

Working Session with people living outdoors

Living Space Relocation Review – Part 3

Wed, Feb 7, 2024

4:00 pm – 6:00 pm

SUMMARY OF FEEDBACK

The working session included 23 people living outdoors, with some people who stay at Living Space and some people who don't. Staff from the Mushkegowuk Fire Keeper Patrol also attended, as did Brian Marks (CAO, CDSSAB) and Jen Byrnes (Manager, Living Space).

The conversation focused on the experiences people have had and/or were having with the Living Space emergency shelter, as well as their thoughts on the location. A number of problems were identified and suggestions made on how they could be addressed. The table below summarizes what participants said.

#	Problems identified by participants	Solutions identified by the participants
COMMENTS ABOUT THE LIVING SPACE SHELTER		
1	<p><u>There are not enough toilets at Living Space.</u> There are 2 toilets on the shelter side and 1 toilet on the drop-in side. Sometimes not all toilets are working. Some people stay for a long time in the toilet, up to 2 hours. This means that people who need the toilet don't have access. This forces clients of Living Space to find other options. They go outside. If they urinate or defecate on Living Space property they are restricted from coming back into the shelter. As a result, they go off the property.</p> <p>Sometimes male staff walk in on women in the washroom without knocking.</p>	<p>Fix the toilets.</p> <p>Have more toilets.</p> <p>The process on toilet use needs revisiting.</p>
2	<p><u>Staff do not treat the clients of Living Space with respect.</u> They order us around instead of asking us. They are very aggressive. Some staff pick on clients. They kick us and pull us. This leads to conflicts because we stick up for ourselves and then we get restricted for getting into a fight so we're out in the cold.</p>	<p>Have more Native workers that speak Cree and English.</p> <p>Provide training to staff on how to treat people.</p> <p>Ask us instead of ordering us.</p> <p>Provide cultural competency training. <i>Jen from Living Space said that this is scheduled for Feb 28.</i></p>
3	<p><u>There is no way to share complaints privately.</u></p>	<p>Have a comment box station where serious complaints can be shared privately. Time and date can be provided and then the surveillance can be reviewed to see it.</p> <p>Create an Ombudsperson-like position, or a similar role for a Committee, to address complaints.</p>

#	Problems identified by participants	Solutions identified by the participants
4	<u>Being banned from accessing Living Space means we have no other options.</u> People need to find places to survive the night – or we're going to die out there. Sometimes this means breaking into a garage and starting a fire to stay warm. This can lead to conflicts with neighbours.	Revisit the process of putting people on restriction. Find ways to help people own their own behaviour, and even if it's not your fault, make time for people to decompress. Have a quiet room.
5	<u>The shelter mixes everyone together.</u> It's hard to get a good night sleep. Some people are fighting.	Separate people who are mad from people who are trying to sleep. Have smaller spaces for fewer people (like rooms with 10-12 beds). Have different areas for different people. If the shelter had more floors, there could be one floor for people with addictions, one for women and children, etc.
6	<u>The lights go on early,</u> there are days that don't start in a good way.	The beginning of the day should be reassessed.
7	<u>Things get stolen from the lockers.</u>	Watch the security footage and follow-up with people who are stealing. Have a consequence.
8	<u>Items in storage are thrown away too soon.</u> Three days is not enough time. There have been cases when private items have been thrown away and the person was staying at Living Space.	Provide more time for people to store items. Replace items that are thrown away when they shouldn't be.
9	<u>There's a need for more clothing.</u> Donated items are hidden from clients. Staff don't allow clients to see what's being donated. There's concern donations are going out the back door.	Show clients what is donated.
10	<u>There are mentally unstable people at Living Space.</u>	They should be in the MHU (Mental Health Unit).
11	<u>Living Space is unsanitary and not maintained.</u>	Have regular inspections.
OTHER COMMENTS SHARED		
1	<u>Services are hard to access.</u> Dentists are refusing ODSP. My teeth are in very bad shape and I'm in pain. Mobility is an issue – no canes, no crutches. We have to go all the way to South End for the Probation office. Getting there is hard enough, even with bus tickets provided.	Have dentist visit Living Space once or twice a week. Bring services to Living Space.
2	<u>There's not enough focus on what's causing homelessness.</u> When people get out of rehab or jail, the only place they have is the homeless shelter, and that's there start.	Provide more transition housing. Provide more rehab. Consider the Old Canadian Tire building as a location – groceries are right there.

#	Problems identified by participants	Solutions identified by the participants
	<p>Everybody is broken in a different area. People transitioning in their lives sometimes fall to addiction.</p> <p>People are not getting housed. 3 years ago I was the next one to be housed, and I'm still not housed. They're stuck in cycles and not getting help.</p>	
3	<p><u>People lump all of us together and are rude to us and yell at us.</u> Anyone can fall through the cracks. We're products of our environment.</p> <p>People see us and there's a stigma. People are falling apart and they watch us struggle. They think we're all dirty and disgusting.</p> <p>Everythink is being placed on the natives. Compassion is missing.</p> <p>They think we are all criminals, but where's the data to prove that?</p>	<p>It shouldn't matter where we live. I pick up needles. I volunteer every day.</p> <p>I will help anyone that needs it.</p> <p>We can't fight hate with hate.</p> <p>There needs to be a public relations program.</p> <p>Get rid of the name Living Space. (Another person said that it's important to keep the name – it's a homeless shelter).</p> <p>Show us the data on whether we contribute to crime.</p>

Regarding the potential relocation of Living Space:

- The location of Living Space is not a problem for the people in the room. With one exception, they said that it's fine where it is. It's in walking distance to things. It's close to where the bus runs. It's close to social workers and clinics that help us. Some people need to be around town so they can go to the pharmacy daily. If it goes into the bush, what will we do there? It's hard enough to get around now.
- One person suggested that a relocation of the shelter out in the country may give people more time to focus and there could be a shuttle to get there.
- One person suggested that maybe an there could be a program option where people could spend time in the bush to regroup, in addition to the shelter on Spruce Street.

Next steps:

The Third Party Public team will be taking all feedback received by Feb 20, 2024, refining, and then finalizing the Outcomes of the Relocation Review. In addition to in-person working sessions, there is an online feedback form at www.livingspacereview.ca that asks the same questions.

The Relocation Review report will be delivered by Third Party Public to the Relocation Review Steering Committee on February 29, 2024 and also distributed to all participants in the process. It will also be posted online at www.livingspacereview.ca.

This summary was written by Nicole Swerhun and Matthew Wheatley from Third Party Public. As facilitators that are not advocating for any particular outcome of the Relocation Review, the intent is to capture the perspectives shared during the discussion, not to assess the merit or accuracy of any of these perspectives. Note that points are numbered in this summary for ease of reference only and are not intended to imply that some points are more important than others.