# BUILDING PROSPERITY IN THE ALBERNI CLAYOQUOT

## Poverty Reduction Action Plan

ALBERNI CLAYOQUOT HEALTH NETWORK

Prepared by the Alberni Clayoquot Health Network / December 2021

## ACKNOWLEDGEMENTS

The Alberni-Clayoquot Health Network would like to acknowledge the traditional territories of the Nuu Chah Nulth people in which we work and strive to improve the health outcomes for all people. This includes the territories of the Ditidaht, Huu-ay-aht, Hupacasath, Tseshaht, Uchucklesaht, Ahousaht, Hesquiaht, Tla-o-qui-aht, Toquaht and Yuu-cluth-aht Nations. We look forward to our shared work and collaborations to build a healthy region.

### Community Engagement

Thank you to the amazing front line organizations who assisted with in person community engagement and access to technology in the Alberni Valley and West Coast communities.

The Port Alberni CAT Team Peer Outreach Workers, Literacy Alberni
Alberni Community and Women's Services Society (ACAWS), Port Alberni Friendship Centre, Alberni Drug and Alcohol Prevention Society (ADAPS), Canadian Mental Health Association, Westcoast Community Resources Society, Food Bank on the Edge

### Focus Groups

Thank you to all the Networks, professionals and organizations who reviewed information, collaborated, and provided insights in this project.

District of Tofino, District of Ucluelet, City of Port Alberni, Alberni Clayoquot Region District, Huu-ay-aht First Nation, MLA Josie Osborne, MP Gord Johns
Bamfield Community School, Alberni Community and Women's Services Society
Westcoast Community Resources Society, Coastal Family Resource Coalition
Alberni Valley Learning Council, Alberni Valley Child and Youth Network
Port Alberni Friendship Society, BC Community Response Networks

And many others engaged through these networks for your thoughtful participation.

## REPORT PREPARATION

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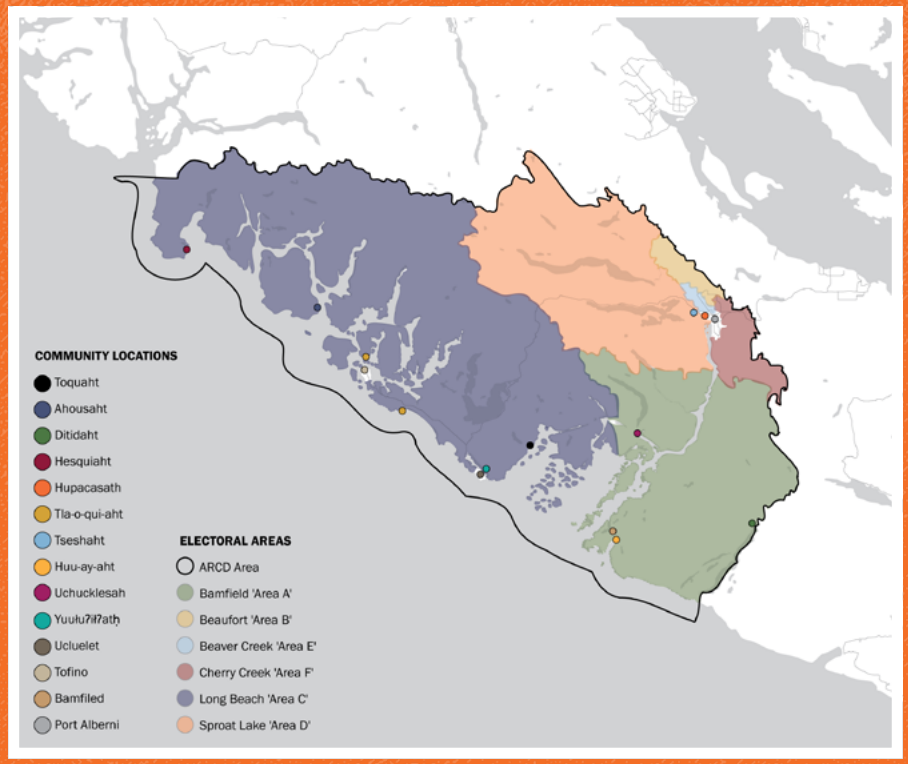
# EXECUTIVE SUMMARY

**The Alberni Clayoquot Regional District is a geographically diverse area which spans 6904 km². All together, the ACRD has a population of over 30,000 people. The ACRD is located in the traditional territories of the Nuu-Chah-Nulth speaking peoples, the ten Nations of the Ditidaht, Huu-ay-aht, Hupacasath, Tseshaht, Uchucklesaht, Ahousaht, Hesquiaht, Tla-o-qui-aht, Toquaht, and Yuu-cluth-aht peoples who have territories and communities within this region. The ACRD includes the City of Port Alberni, Municipalities of Ucluelet and Tofino as well as the six electoral areas of Bamfield, Beaufort, Long Beach, Sproat Lake, Cherry Creek, and Beaver Creek.**




**MAP** Alberni Clayoquot region map.

# THIS PLAN

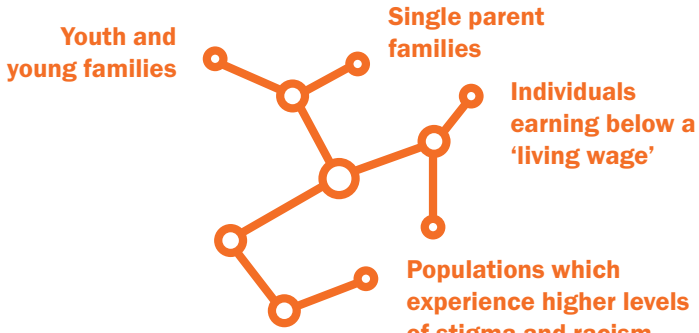
Building Prosperity Action Plan outlines poverty reduction strategies and areas of focus for the Alberni Clayoquot communities to direct attention in order to see real meaningful change.

## OUR CHALLENGE

- 21% of all residents live in poverty
- 1880 children experiencing poverty with a 15% poverty rate for children in two parent homes and a 62% poverty rate for children in lone-parent families
- Low median income: $49,679 in 2015, with a growth rate of 2.3%, compared to the2015 BC median income of $61,280, with an 11.5% growth rate
- High cost of living: 47% of renters spending more than 30% on shelter
- Housing crisis: low vacancy rate and hot housing market

## PRIORITY POPULATIONS

Statistics and information in this plan point to specific attention to:




## CONSULTATION

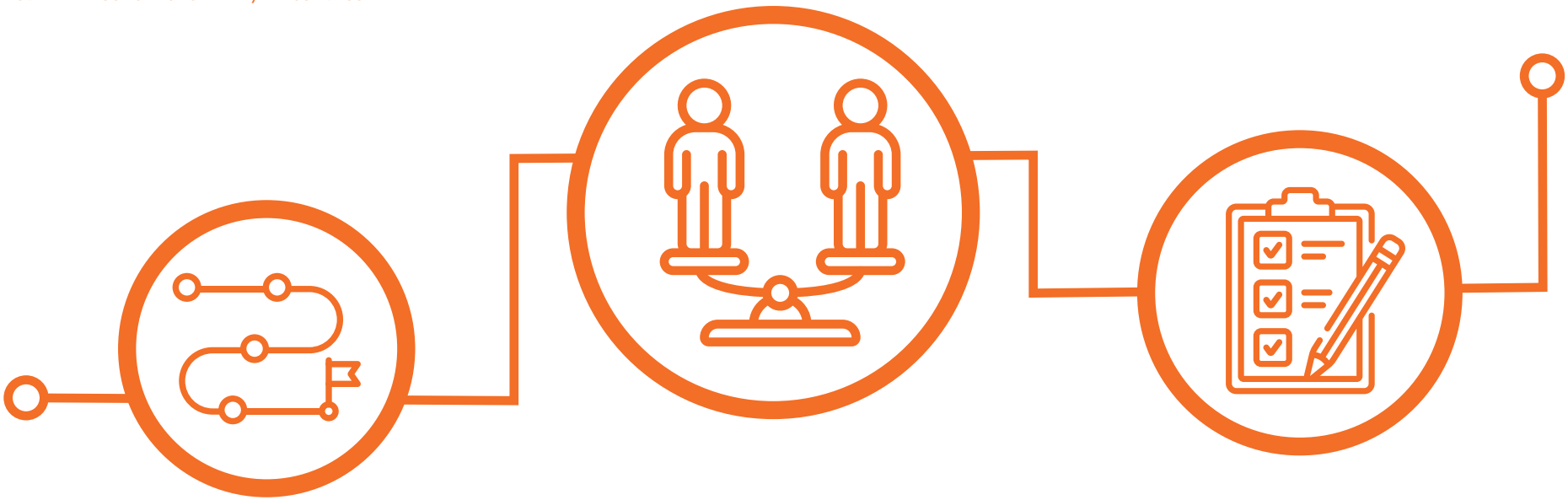
- Community Engagement Survey
- Interviews with People with Lived Experience
- Data from Provincial Poverty Reduction Community Engagement
- Focus groups

## RESEARCH

- Population statistics
- Peer reviewed research
- Wise practices and interventions with empirical evidence to stimulate change

## BUILDING PROSPERITY ACTION PLAN

Developed to focus, direct and maintain energy and attention to reduce the impacts, build protective factors and end poverty.



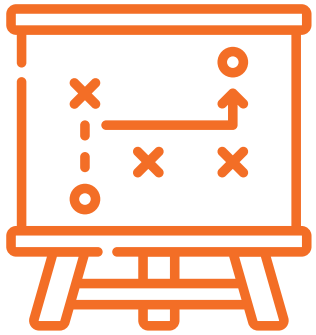
- **Two main areas of focus**
  * Build and enhance *PROTECTIVE FACTORS* which support community members in poverty, at risk of poverty or in situations where they are unable to thrive.
  * Creating *CLEAR PATHWAYS OUT OF POVERTY* by addressing systemic inequities which exist for those individuals' experiencing poverty.

- **Centered in Equity Building Principles**
  * Procedural Equity (Inclusion) – representation in the process which includes communities in a fair, transparent, meaningful, and inclusive manner.
  * Distributional Equity (Access) – implementation prioritizes the highest unmet needs in community and takes into consideration distribution of power, benefits, and burdens.
  * Structural Equity – acknowledges historical, cultural, and institutional dynamics to address changes required to impact social and racial inequities.
  * Transgenerational Equity – considers the impact of action or failure to act on future generations while prioritizing present day responsibilities and actionable steps.

- **Utilizing the Sustainable Development Goals as a shared evaluation tool to report progress**
  * Used locally in Alberni Valley and Clayoquot Vital Signs Reports
  * Familiar framework to evaluate progress and document community sucess

# RECOMMENDATIONS

## Summary of recommendations for Prosperity Building in the Alberni Clayoquot Regional District:



### INCOME

- Advocate for the adoption and implementation of systemic reforms outlined in the Guaranteed Basic Income Panel findings
- Advocate for adoption of Living Wage
- Advocate for the continuation and implementation of childcare supporting funds and initiatives
- Advocate for Provincial and Federal interventions to decrease the financial burden of advanced education
- Increase access to technology
- Increase access to basic needs and ensure availability of necessities
- Support initiatives which increase access to healthy foods

### HOUSING

- Joint regional advocacy to Provincial and Federal governments to align housing strategy, policy and resources to meet actual community need.
- Implement a regional or sub regional housing authority
- Implement a person-centered approach to support individuals in need of housing supports

### HEALTH, MENTAL HEALTH AND ADDICTIONS

- Support local partners such as the Divisions of Family Practice and Community Action Tables to advocate and support patient centered care and harm reduction programs
- Advocate and support funding mechanisms which will enhance individuals access to treatment and care

### BUILDING EQUITY

- Adopt an equity lens for planning, engaging and prioritizing the needs of those most effected in decisions
- Increase community education and action around the Truth and Reconciliation Calls to Action and United Nations Declaration of Indigenous People
- Support training and interventions in health, social and mental health supports which address stigma
- Support interventions and solutions which ensure protective factors such as shelter, basic needs, and income are accessible.
- Creation of a regional Poverty Reduction Table which promotes education and stigma reduction, advocates for actions outline in the Action Plan

# INTRODUCTION

**The Building Prosperity in the Alberni Clayoquot Poverty Reduction Action Plan has been informed by community engagement. The plan aims to bring forth the voices of individuals with lived experience to make meaningful change and generate informed dialog around poverty reduction and equity building activities in our region. To embed equity in our work, the plan centres engagement with community and those most directly impacted by poverty as part of the entire process, from planning to evaluation.**

The concept of equity can be easily misunderstood or inconsistently applied; thus, the Urban Sustainability Directors Network's (USDN) definition of equity has been adopted. It has been chosen because it offers the ability to look at multiple dimensions of equity and their relation to planning, policy and action. This plan and the subsequent recommendations will touch on all four aspects of equity building while aiming to build processes to improve structural equity through practices of procedural (inclusion-based) equity.

- Procedural Equity (Inclusion) – representation in the process of developing programs, services and policy which includes impacted communities in a fair, transparent, meaningful, and inclusive manner.
- Distributional Equity (Access) – implementation of program and policies prioritize the highest unmet needs in community and take into consideration distribution of power, benefits, and burdens.
- Structural Equity – acknowledges historical, cultural, and institutional dynamics to address underlying structural and institutional systemic changes required to impact social and racial inequities.
- Transgenerational Equity – considers the impact of action or failure to act on future generations while prioritizing present day responsibilities and actionable steps.[1]

With this lens in mind, we began this project by asking community members two questions to help centre our work. How do you define prosperity? And how do you define poverty?

When respondents were asked to provide a definition of poverty, they described an inability to meet a basic standard of living – poverty means a lack of access to safe and secure housing, food, heat, self-care, time, and leisure. Poverty is stress – an individual or household under stress, missed opportunities, an inability to make dollars stretch to deal with the basics and the overall inability to thrive.

When respondents defined prosperity, they described the opposite: an individual's basic needs being met, opportunities to focus on interests, luxuries, time off and vacation. Community prosperity was further characterized by strong links to organizations, strong transportation and access systems, adequate services and resources and having the ability to keep people we need in community.

This exercise demonstrated that the basic concepts of poverty and prosperity are opposing. It also reaffirms our intent: not to reduce poverty, but to build prosperity in our communities. Building prosperity involves building healthier systems and ensuring equitable access to resources and leads to healthier and more prosperous individuals and communities. Research shows that early interventions and systemic changes make considerable impacts to the load that is felt on the system overall. The cost of poverty and our current approach, which reinforces cycles of poverty, far exceed the cost to implement early interventions and systemic changes.

The act of building prosperity in our local communities involves a complex web of systemic changes. The recommendations outlined in this plan are centered in prosperity and equity building activities, recognizing that the health of our communities is tied to the health of our systems. We focus on ensuring that there are clear pathways to prosperity for individuals experiencing poverty as well as ensuring that adequate supports and resources are available to individuals at risk of adversity. While this is a big issue with many moving parts, there are tangible approaches which can be taken in community, work already initiated and led by local community groups and concepts introduced at parliament which can make substantial difference. Frameworks and measurements exist in community to assist. Our local Vital Signs reports have assisted in bringing local communities and leadership to the table to track the health of our communities. Produced by the Alberni Valley Community Foundation and Clayoquot Biosphere Trust these reports utilize the United Nations Social Development goals to communicate local data into an international framework complete with measurable targets. To adopt a common language and take advantage of baseline measurements, these themes will be repeated throughout the plan. Local approaches to increase equity, in combination with advocacy to higher levels of government, strategies to increase impact and activities which increase awareness of the issues in community will be the focus of this report.

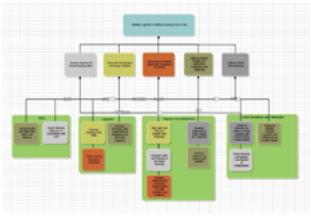
**SGD's** Adopted by the United Nations in 2015 as part of the 2030 Agenda for Sustainable Development, the 17 Sustainable Development Goals (SDG's) are a blueprint for all world nations to act. Regardless of economic status, to end poverty and protect the planet while leaving no one behind. [2]

## THE COST OF POVERTY

**Work from the Public Health Agency of Canada shows that every $1 invested in early interventions leads to $9 savings in the health and criminal justice system. Estimates place the impact of poverty on the health care system at $7.6 billion alone. In 2011 Canada Without Poverty published a detailed breakdown of government spending, that poverty cost the BC government $2.2 to $2.3 billion annually and cost society $8.1 to $9.2 billion annually, or between 4.1 percent and 4.7 percent of BC's Gross Domestic Product. The cost to maintain this system far exceeds the $3 – 4 million investments in a comprehensive poverty action plan.[3]**

# BACKGROUND

**In 2015 the Alberni Clayoquot Health Network brought local leaders together and began to assist in facilitating and tracking actions to address poverty. Numerous community based networks exist in the Alberni Clayoquot to identify and address aspects of community health related to poverty. These efforts stem from the recognition that poverty is a complex issue which cannot be addressed by any one organization or initiative. Solutions require resources and collaboration to tackle the social inequities we are currently facing.**



**2016**
ACRD planning and first poverty reduction Theory of Change

**2015**
First community gathering in partnership with MLA's office

**2017**
Poverty Reduction Protocol Agreement Signing with MLA and MP

**2018** Opportunity for All: Canada's First Poverty Reduction Strategy

**2018**
Poverty Reduction Protocol Agreement Signing with Municipalities and Toquaht Nation

**2018-2019**
Provincial Poverty Reduction Consultation

**2019**
TogetherBC, British Columbia's first-ever poverty reduction strategy

**2020**
UBCM Action Plan Funding

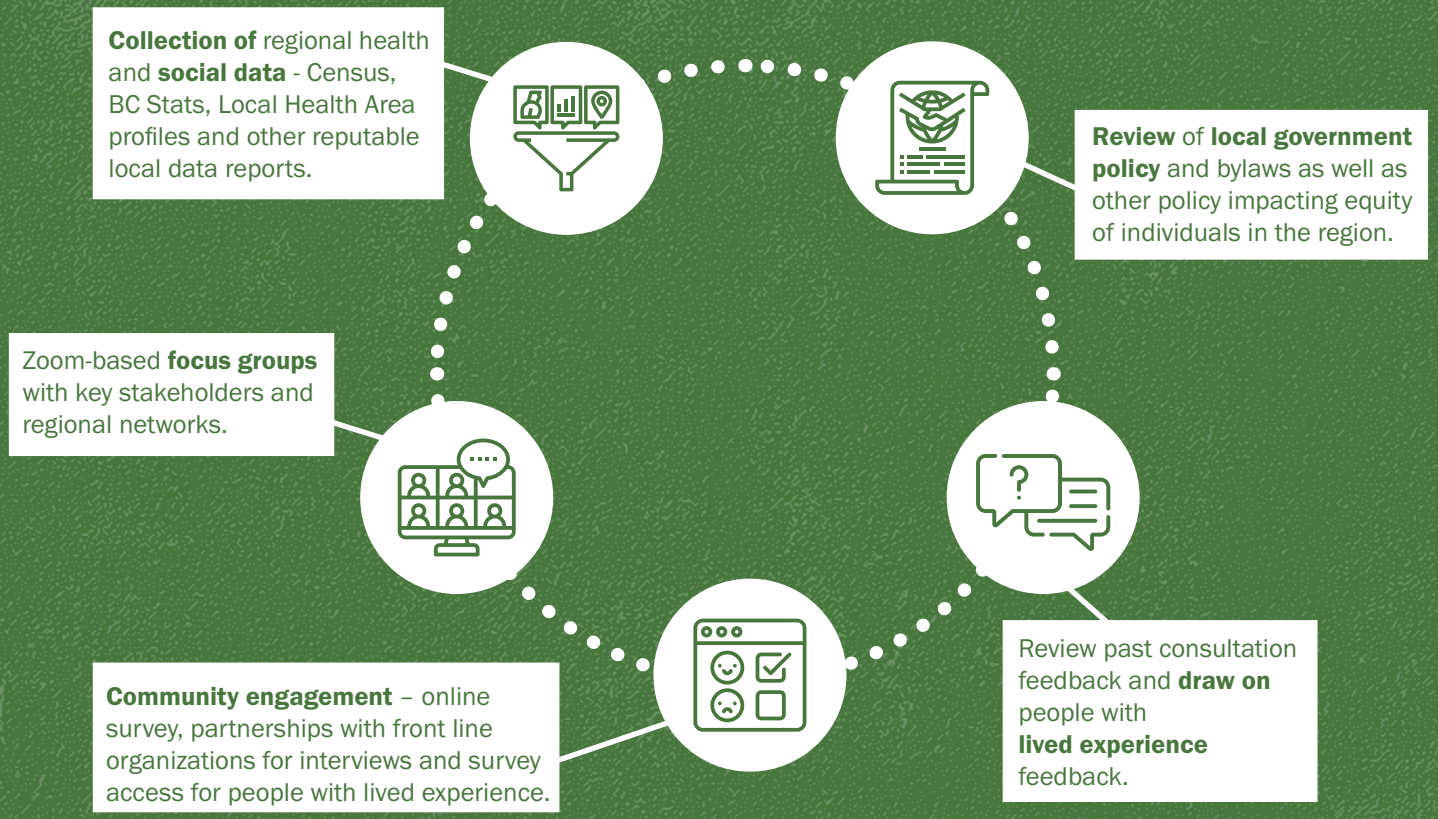
# METHODOLOGY

**The ACHN received confirmation of funding for the development of the Alberni Clayoquot Poverty Reduction Action Plan in May 2020, during the first wave of the COVID pandemic. At this time there was great uncertainty around what would transpire in the next year. While many of the action plan development activities were low risk the ACHN revised the community engagement plans for action plan development and approved the new activities in June 2020.**

**DATA COLLECTION**

This action plan pulls together regional data, feedback from community engagement and local government policy analysis with research and policy practices around the priority themes identified for the region. In developing community engagement activities, the ACHN was careful to acknowledge the prior contributions of individuals with lived experience. Raw data from past ACHN engagements as well as the 2018-2019 BC Poverty Reduction Consultation was used in the action plan and informed the development of survey questions to reduce duplication and update past findings.

Data collection was conducted through the following activities:



## LIMITATIONS

Proposed community engagement for the ACRD Poverty Reduction Action plan included robust in-person focus groups, workshops, and events with communities in the ACRD. Due to the COVID pandemic, activities were altered to minimize contact. This reduced community engagement to online surveys, Zoom-based focus groups and partnerships with local front-line organizations to interview people with lived experience. The development of the online survey was informed by past feedback from the provincial consultation as well as ACHN community engagement prior to 2018. Despite limitations, the survey and interview results confirmed past data collection and provided updated accounts of the current challenges and needs faced by individuals in the Alberni Clayoquot Region. Some additional limitations to note:

- Consultation fatigue from those with lived experience as well as the general public, voiced in previous years' activities but more prevalent as public and societal health crises continue.
- While the survey was well promoted and open for a considerable amount of time, its completion required access to the internet. Partnerships with front line organizations assisted in providing access to many but internet and device access was a challenge to some.
- The COVID 19 Pandemic challenged engagement with community and there was a concern that this would also skew results to show disproportionate impacts to specific dimensions of the engagement. As such during the community survey each dimension included an inquiry around how long the respondent had experienced challenges relating to the topic area. In most cases COVID was attributed to the challenges respondents faced in 5% or less of the responses. Any dimensions which saw higher rates of impact due to the COVID Pandemic will be noted in the report.
- Given the previously noted limitations around engagement, and timeline of the project, survey response rate and overall engagement was acceptable but could have been improved. As such, engagement information was combined with responses collected during the Provincial Poverty Reduction community engagement to ensure an accurate reflection of the experiences of people experiencing poverty and barriers to prosperity.
- Survey results showed a response rate of 19% indigenous people, on par with the regional population distribution. Despite this, not enough meaningful engagement with indigenous communities was possible during the COVID pandemic or in the timeline and scope of this project. Recommendations will include feedback gathered with an aim to ensure further work is done in an inclusive and collaborative manner. This plan will build upon recommendations from the Truth and Reconciliation Commission when forming recommendations to honor the uniqueness of the ten Nuu-Chah-Nulth Nations and other indigenous peoples within the Alberni Clayoquot region.

**"There is a middle range where many people fall - not living in poverty but not getting anywhere. Prices are too high, income is too low, and no affordable housing exists. I can barely afford to live here by myself and could never afford a family."**

## WHO WE HEARD FROM

Community engagement efforts for the Action Plan received good representation with over 400 individuals participating in one of the three engagement activities.

## INTERVIEWS

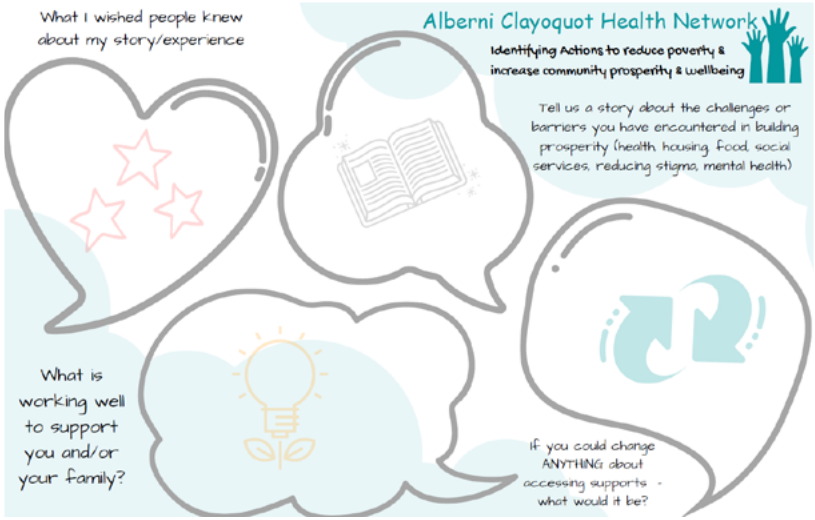
Over the course of five months, 53 interviews with people with lived experience were conducted in partnership with local organizations. The majority of responses were from the Alberni Valley due to availability of services. Technological assistance was made available to interested participants through the Port Alberni Friendship Society and West Coast Community Resources Society to increase feedback from those without access to technology.

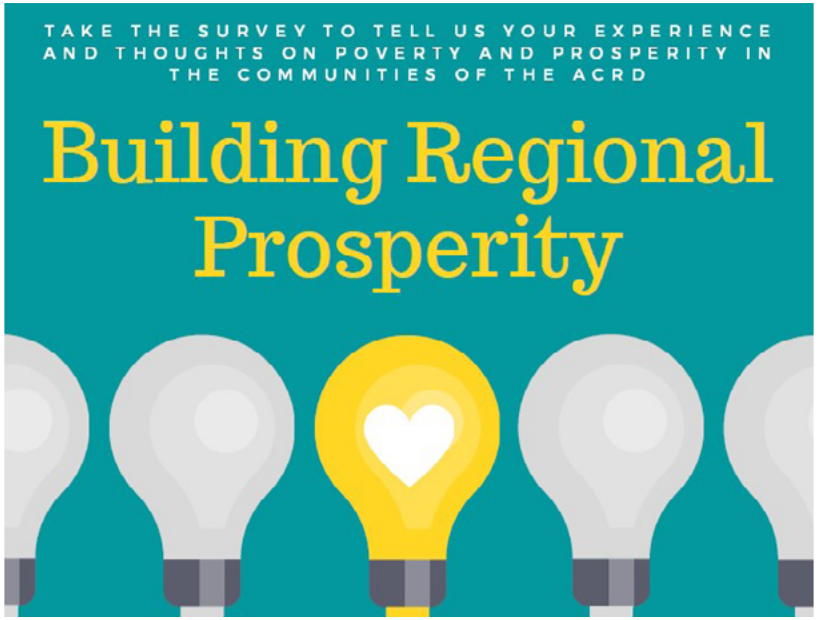
## FOCUS GROUPS

Two dedicated focus groups were hosted via Zoom in March 2021 to engage regional stakeholders, decision makers, and community partners interested in learning more about the responses to the survey and interviews. Twenty representatives were in attendance, including elected local leadership, service providers, and municipal and regional government staff. In addition to dedicated focus groups, the information was presented at three local network tables with a total of forty participants and specific issues were investigated with local networks and task forces with more specific mandates.

## COMMUNITY SURVEY

Prosperity in our region is about everyone having equitable access to goods and services. As such, the online survey targeted all residents of the Alberni Clayoquot region and captured respondent demographic information to ensure representation of the region's population. The online community survey ran from September 2020 to December 2020 and received a total of 317 responses. Regional, identity, and demographic distribution of survey respondents showed reasonable representation of the Alberni Clayoquot region with a good representation of more vulnerable populations.




**TOP** Active listening interview template for action plan community engagement, designed by Kelly Foxcroft-Poirier, White Raven Consulting.
**BOTTOM** Poverty reduction community engagement survey announcement.

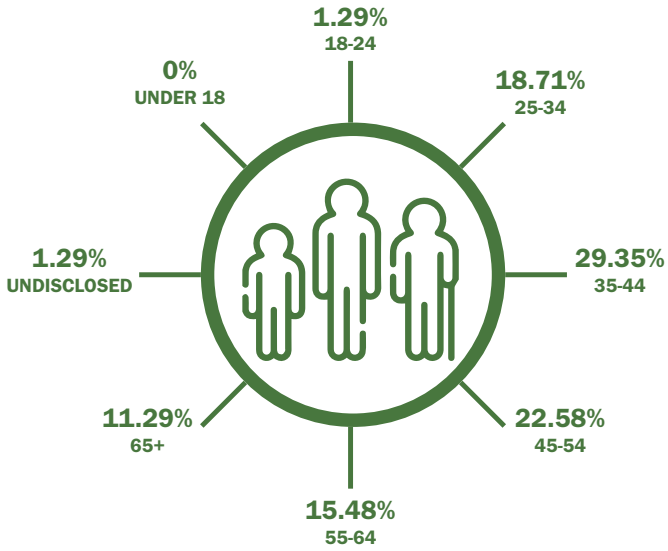
# SURVEY RESPONDENTS

## COMMUNITY

Where do you live?

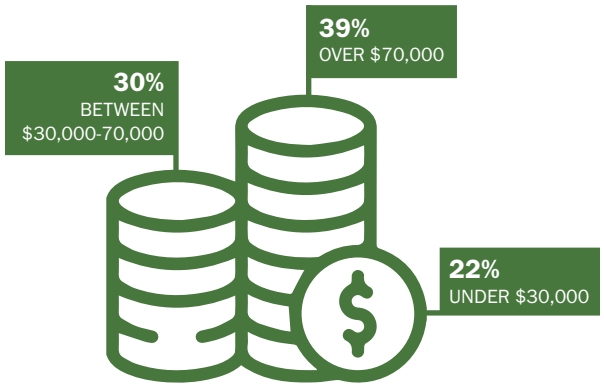
| | |
|---|---|
| PORT ALBERNI | **43.63%** |
| TOFINO | **16.24%** |
| UCLUELET | **11.78%** |
| SPROAT LAKE (AREA D) | **4.78%** |
| BEAVER CREEK (AREA E) | **4.78%** |
| BAMFIELD (AREA A) | **4.46%** |
| CHERRY CREEK (AREA F) | **3.18%** |
| TSESHAHT | **2.87%** |
| OTHER | **2.87%** |
| HITACU | **2.55%** |
| LONG BEACH (AREA C) | **1.27%** |
| TYHISTANIS/ESOWISTA | **0.64%** |
| ANACLA | **0.32%** |
| BEAUFORT (AREA B) | **0.32%** |
| AHOUSAHT | **0.32%** |
| HUPACASATH | **0.00%** |
| MACOAH | **0.00%** |
| HOT SPRINGS COVE | **0.00%** |
| OPITSAHT | **0.00%** |

## AGE




## INCOME

Income groupings in the report were chosen to align with census data and be representative of those experiencing poverty (under $30 000), earning under a living wage ($30 000-$70 000) and earning over a living wage ($70 000 +).




## IDENTITY

| | |
|---|---|
| MALE | **22.58%** |
| FEMALE | **73.87%** |
| LGBTQIA2S | **5.16%** |
| INDIGENOUS | **9.68%** |
| NUU CHAH NULTH | **9.68%** |
| METIS | **2.58%** |
| IMMIGRANT | **2.58%** |
| YOUTH IN CARE/AGED OUT | **0.32%** |
| PERSON WITH A DISABILITY | **11.29%** |
| SINGLE PARENT | **9.03%** |
| SINGLE PERSON | **11.94%** |
| SENIOR ON FIXED INCOME | **6.13%** |

# Truth and Reconciliation

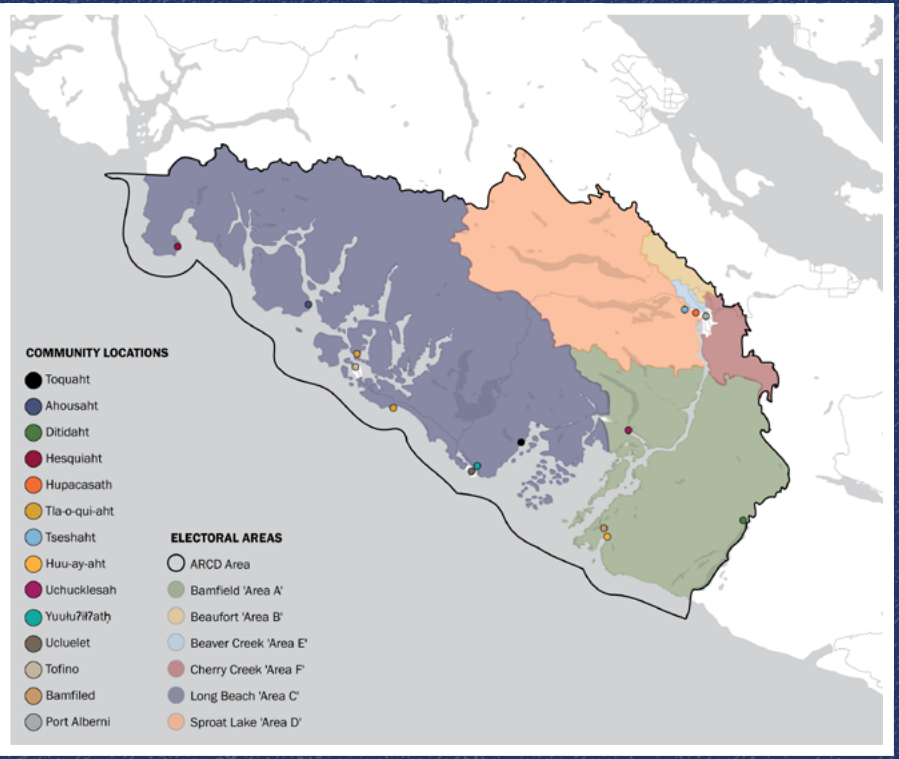
**The Alberni Clayoquot Region is situated on the territories of the Nuu-Chah-Nulth peoples. Ten of the fourteen Nuu-Chah-Nulth Nations on Vancouver Island are located within the boundaries of the Alberni Clayoquot.**

Of the ten Nuu-Chah-Nulth Nations in the Alberni Clayoquot region, four have signed modern treaties and are part of the Maa-nulth Treaty group with representation on the Alberni Clayoquot Regional District Board.

While the ten Nuu-Chah-Nulth Nations are part of the same family group there is rich diversity between each nation. Language dialects, structure of community leadership, culture, teachings, and relationships to local, provincial, and federal governments differ among the nations. It is important to recognise that time-limited processes such as Action Plan development are not able to capture the richness of these individual nations, nor is it appropriate to assume that sufficient relationship building has been conducted to make recommendations on behalf of these nations.

Recommendations outlined in this Action Plan focus on relationship building and collaborative efforts to address inequity in the region while recognizing that non-indigenous communities and representatives must commit to actively listening, learning and working to implement the Truth and Reconciliation Calls to Action and the United Nations Declaration on the Rights of Indigenous Peoples.

The Alberni Clayoquot Health Network will continue to integrate the following commitments directly related to the work of the Network into poverty reduction and equity building work in the ACRD while assisting other organizations and levels of government to do the same.




**MAP** Alberni Clayoquot region map.

## UNITED NATIONS DECLARATION ON THE RIGHTS OF INDIGENOUS PEOPLES

1. We support the rights of First Nations, Inuit, and Métis Peoples: UN Declaration and Bill 41 in BC
2. Governments must ensure Indigenous Peoples have resources they require, including Urban Indigenous People.
3. We support the development of Nuu-Chah-Nulth and/or Indigenous specific Poverty Reduction strategies. Indigenous communities have and may evolve services in directions other than those in this Action Plan.
4. We commit to listen and learn in our on-going work to decolonize[4]

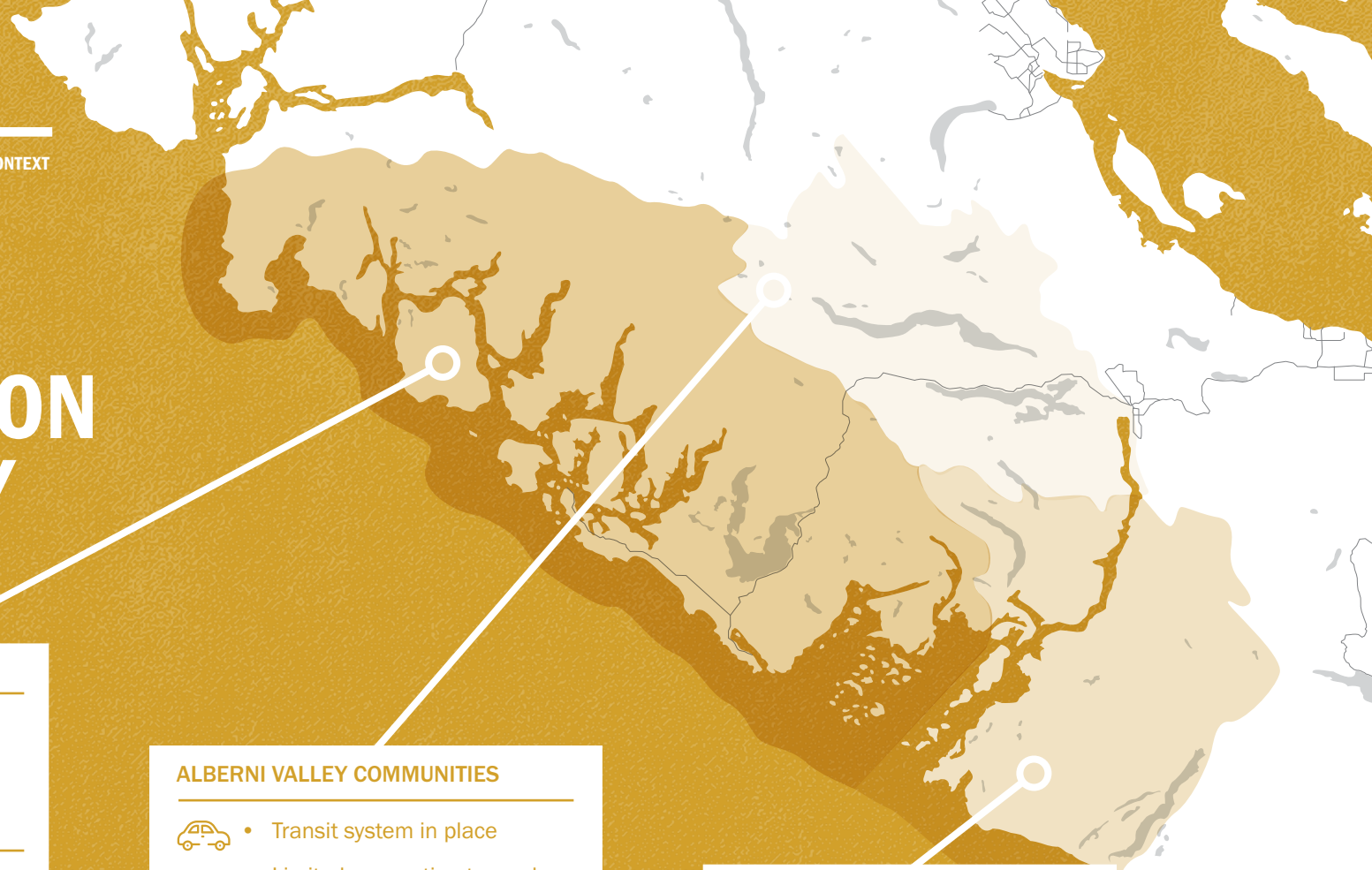
## TRUTH AND RECONCILIATION CALLS TO ACTION

1. We support Calls to Action #1 – #42, which address the legacy of colonization. We commit to actions that build equity, culturally appropriate response, and learning.
2. We support Calls to Action #42 – #94 which outline steps to reconciliation and learning about the impacts of colonization. We urge community partners to learn more and will support efforts to implement action.
3. We support the full implementation of Call to Action #57, to provide education to public servants on the history of Aboriginal peoples, requiring skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism.
4. Further to the TRC Call to Action #57 we support the development and implementation of Education for Reconciliation outlined in Calls to Action #62 to #65
5. We support buy in and implementation of Call to Action #92 which calls for corporate sector partners and institutions to adopt UNDRIP as a framework and to apply its principles, norms and standards to corporate policy and core operational activities which involve indigenous peoples, their lands, and resources.[5]

# REGIONAL CONTEXT

**The Alberni Clayoquot Regional District is a geographically diverse area which spans 6904 km2 and includes three municipalities, ten Nuu-chah-nulth First Nations and six electoral areas. All together, the ACRD has a population of over 30,000 people. The ACRD is located in the traditional territories of the Nuu-Chah-Nulth speaking peoples, the ten Nations of the Ditidaht, Huu-ay-aht, Hupacasath, Tseshaht, Uchucklesaht, Ahousaht, Hesquiaht, Tla-o-qui-aht, Toquaht, and Yuu-cluth-aht peoples who have territories and communities within this region. The ACRD includes the City of Port Alberni, Municipalities of Ucluelet and Tofino as well as the six electoral areas of Bamfield, Beaufort, Long Beach, Sproat Lake, Cherry Creek, and Beaver Creek.**

# ACRD SUB-REGION DIVERSITY



## WEST COAST COMMUNITIES

- Transit service planned
- 4 communities with logging road, boat or float plane access
- Low median income with high cost of living
- Cost of ownership has risen 82% with a rental market shortage
- Limited health and social supports

## ALBERNI VALLEY COMMUNITIES

- Transit system in place
- Limited connection to rural and First Nation communities
- High poverty rates
- Lowest median income in the region
- Increasing pressures on real estate and rental market
- High level of health and social services available

## BARKLEY COMMUNITIES

- Logging road or boat access only
- Road paving underway
- No public transport
- Low median income which saw a decrease between last census periods
- Growing need for community planning
- Health outpost only

Transportation Income Housing Services

# MEASURING PROSPERITY

**Like many coastal regions of BC, the Alberni-Clayoquot region has seen high rates of poverty and inequity. For many years, the ACRD was one of five regional districts across the province reporting the highest rates of poverty. Poverty rates have improved moderately, as illustrated by the child poverty rate, which began to decline in 2016 and has continued to decrease marginally from 32.6% in 2015 to 29.5% in 2021. Currently 21% of all residents live in poverty, with 1880 children experiencing poverty (a 15% poverty rate for children in two-parent homes and a 62% poverty rate for children in lone-parent families.[6])**

### GOAL 1. END POVERTY IN ALL ITS FORMS EVERYWHERE

**1.2** By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions.

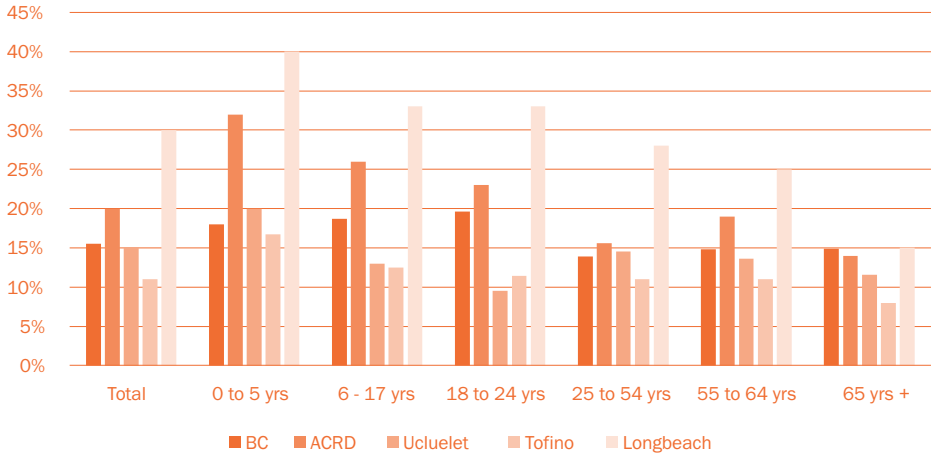
**1.3** Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.

**1.4** By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance.

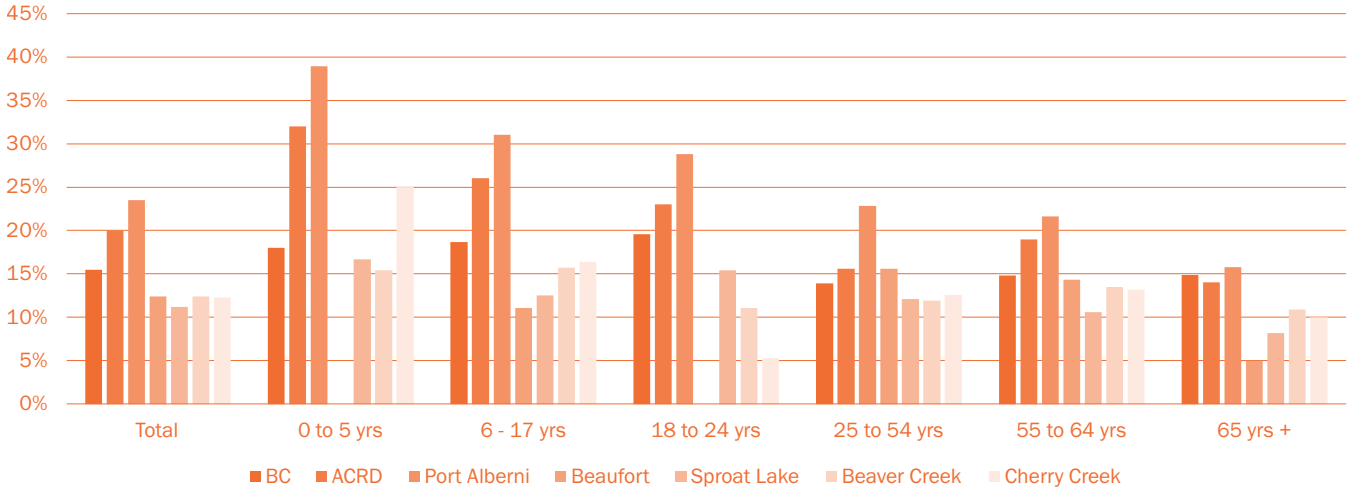
**1.5** By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters.[7]

# LOW INCOME MEASURE

## Coastal Communities




## Alberni Valley Communities



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*Bamfield and Indigenous Community unavailable due to data suppression for communities with small populations.

**“Poverty rates in Canada are measured through three main measures of low income: the Low-Income Cut-Off (LICO), the Low-Income Measure (LIM), and the Market Basket Measure (MBM). From 1996 to 2009, the poverty rate for all of Canada declined under LICO (and later under MBM). However, the low-income rate under LIM didn’t change much at all.**

**Looking at the LICO, the current low-income thresholds are based on 1992 consumption patterns, adjusted over time for the rising cost of living. As such they operate as a fixed standard against which to measure change. When we use the LICO to generate poverty statistics, we are comparing the situation of those at the bottom of the income ladder today with those who were at the bottom back in 1992 (a recessionary year). And on this score, progress is being made – notably among seniors and families with children.**

**By contrast, the LIM thresholds are updated each year; when incomes increase (or decrease), the thresholds shift in lockstep. When we use the LIM, we are comparing the situation of those at the bottom with those who are in the middle in that same year. As said, not much has changed. Poverty levels continue to hover around the 13% mark, reflecting persistent and damaging consequences of income inequality.”[9]**

— Making Sense of Poverty Measures | Citizens for Public Justice

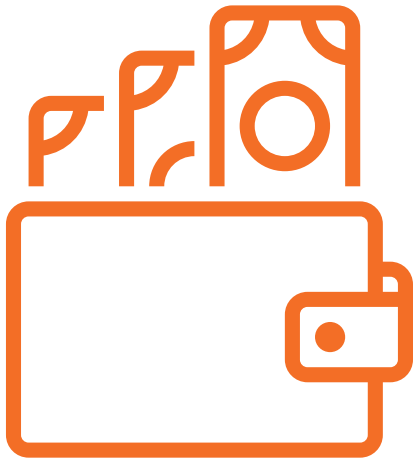
The non-indigenous communities established in the ACRD were built around resource industries including fishing and logging. The decline of these industries has shaped the current economic landscape of the region, resulting in new primary industry in several communities and increased diversity in others. Farming, fishing, and the forestry industry are still prevalent in most of the ACRD, most notably in the Alberni Valley. However, as these industries have declined, sectoral diversification has been embraced as a necessity and for risk mitigation. This has resulted in increased jobs in health and social service industries, aviation, and an ongoing desire to attract new industry to the Alberni Valley. In the more rural communities of Ucluelet and Tofino, tourism has become the dominant industry. One pattern has been observed across the ACRD: as resource industry employment declines, so too do higher wages.

Many communities in the ACRD have a historically lower median income than the province of BC. The after-tax median income in the ACRD was $49,679 in 2015, with a growth rate of 2.3%. In comparison, the BC median income for the same time period was $61,280, with an 11.5% growth rate. Lower incomes combined with the higher cost of living associated with rural and remote communities and tourism destinations adds to the financial pressure in the region. The living wage in some areas of the ACRD is on par with major cities in BC and significantly higher than other rural areas in the province. The living wage in 2019 was between $17 and $19.60 per hour, depending on the community.

Tourism industry employment and the warming real estate market have led to a steady increase in living costs in the Alberni-Clayoquot region, in turn putting pressure on young people, families, and low-wage workers. Households with two-income earners experience increased stability and ability to meet the living wage in the region, individual incomes highlight the prevalence of lower paying employment. Of the 25,540 income eligible residents in the ACRD, 49% earned below $30,000 annually, 35% earned between $30,000 and $70,000, while only 17% earned over $70,000. Noting these challenges, it is increasingly important for local communities to plan around young people, families, and individuals at or below the living wage for the region through the implementation of protective community factors. While the challenges vary from community to community in the ACRD, supports and recommendations in this plan will be centered in equity building in support of those directly experiencing vulnerabilities as well as those precariously close.

## MEDIAN INCOME
In the ACRD regions

| | |
|---|---|
| BC | **$61,280** |
| ACRD | **$49,679** |
| Port Alberni | **$45,957** |
| Beaufort | **$63,872** |
| Sproat Lake | **$65,536** |
| Beaver Creek | **$60,749** |
| Cherry Creek | **$56,346** |
| Ucluelet | **$54,336** |
| Tofino | **$58,944** |
| Longbeach | **$46,208** |



**10** *Bamfield and Indigenous Community unavailable due to data suppression for communities with small populations.

# BUILDING PROSPERITY

**The landscape of social and community services has changed drastically in the last 30 years. Reforms to social programming in BC have shifted responsibilities for health and decreased caseloads for social programming, and the impacts of these shifts have been felt predominantly at the community level. Reforms to Income Assistance in the mid-1990s and early 2000s led to systems of support becoming increasingly complex to access in an effort to reduce caseloads. Changes to the BC Child Benefit in this same timeframe have contributed to the province's devolution from a leader in family support to the province with some of the highest child poverty rates in the country.[11] Federal and provincial supports to communities for housing and social infrastructure have also decreased. The need for communities to support their community members has grown, while resources to achieve this aim have decreased. Municipalities have been tasked with gradually increasing responsibilities without the fiscal and policy level support required to do so. Advocacy in response to this change has led to increased investment to local governments for planning and action, combined with renewed provincial and federal attention to social issues including housing, poverty reduction and mental health and substance abuse. Support for local planning processes has benefited rural communities, taking the pressure off municipal budgets and staff to perform these activities while still generating a plethora of community input and resultant plans and strategies.**

Municipalities in the Alberni Clayoquot have been rising to the occasion to complete housing needs assessments, child care needs assessments, and other planning essential to action in support of social determinants of health. The ability to perform these assessments and to increase attention to these issues is a key first step. To build prosperity, there are two primary areas of focus that must be addressed and maintained by communities:

1. Building and enhancing protective factors that support community members in poverty, at risk of poverty, or in situations where they are unable to thrive. Actions to achieve this result are a combination of service level interventions, municipal policy, and advocacy to the provincial and federal governments.
2. Creating clear pathways out of poverty by addressing systemic inequities which exist for individuals experiencing poverty. This involves advocacy and action to implement systemic changes, equity building programs, and actions that increase people's ability to access services, basic needs, and essentials to thrive.

Data from the 2020 Poverty Reduction Action Plan community engagement pointed out four main areas of intervention for local communities to focus their efforts: housing, income, education, and access. The following sections present community feedback, associated data, wise practices, and recommendations in each of these areas.

# HOUSING

**The right to adequate housing is recognized internationally as a human right and appears in numerous international declarations including but not limited to the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights, Convention on the Rights of the Child, and the Convention on the Rights of Persons with Disabilities. Through these declarations, adequate housing is identified by:**

- Housing security – agreements and laws that protect against eviction and intimidation
- Availability of services and infrastructure – access to water, sanitation, food storage, energy, and access to services
- Affordability – the cost of housing should not threaten the ability to attain other rights and needs
- Habitability – housing has sufficient space, offer protection from the elements, and be free of health threats
- Accessibility – accommodates the needs of the elderly, terminally ill, and people with disabilities
- Location – accessibility to healthcare, schools, and employment; built in locations which do not threaten the health of residents
- Cultural adequacy – construction considers cultural identity and diversity[12]

In Canada housing at or below 30% of the cost of an individual's income is deemed affordable and attainable. Census data from 2016 shows a strong regional trend around renters experiencing the most unaffordable shelter costs in the region. Preliminary data from regional housing needs assessments shows staggering growth in the housing market and an increasing demand for core housing in rental markets across communities. Vancouver Island saw a 31.5% increase to the cost of ownership, west coast communities of the Alberni Clayoquot have seen an 82% increase, and the municipality of Ucluelet experienced the highest increase at 102%.[13]

**GOAL 11. MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE**

**11.1** By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums

## SPENDING 30% OR MORE ON HOUSING

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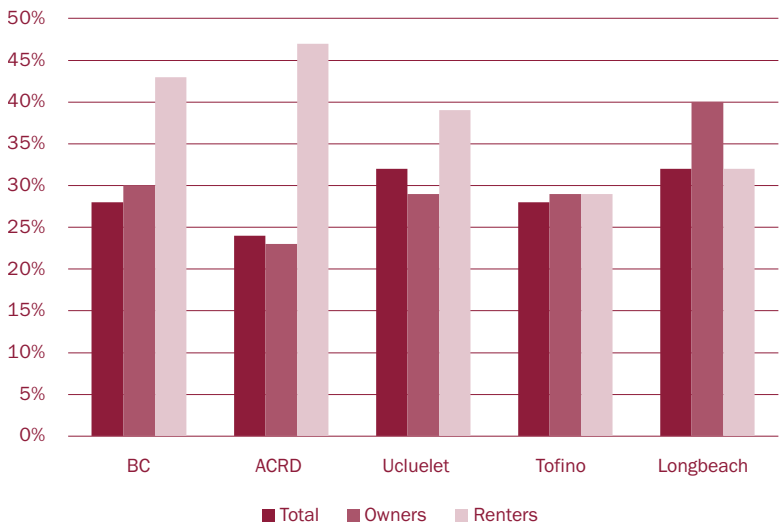
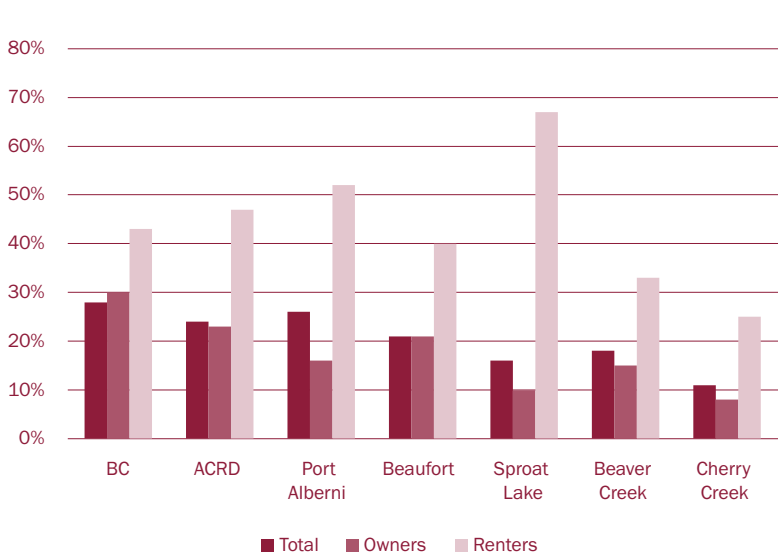



## CORE HOUSING DEFINITION

**Core housing need is a 2-stage indicator. It helps to identify households living a dwellings considered unsuitable, inadequate or unaffordable. It also considers if income levels are such that they could not afford alternative suitable and adequate housing in their community. Assessing a household for core housing need involves two steps to determine if:**

1. **the household lives in acceptable housing**
2. **the household's before-tax is sufficient to access acceptable housing in their community** [15]

— Understanding Core Housing Need | CMHC

High core housing needs in the rental market, low rental vacancy rates, and a steady increase in the cost of houses has led to residents living in overcrowded or unsuitable homes, negative health and economic impacts, and an increased risk of homelessness. Research into the cost of health and social supports and the use of the justice system demonstrates that the cost of homelessness for one person is over $63 000 per year. Further research has shown that costs increase for those experiencing homelessness combined with mental health and addictions.[16] During the 2021 Point in Time Homelessness Count in the Alberni Valley, 125 people were reported to be experiencing homelessness. While this is a decrease from the 147 reported in 2018, the vulnerabilities of those experiencing homelessness saw a sharp increase.

- 65% of the respondents identified as indigenous compared to 48% in 2018;
- 81% reported two or more health concerns as opposed to 58% in 2018;
- Mental health and substance use were the number one reasons for housing loss;
- And no respondents reported sources of income outside of Ministry supports.

Point in Time counts provide a very modest estimate of homelessness in a community, with acknowledged limitations around the duration of the study and coverage of the community. Outside of the Alberni Valley, homelessness is often much harder to capture as rural and remote homelessness manifests as overcrowding, couch surfing, and living in the bush or other unsuitable dwellings. Regardless of measurement challenges, the cost of housing insecurity to communities and the country is staggering. An abundance of affordable housing research points to impacts on both individuals and communities facing housing inequities. These mirror the experience of many communities in Alberni Clayoquot.

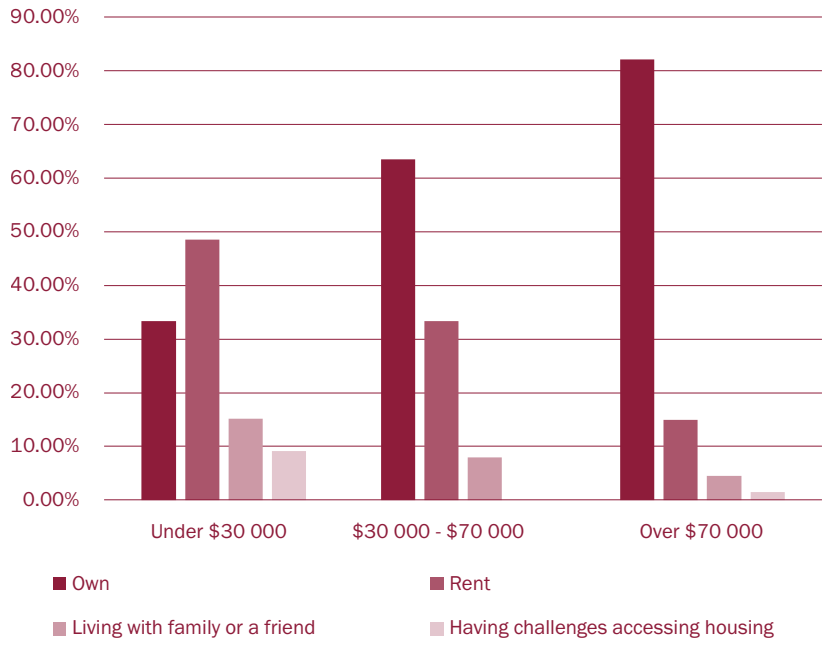
**Individual**
- Health impacts including asthma, low weight in children, and incidents of depression
- Lack of access or delayed access to care, leading to general poor health and increased severity of health issues
- Increased experience of stress which leads to poor health and has impacts on child development

**Community**
- Increased health care costs and acute patient care
- Decreased economic activity
- Shortage of workers and relocation of young families for affordability[17]

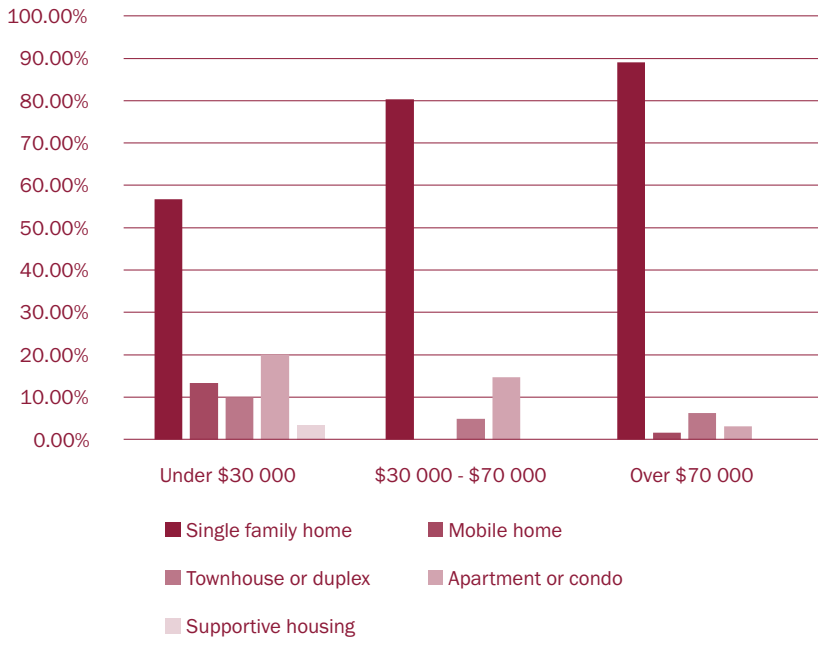
When income is compared, the contrast between higher income earners ($70 000+) and those earning under the living wage for the region highlighted housing challenges. As income decreased, individuals reported increased barriers and challenges in accessing adequate housing, with lower income people experiencing more housing instability. Those in the lowest income bracket saw a statistically relevant increase in experiences of homelessness and inability to find rental housing while middle income earners reported slightly higher challenges with mortgages or ability to purchase a home. All income brackets saw challenges with rental prices and market housing stock.

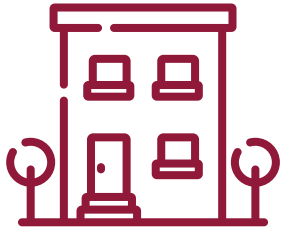
Housing was the second-largest barrier to people with lived experience who were interviewed for the Action Plan. In total, 33% of respondents included housing as one of the top three challenges, with an overwhelming majority speaking to the regular decision of paying bills, paying rent, or buying food. The experience of stigma in accessing housing due to race, mental health, substance use or low income was another common experience that arose regularly. Results from the 2019 Provincial Poverty Reduction Community consultation saw similar reports. Housing was the most frequent need for individuals with lived experience. Out of the 2000+ responses to the provincial consultation, 20% mentioned housing as the primary barrier to prosperity, again citing tough decisions related to cost of living as well as stigma in accessing housing.

## LIVING ARRANGEMENT

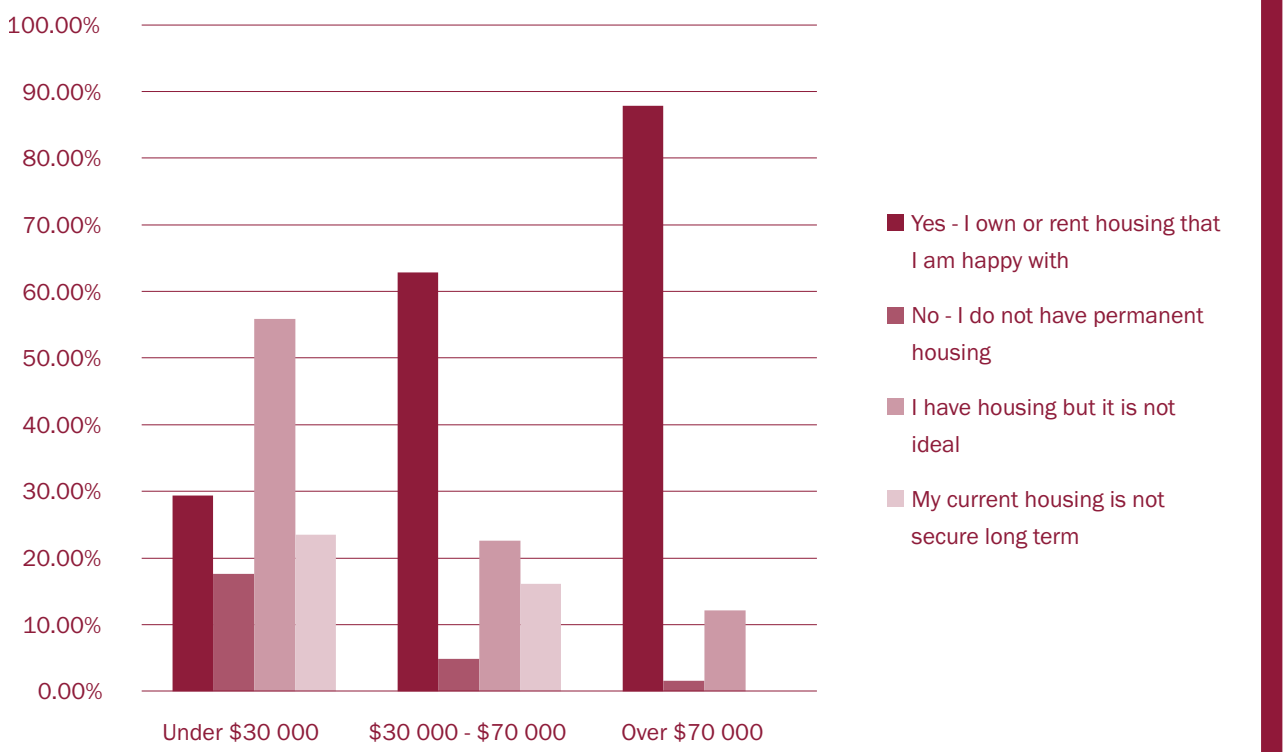



## HOUSING STYLE

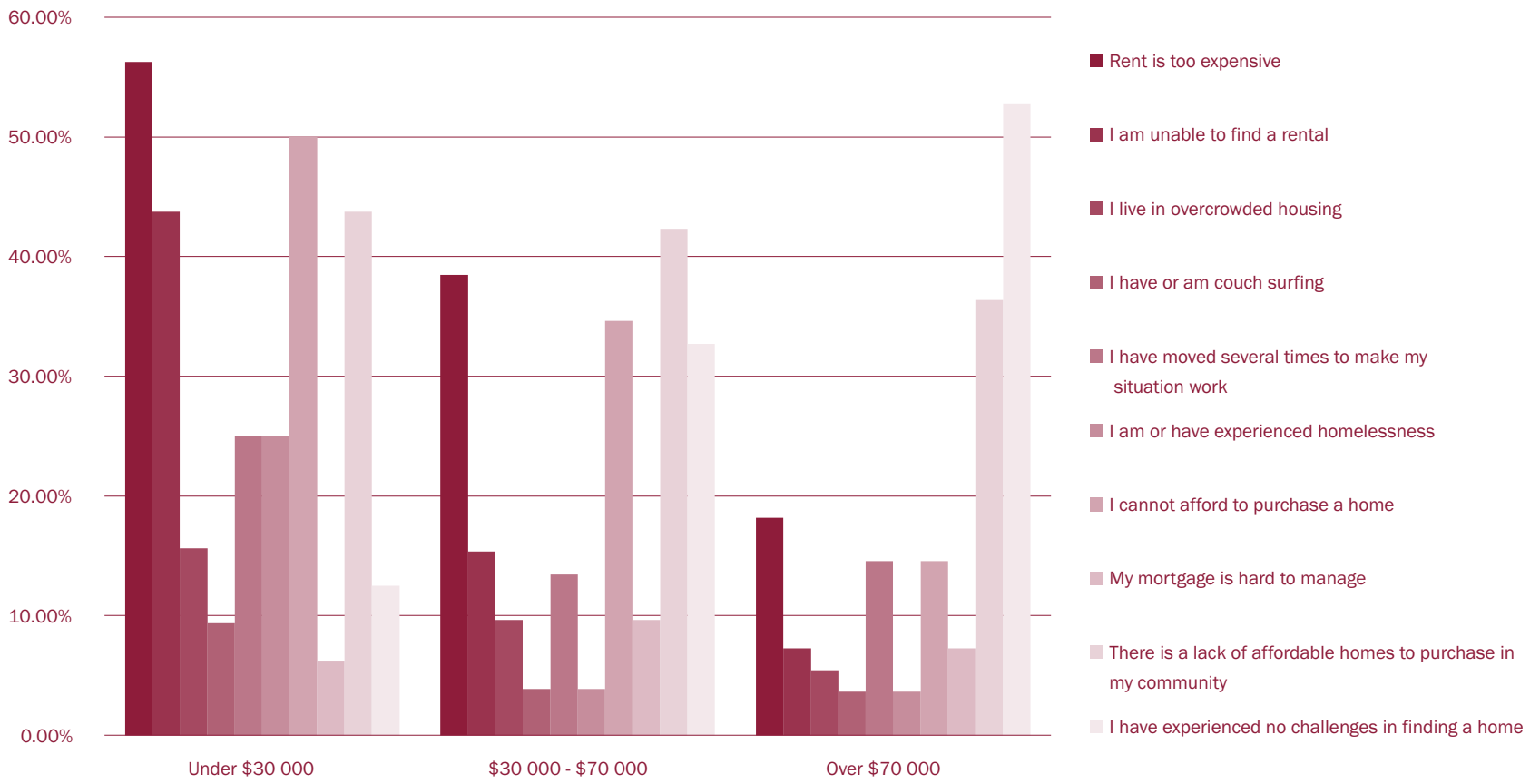




## HOUSING SATISFACTION



## HOUSING CHALLENGES



**RECOMMENDATIONS**

There is an immediate need for provincial and federal government interventions and the creation of housing strategies that can generate and secure housing stock across the country. The housing crisis has been building for over a decade and is worsening without intervention. Municipalities have a specific role to play in creating and securing housing for all in their communities.

While it is challenging for local governments in small communities to balance the numerous operational duties assigned to them, those within the ACRD are taking progressive first steps to ensuring solutions in response to the social needs in each community. With the assistance of UBCM funding, every municipality and electoral area in the Alberni Clayoquot will have a completed housing needs assessment to assist in planning. These assessments assist in applications for provincial funding and in projects to increase community housing stock. While each Housing Needs Assessment will have different needs and strategies for ACRD communities, the following recommendations are consistent with feedback from across the region and preliminary data from housing needs assessments:

- Joint regional advocacy to Provincial and Federal governments to align housing strategy, policy and resources to meet actual community need.
- Increase diversity of housing in planning, OCP and zoning, and where possible reduce barriers to housing projects which meet needs identified in Housing Needs Assessments.
- If not already in place, creation of a housing authority to champion implementation of Housing Needs Assessments. Consider creation of regional or sub-regional authorities to increase ability to access funds and meet community needs.
- Consider and address the impact of tourism and short-term rentals and utilize municipal tools and resources to ensure balance between needs of homeowners and availability of rental stock.
- Consider the implementation of a regional or sub-regional housing first model to support individuals in the most need of housing support. At minimum, work collaboratively with local organizations to increase diversity in support and advocate for increased support from higher levels of government to meet the current need. Recognize that a diversity of housing and program types are required to address housing insecurity and homelessness.

## LIVED EXPERIENCES

**“I am fortunate to have an affordable rental unit and great landlords. Even with my ‘decent waged job’ if I needed to find a new rental the same size I currently rent I would never be able to afford it.”**

**“We own a house, but cannot afford to live in it and pay the mortgage payments. We rent it out as a long-term rental, and rent a small suite for ourselves.”**

**“I am not able to plan for future expenses as 100% of my income goes to current living expenses.”**

## ACTIONS UNDERWAY

- **50 new, affordable rental homes for families and seniors in Port Alberni, as a result of a partnership between the Province and the Alberni Low Energy Housing Society (ALEHS)**
- **14-unit housing development at 700 Sharp Road through a partnership between the Tofino Housing Corporation and Catalyst Community Developments.**
- **Housing needs assessments in preparation for each community in the ACRD along with opportunities for implementation and support for community members.**

# INCOME

**As illustrated earlier, communities in Alberni Clayoquot are greatly impacted by lower-than-average wages and high cost of living. Addressing economic disparities in communities includes much more than economic development. It requires government policy, economic diversity, the building up of protective factors in each community, and the reduction or elimination of barriers to access. A recent UBC study of a Guaranteed Basic Income in British Columbia has brought together a wealth of research and recommendations about how to build an equitable approach to income assistance programs in BC. These recommendations are crucial to ending the cycle of poverty perpetuated by the social assistance model currently in place. To address the issue of increasing cost of living and stagnant wages, community engagement participants recommended that in addition to affordable housing, protective factors in the form of childcare, education, access to basic needs and food were a priority to increase income equity for youth, young families, and those with lower incomes. Thus, these community engagement findings and recommendations will be included as economic protective factors and crucial components to develop prosperity in our communities.**

Not surprisingly, respondents in the higher income bracket reported a statistically significant experience with income satisfaction and the least adversity with income and stability. Living pay cheque to pay cheque was an experience reported in all income brackets with the highest percentage between $30000 and $70000. Unemployment and the utilization of social assistance and disability assistance were experienced most frequently by those in the lowest income demographics. While COVID impacted income stability across demographics, it is worth noting that most individuals experiencing challenges have been for 3 or more years. Respondents earning less than $70000 that expanded on their responses noted challenges in saving, staying on top of living expenses, an inability to save for the future, lack of housing or childcare and an overall instability due to combinations of the above factors and/or contract work.

When asked about interventions which would assist respondents in creating more stability and prosperity in their lives, notable trends emerged:

- Access to affordable housing and childcare were the most noted protective factors mentioned, followed by access to education and transportation to access education, employment, and basic needs.
- Increasing the minimum wage, adopting a living wage and guaranteed basic income were mentioned throughout comments.
- Increasing the diversification of industries. For the Alberni Valley, this included comments about diversification from resource-based industry and for west coast communities, diversification from tourism was a priority.

Experiences of people in poverty engaged through the Action Plan as well as the Provincial Consultation mirrored many of these comments - 17% of respondents mentioned income and social assistance as a primary barrier to their prosperity and the experience of being working poor was noted frequently.

- Social assistance and disability system inequities: the low support rates and shelter rates starting at $375/month are contributing to the cycle of poverty and inequity.
- Assistance is required to withstand cost-of-living increases for housing, food, hydro.
- Assistance for people living pay cheque to pay cheque to ensure housing stability and ability to meet basic needs

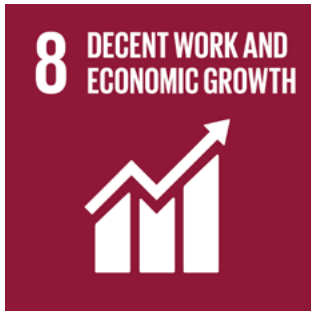
### GOAL 1. END POVERTY IN ALL ITS FORMS EVERYWHERE

**1.2** By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions.

**1.3** Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.

**1.4** By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance.

**1.5** By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters.



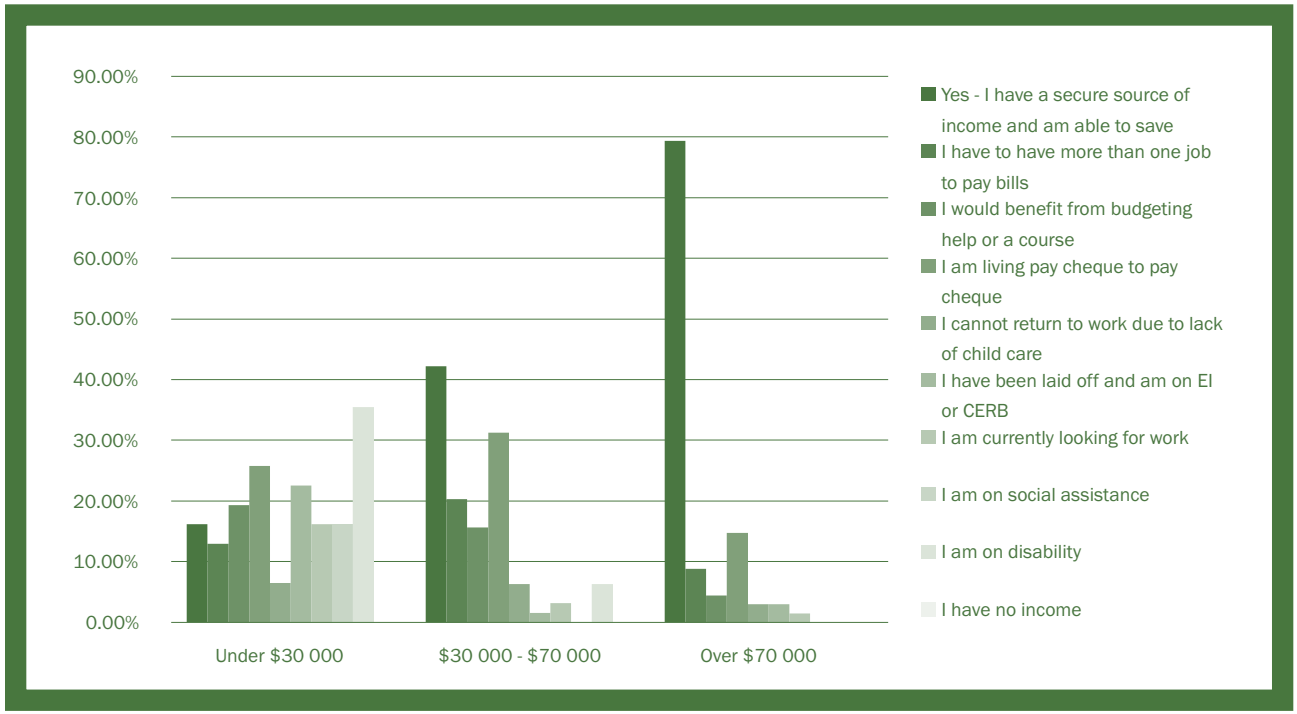

### GOAL 8. PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL

**8.2** Achieve higher levels of economic productivity through diversification, technological upgrading and innovation, including through a focus on high value added and labour-intensive sectors

**8.5** By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value

**8.9** By 2030, implement policies to promote sustainable tourism that creates jobs and promotes local culture and products

## ACCESS TO AN ADEQUATE SOURCE OF INCOME



## LIVED EXPERIENCES

**“I have several businesses, work hard, and budget very tightly in order to remain in the black. we are only able to live here because we bought a house 19 years ago.”**

**“My income has never been enough to cover all my living expenses with enough leftover over for saving.”**

**“I have an income, but lack of child care prevents my partner from getting steady income.”**

**“being laid off caused grief in my final earning years. It’s difficult to get a decent position when 55 and over.”**

**RECOMMENDATIONS**

Recommendations to increase income stability in the Alberni Clayoquot communities involve a significant amount of advocacy and intervention from provincial and federal governments and the systems of support which they administer. With a lower-than-average median income in the region and high cost of living in Alberni Clayoquot communities, this should be a priority. In addition to advocacy for systems change, there are tangible steps which can be taken at the local level to build up protective factors (housing, childcare, education, access and access to basic needs) mentioned throughout this report. Additional protective factors directly tied to income equity which can be promoted in ACRD communities include:

- Consult with the most vulnerable in community decisions and support them to be active participants in the creation of a more equitable system.
- Calculate and adopt a Living Wage for subregions, become a living wage employer, work with community partners to actively model and promote living wage employment.
- Encourage economic diversification, ensuring large employers have plans to hire locally and if relevant will provide staff accommodation and contribute amenities to communities.
- Implement local plans to increase protective factors such as housing, child care, and transportation.

To create a more just and equitable system of social support, which assists in building people up from poverty, the support system's response to cost-of-living increases and other economic hardships must evolve. The Covering All the Basics report on Guaranteed Basic Income, based on a wealth of economic review and research, details the ways in which the support system can be reformed to better deliver services to people in a financially viable and equitable manner. While the report did not suggest the implementation of a guaranteed basic income it did recognise the complexity and shortfalls of the current system and the unique challenges that individuals with income insecurities face. The report included 65 recommendations that were developed with the overarching goals that individuals should be treated with dignity, be empowered to work, and be active participants in the reform process. These recommendations are summarised by the following 11 themes. Local government and community organizations have a strong role to play in order to influence the implementation of recommended reforms and can become familiar with the research and full recommendations through the dedicated GBI Panel website.

## GBI PANEL REPORT

- **Reform Disability Assistance into basic income**
- **Reform Temporary Assistance to reduce "welfare well"**
- **Provide extended health-care benefits to all low-income individuals**
- **Provide housing support to all low-income renters**
- **Provide intensive work support to targeted groups**
- **Enhance support for low-income families with children**
- **Enhance support services for young adults**
- **Enhance financial and support services for people fleeing violence**
- **Improve precarious employment through labour regulation reform**
- **Improve the way benefit delivery platform's function**
- **Make engagement a permanent part of all policies**[18]

# CHILDCARE

**Early childhood education is often deemed the great equalizer, providing children access to early years enrichment which has lasting positive impacts throughout the lifespan, including better education and health outcomes later in life no matter the family's economic status or situation. Additionally, child care that is accessible and affordable increases participation in the workforce, aiding both families and communities. The 2019 Collaborative Child Care Planning Across the Alberni Clayoquot Child Care Needs Assessment documents the challenges faced by families in the Alberni Clayoquot regarding access to affordable quality care. The report notes a distinct lack of child care spaces in the region (particularly infant/toddler and before and after school spaces), a lack of ability for child care programs to meet family needs, and industry challenges for early childhood education professionals. Impacts of these deficits in the child care system include increased family stress, loss of income or employment for one parent, high monthly cost for child care spaces, lack of quality spaces and challenges for child care centres in recruiting and retaining staff.**

Results from community engagement for the Poverty Reduction Action plan saw a low response rate to questions about child care, as many respondents did not require child care services. Interestingly, in both the 2019 Child Care Needs Assessment and the Poverty Reduction community engagement all income groups were affected by lack of childcare, making this an important step for local communities to focus on to increase prosperity for young families and the local economy.

**GOAL 4. ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION AND PROMOTE LIFELONG LEARNING OPPORTUNITIES FOR ALL**

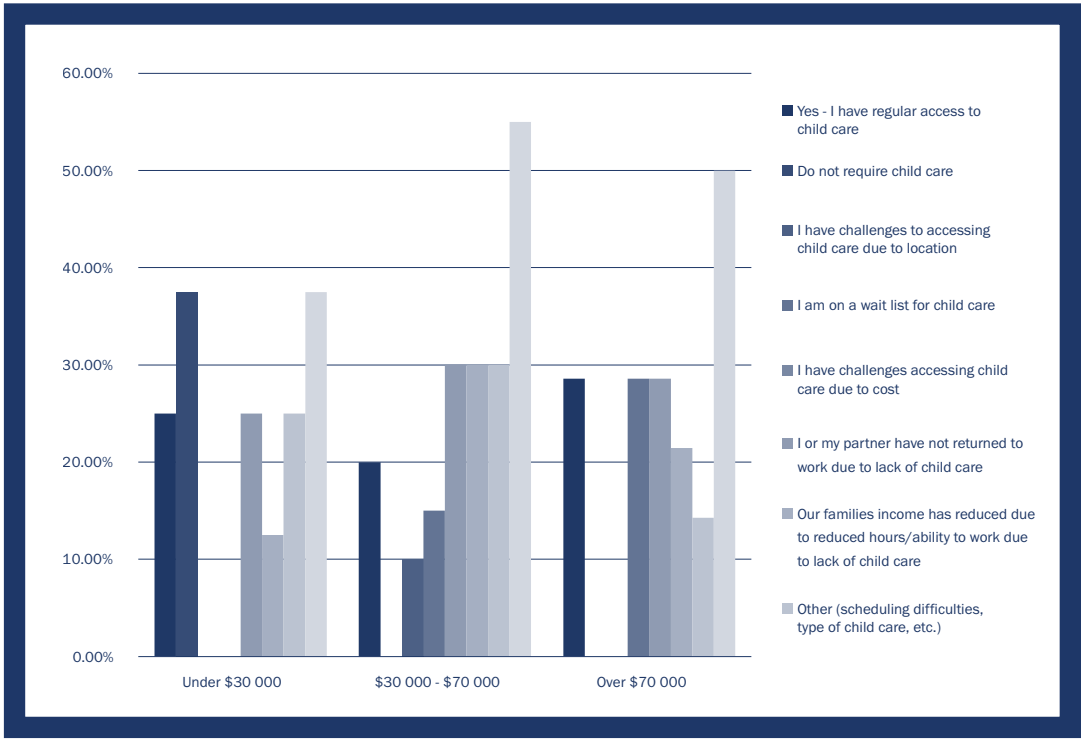
**4.2** By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education

## RECOMMENDATIONS

Child care is an integral component of the protective factors that assist community members to participate in work, education and society. Child care supports the development of young children and has been demonstrated to greatly impact success later in life. Since the completion of the ACRD Child Care Needs Assessment in 2019, over 300 spaces have been confirmed for the Alberni Valley and more are planned for West Coast communities although many more are needed. To summarize the recommendations from the 2019 Child Care Action Plan, local governments and communities can take the following steps to increase resiliency for children and families:

- Aid in the creation of new child care spaces with a goal of at least one space for every two children. This can be accomplished through municipal, school district, or non-profit organization applications to the New Spaces Fund, and through support for at-home child care centres.
- Update or add policies that support child care, including through zoning, accessible business licensing, application assistance, and amenity requests.
- Advocate for the continuation and implementation of child care supporting funds and initiatives. The BC New Spaces Fund has been influential in the creation of much needed spaces in the Alberni Clayoquot but ongoing support is required. Local government and community organizations can assist in advocating for implementation of the $10/Day plan which includes solutions to family access and affordability as well as Early Childhood Education industry improvements.
- Support partnerships for space creation and training which increase the availability of quality child care spaces and assist in developing the Early Childhood Education industry.

## ACCESS TO CHILDCARE



## LIVED EXPERIENCES

"We have JUST gotten our son into full time daycare after more than a year without and trying to work full time, with rotating shifts which increases cost of child care needs. Our children have to be in two separate day cares at opposite ends of town, so I spend a lot of time dropping off and picking up after work."

"Local job wages make affording child care impossible. It would be like working JUST to pay for child care. There would be no extra money for other bills."

"We work hard to offset childcare - It means I work nights and weekends so that we do not require childcare. If we did, we would have to move as we could not afford childcare in Tofino."

## ACTIONS UNDERWAY

- Over 300 new child care spaces approved through the BC Childcare New Spaces funding in 2021 for the Alberni Valley.
- 24 new spaces being developed in conjunction with Ucluelet Secondary School seismic upgrades and more in planning for west coast communities.
- Agreement between the BC NDP and Federal government to bring $10/day care to BC by 2026.

# EDUCATION

**While the public school system is open to all students in K-12, access to advanced education is an advantage not available to everyone. Just as early childhood education is a great predictor of health and wellbeing throughout the course of an individual's life, advanced education in any form greatly increases a person's ability to find and sustain employment, develop a career, and increases wellbeing and health outcomes. Unfortunately, costs associated with post secondary, trades, and other training can be prohibitive and, when combined with stresses associated with increased cost of living, advanced education is unattainable for many people.**

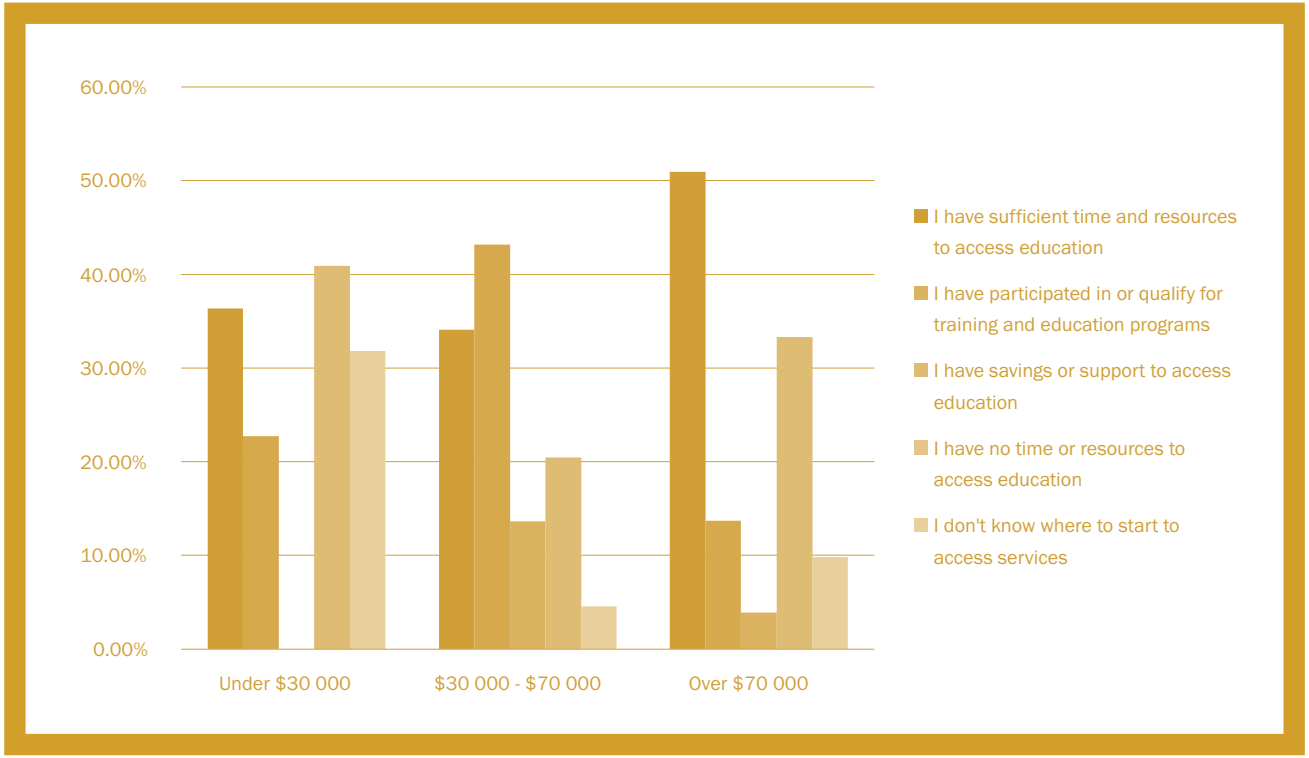
When survey respondents were asked about access to training, those in higher income brackets unsurprisingly identified less barriers to accessing education, while those in lower income brackets identified higher barriers. Interestingly, time was a major factor for all respondents, who shared that taking time for additional training was a challenge due to work schedules, existing commitments, or an inability to work enough hours to meet living costs while in training. Similarly, respondents from the Provincial Poverty Reduction community engagement identified time, cost, and access to training as primary barriers. Additionally, many respondents identified the lack of training options available in their community, lack of computer and internet access, and lack of transportation as reasons why access to education was challenging.

**GOAL 4. ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION AND PROMOTE LIFELONG LEARNING OPPORTUNITIES FOR ALL**

**4.4** By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship

**4.5** By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations

## ACCESS TO EDUCATION



### RECOMMENDATIONS

While many interventions to ensure education is more accessible and achievable for community members rely on provincial and federal governments, there are opportunities for local communities to enhance access to educational opportunities.

- Advocate for and support provincial and federal interventions to decrease the financial burden of advanced education.
- Promote, support, and partner to increase access to technology for education and access to services to address inequities due to lack of computer and internet access.
- Engage educators and students in community transit planning to ensure transit systems meet the needs of learners throughout the lifespan.
- Engage in and support partnerships with local education, employment services, and business community to increase synergies around economic development, training, and industry gaps

## LIVED EXPERIENCES

"Working full time and raising a family does not afford time or money for education opportunities."

"The cost of education is too high and travel is required."

"I am post graduate educated however the costs associated with education and the debt I continue to pay is overwhelming and creates a cascade of other financial challenges."

## ACTIONS UNDERWAY

- Alberni Valley Learning Council meets quarterly to merge community, industry and training needs with stakeholders from business, community leadership and community stakeholders
- Strong partnerships and training initiatives exist with local training providers such as North Island College to increase access to post secondary education in rural and remote communities through technology and on-site programs.
- The Bamfield Marine Sciences Centre hosts learning and research experiences in the remote communities of Bamfield and Anacla in the Barkley Sound.

# BASIC NEEDS

**Basic needs are defined as the products and services necessary to survive in the community considering climate, and necessities to maintain wellness. This includes products such as cleaning supplies, personal hygiene supplies, and services to maintain comfort in the home such as hydro. In the Provincial Poverty Reduction Consultation, 24% of respondents mentioned access to basic needs as a barrier to prosperity. Choosing between paying hydro or rent was a common experience, as was an inability to purchase personal hygiene items, particularly feminine hygiene products. Community engagement for the ACRD Poverty Reduction action plan saw fewer responses but showed similar trends regarding access to basic needs. Respondents in higher income brackets reported less challenges around access to basic needs but an overall acknowledgment of expense, while lower income bracket respondents reported increased experiences of barriers, noting that their monthly income is not enough to cover expenses and that they regularly choose between rent, food and, hydro and that overall products are too expensive.**

**GOAL 11. MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE**

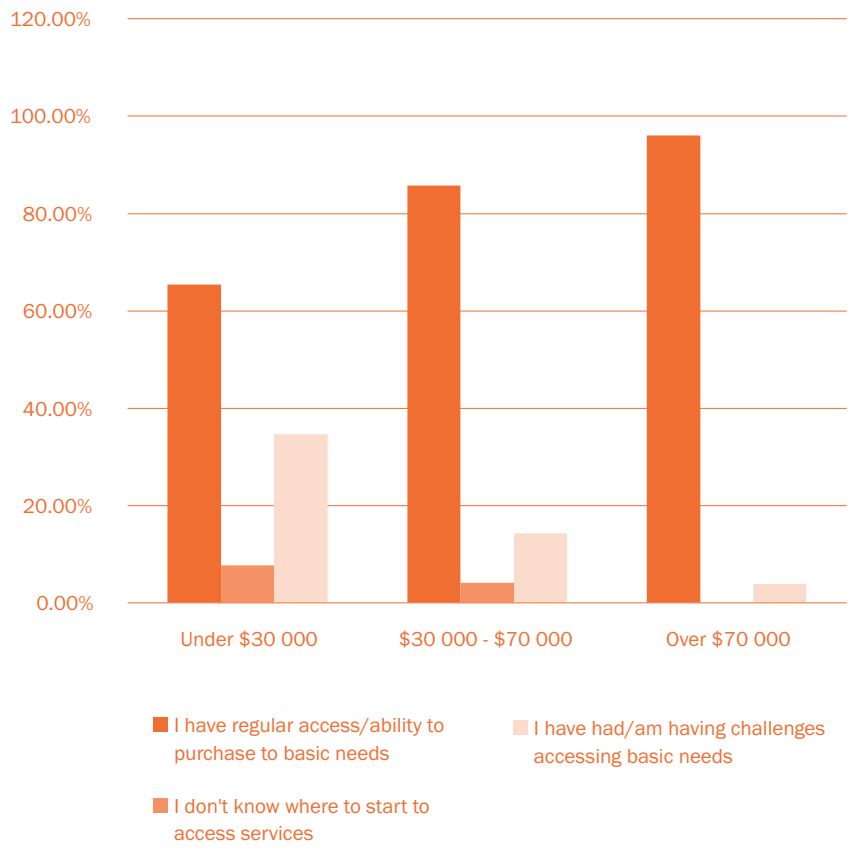
**11.1** By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums

**11.2** By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons

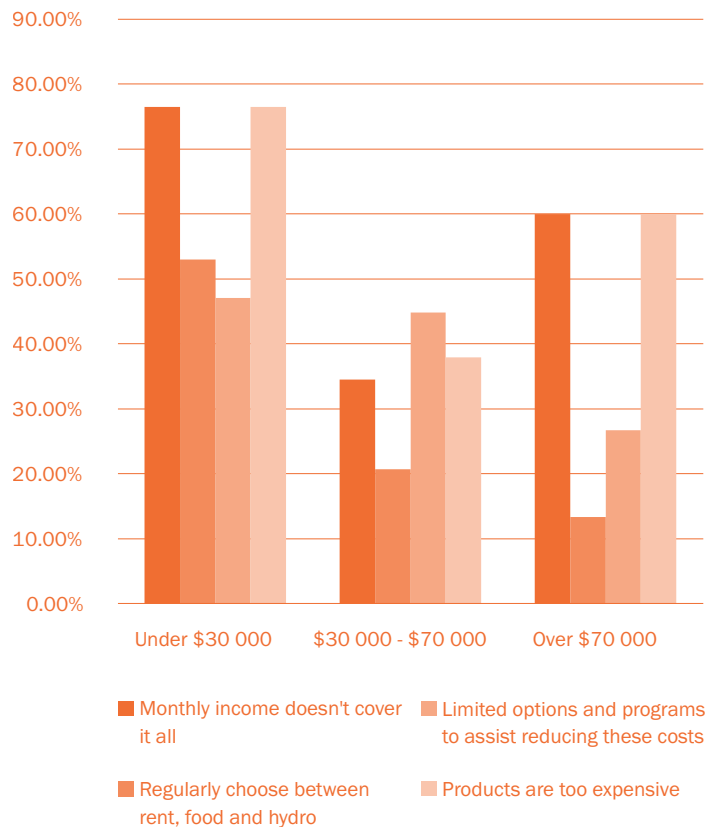
**11.7** By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

**11.a** Support positive economic, social and environmental links between urban, peri-urban and rural areas by strengthening national and regional development planning

## ACCESS TO BASIC NEEDS




## BARRIERS TO ACCESSING BASIC NEEDS



**RECOMMENDATIONS**

Affordability and cost of living increases are challenging problems for communities to tackle as increases to goods and services are tied to market demands, shipping, and manufacturing - all of which are outside the scope of local governments. To ensure individuals have and can maintain access to basic needs, communities can focus on interventions around housing (supporting a housing market in which the cost of home rental or ownership is 30% or less of an individual's monthly income), affordable childcare for families, and accessibility of services in community.

- Support interventions and solutions which ensure shelter, child care, and other large monthly expenses are affordable, so wages go further.
- Explore partnerships with local organizations and/or support initiatives which provide free or affordable products for cleaning and personal hygiene.
- Include transit users in community transit planning to ensure transit systems provide physical access to basic needs.

## LIVED EXPERIENCES

**"Sometimes there's not enough in the grocery budget for tampons or pads. We go through extra TP those weeks."**

**"Choosing between bills and food is sad."**

**"I don't live where there is a good public transport system. I problems getting everything from groceries to going to work."**

## ACTIONS UNDERWAY

- **Salvation Army, the Community Action Table, and other community partners distributed cleaning products to people in the Alberni Valley experiencing housing vulnerabilities during the height of the pandemic.**
- **Free menstrual products have been available in BC public schools since 2019, provincial statements suggest this program could be piloted for people outside of the school system experiencing challenges too.**

# ACCESS TO NUTRIOUS FOOD

**Like other basic needs, the cost of food is often dictated by forces outside of the local community. Despite this, there are many ways to increase spending ability and access to affordable, nutritious food. A common sentiment expressed during the Provincial Poverty Reduction community engagement was about the need to choose between rent, hydro, and food; participants also discussed the challenges of accessing and transporting healthy food as well as the stigma associated with food programs, which was reiterated in the community engagement for this plan. Survey results show a significant trend in the ability to afford food: respondents earning under $70000 reported experiencing some barriers, those under $30000 reported significant barriers, and individuals earning over $70000 reported seeing very few barriers to access but an overall acknowledgement that the cost of healthy food is high.**

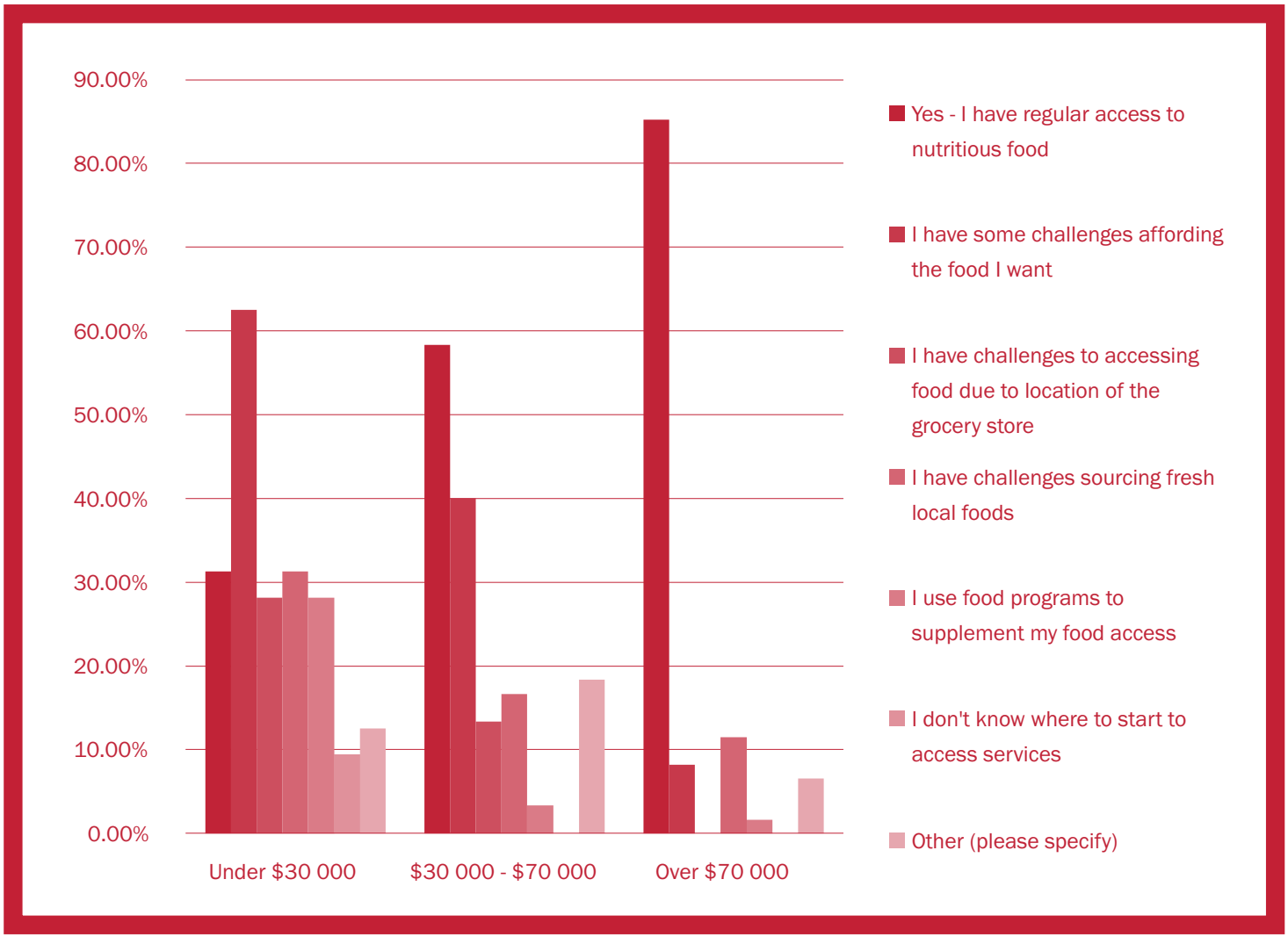
**GOAL 2. END HUNGER, ACHIEVE FOOD SECURITY AND IMPROVED NUTRITION AND PROMOTE SUSTAINABLE AGRICULTURE**

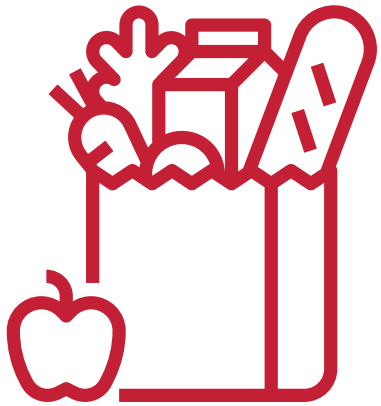
**2.1** By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round

**2.4** By 2030, ensure sustainable food production systems and implement resilient agricultural practices that increase productivity and production, that help maintain ecosystems, which strengthen capacity for adaptation to climate change, extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality

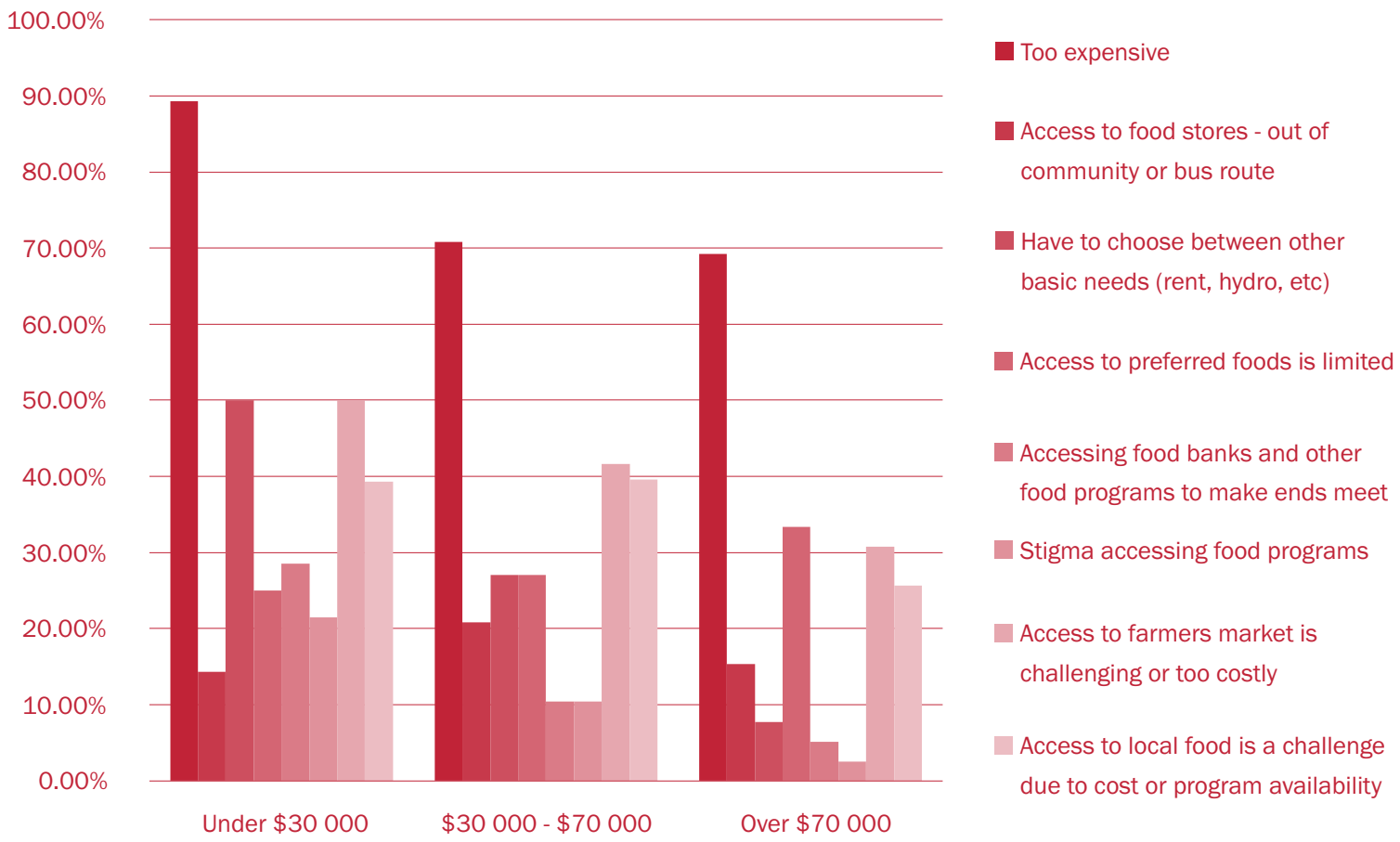
**2.c** Adopt measures to ensure the proper functioning of food commodity markets and their derivatives and facilitate timely access to market information, including on food reserves, to help limit extreme food price volatility

# ACCESS TO NUTRIOUS FOOD



# BARRIERS TO ACCESSING NUTRIOUS FOOD



**RECOMMENDATIONS**

Access to food is a basic human right recognised by the United Nations and many international charters. In the Alberni Clayoquot there are many communities without access to grocery stores and healthy, affordable food. Transportation networks could be utilized as mechanisms to meet income equity and food distribution goals for the region.

- Support interventions and solutions that ensure shelter, childcare and other large monthly expenses are affordable, so wages go further.
- Explore partnerships, and support and promote initiatives that increase access to healthy foods including hub models, food redistribution, community kitchens, meal preparation services, and food education programs that decrease stigma for food program access.
- Support planning that facilitates increased access to basic needs and food services, prioritizing rural and remote communities. This includes accessible transit programs, food distribution programs, and educational programming within a community.
- Include community members who's access to food is limited, in community transit planning to ensure transit systems support food access.

## LIVED EXPERIENCES

**"Living in a small community, food is very expensive with limited access. I drive to a larger town every month to stock up."**

**"Gaining access to nutritional food is a big challenge on a low budget. Not eating healthy food affects everything else (illness from poor diet, pain from inflammation) and prices are only increasing."**

**"Use of the Food Bank and Community Kitchens is a necessity, regularly eating food that is past expiry dates."**

**"For people with diabetes or other health conditions requiring a special diet, a stipend is too small to get type of food you need (25$) per month. It is renewed annually, and you also have to ask."**

## ACTIONS UNDERWAY

- **Salvation Army and the Bread of Life in the Alberni Valley consolidated to provide more effective programming to residents in 2019. In 2020, they responded to provide food distribution to Alberni Valley residents.**
- **The 2018 Coastal Agricultural Plan focuses on aquaculture and terrestrial opportunities in the coastal communities to increase food production opportunities in the coastal communities.**
- **The Port Alberni Port Authority opened The Dock+ at the Fishermen's Harbour in 2021. It offers start-ups and small businesses a space for growth, development, and collaboration in a shared 17,000 sq ft. space with a commercial kitchen.**

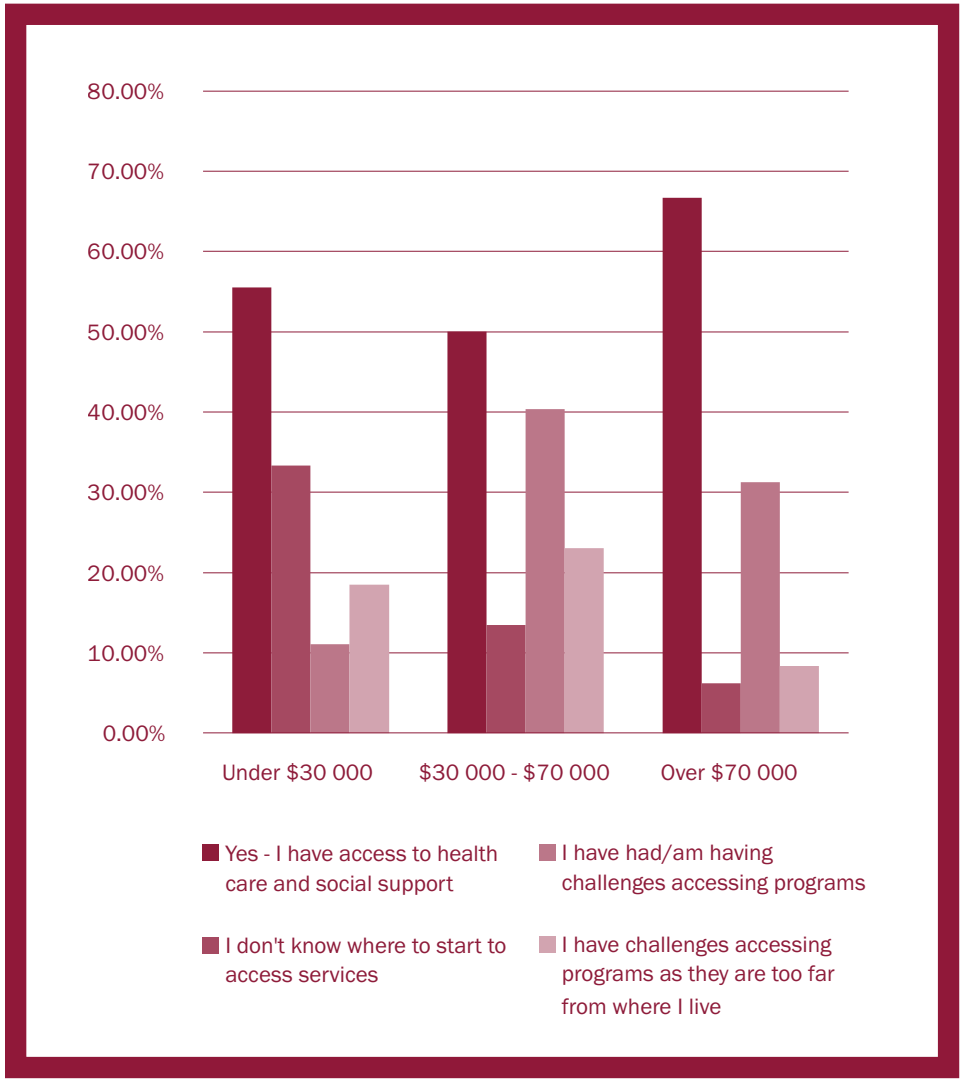
# ACCESS TO HEALTH SERVICES

**The impacts of poverty and systemic inequity are highly correlated with increased costs to the health care system. Research shows that experiences of inequity have impacts throughout the lifespan. Most notably, impacts can be seen in individuals who faced poverty as young children and did not have access to protective supports such as quality early childhood education, leading to high costs to health care and other social systems later in life.[19] Preventative programming and protective societal factors are integral components of the health system. Increased funding to protective supports is a large upfront investment that has been proven to decrease the need, severity, and expense of more acute health care concerns. To decrease the costs of healthcare, protective factors and "upstream" or preventative programming that is universally available is our most sustainable long-term option.**

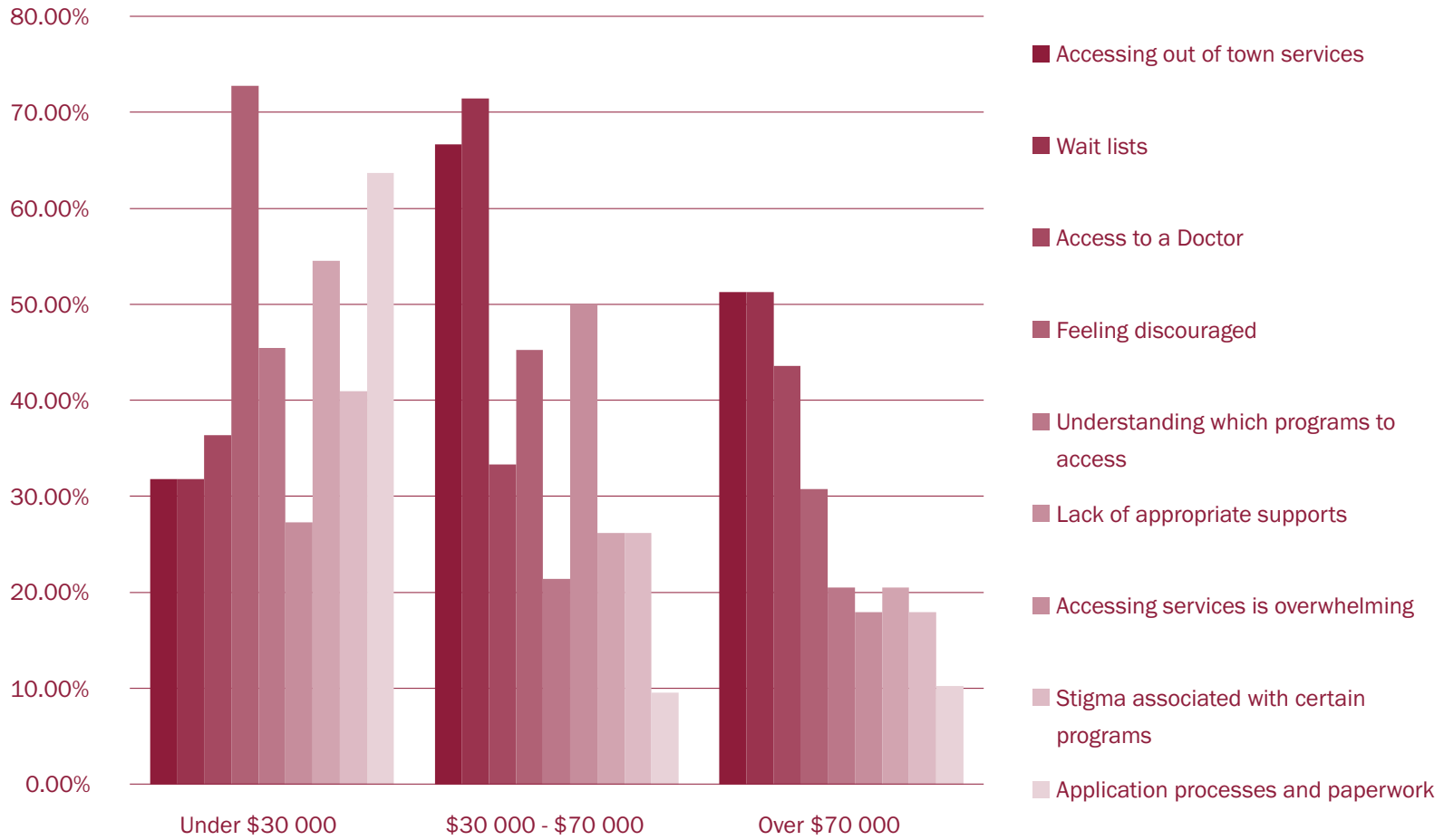
Community engagement participants reported that experiences in accessing health and social supports, including those for mental health and addictions, was related to income demographics as well as the geography in which they lived. Many rural communities in Alberni Clayoquot have limited services, with most First Nation communities and remote communities having a Nurse Practitioner or visiting GP as the highest level of care available. Further, many specialized services are not available anywhere within Alberni Clayoquot, requiring residents to travel outside of the region for care. Respondents reported challenges accessing out of town supports to manage pain or give birth, as well as challenges paying for medications, with some noting that they were unable to access treatment that they needed to maintain a chronic condition.

All income levels experienced challenges in accessing services, although reasons for challenges differed depending on income bracket. Those in the lowest income bracket reported the highest incidence of uncertainty around where to start to access services, stigma in accessing services, and feeling overwhelmed or challenged with processes and paperwork. Middle income earners reported the highest challenges accessing out of town services, waitlists and finding services appropriate to their needs. Those in the higher income bracket reported the highest satisfaction with services available but also noted challenges in finding doctors, being waitlisted, and accessing out of town services. Interviews with people with lived experience and results from the Provincial Consultation community engagement showed similar trends: respondents reported high levels of challenge accessing services due to paperwork, confusion regarding which services are available, and high levels of stigma when accessing services due to economic situation race.

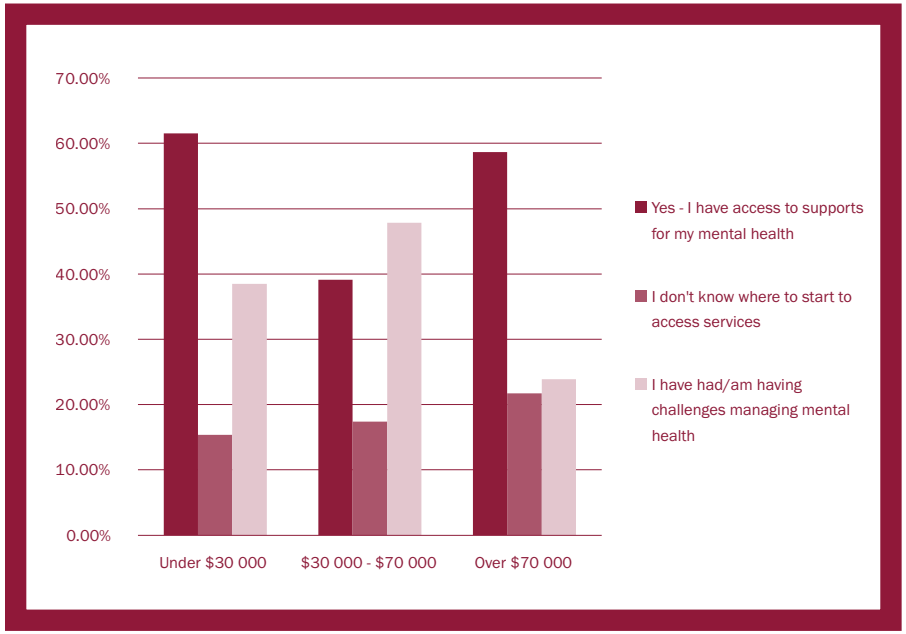
# ACCESS TO HEALTH AND SOCIAL PROGRAMS



# BARRIERS TO ACCESSING HEALTH AND SOCIAL PROGRAMS



# ACCESS TO MENTAL HEALTH SUPPORT




The COVID pandemic has brought mental health services to the forefront. Many people have required increased support during this time, which has demonstrated that our system requires significant changes to meet the current need. Although increases to mental health care capacity are needed to accommodate for the impacts of isolation and stress experienced during the pandemic, it is important to note that 42% of survey respondents indicated that they have been challenged in accessing mental health support for over 5 years. Mental health needs and challenges were identified at similar rates between income levels although middle income earners reported more challenges overall. Most respondents reported challenges with waitlists, understanding and accessing programs, lack of supports and overwhelm, or stigma in accessing supports. Interview respondents and responses from the Provincial Consultation community engagement shared high levels of overwhelm and significant reports of lack of appropriate services, stigma, and judgement in accessing services. The acute need to support individual's mental health is evident and well illustrated by the increasing challenge of our country's ongoing opioid overdose public health crisis, which began in 2010 – 2013 and continues to worsen. Trauma and unaddressed mental health concerns are one of the driving factors of drug usage and dependence. Immediate action is required to decrease impacts of adverse mental health experiences, increase resilience of communities, and tackle ongoing challenges related to mental health and addictions.

**GOAL 3. ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES**

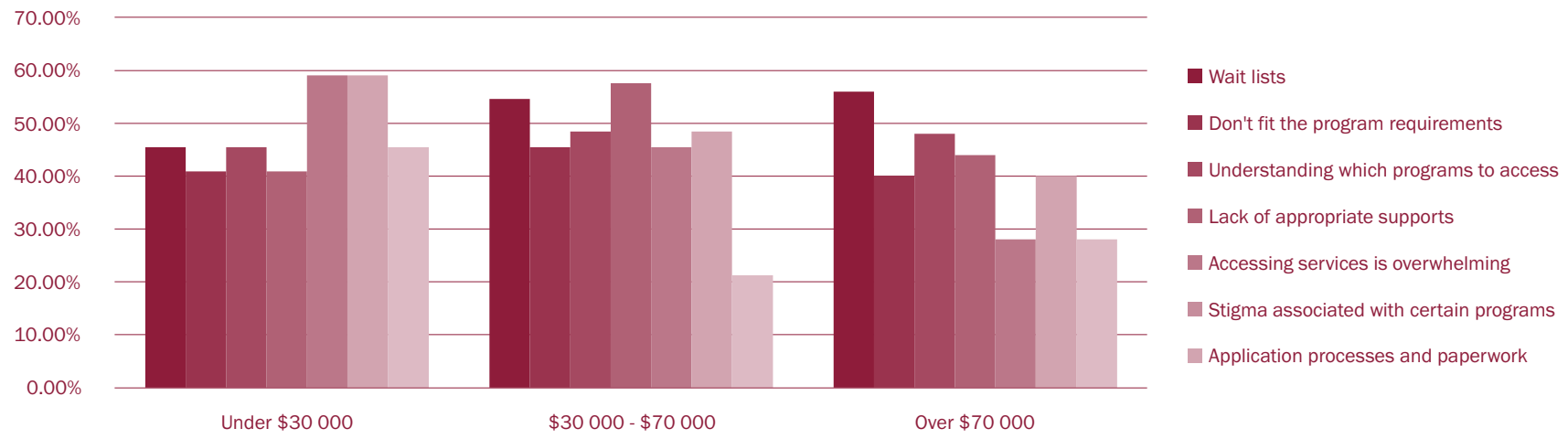
**3.4** By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

**3.5** Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol

**3.7** By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes

**3.8** Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

# BARRIERS TO ACCESSING MENTAL HEALTH PROGRAMMING




## RECOMMENDATIONS

Ability to access services is often tied to an individual's ability to advocate for themselves. Those that face stigma due to mental health, addictions, income or race are often disenfranchised and unable to access services they require. Additionally, due to the complexity of the health, social, mental health, and addictions system, many individuals experience frustration and barriers to access services because of cost, location, and time required to access services. While health care is primarily a responsibility of the provincial and federal governments, there are many actions that can be taken by local governments to decrease barriers to health, including:

- Support interventions and solutions that ensure protective factors including shelter, basic needs, and income are accessible.
- Advocate for and support training and interventions in health, social services, and mental health care that address stigma for individuals experiencing mental health and addictions, or stigma associated with race, gender, or income.
- Advocate for or engage service users in planning community health, social, mental health and addictions programs.
- Include service users in community transit planning to ensure transit systems provide access.
- Work with local partners including the Divisions of Family Practice and Community Action Tables to advocate for patient centered care and harm reduction including but not limited to:
  - » Advocate for and support the funding and creation of preventative services which increase resiliency and decrease acute care needs.
  - » Advocate for and support navigational programs that assist people to access health, social, and mental health supports with ease and dignity. Supports include general advocacy, forms and referral assistance, knowledge of supports available, and connection to appropriate supports.
  - » Advocate for and support the increase in availability of specialized services through telehealth and ensure increased access to telehealth sites.
  - » Support the development of localized services and supports required for a healthy population, including but not limited to preventative programs, detox and rehab supports, therapy, psychiatry, and other services.
- Advocate and support funding mechanisms that enhance individual's access to treatment and care such as fair PharmaCare, transportation assistance, and access to out-of-town services.

## LIVED EXPERIENCES

"Once I had to phone 9 different places for addiction and suicide assistance; passing the buck seems to be normal; 'phone another place' is what I was told eight different times!"

"Its all over whelming and I find if you dont know what to ask or you dont know where to go you just get the run around. by that time the stigma has set in and you just give up."

"There are not enough resources. Time is crucial. In a crisis, patients can't wait 2 weeks for an appointment."

'We currently have a 6 month wait for my child to see someone. Mental health is part of overall health. The fact that it is separate from our medical system & not funded by MSP is a tragic joke."

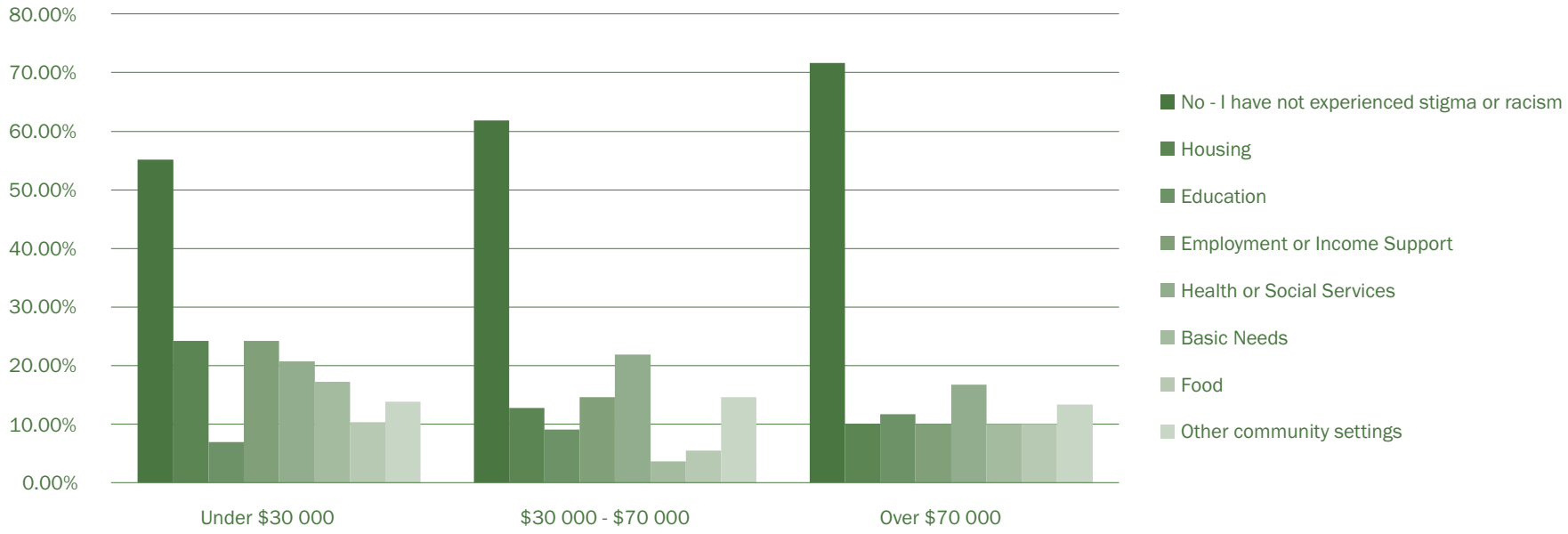
## ACTIONS UNDERWAY

- The Long Beach Chapter of the Rural and Remote Divisions of Family Practice has been successful in advocating for and receiving funding for sobering and assessment beds in Tofino and Ucluelet. They continue to work towards increased support which meets the needs in coastal communities of the Alberni Clayoquot with other health partners through an integrated primary care model.
- The Port Alberni Community Action Team works toward harm reduction, education, and stigma reduction around the opioid overdose crisis. They have piloted powerful peer support teams that have developed into independent programs providing support to individuals who are at higher risk of opioid overdose and toxic drug supply impacts.

# BUILDING AN EQUITABLE SYSTEM

**Building prosperity is building equity. The most common themes throughout the community engagement, reflected in this report, have been access, involvement, and dignity. An equitable system is one that affords the same opportunities to all people participating. Building an equitable system requires shifts to the way we make decisions, engage community, and provide support, ensuring that equal opportunities are granted to individuals no matter what race, gender, or economic status they are born into. Many of our current systems position those in most need as recipients rather than participants in the healing process and thus fail to engage these individuals in decisions and fail to accommodate for basic needs.**

## EXPERIENCE OF RACISM AND STIGMA



Stigma was the predominant theme in interviews with people with lived experience in the poverty reduction community engagement. All respondents noted stigma in accessing services, housing, and other basic needs due to race, ability, age, mental health or addictions. This trend was also observed in the Provincial Consultation results. Survey respondents that reported experiencing stigma or racism validated these accounts, with stigma and racism being reported in the highest percentages when accessing health and social services, attaining housing, employment, or income support.

**GOAL 10. REDUCE INEQUALITY WITHIN AND AMONG COUNTRIES**

**10.1** By 2030, progressively achieve and sustain income growth of the bottom 40 per cent of the population at a rate higher than the national average

**10.2** By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status

**10.3** Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard

**10.4** Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality

**GOAL 11. MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE**

**GOAL 16. PROMOTE PEACEFUL AND INCLUSIVE SOCIETIES FOR SUSTAINABLE DEVELOPMENT, PROVIDE ACCESS TO JUSTICE FOR ALL AND BUILD EFFECTIVE, ACCOUNTABLE AND INCLUSIVE INSTITUTIONS AT ALL LEVELS**

**16.6** Develop effective, accountable and transparent institutions at all levels

**16.7** Ensure responsive, inclusive, participatory and representative decision-making at all levels

**16.b** Promote and enforce non-discriminatory laws and policies for sustainable development

**Recommendations**
This Action Plan has been built around the four dimensions of equity: procedural equity (inclusion), distributional equity (access), structural equity, and transgenerational equity. To build prosperity in our communities we must begin to shift our systems and planning to encompass a more equitable lens that includes the people most affected by decisions, benefits those most disenfranchised by the status quo, ensures no one segment of society carries an undue burden due to actions or failure to act, and finally, consider future generations.

- Adopt an equity framework in community and organizational decision making.
- Familiarize staff, leadership and community members with the Truth and Reconciliation Calls to Action and United Nations Declaration of Indigenous People, work alongside community stakeholders to move from discussion to collaborative action.
- Encourage and implement diversity and anti-racism training and ongoing professional development. Local communities can lead by example.
- Incorporate service user engagement into decision making processes, minimizing tokenism, and maximizing responsiveness to feedback.
- Work in partnership with local organizations to advocate for and ensure dignity for all residents of the Alberni Clayoquot regardless of identity.

Create a regional Poverty Reduction table to promote education and stigma reduction, advocate for actions outlined in the Action Plan, move forward and/or track actions taken and evaluate progress

## LIVED EXPERIENCES

**“There is a lack of understanding about the homeless community and due to that misunderstanding people tend to stereotype the homeless and group them all as the same type of people.”**

**“People think because I am FN that I drink and party all the time. Hard to find housing because of racism. Even though I have a full time job.”**

**“No escape, no holiday from poverty, no special outings, holidays or movies, no extras.”**

## ACTIONS UNDERWAY

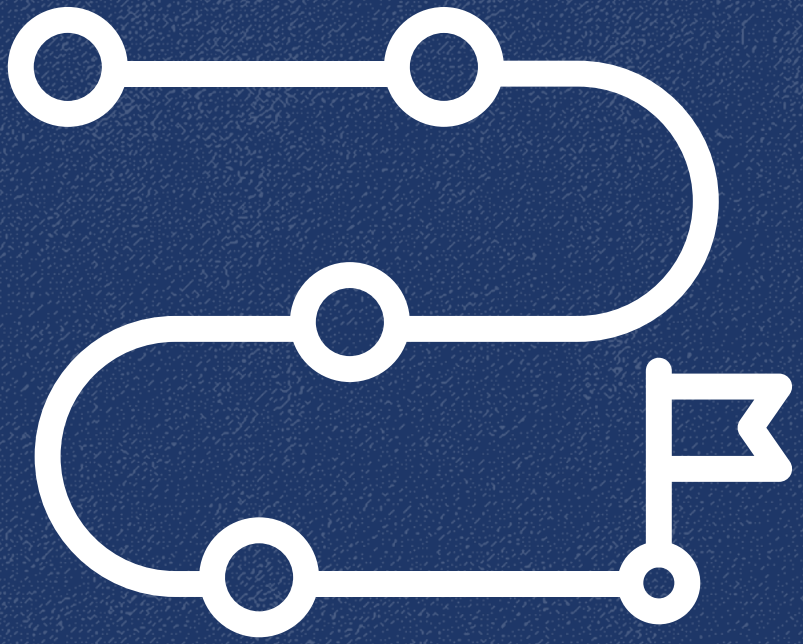
- **Truth and Reconciliation Calls to Action and the United Nations Declaration on the Rights of Indigenous People are more widely known and have assisted to increase education around the impacts of colonialization and the realities of residential schools.**
- **Indigenous, anti-racism and diversity education are becoming common place in many large institutions.**
- **Acknowledgement of systemic harms faced by indigenous people and subsequent renaming of community structures.**

# CONCLUSION

## The cost of inaction is greater than the cost of action.

Our communities currently face a multitude of public health crises, most of which have been building momentum over the past decade. The cost to maintain status quo has always been a future expense, largely downloaded on to health care, justice and societal systems. After 10 years or more, these costs continue to grow significantly greater than the cost to intervene. The COVID 19 pandemic illuminated the inequities of our system exposing the extreme vulnerabilities of those already impacted by housing shortages, income stagnation, lack of childcare, and lack of access to resources. The opioid overdose crisis, mental health, and health care access have worsened in this time, but when asked about how long survey respondents had experienced challenges, the most common answer was over 5 years across dimensions.

The COVID pandemic demonstrated that our system is capable of rapid change to address challenges. While ending poverty involves interventions to many systems, there are concise actions that can be applied in combination with an equity framework to implement systemic change impacting health, social systems, and individual dignity.



The following pages summarize a timeline of action on recommendations to build prosperity in the Alberni Clayoquot communities.

# INCOME

## Short Term (1-3 Years)

Advocate for systemic reforms outlined in the Guaranteed Basic Income Panel findings

Advocate for Living Wage

Advocate for childcare supporting funds and initiatives

Advocate for Provincial and Federal interventions to decrease the financial burden of advanced education

Increase access to technology for:
» Education
» Health Care
» And other supports

Provide free or affordable hygiene products for cleaning and personal hygiene to those with the most need, advocate for provincial support

Support initiatives which increase access to healthy foods

## Mid Term (3-5 Years)

Implementation of systemic reforms to increase access to income and lift people out of poverty

Minimum wage reforms and increases to meet cost of living

- Increase child care space creation and access to quality child care
- Implementation of $10/Day Plan

Ensure access to reliable high-speed internet as well as accessible computer access to aid communities in access

## Long Term (5+ Years)

Ensure access to basic needs for all people

Ensure regular access to nutritious foods for all communities

# HOUSING

## Short Term (1-3 Years)

Joint regional advocacy to Provincial and Federal governments to align housing strategy, policy and resources to meet actual community need.

Implement a regional or sub regional housing authority

Implement a housing model to support individuals in the most need of supports

Address zoning and bylaws to enable increased housing types and programs

## Mid Term (3-5 Years)

- Increase diversity of housing types and programs
- Implement recommendations from community Housing Needs Assessments

Evaluate housing program needs, explore partnerships and implementation of supports and programs required

## Long Term (5+ Years)

Increase diversity of housing and housing programs

# HEALTH, MENTAL HEALTH AND ADDICTIONS

## Short Term (1-3 Years)

Support local partners to advocate and support patient centered care and harm reduction programshousing authority

## Mid Term (3-5 Years)

- Implement harm reduction measures to address the impact of the Opioid Overdose Crisis
- Implement patient centered care model which address community and individual health care needs
- Advocate and support funding mechanisms which will enhance individuals access to treatment and care

## Long Term (5+ Years)

# BUILDING EQUITY

## Short Term (1-3 Years)

Adopt an equity lens for planning, engaging and prioritizing the needs of those most effected in decisions

Increase community education and action around the Truth and Reconciliation Calls to Action and United Nations Declaration of Indigenous People

Training and interventions in health, social and mental health supports which address stigma associated with mental health, race, gender or income

Ensure protective factors such as shelter, basic needs, and income are accessible

Regional Poverty Reduction Table which promotes education and stigma reduction, advocates for actions outline in the Action Plan

## Mid Term (3-5 Years)

A human rights-based equity framework to impact:

- Housing supports and affordability
- Income supports
- Community transit
- Access to goods, services and resources
- Community health, social, mental health and addictions programs

Work along side community stakeholders to move from discussion of reconciliation to meaningful action in the implementation of the 94 recommendations

Training and interventions in health, social and mental health supports which address stigma for individuals experiencing mental health and addictions, or stigma associated with race, gender or income

Increase access to basic needs and food services with a priority around those most in need including rural and remote communities

Conduct further action planning for dimensions outlined in the Action Plan, move forward and/or track actions taken and evaluate progress

## Long Term (5+ Years)

Political and community buy in are powerful tools in advocacy and action associated with ending poverty, but community commitment and education are required in tandem. In order to see lasting change and attention the creation of a regional Poverty Reduction Table is advised. This table will be tasked with:

1. Providing education and resources for advocacy to local leadership
2. Education and stigma reduction
3. Developing and promoting an equity framework. Ensuring relationships between communities and with those with lived experience are developed and maintained in meaningful ways to provide an avenue for ongoing consultation and input from community to leadership.
4. Support existing and future tables in the implementation of actions associated with ending poverty including but not limited to:
   - » Housing
   - » Transportation
   - » Child care
   - » Health, mental health and addictions access and care
5. Where appropriate, develop more granular action plans to move forward actions associated with ending poverty

Through collaboration, advocacy, and the development of frameworks to privilege the voices most affected and at risk of poverty we can progress genuine change to address inequity in our systems. Change can be as simple as shifting attitudes or increasing understanding of the people impacted or as complex as adjusting social support systems in order to stop the cycle of poverty. No one organization has the mandate to move this forward alone, but everyone has a role to play.

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