable to do it on their own. These types of things have been downloaded onto frontline non-profit service providers.

**Youth:**

There is a great need for youth shelter and housing in Quesnel. We have no safe facility for those who leave the care of MCFD or age out. Most of these youth end up couch surfing and staying in very unsafe situations to survive. Most come from families with historical trauma and violence; including those who are living with the ongoing legacy of our residential school system. We MUST start investing in our youth with prevention services and longer access to supports for youth who come of age out of our foster care system.

Greater assistance for family’s needs to be provided to ensure kids can stay within the family home. We provide more assistance and resources to foster families than we do to parents. This is backwards. We are often working with parents trying to regain care of their children who are required to have a home with enough room and food in order to regain access, yet there is no funding to help support them to provide this while they are working towards it. This puts up unnecessary barriers for parents who are often traumatized by having children apprehended. Most of the families we support disproportionately identify as First Nations.

**Food:**

Food insecurity is a growing concern in Quesnel. The majority of people struggling to put food on the table and meet nutritional needs are single mothers, recent immigrants, indigenous people, people with disabilities, and seniors. Poverty negatively affects a person’s physical health, mental health, education outcomes, community life, housing, and wellbeing. The 2016 provincial Child Poverty Report Card indicates that 1 in 5 children are poor in BC. Food insecurity is a direct result of poverty. Many individuals must make the choice between paying rent and utilities or having food in the cupboards. In Quesnel, we have dedicated service providers and groups who try to address food insecurity but are unable to meet this growing need. Below are some local facts on the limited resources for people in Quesnel.

Seasons House had to discontinue our community food program due to insufficient resources and lack of space for the growing amount of people who accessed this service. Up to July 2017, we used to provide breakfast and an evening meal 7 days per week to community members. We also ran soup kitchens on the week-ends and days other soup kitchens were closed. In addition to this, we gave out 150 PB&J sandwiches daily! This all added up to nearly 4000 meals and 3500 sandwiches per month!

The Salvation Army provides a soup kitchen 4 days per week, feeding approximately 120 people each meal. This equals 1920 meals per month! They also operate the community's only Food Bank service. Low income families in Quesnel can access the food bank once every two months and receive approximately 4 bags of food, plus daily donations of bread, sandwiches.

Children and families are having to rely on our local schools who are making sure our kids' nutritional needs are met. Did you know that our local schools, combined, served up 71, 681 breakfasts to kids in 2015/2016

The Anglican Church provides a soup kitchen every Monday.

#### **Extra Health Costs:**

People who live in poverty are not able to afford extra costs for necessary items such as eye glasses, dental work, eye exam fees, orthodontics' etc. These things need to be provided for people who are struggling. We often have to approach churches and charity groups for help with this for our clients. A reliance on charity for these necessities is not appropriate.