“I feel at home down here. I don’t want that taken away.”

“It’s changing. We have to not forget that we were here first. We want you to see us for who we are and what we are. Down here it’s safe. We always will be here. We shouldn’t be looked down upon.”

“This is not the poorest postal code. We are the richest.”

“I like change if it is organic and slow change that comes from the neighbourhood, rather than from outside of it—change initiated by residents and community members. Why do people in boardrooms and towers get to play boardgames with our homes?”

“Housing for use value, not exchange value; people before profits.”

“I cannot go anywhere besides here.”

“On the street, it is all people I went to high school with: my cousins, my relatives.”

“I’ve been living upstairs for 6 years. It’s the first place in my life I’ve been part of a community. I know my neighbours and I’ve never felt like that anywhere before. There’s lots of great help and support down here.”
It's changing. We have to not forget that we were here first. We want you to see us for who we are and what we are. Down here it's safe. We always will be here. We shouldn't be looked down upon.

I like change if it is organic and slow change that comes from the neighbourhood, rather than from outside of it—change initiated by residents and community members. Why do people in boardrooms and towers get to play boardgames with our homes?
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Executive Summary

This report examines potential social impacts of development in Vancouver’s Downtown Eastside (DTES) using an integrated approach to sustainability based on the City of Vancouver’s draft Healthy City Strategy (“A Healthy City for All”). This approach recognizes that sustainability takes into account the economic, social and ecological needs of a community. Further, health is determined by a variety of factors including income, housing, employment, food security, education, early childhood development, health services and social inclusion (Mikkonen and Raphael 2010).

In applying such an approach, this report acknowledges changes which have occurred in the community in the decade prior to the assessment being conducted, in five key areas of interest: Housing, Livelihoods, Health and Well-being, Child Vulnerability, Safety and Development. It describes the Social Impact Assessment (SIA) process that engaged people potentially affected by new development in determining community assets and gaps, assessing the potential social impacts of new development (both positive and negative) and developing a framework to mitigate, monitor and evaluate assets and impacts in order to maximize the positive effects and minimize the negative effects of development on the community.

Though not exhaustive, the findings for the period 2000-2013 indicate that poverty was a dominant theme in the DTES as evidenced by: the proportion of low-income persons (64 per cent in 2006 based on before tax income); the highest homeless population in the city (731 people in 2013); the number of Single Room Occupancy (SRO) households (5,500); and child vulnerability (52 per cent of kindergarten-age children in Strathcona were not school-ready in 2012 compared to 35 per cent citywide). During the same period, the total number of housing units in the DTES grew from 11,900 to 15,300. Market housing has grown the fastest, more than doubling since 2003. Social housing numbers also significantly increased by almost 2,000 units, including 800 additional social housing units and BC Housing’s purchase of 1,100 private SRO rooms.

Contrary to some of the findings above, the data revealed positive signs of a community recovering from a health crisis. In the period 2000-2013 health conditions and life expectancy of people living in the DTES improved significantly. HIV infection rates and heroin overdoses fell dramatically in response to coordinated health intervention and drug strategies introduced in 2000. Furthermore, life expectancy in the DTES increased by approximately 10 years, though it is unclear how much of that increase can be attributed to new, healthier residents moving in to the neighbourhood and how much to improved health outcomes for vulnerable populations. Despite recent gains in physical health, there remains to be high rates of mental illness and addiction challenges, especially for residents in SROs.

In 2012-2013 during the community input phase of the SIA, approximately 600 residents participated in workshops and identified over 168 community assets that are critical for DTES residents. Assets included physical buildings (SROs, Carnegie Community Centre), places (Oppenheimer Park), low cost or free food (Evelyne Saller), health and support services (Insite), as well as intangibles such as feeling safe, enjoying a strong sense of community, not being judged and being included and connected. Frequently mentioned gaps included affordable housing, employment, low cost food, places to gather, and health and support services. These exercises confirmed the findings above - that poverty is the most important issue for DTES residents and central to many of the challenges faced by vulnerable groups living in the community. The exercises also highlighted the fears low-income residents have around losing their critical assets.
To facilitate a structure for assessing the potential social impacts of new development, seven themes were developed: Our Homes; Our Livelihoods; Our Places; and Our Well-Being, including Early Learning and Care, Education, Recreation and Parks; Food Access; Health and Social Services; and Inclusion, Belonging and Safety. These themes, which were based on the draft Healthy City Strategy and the Downtown Eastside Local Area Plan (DTES Plan) were characterized by impact areas (38 in total) which will be linked to regular assessments monitoring the effect of development on the community over time.

This report concludes with a strategy to mitigate, monitor and evaluate community assets, largely through implementation of the DTES Plan. The Plan’s Social Impact Management Framework outlines actions to manage community assets, amend regulatory by-laws and policies, manage new business and development and foster Good Neighbour practices in broad community partnership. In moving ahead, the goal will be to maximize beneficial opportunities of development for vulnerable populations and low-income residents, and minimize negative impacts which may reduce the quality of life for DTES residents.
“My fear is that as things start to build and grow, we are not going to have this close-knit community. It’s frightening.”
1.0 Introduction

Background

In recent years, the City of Vancouver has undertaken a number of initiatives in the DTES in efforts to improve various neighbourhood conditions, including social and economic development. At the same time, there has been increasing market pressure to develop the area due to its close proximity to the downtown core and comparatively lower land values than elsewhere in the city. An increase in market condominium development has brought new, high income households to the predominately low-income community. These realities have led to growing concern by residents over the impacts of new development on the neighbourhood.

In 2010, DTES residents and community groups voiced their concerns about development impacts on their neighbourhood and patterns of displacement and in response, Vancouver City Council directed: “THAT a social impact study be conducted to assess the effect on the existing low-income community of new developments in the historic area and where opportunities for enhanced affordability and liveability may be achieved.”

The following year, when considering the Terms of Reference for undertaking a planning program in the Downtown Eastside, City Council directed: “The development of a City-directed Social Impact Assessment will be pursued as a priority of the Downtown Eastside Local Area Planning Process work program”.

As a follow-up to Council directions and community concerns, a Social Impact Assessment (SIA) was prepared in 2011-2013 in a parallel process with the DTES Local Area Plan (DTES Plan) Program. The key goal of both the SIA and the DTES Plan is to ensure that future development in the DTES improves the lives of all those who currently live in the area, particularly those with low incomes.

What is a Social Impact Assessment?

Social Impact Assessment (SIA) is a widely-adopted tool guided by international guidelines and principles established by the International Association for Impact Assessment. SIAs analyze, monitor and manage intended and unintended social impacts of development on people. The goal of a SIA is to identify social impacts in order to maximize the positive effects and minimize the negative effects of development on a community in an anticipatory and proactive way. It also helps ensure that communities are included in processes that shape their surroundings and can significantly affect their lives.
Research has shown that social impacts resulting from development and neighbourhood change can result in improvements to, or decreases in the health and well-being of residents. The main types of social impacts resulting from development and neighbourhood change include: lifestyle impacts, community impacts, quality of life impacts, health impacts and emotional impacts. (Refer to Appendix A.)

Social impacts can be cumulative (combined with other past, present and future impacts) and triggered directly by a single development or as a result of the effects of incremental development over time.

**Why do we need a SIA for the DTES?**

Like many of Vancouver’s neighbourhoods, the DTES has witnessed significant change in its urban landscape over the past decade including:

- a significant increase in property values in keeping with citywide increases (303 per cent between 2001-2013);

- a steady flow of development permits being issued (average of 38 annually between 2000-2011);

- a steady population growth (9.8 per cent between 2001-2011);

- an increase in the number of new shops and restaurants catering to moderate and high-income patrons.

These trends are raising concerns about the future of the neighbourhood for low-income residents and local small businesses that serve them. Residents are concerned with the pace of change and ripple effects of new developments in the neighbourhood and the impact they have on the community – especially the most vulnerable who feel the impacts most directly. (Refer to Appendix C.) Any significant change occurring in the neighbourhood places increased pressure on low-income residents and businesses, including rising rental rates, displacement through redevelopment, the closure of affordable businesses and the accompanying feelings of exclusion from a gentrifying landscape. These fundamental concerns are part of an intricate web of complicated issues facing the DTES and are highlighted in the key objectives of the SIA:

- Protect existing assets by maintaining, creating new, or relocating assets where they are accessible to vulnerable populations (refer to Appendix D);

- Fill identified gaps through development, where possible, and through partnerships;

- Create SIA planning tools for use in future planning and development;

- Maximize positive impacts and minimize negative impacts of new developments on vulnerable residents;

- Achieve healthier and more equitable and inclusive development outcomes.
“Good health and good health services are the most important.”
2.0 SIA Framework – “Healthy City for All”

The City has long recognized that sustainability requires integrated decision-making that takes into account the economic, social and ecological needs of residents and neighbourhoods. The City has two ambitious plans for sustainability – the Vancouver Economic Action Strategy (economic) and the Greenest City Action Plan (ecological). The third – the Healthy City Strategy (in development), will be Vancouver’s social sustainability plan toward a “Healthy City for All”.

The Healthy City Strategy aspires to the vision of a “Healthy City for All” through three focus areas: “Healthy People” (taking care of basics); “Healthy Communities” (cultivating connections); and “Healthy Environments” (ensuring livability now and into the future). The Strategy’s twelve long term goals (refer to Appendix B) help form the foundation for the DTES Plan and the SIA. The proposals contained within the DTES Plan and the key themes in the DTES SIA are aligned to these Healthy City Strategy goals.

The SIA and the DTES Plan were prepared in a parallel and connected process with the SIA process taking place from October 2011 to March 2013 and the DTES Plan process starting in March 2012. During that time, the SIA process linked to the Plan in different ways including:

- assisting with the development of demographic information for the DTES plan;
- contributing to developing the community engagement activities;
- informing the planning roundtables in order to create actions and policies that address social impacts;
- seeking guidance throughout from the DTES Plan committees, including an SIA Reference Group;
- informing the creation of the Plan’s Social Impact Objectives and Social Impact Management Framework (refer to the DTES Plan).
SIA Process

Over 600 residents, including representatives of numerous vulnerable population groups as well as the DTES Planning Program Committee SIA Reference Group helped shape the key themes and impact areas of the SIA (refer to section 5.0).

Most, if not all, SIAs are conducted on a specific development project and evaluate potential impacts within its vicinity. The DTES SIA is unique because it set out to predict impacts of all new development on a specific sub-set of the population (low-income, vulnerable populations). It was also conducted parallel to the DTES Plan (see above) and integrated into its final outputs in order to mitigate potential impacts, which is not common in SIA practice. Because of its unique nature, the DTES SIA methods have been adjusted, but are generally in keeping with SIA practice (i.e. a focus on identifying community assets and gaps to assess potential social impacts). Asset mapping exercises and community consultation held during the SIA process revealed that there are over 168 community assets that are important to the quality of life in the DTES.

In developing the DTES SIA, several steps were followed which are highlighted below and described in more detail in the following sections.

**Step 1: Understanding the Context and Issues (the Retrospective: 2000-2013)**

First, there was a process of fully understanding the context and key issues behind the community concern and call for the SIA. To develop this baseline knowledge of the community, a comprehensive set of data sources were reviewed and analyzed including: census data, the DTES Local Area Profile, key informant interviews, City planning policies and by-laws, as well as academic studies.

**Step 2: Engaging the Community**

Secondly, the potentially affected stakeholders (low-income, vulnerable populations) were identified in consultation with the SIA Reference Group and other community stakeholders, and invited to take part in a community engagement process. This engagement process identified community assets, gaps and feelings about development and neighbourhood change. It also helped refine the information gathered in Step 1.

**Step 3: Assessing Potential Impacts of Development**

Thirdly, community input, health and well-being data, and feedback from key stakeholders were reviewed and potential social impacts were identified.

**Step 4: Managing Community Assets (on-going)**

A mitigation strategy to manage the impacts forecasted in the SIA is underway through the direct actions in the DTES Plan and through other City of Vancouver tools and levers. The mitigation techniques that will be included are intended to maximize the potential positive benefits of development and minimize negative impacts.

**Step 5: Monitoring Community Assets (forthcoming)**

SIAs are predictive tools. The DTES SIA process assessed potential impacts of future developments, established a baseline through past indicators and highlighted a set of new indicators to monitor impacts into the future.
“There is development encroachment from Cambie and from Main: encroachment on the DTES is coming from two directions and they’re checkerboarding—putting a building here and another there. They’re trying to legislate the DTES out of business, legislate us out without any recourse and count on peoples’ lack of ability to see understand what is going on.”
3.0 Retrospective (2000-2013)

Understanding the Context

In the years preceding the SIA, changes have occurred in the DTES in five key areas of interest for the purpose of this study: Housing, Livelihoods, Health and Well-being, Child Vulnerability, Safety, and Development. Though not exhaustive, these indicators provide an idea of general trends over the last 10 years in key areas that are important when looking at social impacts. Indicators are based on the most recent and reliable data available for the DTES, which in most cases is the 2006 census. Due to dataset inconsistencies and restrictions, a new set of indicators that builds from baseline data discussed here will be used for future monitoring purposes (refer to section 7.0 Monitoring Assets.)

Key findings over the past decade indicate that poverty was an overarching theme in the DTES as evidenced by the lack of affordable housing, decrease in vacancy rates of SROs and the reduced number of private SRO rooms renting at the shelter rate, the high proportion of low-income households compared to citywide, an increase in social assistance cases, increase in crime and prevalence of child vulnerability.

Some of the findings showed positive signs of a community recovering from a health crisis. In the period 2000-2013 health conditions and life expectancy of people living in the DTES improved significantly. HIV infection rates and heroin overdoses fell dramatically in response to coordinated health intervention and drug strategies introduced in 2000. Furthermore, life expectancy in the DTES increased by approximately 10 years though it is unclear how much of that increase can be attributed to new, healthier residents moving in to the neighbourhood and how much to improved health outcomes for vulnerable populations. Despite recent gains, there remains to be high rates of Chronic Obstructive Pulmonary Disease and Hepatitis C, as well as mental illness and addiction challenges, especially for residents in SROs.

1. 2011 National Household Survey data (voluntary survey to replace the long form census) only became available for the Downtown Eastside in mid 2014, and there are concerns over data validity and reliability as a result of methodology changes.
Housing

Housing affordability in the DTES remains a challenge due to the low median household income of $13,960 and the highest homeless population in the city. In 2013, 731 people were found homeless in the DTES, including 124 on the street or staying temporarily with friends and 607 staying in shelters. Aboriginal people continue to be over-represented in the homeless population (30 per cent citywide despite accounting for only two per cent of the population) (Eberle Planning and Research 2012).

Within the last decade, the total number of housing units in the DTES grew from 11,900 to 15,300. Market housing has grown the fastest, more than doubling since 2003. Social housing numbers also significantly increased by almost 2,000 units, including 800 additional social housing units and BC Housing’s purchase of 1,100 private Single Room Occupancy (SRO) rooms. Although the conversion of private SROs to non-market SROs does not fully meet the goal for replacement with self-contained social housing (units with kitchens and bathrooms), the objective of securing affordability and tenure for vulnerable low-income residents in the interim has been met. Almost all of the BC Housing SRO rooms are rented at $375.

DTES Housing Mix: 2003 and 2013

<table>
<thead>
<tr>
<th></th>
<th>2003</th>
<th>2013</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Housing - SROs</td>
<td>400</td>
<td>1500</td>
<td>1,100</td>
</tr>
<tr>
<td>Social Housing - Units</td>
<td>4,400</td>
<td>5200</td>
<td>800</td>
</tr>
<tr>
<td>Private Rental SROs</td>
<td>5,100</td>
<td>4000</td>
<td>(1,100)</td>
</tr>
<tr>
<td>Other Market Housing</td>
<td>2,000</td>
<td>4600</td>
<td>2,600</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>11,900</td>
<td>15,300</td>
<td>3,400</td>
</tr>
</tbody>
</table>

Note: Other Market Housing includes a variety of housing types including single family homes, duplexes and market rental housing. This category also includes condominiums in multiple family developments (projects with three or more units). In 2003, there were 943 condominium units in multiple family developments and in 2013 there were 2,874.
Livelihoods

The DTES has been a predominantly low-income and working class neighbourhood for over 70 years. Income, income assistance and employment continue to be major challenges for the majority of DTES residents. (Refer to Appendix C for details.) Recent trends indicate:

• The proportion of households that fell below the low income cut-off was much higher in the DTES (53 per cent), than citywide (21 per cent), according to the 2006 census.

• The number of social assistance cases increased by 13 per cent in the welfare offices serving the DTES and decreased by 11 per cent citywide between 2000-2012. It is unclear how much of the increase in cases could be attributed to conditions such as improved access to assistance (through social service advocacy), or an impact of changes in other parts of the city (displacing social assistance recipients to the DTES), or an increase generated locally.

• From 2007 (the last time social assistance rates changed) to 2013, the Consumer Price Index in Metro Vancouver increased by approximately 8 per cent.

• The median income increased by 13 per cent across the city between 2000-2005. Within the DTES median income increased at the same rate, but remained less than 30 per cent of the citywide median.

These indicators are important to monitor moving forward as research has shown that income level could be the single most important social determinant of health and well-being. Income has direct implications on overall living conditions, psychological functioning, and health-related behaviours such as diet, physical activity, tobacco use and excessive alcohol use (Mikkonen and Raphael 2010).

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2 Three welfare offices serve the V6A and V6B forward sortation areas (FSA) defined by Canada Post. The V6A FSA includes the portion of the Downtown Eastside east of Carrall Street, and the V6B FSA includes the remainder of the Downtown Eastside but also much of the Central Business District and Yaletown.
Health and Well-Being

Health and well-being are shaped not only by individual elements such as biological factors, lifestyle choices and access to medical treatment, but also by our socioeconomic status and living conditions. As they do for all of us, the social determinants of health play a central role in the well-being of DTES residents. In material terms, these factors can shape an individual’s life circumstances such that they face difficulty accessing the basic prerequisites of health, such as nutritious food or adequate housing. Well-being is also significantly impacted when individuals experience chronic physiological and psychological stress as a result of their living conditions.

Despite some indications of improvement in recent years, significant health gaps remain between DTES residents and residents of other neighbourhoods in the city. Recent trends include:

- New diagnosis rates for HIV fell dramatically in the DTES local health area between 2006-2008 and 2009-2011, but they remained higher than the rates for Vancouver as a whole (46.7 new diagnoses per 100,000 compared to 42.0 for men citywide, and 10.6 compared to 5.2 for women citywide).

- Rates of new Hepatitis C diagnosis fell in the DTES local health area between 2006-2008 and 2009-2011 but remained significantly higher than the citywide rate (277.4 new diagnoses per 100,000 population compared to 58.4 citywide).

- Life expectancy in the DTES local health area increased by almost 10 years between 1996-2011 to 79.5 years, but remained lower than the average life expectancy for the Vancouver Health Service Delivery Area (83.3 years) and for BC (82.0 years). It is unclear how much of this increase can be attributed to new, healthier residents moving into the neighbourhood and how much to improved health outcomes for vulnerable populations.

- Mortality rates declined in the DTES local health area for many major causes of death between 1990-1994 and 2005-2009, but remained higher than citywide mortality rates. Mortality in the DTES local health area is particularly high for HIV, accidental poisoning, infectious disease, suicide, and chronic obstructive pulmonary disease.

- High rates of mental illness and addiction persist and are difficult to treat - a problem exacerbated by poverty, homelessness, poor housing conditions, histories of trauma, and the lack of a continuum of care that emphasizes choice and client-centered care.

- Indicators of maternal and infant health show considerable disparities. Rates of stillbirth, infant death, low birth weight, pre-term birth, and birth to teenage mothers were significantly higher in the DTES Core as compared to the entire DTES local health area and to BC as a whole.

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1 Mikkonen and Raphael (2010) have identified the following 14 key social determinants of the health of Canadians: income and income distribution; education; unemployment and job security; employment and working conditions; early childhood development; food insecurity; housing; social exclusion; social safety net; health services; Aboriginal status; gender; race; and disability.

4 The Downtown Eastside local health area includes Grandview-Woodland and is one of six local health areas that make up the Vancouver Health Service Delivery Area. The population of the Downtown Eastside local health area is 71,401, of which the Downtown Eastside comprises approximately 25 per cent of the population.


10 The DTES Core is a sub-area of the DTES local health area identified by Vancouver Coastal Health. The boundaries of the DTES Core match the DTES neighbourhood boundaries used by the City of Vancouver.

Child Vulnerability

A frequently used measure of child vulnerability is the Early Development Instrument (EDI), developed by the University of British Columbia. The EDI measures school readiness of kindergarten aged children based on five scales of vulnerability (physical, social, emotional, language and communication). Strathcona has the highest proportion of children who are vulnerable on one or more scales of vulnerability (52 per cent compared to 35 per cent citywide).

Over the past four times the EDI survey has been conducted, from 2004-2013, the city overall has seen a significant decrease in vulnerability, but Strathcona has not. More than half of all children surveyed in this portion of the Downtown Eastside begin kindergarten with vulnerabilities that impact their readiness for school.

Safety

Safety continues to be a concern in the DTES, especially for certain groups including women who are vulnerable to sexual, emotional, mental, physical and racialized violence. Crime rates are higher in the DTES than citywide and total crime has increased over the period 2006-2011. These trends are demonstrated by:

- The total number of crimes reported in the DTES increased by 4 per cent, while the total number reported citywide decreased by 23 per cent between 2006-2012.
- The number of violent crimes reported in the DTES increased by 36 per cent; property crimes decreased by 20 per cent; and other criminal code violations increased by 23 per cent between 2006-2012.
- In 2011 there were 455 reported crimes per 1000 people in the DTES compared to 87 reported crimes per 1000 people citywide.
- In 2012, 16 per cent of reported sexual assaults in Vancouver occurred in the DTES, an area with only 3 per cent of Vancouver’s population. (Vancouver Police Department 2013). As many sexual assaults are unreported and marginalized groups are particularly unlikely to report crime, this may be an underestimate.

Interpreting reported crime data can be a fraught exercise, particularly in vulnerable communities. An increase in reported crime may be due to an improved relationship between police and residents (resulting in an increase in reporting). Changes to police deployment and priorities can also affect how crime is reported.

Development

Over the last decade, development permit activity in the DTES has occurred at roughly the same pace as citywide. (Development permits are required for new construction, major alterations and changes to the use of a building.) Between 2000 and 2012 there was an average of 38 development permits issued annually in the DTES, with a high of 47 permits in 2011 and a low of 23 permits in 2005.

Applications to rezone property in the DTES have been relatively few in number with a maximum of two in any given year. Between 2000 and 2012, 45 per cent of the rezoning applications in the DTES were for social housing projects.

Land values and building improvement values are also indicators of neighbourhood change. Both the DTES and the city experienced land value increases in the range of 300 per cent over the past 12 years. Building improvement values increased slightly more citywide (180 per cent), than the DTES (138 per cent).

12 Data obtained 2013 from Vancouver Police Department.
13 The relatively few number of rezoning applications is partially explained by the DTES LAP Rezoning Policy which restricts applications in the Oppenheimer District during the local area planning process.
“I wish there were more Carnegies in the DTES and all over the city.”
4.0 Identifying Community Assets

Engaging the Community

The main purpose of the community input phase was to gather information from residents to help shape the key themes, impact areas and potential impacts of development. In keeping with the core value of SIA practice, the DTES SIA process was characterized by a high degree of public participation. The main technique used was a process called “asset mapping”\(^{14}\), where participants map attributes of the neighbourhood which are considered essential to maintain quality of life. Assets are what communities want to keep, sustain and build upon for the future. For example:

- affordable housing;
- healthy and affordable food;
- institutions such as schools, libraries, etc.;
- parks and recreation services;
- places where people feel safe and included;
- sense of community.

The exercise draws upon existing community strengths to build stronger, more sustainable communities. It also helps participants think positively about the place in which they live and produces a view of what is considered important in the community. Asset mapping is the starting point for strategic planning as it identifies what assets the community has and how they might be utilized in the future (Northwestern University 2009). (Refer to Appendix D for details.)

\(^{14}\) “Asset mapping” was developed by John Kretzmann and John McKnight of the Asset-Based Community Development Institute at Northwestern University in Evanston, Illinois.
Methods

The activities of the community input phase are outlined below:

- **Map**
  - Map what’s important to people in the community

- **Learn & Listen**
  - Learn about and record the spaces, places and things valued by the people in the DTES

- **Evaluate & Influence**
  - Evaluate and influence how new developments impact the community

- **Communicate**
  - Allow residents to communicate hopes and fears around change in their community

- **Understand Gaps**
  - Gain a better understanding of what is missing for the community

- **Assets & Amenities**
  - Identify future assets and amenities for the DTES

From June through August 2012, low-income residents aged 7 to 97 took part in the community input phase. This phase consisted of a total of 38 workshops (including several conducted in Cantonese and Mandarin) and focus groups and was completed in partnership with 16 neighbourhood organizations. Workshops were designed to be low-barrier and include people from various vulnerable populations. Refreshments were provided along with a small honorarium for the participants’ time.

In the workshops, residents were encouraged to map assets and gaps of the neighbourhood in an informal inclusive way. In addition to the mapping, people also participated in focused discussions facilitated by volunteer facilitators and City staff.

During the sessions, participants were asked:

- What are the important places, spaces and things in the DTES?
- What else would you like to see?
- What’s missing?
- How do you feel about change in the DTES?
- What are your hopes and fears about development in the DTES?

Workshops were also held with children and youth. These workshops involved a mapping activity, group and individual discussion. Children were asked about where they lived and what they liked to do in their neighbourhood or where they like to go (assets identification) as well as what they would like to do, but couldn’t (gaps identification). They were then prompted to discuss how change felt, where they had experienced it, and what it felt like. Input from the children and youth workshops was combined with the feedback from adults and reported as a full set.
In addition to the workshops, 168 individual interviews were conducted with residents in SROs and on busy street corners frequented by low-income residents of the DTES. Interviews were conducted in order to reach marginalized populations who wouldn’t normally attend a workshop.

**Results**

Asset mapping exercises conducted with the community revealed that there are over 168 community assets that are important to the quality of life in the DTES. These assets were both physical and intangible. Some of the most frequently mentioned assets (also gaps – see below) identified by the community included:

- affordable housing;
- low-cost and free food, community kitchens;
- social services and community organizations;
- the street;
- parks and recreation services, and safety;
- doctors, dentists, pharmacies, health services;
- institutions such as schools, libraries, etc.;
- physical structures such as plazas, heritage buildings;
- parks, places to gather, heritage buildings;
- libraries, community centres, childcare, adult learning.

Assets that couldn’t be mapped (intangible assets) included:

- strong sense of community;
- being close to friends and family;
- caring for others and being cared for;
- not being judged;
- employment;
- support;
- hope;
- being able to participate in the informal economy (binning, vending, etc.);
- being able to give input to decisions that affect the neighbourhood.

In addition to assets, DTES residents also identified gaps in their community that were needed to improve quality of life. For example:

- affordable housing – especially for vulnerable populations;
- access to healthy and affordable food;
- employment opportunities – including low barrier;
- social spaces and gathering places;
- educational and training opportunities;
- supports and services – especially for people struggling with mental health and addictions.

For a list of all of the assets, gaps, hopes and fears provided by participants during the community input phase, refer to Appendix D.
2012 City of Vancouver Asset Inventory

In 2012, as part of the preparation for the SIA and DTES planning process, City staff undertook an inventory of community assets in the DTES (refer to section 5.0). These illustrated assets complement community identified assets (above) by displaying the locations, such as housing, parks, childcare, free and low-cost meals.\footnote{Assets are as complete as possible and based on reliable data sources available in 2012. There may be errors or unintended omissions which will be addressed through the Community Based Asset Mapping Program (refer to section 6.0).} The \textit{2013 Downtown Eastside Local Area Profile} contains all maps produced during the inventory (refer to Appendix F).
“There used to be lots of services geared towards low-income but we’re losing them one by one.”
5.0 Assessing Potential Impacts of Development

Key Themes

To facilitate a structure for assessing impacts, the following seven theme areas were developed. These were based on the main areas of focus for the DTES Local Area Plan and connected to the building blocks of the emerging Healthy City Strategy. Input collected through the SIA process was categorized in this way to enable consistent data collection, analysis and policy development.

Each theme is characterized by impact areas which will be linked to regular assessments monitoring change and the effect and/or benefits of development on low-income residents over time. (Refer to Section 8.0 for details.) The key themes are:

- Our Homes;
- Our Livelihoods;
- Our Places;
- Our Well-Being: Early Learning and Care, Education, Recreation, Parks;
- Our Well-Being: Food Access and Security;
- Our Well-Being: Health and Social Services;
- Our Well-Being: Inclusion, Belonging and Safety.
Theme 1: Our Homes

What We Know

Housing is a social determinant of health and well-being. Three components ensure adequate housing: affordability, condition and supports. The range and affordability of housing choices available in the DTES has broad impacts on the health of residents. Ensuring there is a home for everyone is an ongoing goal for the City and is essential to building a socially sustainable community. A lack of basic sanitation and ongoing plumbing issues, the presence of mold and vermin, and poor heating and ventilation are just a few of the factors that impact the health and well-being of DTES residents living in inadequate housing. Insufficient social networks, food security and mental health and addictions supports also impact the ability for people to remain housed for the long-term.

An estimated 15,300 housing units are located in the DTES including both market housing (56 per cent) and non-market (44 per cent). Housing types include: single room occupancy (SRO) hotels, self-contained apartments, single-family houses, condominiums and supportive housing units. The average occupancy rate is 1.14 persons per unit, reflecting the high number of single people living in the neighbourhood.

In 2006, 88 per cent of residents rented homes (compared to 52 per cent for the city overall) and 12 per cent owned. More than half of DTES renters (58 per cent) pay more than 30 per cent of their household income on shelter costs compared to 45 per cent in Vancouver overall.

SRO hotels make up an important component of the total housing stock in the DTES, especially for individuals on income assistance and others living on a fixed income. In 2013, there were approximately 1,500 non-market SRO units owned and operated by a non-profit or government agency in the neighbourhood. In addition, there were approximately 4,000 private SRO units in the DTES (refer to map below). Almost all of SRO rooms are not self-contained, meaning they have shared bathrooms and kitchen facilities.
In addition to the 1,500 non-market owned SRO units, approximately 5,200 social housing units are located in the DTES. This social housing houses a mix of low and moderate incomes, including seniors, singles, families and others who may or may not require additional mental health and addiction supports (refer to map below). An additional 286 units of supportive social housing are currently under construction and are expected to be completed in 2014.

Of the total 1,600 homeless in the city, 731 are located in the DTES – 83 per cent of these individuals are living in shelters and 17 per cent live on the street. Emergency shelters fulfill short-term need for people when longer-term housing is not an option. Year-round and temporary or seasonal shelters operate throughout the DTES based on different shelter programs (funded by senior governments). As of November 2013, there were 14 shelters located in the DTES, including one seasonal, two temporary (Stanley New Fountain and First United Church), and two open during extreme weather.
### Summary of DTES Housing Assets, Gaps and Targets

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2013)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Housing - SROs</td>
<td>1,500</td>
<td>Meet the needs of those who are:</td>
<td>By 2043:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• homeless</td>
<td>• 3,000 units of secured market rental housing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• singles with low income</td>
<td>• 8,850 units of new affordable homeownership</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• families with low income</td>
<td>• 4,400 new social housing units inside the DTES</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• people with mental health and addictions</td>
<td>• 3,350 social housing units outside the DTES</td>
</tr>
<tr>
<td>Social Housing</td>
<td>5,200</td>
<td></td>
<td>• 1,650 rent subsidies</td>
</tr>
<tr>
<td>Private SROs</td>
<td>4,000</td>
<td></td>
<td>• 2,200 upgrades to single-room occupancy (SRO) units</td>
</tr>
<tr>
<td>Other Market Housing</td>
<td>4,600</td>
<td></td>
<td>• 1,900 scattered supportive housing site</td>
</tr>
</tbody>
</table>

Source: City of Vancouver, 2012

### What We Heard

“I hope to have a self-contained place with a kitchen, bathroom, with self-esteem. I fear we won’t get it and we’ll be pushed out.”

The need for more affordable housing options is a major concern for vulnerable residents in the DTES. Most people rent and many cannot afford to pay average market rental rates. For those who have a stable place to live, their homes are their biggest asset. Fears of not being able to maintain housing and of being displaced dominate many residents’ every day thoughts. Many people linked their housing situation to other important things such as their health, social networks, employment status and views about the future. People said they need more affordable and adequate family housing, seniors housing, housing appropriate for ‘street families’ and extended Aboriginal families.

A large number of low-income residents felt that their living spaces were inadequate due to a combination of factors: size, rent, physical condition, lack of a sense of safety and/or pest infestations. Some low-income parents felt that their housing was inadequate. Having an adequate living space with bathrooms and cooking facilities was of the utmost importance to low-income residents. For those living in SROs, some felt unsafe and would like to live in neighbourhoods outside of the DTES if they had the choice.

Lack of affordable and adequate housing is also the basis for most of the residents’ fears around new development in the neighbourhood. The biggest fear residents have about housing is that they will lose their current housing or be displaced from the neighbourhood due to new development and rising rents caused by gentrification.
Key gaps regarding housing in the DTES include:

- Strong need for more social housing
- Erosion of affordability for low-income people in privately owned SROs
- Need for urgent renovation and replacement of SROs with self-contained social housing
- High level of homelessness in the neighbourhood
- Lack of City tools to prevent displacement of low-income residents

Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordability</td>
<td>• Over half of DTES residents are low-income and many receive income assistance, disability benefits or seniors pension.</td>
</tr>
<tr>
<td></td>
<td>• Welfare recipients are allocated a minimum of $375/month for shelter. The availability of units renting at $375 impact housing outcomes for vulnerable groups and directly impact health and well-being.</td>
</tr>
<tr>
<td></td>
<td>• Private SRO room rents are not secured at $375 or rent-geared-to-income for low-income residents unless covered by a housing agreement.</td>
</tr>
<tr>
<td></td>
<td>• Ensuring enough affordable rental housing may impact housing outcomes for vulnerable groups in terms of taking pressure off existing rental stock.</td>
</tr>
<tr>
<td></td>
<td>• A vibrant and sustainable neighbourhood includes a range of affordable housing types, including social housing for vulnerable populations.</td>
</tr>
<tr>
<td>Condition</td>
<td>• Housing that is inadequate, unsuitable and lacks minimum safety standards leads to decreased well-being and general health.</td>
</tr>
<tr>
<td></td>
<td>• Private bathrooms and access to cooking facilities are important to the long-term health, safety and independence of residents.</td>
</tr>
<tr>
<td>Supports</td>
<td>• The ability to maintain housing is important to prevent patterns of homelessness.</td>
</tr>
<tr>
<td></td>
<td>• Approximately 2,100 people who are homeless or living in SROs have a serious mental health and addiction issue and require higher levels of support to access or remain in housing.</td>
</tr>
</tbody>
</table>
Theme 2: Our Livelihoods

What We Know

Poverty is the most important overarching issue for the majority of DTES residents. Rather than being defined solely by income level, poverty is a complex, extreme and diverse set of compounding layers, often generational, and includes: economic pressure, feeling of being beaten down, food insecurity, lack of adequate housing, mental distress/illness/addictions, physical ill health, social marginalization (Vancouver School Board 2014) and persistent and pervasive oppression.

When considering low income as an indicator of poverty, Vancouver has the highest share of low-income people (16.5 per cent) and the second highest growth rate of low-income individuals (6.7 per cent) compared to other Canadian cities (Conference Board of Canada 2011).

Low income is more prevalent in certain at-risk groups, many of whom live in the DTES. A recent House of Commons report on poverty identified 10 groups that were most at risk of experiencing low income: children, lone-parent families (particularly female lone-parent families), women, unattached individuals, seniors, Aboriginal people, people with disabilities, recent immigrants, visible minorities, and low-wage workers (Conference Board of Canada 2014).

There are approximately 19,500 people working in the DTES, most of whom commute into the area from elsewhere in the city. Many of these jobs are created by the neighbourhood’s 2,800 businesses and fall under the categories of professional scientific and technical; retail trade; manufacturing; and accommodation and food services. There are a significant number of social enterprises operating in the DTES (refer to map below). Four Business Improvement Areas have been established in the DTES: Strathcona, Gastown, Chinatown and, most recently, Hastings Crossing.
The proportion of DTES residents who are employed or looking for work is low compared to the city as a whole; in 2006 labour force participation was 46 per cent, compared to 66 per cent citywide. The unemployment rate in the DTES is 12.1 per cent compared to 6 per cent for the rest of the city. Of DTES residents who work, many are considered part of Vancouver’s working poor, meaning low-paid workers living in low-income situations. Key occupation categories for DTES residents include sales and service, trades, transport and equipment, business, finance and administration, arts, culture, recreation and sport.

Some DTES residents participate in the informal economy. This includes activities such as binning, street vending, panhandling, bartering or involvement in the sex trade. Although this economy is marginalized by mainstream society and has little formal recognition, it provides an income for many people that is essential to the attainment of their basic needs.

Thousands of DTES residents also hold down volunteer jobs and contribute a significant number of volunteer hours. Some volunteer opportunities provide food and training in return for hours worked. In 2012, 29 City-funded organizations in the DTES employed 2,075 volunteers who contributed over 100,000 hours to doing community work. This volunteer work is an important part of the survival economy and helps residents make ends meet as well as contribute to their community.

There is a high concentration of low-income artists in the DTES. Artists’ median earnings in the V6A postal code (a large portion of the DTES planning area) were $14,300 compared to the $17,400 median income earned by artists living in the city overall. Cultural workers in the same area also had lower median incomes ($18,100) when compared to the rest of the city ($28,000) (Hill 2010).

Key gaps regarding livelihoods in the DTES include:

- More than half of all DTES households have low incomes
- A large portion of residents experience poverty through living on inadequate fixed incomes and have low purchasing power
- Income Assistance rates are inadequate and do not cover the cost of basic necessities such as food and shelter
- Lack of job skills and local job opportunities especially for low-income residents who deal with multiple barriers to employment
- The informal ‘survival’ economy (e.g. binning, vending, drug dealing, survival sex trade, panhandling) is a critical component of the lives of many residents
- Support for local art and artists
- Over half of DTES residents were considered low-income in 2005 (Statistics Canada 2006). The median household income of the DTES is $13,691, less than 30 per cent of the city’s median household income ($47,299). The proportion of residents with low incomes ranges from 48 per cent in Strathcona to 83 per cent in Victory Square. Approximately 7,500 people are receiving Income Assistance or Disability Benefits.
Summary of DTES Income/Jobs Assets, Gaps and Targets

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2012)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Enterprise</td>
<td>NA</td>
<td>• Income security and purchasing power</td>
<td>(Draft) Healthy City Strategy (to 2025)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Affordable retail</td>
<td>Reduce the City’s poverty rate by 75%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Opportunities to earn income</td>
<td></td>
</tr>
<tr>
<td>Business Improvement Area</td>
<td>4</td>
<td></td>
<td>Economic Development Plan (to 2016)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Strong partnerships with key agencies involved in enhancing the local economy;</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>More people who work in the neighbourhoods in which they live</td>
</tr>
<tr>
<td>City-funded organizations funding</td>
<td>29</td>
<td></td>
<td>Greenest City Action Plan (to 2020)</td>
</tr>
<tr>
<td>volunteers</td>
<td></td>
<td></td>
<td>Double the green jobs by 2020</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Double the businesses engaged in green business practices by 2020</td>
</tr>
<tr>
<td>Businesses</td>
<td>2,800</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employees/jobs</td>
<td>19,500</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: City of Vancouver, 2012

What We Heard

“I’m here out of necessity – because of my income.”

The ability to make enough money to survive is a key concern of low-income and vulnerable residents in the DTES. Poverty, low incomes and low purchasing power underlay most of the challenges vulnerable residents face in their day-to-day lives. A disproportionate number of residents receive social assistance that is not enough to cover their most basic of needs.

A large number of residents volunteer at local non-profit agencies where they help with building maintenance, cleaning and food preparation, others contribute to the community by serving as board members at the many peer-run associations in the DTES. These opportunities provide low-income residents with the ability to purchase basic necessities such as food and toiletries. Many want to work, but face barriers to formal employment such as physical disabilities, mental health issues and addictions. Many desire skills training and employment supports. Low-income residents who are unemployed need access to employment centres that provide wrap-around care in order to help prepare them to look for work.

Others rely on informal economies such as binning, vending, panhandling, drug dealing and survival sex work to make ends meet. The DTES street market is a significant neighbourhood asset because of its role in giving residents a dignified and legitimate manner in which they can earn a small amount of money to supplement their income.
Accessing neighbourhood shops without feeling discriminated against is important to low-income residents. Some feel excluded from new businesses in the neighbourhood because they are either too expensive or because they feel unwelcome. Low-income residents value local businesses that regularly give them access to affordable goods in a dignified manner.

The biggest fear that residents have around livelihoods is that they will no longer be able to afford to live in the neighbourhood and access its shops and retail services. They also fear that their incomes will prevent them from being able to meet their basic needs and maintain their housing. Artists fear that the existing spaces for low-income artists will be lost and that they won’t be replaced.

### Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail Affordability and Access</td>
<td>• Many DTES residents rely heavily on local shops and services because of a lack of transportation and other barriers.</td>
</tr>
<tr>
<td></td>
<td>• The ability to afford and access local shops and services is vital to the long term tenure of vulnerable populations in the DTES.</td>
</tr>
<tr>
<td>Employment Opportunities</td>
<td>• Over half of DTES residents are not part of the formal workforce.</td>
</tr>
<tr>
<td></td>
<td>• The availability of work opportunities for low-income residents who are capable of working could lead to future long-term employment.</td>
</tr>
<tr>
<td></td>
<td>• Being employed can contribute to a better overall quality of life.</td>
</tr>
<tr>
<td>Local Hiring</td>
<td>• Many vulnerable groups in the DTES face significant barriers to employment.</td>
</tr>
<tr>
<td></td>
<td>• Local hiring practices could lead to better employment outcomes for vulnerable groups.</td>
</tr>
<tr>
<td>Low-Income Artist Space</td>
<td>• Having space available for low-income artists to create and sell art is important for artists to remain in the neighbourhood.</td>
</tr>
<tr>
<td>Informal Economies</td>
<td>• Informal economies (e.g. recycling/binning) are equally as important to vulnerable residents of the DTES as are formal ones.</td>
</tr>
<tr>
<td></td>
<td>• Having general support for these is important to the financial stability of low-income community members.</td>
</tr>
<tr>
<td>Income Security and Financial Supports</td>
<td>• Income security and financial supports such as income-assistance, low-barrier banks and credit in stores are important for residents with low incomes.</td>
</tr>
<tr>
<td></td>
<td>• The availability of such supports or space for such supports has a positive effect on the financial stability and overall well-being of vulnerable groups.</td>
</tr>
</tbody>
</table>
**Theme 3: Our Places**

**What We Know**

The health of people, places, and the environment are inextricably linked. A well-planned built environment is critical for the health and well-being of residents. A vibrant social environment should provide accessible and shared spaces where residents can meet, learn, access services, relax and enjoy themselves. The benefits of nature in an urban setting also impact the well-being of communities. Easily accessible green spaces (see map below) can improve social cohesion by providing sites for interaction and shared activities.

There are nine city parks in the DTES ranging in size and type: Victory Square, Pigeon, Wendy Pool, Dr. Sun Yat-Sen, Thornton Extension, Oppenheimer, MacLean, Strathcona, Strathcona Linear (refer to map below). For the DTES, including park spaces in and adjacent to the community, there are 1.65 hectares of park space per 1,000 residents. The central, built-up core of DTES has little space for relaxation and active recreation, apart from Oppenheimer Park.

The ways in which we move around our neighbourhood and city and get from our homes to work, school, appointments and social gatherings have a significant impact on our health, as well as on the health of our communities and of the larger environment in which we live. DTES residents take more trips to work by walking, cycling, or transit (65 per cent compared to 41 per cent citywide) and less by car, motorcycle, or taxi (35 per cent compared to 59 per cent).

The DTES is home to a large number of vulnerable pedestrians including seniors, families with children, people with disabilities, people living with mental illness and addictions, wheelchair users and residents dependent on walkers and other forms of mobility assistance. A 2009 study by researchers at Simon Fraser University and the University of British Columbia found that a section of Hastings Street in the DTES was the most dangerous place for pedestrians in Vancouver and 10 per cent of all pedestrian injuries happen in this neighbourhood.
The heritage assets of the DTES are significant, both in terms of the spiritual memories and intangible values to the communities and the tangible built form of various structures in the area. There are approximately 500 buildings in the area currently listed on the City’s Heritage Register, accounting for nearly 20 per cent of all the buildings on the register.

Access to basic needs, including access to bathrooms, are a particular concern for residents in the DTES because of the rate of homelessness and the SRO stock with inadequate bathroom facilities. In addition to City facilities such as libraries and community centres, many agencies provide access to toilet facilities (refer to map below).

Key gaps regarding places in the DTES include:

- Feelings of exclusion from public spaces
- Improving the streetscape (public realm, street furniture) and public gathering spaces like parks and plazas
- Walkability, pedestrian safety and access to transit
- Transportation improvements such as bus shelters, bike lanes and transit
- Reviving and strengthening arts and culture through commercial studio space, artist live/work spaces
- Restoring heritage buildings and protecting Gastown and Chinatown.
Summary of DTES Places Assets, Gaps and Targets

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2012)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parks</td>
<td>9</td>
<td></td>
<td>(Draft) Healthy City Strategy (to 2025)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Public spaces and street life</td>
<td>Increase public participation and community engagement in arts and culture by 25% over 2014 levels;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Lighting, clean streets, benches</td>
<td>Every Vancouver neighbourhood has a Walk Score of at least 70</td>
</tr>
<tr>
<td>Plazas</td>
<td>NA</td>
<td></td>
<td>Greenest City Action Plan (by 2020)</td>
</tr>
<tr>
<td>Public toilets</td>
<td>24</td>
<td></td>
<td>Make the majority of trips on foot, bike and transit by 2020</td>
</tr>
<tr>
<td>Heritage Buildings</td>
<td>500</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: City of Vancouver, 2012

What We Heard

“Accessibility to those things that are in the area – streets, sidewalks and access to buildings is important.”

The way DTES residents interact with and feel about the buildings, roadways, trails, transit networks and parks has both direct and indirect consequences on their health and well-being. This is especially true for low-income residents who, due to the type of housing they live in, or their lack of adequate housing, spend a lot of time in the public realm and on the street.

The street, itself, is a vital asset for many low-income people. Street infrastructure, streetscape aesthetics and general cleanliness are important to residents. Many low-income DTES residents say that there is a lack of street furniture in the neighbourhood and that there needs to be improvements in general cleanliness and utility of the streetscape. Basic necessities like public phones and bathrooms are seen as gaps in the current streetscape.

Due to a high number of singles in the DTES and inadequate living spaces, many residents expressed the need for more public spaces to socialize and gather—especially at night. Various streets and intersections are known as community ‘hearts’ for the low-income community and there is a strong desire to protect those spaces. Of particular importance are spiritual, historic, cultural and green spaces which are highly valued by vulnerable residents.

There are many fears in the neighbourhood concerning the loss of special places and growing feelings of exclusion from neighbourhood spaces. There is also a certain level of discomfort with the high-end aesthetics and decor of new spaces and with the perceived demeanor of new residents who appear to have higher incomes. The visual elements of neighbourhood change cause some low-income people to feel uneasy and fear for their ability to remain in the area over the long-term.
## Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
</table>
| Community Fit, Urban Design and Scale | • Whether or not a development fits with its surrounding community affects vulnerable residents’ sense of community, belonging and inclusion.  
                             • Significant changes in the urban design and scale of a neighbourhood could have effects on the people living in the neighbourhood and utilizing the surrounding street space. |
| Heritage and Cultural Conservation | • The DTES is one of Vancouver’s oldest neighbourhoods and home to many of Vancouver’s urban Aboriginal population and cultural groups.  
                             • Whether or not the historic and cultural aspects of the neighbourhood are preserved could affect residents’ connection to the area in which they live. |
| Public Space and Interaction | • Several aspects of the public realm can have a direct effect on the health and well-being of community members.  
                             • Enhanced opportunities for interaction could have an effect on the general well-being of vulnerable residents.                                        |
| Beautification and Green Space | • The cleanliness, aesthetics and general safety of the public realm and streetscape could impact the lives and general well-being of vulnerable residents.  
                             • The amount of green space in the DTES could have a direct effect on the well-being of vulnerable residents.                                |
| Street Furniture and Infrastructure | • The street is an important aspect of many vulnerable residents’ lives and is often the only space residents have to socialize and spend time.  
                             • The street is often referred to as ‘the living room’ of the DTES.  
                             • The availability of street furniture and the accessibility of the street for people with mobility issues are important for the lives and general well-being of vulnerable residents. |
| Transportation | • Barriers to accessing transportation prevent many vulnerable groups from being able to conduct their daily business in a dignified and efficient way.  
                             • Transportation amenities and access could improve the lives and general well-being of vulnerable residents who rely on it. |
Theme 4: Our Well-Being: General
(Early Learning and Care, Education, Recreation)

The City’s goal of building a “Healthy City for All” means continually improving the conditions that enable residents to enjoy the highest level of health and well-being possible. Achieving a healthy neighbourhood for all means addressing significant health and social issues by securing existing community assets and leveraging new ones.

Although the elements of health and well-being are many, the SIA focused on four sub themes:

- General (Early Learning and Care, Education, Recreation);
- Food Access and Security;
- Health and Social Services;
- Inclusion, Belonging and Safety.

What We Know (Early Learning and Care, Education, Recreation)

Early childhood development, education and learning opportunities and access to recreation and physical activity are all elements necessary for general health and well-being. Children who have a good start in life do better at school, secure better paid jobs, and enjoy better physical and mental health as adults. The early years are therefore a time when investment can have a profound and long-lasting impact on the health and well-being of individuals and communities.

Availability and affordability of quality early learning and care opportunities are key issues for all families but especially challenging for more vulnerable families in the DTES. Culturally relevant services for Aboriginal children and families are limited, and the affordability of childcare is a concern for all families.

In 2013 there were 384 childcare spaces serving children ages 0-12 in the DTES, including preschool, (refer to map below). Current estimates project a need of 183 spaces to meet existing and future demand particularly for infants and toddler and school age children (refer to DTES Plan).
A frequently used measure of child vulnerability is the Early Development Index (EDI). Vulnerability is measured on five scales: physical, social, emotional, language and communication. The Strathcona Local Area\(^{16}\) has the highest per cent of children vulnerable on one or more scales in Vancouver. In 2011-13, 52 per cent of children were vulnerable, compared to 35 per cent citywide.

Formal educational attainment in the DTES is lower when compared to citywide rates. Only 17 per cent of DTES residents have a university degree compared to 39 per cent citywide. Conversely, 38 per cent of DTES residents have not attained a high school diploma compared to a rate of 17 per cent citywide. There are several educational institutions in the DTES including two elementary schools, college and university campuses and a private film school. In addition, special programs exist that provide one-to-one and small group instruction to isolated learners through outreach, literacy and information services. There are also various Aboriginal and adult education resources in the neighbourhood.

Two Vancouver Public Library branches are located in the DTES, the Carnegie Branch and Strathcona Branch. A new Strathcona library (scheduled for completion in 2015) will include affordable housing for single mothers and their children above the street-level library. Both Carnegie and Strathcona libraries are well-used by community members and the foot traffic at libraries in the DTES is increasing while citywide foot traffic rates are staying the same.

There are three City funded community centres in the DTES: Carnegie Community Centre, Ray-Cam Co-Operative Centre and Strathcona Community Centre. All three have fitness facilities and community recreational programming spaces that are well used by community members. The volunteer program at the Carnegie Centre makes it possible to offer recreation programs free of charge. There are also independent programs designed to increase the participation of children in organized sports and a local basketball league. In addition, the City funds the Evelyne Saller Centre, which assists residents with access to basic needs, quality of life and well-being.

**Key issues regarding general well-being in the DTES include:**

- high levels of child poverty and vulnerability;
- inadequate access to affordable childcare (especially for high-risk families);
- barriers to accessing recreational facilities (e.g. financial, lack of info, mobility, not kid friendly).

\(^{16}\) The Strathcona Local Area, whose two elementary schools are located within the DTES, excludes part of Gastown, Chinatown and Victory Square. The majority of children in the DTES are accounted for in the Strathcona local area because most children in the DTES live in Strathcona and Oppenheimer (Statistics Canada 2006).
Summary of DTES Early Learning and Care, Education, Recreation... Assets, Gaps and Targets

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2012)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Libraries</td>
<td>2</td>
<td>• 600 childcare spaces</td>
<td>(Draft) Healthy City Strategy (to 2025)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Affordability of childcare</td>
<td>At least 85% of Vancouver’s children are ready for school when they enter kindergarten;</td>
</tr>
<tr>
<td>Community Centres</td>
<td>3</td>
<td>• Child/family friendly spaces</td>
<td>Increase the % of Vancouver residents who participate in lifelong learning opportunities by an average of 25% across all learning participation indicators over 2014 levels;</td>
</tr>
<tr>
<td>Childcare Centres</td>
<td>9</td>
<td>• Family supports for special needs</td>
<td>Greenest City Action Plan (to 2020)</td>
</tr>
<tr>
<td>Childcare Spaces</td>
<td>384</td>
<td>• Lifeskills training</td>
<td>All Vancouver residents live within a 5 minute walk of a park or other green space</td>
</tr>
<tr>
<td>Schools</td>
<td></td>
<td>• Learning centres</td>
<td>DTES Local Area Plan (to 2041)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Literacy projects</td>
<td>292 childcare spaces</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Leisure access</td>
<td>Economic Development Plan (to 2016)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Recreation opportunities</td>
<td>Enhance the affordability and availability of daycare for working families;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Green space</td>
<td>Increased daycare spaces</td>
</tr>
</tbody>
</table>

Source: City of Vancouver, 2012

What We Heard

“We need kid-friendly spaces. People are respectful when they see kids.”

Maintaining well-being is a challenge for many vulnerable DTES residents who face multiple barriers in their everyday lives. While they value education, physical activity and access to nature, vulnerable residents face obstacles in attaining them.

Many vulnerable parents worry for their children’s futures and for their ability to provide them with all of their basic needs. For lone parents and parents with special needs children, this is an even bigger challenge. Child-friendly spaces and accessible activities for children are seen as a gap for low-income families.

Many low-income residents would like to get higher education but face obstacles and barriers in doing so. Lifeskills programs are highly valued by vulnerable residents and a loss in these types of programs significantly affects them.
Some low-income residents also face barriers accessing recreation and leisure opportunities for financial reasons or because of other barriers. Many said that they like to ride their bikes, play sports, go for walks along the seawall, swim in pools (in other neighbourhoods) and go to the gym.

Green space in the neighbourhood is identified as one of the biggest assets but also as a gap. Low-income residents highly value their local parks and gardens but wish there were more and that they would have better access to them. Green space in the DTES is well used and important for many of the residents who don’t have front lawns, patios or personal gardens.

Overall, residents fear losing opportunities for their children, losing the chance to further their education, losing their community recreation facilities and programs and losing community parks and gardens.

### Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education and Learning</strong></td>
<td>• Many DTES residents are eager to expand their education and learning but face more obstacles than the average Vancouverite in doing so.</td>
</tr>
<tr>
<td></td>
<td>• Access to education and learning opportunities affect the well-being and overall health of vulnerable residents.</td>
</tr>
<tr>
<td><strong>Aboriginal Culture, Education and Learning</strong></td>
<td>• The availability and access to Aboriginal culture, education and learning is important to the well-being of Aboriginal residents.</td>
</tr>
<tr>
<td><strong>Recreation and Physical Activity</strong></td>
<td>• Being able to access recreation and physical activity in spite of economic and/or mobility issues has a positive effect on overall health and well-being of vulnerable residents.</td>
</tr>
<tr>
<td><strong>Childhood Development, Youth and Families</strong></td>
<td>• Children, youth and families in the DTES need access to healthy, safe and affordable spaces and opportunities for physical, social, mental, emotional and spiritual development.</td>
</tr>
<tr>
<td></td>
<td>• Enhanced childhood development and support for youth and families benefit the long term health and well-being among vulnerable groups.</td>
</tr>
<tr>
<td><strong>Access to the Outdoors and Green Space</strong></td>
<td>• Parks, community gardens and other green spaces are important to the physical, mental and spiritual health of vulnerable DTES residents.</td>
</tr>
<tr>
<td></td>
<td>• The amount and conservation of green space in the neighbourhood and the access that vulnerable groups have to it has a direct effect on their overall health and well-being.</td>
</tr>
</tbody>
</table>
Theme 5: Our Well-Being: Food Access and Security

What We Know

Local and sustainable food fuels healthy and vibrant communities. It comprises an important part of the local economy, and acts as a powerful catalyst for fostering inclusive neighbourhoods. The City of Vancouver defines a just and sustainable food system as one in which food production, processing, distribution, consumption and waste management are integrated to enhance the environmental, economic, social and nutritional well-being of our city and its residents. Some of the assets that support the local food system are community gardens, urban farms, community kitchens, community food markets, farmers markets, community composting sites, street food vendors and neighbourhood food networks.

In the DTES community gardens and other forms of urban agriculture are important neighbourhood gathering places that promote sustainability, livability, urban greening, community building and food production. There are eight food-producing gardens with approximately 650 plots on City, park, school and private lands in the DTES. SoleFOOD, a non-profit organization that aims to employ DTES residents, operates two urban farms in the DTES. Food that has been redistributed by this organization feeds over 60,000 people a month in the DTES (refer to map below).

In spite of these food assets, the DTES struggles with disproportionate rates of food insecurity when compared to the rest of the city. Many residents lack sufficient income to pay for minimum dietary requirements, limiting their ability to access nutritious foods and making them nutritionally vulnerable.

In addition, the DTES has the highest rates of nutrition-related illnesses in the city and the perpetuation of the cycle of malnutrition is a great challenge. Inadequate housing further exacerbates food insecurity and many of the area’s residential units lack basic cooking facilities and cold and dry food storage.
Due to these barriers to proper food security and access for low-income communities, the DTES has the highest concentration of free and charitable food in Vancouver. There are numerous free or low-cost meal services run by social service organizations, housing providers, the health authority and faith-based groups (refer to map below).

Despite the strong foundation of food system assets that Vancouver enjoys, there are a number of gaps and vulnerabilities. These challenges include inequitable access to healthy and affordable food and poor health outcomes for low-income earners. Added to these challenges are disturbing trends across Canada including a growing income gap, social polarization, child poverty, unaffordable housing, and rising rates of hunger and preventable disease. These issues mean that bolstering the resilience of Vancouver’s food system is critical.

In 2009, DTES residents and organizations identified seven DTES food solutions (City of Vancouver 2009)

- Creating nutritional and food quality standards (fresh protein, fruits and vegetables)
- Menu and recipe development
- Food procurement (collective buying from local farmers and a coherent, quality food donation system)
- Food preparation and processing (creating diverse food-related jobs)
- Food distribution (no more lineups and increased food distribution points)
- Professional food industry expertise (menus and kitchens guided by creative chefs)
- Greening DTES kitchens (food composting and recycling in collaboration with DTES social enterprises and creating diverse food related jobs)
Summary of DTES Food Assets, Gaps and Targets

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2012)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Locations serving Low Cost/Free Food</td>
<td>22</td>
<td>• Disproportionate food insecurity, insufficient income to pay for dietary requirements;</td>
<td>(Draft) Healthy City Strategy (to 2025) Increase city-wide and neighbourhood food assets by minimum of 50% over 2010 levels (to 2020) (Greenest City Action Plan)</td>
</tr>
<tr>
<td>Community Kitchens</td>
<td>26</td>
<td>• Limited access to nutritious foods;</td>
<td></td>
</tr>
<tr>
<td>Community Garden plots</td>
<td>650</td>
<td>• Affordable food stores;</td>
<td></td>
</tr>
<tr>
<td>Orchard</td>
<td>1</td>
<td>• Income security and purchasing power;</td>
<td></td>
</tr>
<tr>
<td>Urban Farms</td>
<td>2</td>
<td>• Nutritious free/low cost prepared food;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Kitchen facilities/ community kitchens;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Community gardens</td>
<td></td>
</tr>
</tbody>
</table>

Source: City of Vancouver, 2012

What We Heard

“We need an affordable grocery store.”

Many DTES residents do not have adequate food security and rely heavily on the charitable food sector to attain this basic need. Some residents spend a lot of time waiting in food line ups throughout the day and many are constantly worried about where their next meal is going to come from. Compounding this stress is the fact that the charitable food model does not often meet nutritional needs, especially for the many vulnerable residents with compromised immune systems due to HIV and AIDS, Hepatitis C and diabetes.

Because of low incomes and in some cases no income, community members value any low-cost or free food options that exist in the neighbourhood. Many cannot afford to eat in restaurants, especially ones with high-cost meals. Businesses that sell food at discounted prices or at wholesale prices are vital, especially for low-income families. Prepared foods are also important for residents because many live in housing that lacks basic cooking equipment and refrigeration.

For the low-income residents who can afford to go to local restaurants once in a while, many expressed the need to feel more welcome. Small food businesses that have low prices and cater to a low-income clientele are seen as neighbourhood assets. Chinatown, in particular, plays a large role in food access for low-income residents. Many are able to get affordable and fresh produce at the shops there and feel comfortable doing so.

Fears around the availability and affordability of food are prevalent in the DTES. Low-income residents also fear the effect development may have on restaurant prices in the future.
Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low-Cost and Free Food Options</td>
<td>• Access to low-cost and free food options could impact food security and access for vulnerable groups.</td>
</tr>
<tr>
<td></td>
<td>• Loss of affordable food could also alter the ability for a low-income person to pay for other basic needs, including housing.</td>
</tr>
<tr>
<td>Aboriginal Foods</td>
<td>• Being able to access culturally appropriate foods is important to the overall health and well-being of Aboriginal people in the DTES.</td>
</tr>
<tr>
<td>High-Cost vs Low-Cost Restaurants</td>
<td>• Presence of low-cost restaurant options increases the possibility of low-income patronage of local restaurants. Being able to patronize local restaurants promotes feelings of belonging and inclusion.</td>
</tr>
<tr>
<td>Food Assets</td>
<td>• The presence of neighbourhood food assets (e.g. low cost grocer) could strengthen food security and access in the neighbourhood.</td>
</tr>
<tr>
<td></td>
<td>• A lack of food assets could contribute to an unjust and unsustainable food system.</td>
</tr>
<tr>
<td>Nutritious and Quality Food</td>
<td>• Many DTES residents lack access to nutritious food.</td>
</tr>
<tr>
<td></td>
<td>• Residents who have chronic illness, mental illness or dependency on drugs often have special dietary requirements.</td>
</tr>
<tr>
<td></td>
<td>• The quality of the food that is available to low-income residents could result in future health consequences for them.</td>
</tr>
<tr>
<td>Kitchen Facilities</td>
<td>• Some DTES residents don’t have access to cooking facilities and cannot prepare their own food,</td>
</tr>
<tr>
<td></td>
<td>• Having cooking facilities is essential for the long-term food security of vulnerable people which effects their overall health and well-being.</td>
</tr>
</tbody>
</table>

Theme 6: Our Well-Being: Health and Social Services

What We Know

While recognizing that most health and well-being is generated outside of the health care system, high-quality, accessible, and inclusive health and other types of services remain an important part of a healthy city. This is particularly true for more vulnerable populations who may face multiple barriers to accessing services. Connecting to care can be a critical first step on the long road to greater mental and physical health and well-being.

Although Vancouver is a city known for its healthy assets, many groups across the city live in poverty, struggle with mental health and addictions, and are unemployed. For various reasons throughout its history, the DTES continues to be the epicentre of many of the city’s most serious health and well-being challenges.
There are many complex challenges affecting low-income DTES residents, including:

- having more than one chronic illness;
- mental illness and addiction;
- poor housing options and low income;
- limited access to ‘regular’ primary health care resources;
- lack of coordinated care between community providers and programs; and between community and hospital and specialist care;
- high emergency room use: 31,800 per 100,000 people in 2010, compared to the citywide rate of 21,141 visits per 100,000.

According to Vancouver Coastal Health, overall health outcomes for people living in the DTES have improved over the last decade but still remain a concern. Life expectancy, for example, has increased in the DTES over the last few years but men still live much shorter lives than elsewhere in the province. While life expectancy for men living in the DTES has increased 8.1 per cent, from 71.4 years to 79.5 over the last decade, it still remains below the city average of 82.6 years. While the physical health of the DTES population is improving, many indicators of health still show worse rates in the DTES compared to Vancouver and BC averages.

There are slightly fewer medical practitioners at a ratio of 125.6 medical practitioners per 100,000 people in the DTES compared to 136.6 citywide. As for health infrastructure, there are 24 doctor’s offices or primary healthcare clinics (three of which are particularly accessible for low-income residents), 13 dentists (two of which are particularly accessible for low-income residents), 19 pharmacies, three long-term care facilities, two mental health and substance use services, and one supervised injection site (refer to map below). Emergency care for DTES residents is typically provided at St.Paul’s Hospital, outside the neighbourhood in the downtown core.

Specialized services in the neighbourhood include 14 targeted Aboriginal services, 30 drug-use and addictions services, 24 mental health services and 32 for people with disabilities. There are also 13 faith-based social services in the neighbourhood.
Summary of DTES Health and Social Services Assets, Gaps and Targets

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2012)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians/clinics</td>
<td>23</td>
<td>• Primary health specialists;</td>
<td>(Draft) Healthy City Strategy (to 2025)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Free dental;</td>
<td>All Vancouverites are attached to a primary health care provider/family doctor</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Low barrier, on demand mental health, addictions and detox;</td>
<td>Increase the % of Vancouverites who report having access to services when they need them by 25% over 2014 levels</td>
</tr>
<tr>
<td>Dentists</td>
<td>9</td>
<td>• Emergency crisis services;</td>
<td></td>
</tr>
<tr>
<td>Pharmacies</td>
<td>20</td>
<td>• Services for women, seniors, children, youth, sex workers, and Aboriginal people.</td>
<td></td>
</tr>
<tr>
<td>Hospice</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: City of Vancouver, 2012

What We Heard

“We need drop-ins. The places we have now are not adequate. There needs to be a 24-hour drop-in – a place for people to go at whatever time.”

Many vulnerable DTES residents rely primarily on community social and health service providers to attain their basic needs and to address their health issues. Having services that are specialized and accessible is very important to community members who often face obstacles when attempting to access services. Drop-in centres are a significant community asset for low-income residents.

Services that are tied to a resident’s housing, local community centre or that are accessible at the street level are invaluable as are services that distribute free necessities such as clothing and toiletries.

There is a great need for specialized services in the DTES for the various vulnerable populations that exist there. Low-income residents with addictions and/or mental health challenges need more support services to help them recover from or cope with their issues.

The biggest fear around social and health services and resources is that they will be shut down as a consequence of new development and that vulnerable people will suffer as a result. Some people fear that the health and social services they rely on may be moved outside of the DTES and that they will not be served in a respectful and dignified way.
### Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Primary Healthcare</strong></td>
<td>• Vulnerable groups in the DTES often deal with chronic health conditions that require high quality and accessible primary healthcare.</td>
</tr>
<tr>
<td></td>
<td>• The ability to access such care is essential to their health and well-being.</td>
</tr>
<tr>
<td><strong>Basic Needs Services and Supports</strong></td>
<td>• Vulnerable groups in the DTES rely heavily on health and social services and supports to attain their basic needs (i.e. food, clothing, shelter, toiletries, laundry, showers, social support, advocacy etc).</td>
</tr>
<tr>
<td></td>
<td>• The availability of basic needs services and supports for vulnerable people is necessary for the overall health and well-being of vulnerable residents.</td>
</tr>
<tr>
<td><strong>Aboriginal Health and Social Services</strong></td>
<td>• Being able to access social services and healthcare that recognize and support Aboriginal people’s cultural needs is vital to overall health and well-being.</td>
</tr>
<tr>
<td><strong>Specialized Services and Supports</strong></td>
<td>• Many vulnerable residents of the DTES need specialized services and supports in order to ensure their overall health and well-being.</td>
</tr>
<tr>
<td></td>
<td>• The availability of specialized services (i.e. specifically designed for people with disabilities, women, drug users, seniors, people with mental health conditions, etc) is critical in the DTES.</td>
</tr>
<tr>
<td><strong>Quality of and Access to Supports</strong></td>
<td>• Many DTES residents need high quality, and low-barrier access to services.</td>
</tr>
<tr>
<td></td>
<td>• The quality of community and specialized services provided to vulnerable groups and their ability to access them could lead to impacts on general health and well-being.</td>
</tr>
<tr>
<td><strong>Employment Services and Supports</strong></td>
<td>• Vulnerable groups often need special supports when getting ready to look for employment.</td>
</tr>
<tr>
<td></td>
<td>• Being able to attain employment supports could lead to employment and better overall health and well-being.</td>
</tr>
</tbody>
</table>
Theme 7: Our Well-Being: Inclusion, Belonging and Safety

What We Know

DTES residents value strong social networks, acceptance of diversity and strong sense of community. DTES residents often congregate in the public realm as a way to socialize and connect. Many residents have “street families” in addition to biological ones. The arts are also seen to play a central role in the social health of the community and help people feel like they belong and are included.

Schools, workplaces, community organizations and other settings play important roles in fostering social interaction, providing a sense of belonging and connecting community. These places also support health and well-being, volunteering, a robust non-profit sector, community building, local organizations, clubs, sports, and more. The City works closely with the non-profit sector to support a wide range of programs and services.

While many DTES residents report feeling a strong sense of community and belonging in the DTES, some factors make connecting with each other more difficult. For example, there is a high percentage of people not connected to or living with their families, which stems from several historical and social causes. Stereotypes and discrimination also hamper DTES residents’ ability to have feelings of larger societal inclusion and belonging.

Safety is a large concern in the DTES. Between Main and Carrall, on Hastings Street, there is an open drug market where drug deals and violence sometimes occur. Safety is a complicated and multi-faceted issue that depends on an individual community member’s personal life situation and accompanying perceptions. Because of issues around social vulnerability, certain groups in the DTES have serious issues around safety. What makes one person feel safe (i.e. more police and security guards) can be the thing that makes another person feel unsafe.

The Vancouver Police Department has 185 police officers assigned to District 2 which encompasses three neighbourhoods: the DTES, Grandview-Woodland and Hastings-Sunrise. Seventy-four of those officers are assigned specifically to the DTES. There is also an Aboriginal Policing Centre in the DTES whose goals are to reduce the over representation of Aboriginal youth, adults and elders in or at risk of criminal circumstances by offering culturally-based crime prevention programs.

The safety of women in the DTES is a priority for both the community and the City. Poverty, homelessness, racism, sexism and unsafe housing make many women more vulnerable to sexual, emotional, psychological and physical violence.

The epidemic of missing and murdered women in the Downtown Eastside and the continued violence and stigma experienced by both Aboriginal women and sex workers are examples of how multiple factors (e.g. race, poverty, gender) intersect and increase marginalization. The Sister Watch program, launched in 2011 on the National Day of Remembrance and Action to End Violence Against Women, is designed to help combat violence against women in the DTES and make the community safer. As the Missing Women Commission of Inquiry noted, “eradicating the problem of violence against women involves addressing the root cause of marginalization, notable sexism, racism and ongoing pervasive effects of the colonization of Aboriginal people – all of which contribute to the poverty and insecurity in which many women live” (Oppal 2012).

Participation in arts and culture is a critical part of building livable communities and is a prerequisite for healthy individuals and neighbourhoods, and a healthy city. Arts and cultural activities often bring people together and can be an important antidote to social isolation. For many people, participation as a creator or performer provides a creative outlet and an opportunity to build social connections.
Key gaps regarding inclusion, belonging and safety in the DTES include:

- systemic issues of poverty and health;
- stereotypes, discrimination and stigma;
- exclusionary feelings resulting from gentrification;
- safety for women, for sex workers and other vulnerable groups (including women, children and seniors);
- relationships between residents and the police and private security.

**Summary of DTES Inclusion Belonging Safety Assets, Gaps and Targets**

<table>
<thead>
<tr>
<th>Identified Asset</th>
<th>Existing (2012)</th>
<th>Gap</th>
<th>Targets</th>
</tr>
</thead>
</table>
| Community gathering spaces, places      | NA              | Interaction between socio-economic groups; Lack of pride in DTES; First Nations cultural knowledge and awareness; Safety for women; General sense of security and police relations. | *(Draft) Healthy City Strategy* (to 2025)
|                                        |                 |                                                                      | Increase Vancouver residents’ sense of belonging and sense of safety by 10% |
|                                        |                 |                                                                      | All Vancouverites report they have at least 4 people they can rely on for support in times of need; Make Vancouver the safest major city in Canada by annually reducing violent and property crime |

**What We Heard**

Perceptions of safety vary amongst vulnerable groups in the DTES. Concerns around personal safety were expressed by many residents of the DTES and are of particular concern for women, Aboriginal peoples and sex workers. Many have personally experienced violence, explicit racism, harassment or abuse. People feel that private security guards don’t interact well with vulnerable populations and diminish a sense of belonging, making the community feel less safe. People fear that violence in the neighbourhood is going to get worse and they will personally become victims of it.

Street-level safety is seen as a gap. Low-income residents expressed the need for better lighting, more emergency phones, and safer roads. Many people would like to have more places that are accessible to gather 24 hours in order to keep safer.

A strong sense of community is one of the DTES’s biggest assets. Low-income residents value the feelings of acceptance they get in the area and the non-judgmental attitude of many of their peers. Some residents dislike the negative reputation of the neighbourhood and may experience discrimination and stigmatization. Increased feelings of exclusion from places and spaces in the neighbourhood are common and are increasing due to pressures of development and gentrification.
People fear losing the sense of community that exists in the DTES and being displaced. Low-income residents fear being discriminated against and excluded from community life as the neighbourhood grows and changes. Many say that they already feel like they don’t belong in certain areas of the neighbourhood.

Many low-income residents would like to see more places to gather, socialize, take part in activities, celebrate, connect with new people, and create. Arts and culture are very important to vulnerable residents in the DTES. Spaces and opportunities for artists are seen as critical to the community’s well-being.

### Potential Impacts of Development

<table>
<thead>
<tr>
<th>Impact Area</th>
<th>Why this impact area is important</th>
</tr>
</thead>
</table>
| Sense of Community and Social Cohesion | • A strong sense of community has a positive effect on health and well-being.  
• Being connected to one’s community and getting support through meaningful interactions can be a buffer against the hard challenges people face. |
| Discrimination and Exclusion     | • Feeling excluded from community life has a negative effect on overall health and well-being of low-income residents.  
• Feeling excluded can lead to an increase in social isolation and an overall decrease in trust and citizen engagement.  
• Being displaced from one’s community results in erosion of a person’s sense of inclusion and security. |
| Relationships Between Residents and Newcomers | • Changes in the demographic make-up of the DTES may affect community trust and harmony.  
• The ability for vulnerable residents to have harmonious relationships with new residents in the neighbourhood is important to their well-being and long-term tenure in the neighbourhood. |
| Safety                           | • Women and children face disproportionate challenges related to security, violence and exploitation in the DTES.  
• Being and feeling safe in one’s surroundings and neighbourhood is critical to overall health and well-being, especially for vulnerable residents.  
• Aboriginal women face challenges to their safety.  
• Sex workers face challenges related to security, violence. |
| Arts and Culture                 | • Arts and culture play a central role in the social health of a community.  
• Increased opportunities for arts and culture to flourish have a positive effect on the low-income community, and especially for low-income artists. |
| Aboriginal Recognition           | • Recognition of Aboriginal people and culture is vital to the overall health and well-being of Aboriginal people in the DTES. |
“Change is only good if it betters the future for our children and families.”
6.0 Managing Community Assets and Impacts

This section identifies how the SIA will be implemented to achieve the SIA Objectives (refer to section 1) and address the potential impacts of development on the low-income community identified through the SIA process.

Implementation of the SIA will be carried out primarily through its integration with the DTES Local Area Plan – namely through implementing new policy directions and the Social Impact Management Framework (refer to Section 18 of the DTES Plan). In addition, other innovative tools such as social impact management guidelines, will be developed in partnership with community representatives and local Business Improvement Associations (BIAs) to help achieve healthier development outcomes over time.

DTES Local Area Plan Policy Response

The DTES Plan describes the key issues, directions, priorities, strategies, actions and projects to be implemented over the next 30 years to improve the lives of all those who live in the area. Many of the 250+ policies and actions found in the Plan were shaped by the SIA. The following policies are just some of the directions developed to achieve the DTES Social Impact Objectives and address social impacts of development. For a full list of policy directions refer to the DTES Plan.

Our Homes

- Improve conditions for people living in Single Room Occupancy hotels (SROs).
- Increase affordable housing options for DTES residents through creation of new SROs, upgrades to existing SROs and new forms of market housing.
- Offer more housing options for low and moderate income families in the private and non profit sectors as well as more market rental and affordable home ownership options for moderate households.
Our Livelihoods

- Create employment (especially low barrier jobs) through inclusive hiring and other local employment opportunities.
- Encourage employment supports for workers and support for local businesses that hire workers with barriers to employment.
- Build partnerships in training and skills development.

Our Places

- Expand neighbourhood green spaces and open spaces to ensure greater access to nature.
- Pursue opportunities to create new public spaces accessible to everyone such as parks, green and open spaces as part of new developments – particularly in areas with the greatest need.
- Enhance the public realm on commercial streets to improve walkability and vibrancy, create gathering spaces and support commerce and community use.

Our Well-being (General)

- Create more accessible and culturally relevant childcare and after school care spaces and enhance affordability supports.
- Increase services and service coordination for vulnerable youth.
- Continue to encourage well-designed spaces for seniors and adaptation of existing services, programs and spaces to meet the needs of an aging population.

Our Well-being – Food Access and Security

- Source more local/sustainable and nutritious food at key high volume food kitchens for low-income/nutritionally vulnerable residents.
- Continue to support businesses, social enterprises and non-profit agencies involved in processing and distribution of affordable, healthy, local and sustainable foods.
- Encourage more affordable restaurants/food retail businesses that serve the low-income population as well as the broader community through social enterprises or co-operatives
- Facilitate job creation in the food sector.

Our Well-being – Health and Social Services

- Support programs serving DTES residents within the City’s range of policies and tools.
- Identify and protect social, recreational and cultural assets in the neighbourhood and leverage opportunities for new assets through development.
- Develop partnerships to identify and pilot new social program space for non-profit organizations purposefully co-located with other organizations and as part of civic facilities where possible.

Our Well-being – Inclusion and Belonging

- Enhance residents sense of safety, inclusion and belonging.
- Implement recommendations from both the City’s Task Force on Sex Work and Sexual Exploitation and the Missing Women Commission of Inquiry.
- Identify and protect places with social and cultural meaning to the community with emphasis on Aboriginal, Chinese and Japanese communities.
DTES Local Area Plan Social Impact Management Framework

The Social Impact Management Framework sets out a detailed implementation strategy to achieve greater cooperation across the DTES by increasing the number of inclusive, transparent and innovative partnerships with local organizations, agencies, groups and individuals.

In order to achieve the DTES Social Impact Objectives (refer to Chapter 1.0 of the DTES Plan) the implementation framework is comprised of four complimentary components: Community Asset Management Program, a Community-Based Development Program, Regulatory Tools, and Good Neighbour Practices (refer to diagram below).

Community Asset Management Program

A program is proposed (focused in the Community-Based Development Area outlined in Chapter 6 of the Plan) to monitor assets that are essential for vulnerable groups, facilitate asset creation to fill identified gaps, manage development to enable asset retention/replacement and build awareness in the community and the city about the importance of these assets in achieving a healthier neighbourhood.

A partnership approach will be established between DTES communities, businesses, Business Improvement Associations (BIAs), private sector developers and governments to protect and manage critical assets. Where possible, enhancement of existing assets will be sought through new development and businesses coming into the area. Elements of this program will include:

- further identification of physical and intangible assets and gaps;
- descriptions and categories of community assets to highlight those deemed critical;
- investigation and analysis of the adequacy of assets based on current needs and future population growth;
- asset monitoring tools;
- implementation of strategies to close or fill asset gaps;
• mitigation strategies to minimize effects of change over time;
• asset management tools including advocacy, policies and regulations, provision of infrastructure/space and funding/grants;
• education and awareness materials to raise the profile of critical assets.

Assets identified by the community (refer to Appendix D) as well as those identified and inventoried by City staff as part of the SIA process in 2012 (refer to section 5.0), will form the basis for managing and monitoring assets over time.

Community-Based Development Program (Pilot)

Community consultation as part of both the SIA and the Local Area Plan process called for a more creative and innovative way of developing and conducting business in the DTES due to the complex social dynamics, diverse needs and a high proportion of vulnerable groups living in the area. Ideally, all new development and/or business proposals in the DTES would work towards achieving the objectives of the SIA and DTES Plan, particularly those in the Community-based Development Area (refer to Chapter 6 of the Plan).

In order to do this, business or development applicants would ensure that consideration is given to the proximity and relationship of their proposed development or business to existing community assets and consider their possible protection or enhancement. Accordingly, a Community-based Development Program is being proposed to help manage and evaluate future developments and ensure the building of a healthy neighbourhood for all DTES residents (refer to diagram below).

This program is multi-faceted and involves the community, City staff and senior management in the implementation and evaluation of future developments to ensure new development strives to achieve a healthy neighbourhood for all residents.
This program will lead to the preparation of management principles and guidelines for future development and business proposals. It will provide information to guide new developments and ensure they do not directly interfere with low-income residents’ ability to access or receive the basic needs and supports local assets provide. Staff will evaluate new developments and business applications in relation to the location of these assets and any associated impacts to them. This program will facilitate the enhancement of existing assets through new development or businesses coming to the area where possible. Elements of this pilot program involve:

- the creation and utilization of an evaluation tool such as a checklist and explanatory notes for new development and business applications in key sub-areas;
- using internal City structures and review processes to evaluate new proposals;
- regular meetings between the CoV DTES Management Group and various associations of residents, community groups and stakeholders;
- development management tools including education and awareness materials, advocacy, policies and regulations, partnerships and provision of infrastructure/space and or funding and grants.

**Regulatory Policies and By-Laws**

The third component of the Social Management Framework relates to regulatory tools such as by-laws, policies and guidelines that govern land use and development among other things. These regulatory tools support and ensure that new developments fit their specific context and contribute positively to the community where they are located.

The City will look for new ways to use regulatory tools to support and implement the Social Impact Objectives including the development of Social Impact Management Guidelines (informed by the Community-Based Development Program) and the amendment of policies and zoning related to fostering locally-serving retail areas.
Good Neighbour Practices

Community consultation as part of both the SIA and DTES Planning Program emphasized the need to enhance local economic development in the DTES while ensuring at the same time that local commercial/industrial developers and local businesses are sensitive to the context within which they do business (i.e. respectful of surrounding scale, urban pattern, social and community needs). People also emphasized the need for affordable commercial spaces and locally-serving uses that do not exclude the low-income community.

Ideally, all new businesses in the DTES would work towards achieving the Social Impact Objectives of the SIA and DTES Plan, particularly those in the Community-based Development Area (refer to DTES Plan section 6.0). To do this, new development and business proposals would try to ensure that they fit the DTES neighbourhood context and also offer locally-serving uses and not exclude, displace or negatively impact the low-income community or affect community assets without making provision for their relocation or replacement.

Partnerships are the key to the creation of a more neighbourly community. DTES community members, community associations and organizations, non-profit agencies, BIAs, businesses and property owners all need to make this work. Elements of this program will involve:

- education and awareness tools;
- a DTES Community Charter;
- Good Neighbour Agreements;
- a BIA Good Neighbour Accreditation program;
- networking and community-bridging opportunities;
- support for new businesses coming to the neighbourhood.
What places, spaces or things are most IMPORTANT to you in the Downtown Eastside?

1. Oppenheimer Park (Green Space) People + Friends
2. Crab Park
3. Street Market (because it brings people and families out to community)
4. First United - they look after homeless people very well
5. Hope Learning Centre - learning grade 12
6. Anchor of Hope Church - go there to worship the Lord on Sundays & Tuesdays
7. First United - good place to hang out
8. Sun Yet Sin Garden - go there to chill out + get some peace
9. UGM - they feed us all the time, clothing
10. E.U. - helps so many hungry homeless people
11. First United - all of the resources
12. 100 block - insite
13. First United - people sleep here + get help
14. VGH - a lot of ridiculous ideas going on there
15. MacKenzie (or something) - North Shore, went on field trip there
16. Maple Tree Square - the community
17. Victory Square - it's a beautiful park
18. Potluck - eating
19. Waves (Chinatown) - buy coffee, use washrooms late at night
20. Waves (Main + Powell) - buy coffee, washrooms late at night
21. Ovaltine - all day breakfasts for $3.95 very reasonable

“Count every head, because a shelter is not a home.”
7.0 Monitoring Community Assets and Impacts

The potential impacts identified in the SIA will be monitored and evaluated primarily through the monitoring of the DTES Local Area Plan. This will include monitoring and evaluating the status of community assets and the effects of development on low-income and vulnerable residents through the social impact indicators (described later in this section). Innovative strategies are proposed in the DTES Plan not only to protect critical community assets, but also to stabilize affordable rental housing stock and create positive opportunities for all residents through community-based development. Progress and outcomes of the Community Asset Management Program, the Community-Based Development Program and the Good Neighbour Practices component will be instrumental in monitoring the SIA and ensuring that future development contributes to the building of a healthy neighbourhood for all DTES residents.

A key component for evaluating the status of community assets will be through the DTES Plan Community Asset Management Program. The following asset categories will be monitored every three years to help determine the extent to which neighbourhood change and development is impacting low-income and vulnerable residents in the DTES.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Asset</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing</td>
<td>Market Housing</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Non Market Housing</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Market SROs</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Non Market SROs</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>Social Enterprise</td>
<td>Tbd, potential research project with students</td>
</tr>
<tr>
<td></td>
<td>Street markets</td>
<td>Tbd</td>
</tr>
<tr>
<td></td>
<td>Org’s funding volunteers</td>
<td>Tbd</td>
</tr>
<tr>
<td>Places</td>
<td>Parks</td>
<td>City of Vancouver, Board of Parks and Recreation</td>
</tr>
<tr>
<td></td>
<td>Plazas</td>
<td>Tbd with City of Vancouver and Board of Parks and Recreation</td>
</tr>
<tr>
<td></td>
<td>Toilets</td>
<td>City of Vancouver, Engineering</td>
</tr>
<tr>
<td></td>
<td>Heritage Buildings</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td>Well-being</td>
<td>Libraries</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td>Learning, Care...</td>
<td>Community Centres</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Childcare spaces</td>
<td>West Coast Child Care Resource Centre</td>
</tr>
<tr>
<td></td>
<td>Childcare centres</td>
<td>West Coast Child Care Resource Centre</td>
</tr>
<tr>
<td></td>
<td>Schools</td>
<td>Vancouver School Board</td>
</tr>
<tr>
<td>Well-being</td>
<td>Locations of low cost or free food</td>
<td>Vancouver Coastal Health</td>
</tr>
<tr>
<td>Food Access</td>
<td>Community Kitchens</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Community Garden plots</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Orchards</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td></td>
<td>Farms</td>
<td>City of Vancouver</td>
</tr>
<tr>
<td>Well-being</td>
<td>Physicians/clinics</td>
<td>City of Vancouver Business Licenses</td>
</tr>
<tr>
<td>Health and Social Services</td>
<td>Dentists</td>
<td>City of Vancouver Business Licenses</td>
</tr>
<tr>
<td></td>
<td>Pharmacies</td>
<td>City of Vancouver Business Licenses</td>
</tr>
<tr>
<td></td>
<td>Hospice</td>
<td>Vancouver Coastal Health</td>
</tr>
<tr>
<td>Well-being</td>
<td>Community gathering spaces, places</td>
<td>Tbd</td>
</tr>
<tr>
<td>Inclusion, Belonging</td>
<td>Cultural assets/spaces</td>
<td>City of Vancouver Cultural Services</td>
</tr>
</tbody>
</table>
Impacts identified through the SIA process will also be monitored through a set of indicators developed to track impact areas and the consequences and/or benefits of development on low-income residents and the community over time.

The following indicators will be monitored every three years in a parallel process with the DTES Plan implementation strategy updates, to determine the extent to which neighbourhood change and development is impacting low-income residents in the DTES.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Social Indicator</th>
<th>Geography</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing</td>
<td>AFFORDABILITY</td>
<td>DTES</td>
<td>Homeless Count</td>
</tr>
<tr>
<td></td>
<td>Homelessness</td>
<td></td>
<td>Ministry of Social Development and Social Innovation</td>
</tr>
<tr>
<td></td>
<td>Income assistance cases (including Disability Benefits, pensions)</td>
<td></td>
<td>Low-Income Housing Survey, BC Housing</td>
</tr>
<tr>
<td></td>
<td>SROs at shelter component of income assistance</td>
<td></td>
<td>BC Housing</td>
</tr>
<tr>
<td></td>
<td>Social Housing at shelter component of income assistance</td>
<td></td>
<td>BC Housing and Ministry of Social Development and Social Innovation</td>
</tr>
<tr>
<td></td>
<td>Rent Subsidies</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CONDITONS</td>
<td>DTES</td>
<td>City of Vancouver grants, Council Reports (SRA By-law), BC Housing</td>
</tr>
<tr>
<td></td>
<td>SRO Upgrades</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SUPPORTS</td>
<td>DTES</td>
<td>City of Vancouver, Vancouver Coastal Health, BC Housing</td>
</tr>
<tr>
<td></td>
<td>Supportive Housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Scattered Sites</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Development</td>
<td>Development Permits</td>
<td>DTES</td>
<td>City of Vancouver Development Services and Planning</td>
</tr>
<tr>
<td></td>
<td>Land and Improvement Values</td>
<td>DTES</td>
<td>British Columbia Assessment Agency</td>
</tr>
<tr>
<td></td>
<td>Life Expectancy</td>
<td>DTES</td>
<td>Vancouver Coastal Health</td>
</tr>
<tr>
<td></td>
<td>Standardized Mortality Ratio</td>
<td>DTES Local Health Area</td>
<td>Vancouver Coastal Health</td>
</tr>
<tr>
<td></td>
<td>Reported Crime</td>
<td>DTES</td>
<td>Vancouver Police Department</td>
</tr>
<tr>
<td></td>
<td>Early Development Instrument</td>
<td>Strathcona Local Area</td>
<td>UBC Human Early Learning Partnership (HELP)</td>
</tr>
<tr>
<td>Well-being</td>
<td>Sense of belonging, connectedness, feeling accepted at 'home'</td>
<td>DTES</td>
<td>Partnership with nonprofit</td>
</tr>
</tbody>
</table>

Many indicators already exist and a baseline dataset is available for 2013 (refer to section 3.0). Other indicators which are more difficult to measure (where no data source currently exists) will be included in future updates as reliable data becomes available and tracking systems are developed. Future updates will include indicators on affordable retail and retail mix in the DTES in order to track changes to the retail composition of the shopping streets – particularly in the Community Based Development Area (see Section 6.4 of the DTES Plan) as well as indicators to measure the impacts to the community’s intangible assets (e.g. sense of belonging).
Future monitoring of the social impact of development in the DTES will also include collaboration with the low-income community and community organizations. In addition to monitoring assets and measuring indicators, further research into relevant factors in the community could also take place as needed.
“I don’t know if this is a pride thing, but I fear that all these years of struggle we’ve all had here in this community have no meaning. It will just get wiped away. My hope is that the struggle to improve will keep on.”
8.0 Conclusion

This report describes the SIA process that involved taking stock of the current issues and context, engaging those potentially affected by new development, determining community assets and gaps, assessing the potential impacts of new development (both positive and negative) and developing a framework to mitigate, monitor and evaluate assets and impacts.

The DTES SIA has helped to integrate and broaden the City’s thinking around health, well-being and social sustainability into land use planning considerations contributing to a healthier city for all citizens. The SIA assessed potential effects and impacts development may have on a neighbourhood that is home to many people who face extraordinary economic, physical, and social challenges in their daily lives. The focus on Vancouver’s vulnerable population and low-income community was an intentional way of taking into account the increased vulnerability of those experiencing poverty, inequality and marginalization.

The DTES SIA concludes that new developments in the DTES have the potential to affect the existing vulnerable populations and low-income community in both positive and negative ways. Seven key areas of potential impact were identified and within these key themes, 38 specific potential impact areas have been outlined in this report.

The primary way the SIA will be used is through the implementation of the DTES Local Area Plan. Integrating the SIA into the planning process resulted in the creation of a Social Impact Management Framework and corresponding actions to manage community assets, amend regulatory by-laws and policies, manage new business and development and foster Good Neighbour practices in broad community partnership. It is expected that monitoring of the SIA through measuring assets and a set of key indicators that correspond to the potential impact areas would be conducted every three years, supported by the monitoring of the DTES Local Area Plan and in concert with the community.

The DTES’s barriers cannot be overcome by individual sectors working in isolation. Recognizing interconnectivities and working collaboratively is essential to achieving the best possible outcomes (Hancock, 1996). It is beyond the scope and financial capacity of a municipality alone to address the broad range of challenges which are prevalent in the DTES. Sustained governmental involvement at the federal and provincial levels is needed to reduce the social and structural issues which make the impacts of development on vulnerable populations more acute. Moreover, all three levels of government must work in collaboration with the local residents, not for-profit and private sectors to find and implement timely and effective solutions.

Finally, ensuring that all DTES residents have the highest level of health and well-being through adequate income, health care, education, social services and opportunities is the best way to mitigate impacts in the built environment.
Acknowledgements

Many people including local residents, representatives of community organizations, institutions and stakeholder partners invested their time and energy into the SIA process. Their commitment to the future of the community and well-being of its residents is greatly appreciated and acknowledged with gratitude by the City and the communities involved. The following people and organizations are recognized for their dedication, without which the SIA would not have been achieved.

In alphabetical order...

Rabel Burdge
Jeet Chand
Sarah Cullingham
Lindsay Neufeld
Joyce Rautenberg
Yaheli Shtull-Klein
Jackie Vander Eerden
Sandra Vigil Fonseca

Aboriginal Front Door Society, Aboriginal Life in Vancouver Enhancement (ALIVE), Battered Women’s Support Services, Carnegie Community Action Project (CCAP), Carnegie Community Centre, Downtown Eastside LAPP Committee, Downtown Eastside LAPP Reference Group, Downtown Eastside Neighbourhood House, Downtown Eastside Women’s Centre, Dugout, First United Church, Gallery Gachet, Inner City Neighbourhood Council (ICNC), International Association of Impact Assessment – Western and Northern Canada, Portland Hotel Society (PHS), Providing Alternatives Counselling and Education Society (PACE), Qmunity, Ray-Cam Co-operative Centre, Second Mile Society, Strathcona Community Centre, Strathcona Community Mental Health, Union Gospel Mission, Vancouver Area Network of Drug Users (VANDU).
Appendix A - Types of Social Impacts

Social impacts resulting from development and neighbourhood change can result in meaningful improvements to or decreases in the health and well-being of residents. The main types of social impacts fall into the following categories.

**Quality of Life**—on sense of place, aesthetics and heritage, perception of belonging, security and livability, and aspirations for the future

**Health**—on mental, physical and social well-being

**Emotional**—on perceptions about safety, fears about the future of their community, and aspirations for the future and the future of their children

**Lifestyle**—on the way people live, work, play and interact with one another, behave and relate to family, friends

**Cultural**—on shared customs, obligations, values, language or dialect, religious belief and other elements which make a social or ethnic group distinct

**Community**—on infrastructure, facilities, services, voluntary organizations, activity networks, cohesion, stability, or character

**Political**—on the extent to which people are able to participate in decisions that affect their lives, the level of democratization that is taking place, personal and property rights or civil liberties;

**Environmental Impacts**—the quality of air and water, availability and quality of food, levels of hazard or risk, dust and noise, adequacy of sanitation, physical safety, and access to and control over resources

(IAIA 2003 and Centre for Good Governance 2006)

Social impacts can be cumulative (combined with other past, present and future impacts) and triggered directly by a single development or as a result of the effects of incremental development over time.
Appendix B – Healthy City Strategy

A HOME FOR EVERYONE
A range of housing options

A GOOD START
Healthy childhood development

MAKING ENDS MEET
Adequate income

CRITICAL CONNECTIONS
Strong social relationships and support networks

FEEDING OURLIVES WELL
A healthy, just and sustainable food system

BEING AND FEELING SAFE
Addressing fear, violence and crime

HUMAN SERVICES
High-quality, accessible and inclusive health, social and community services.

WORKING WELL
Decent employment conditions

A vibrant SOCIAL environment

A well-planned BUILT environment

A sustainable NATURAL environment

A thriving ECONOMIC environment

IN THE ‘HOOD
Belonging and inclusion close to home

OUT AND ABOUT
Connecting for belonging at work, at school, at play

ACROSS THE CITY
Engaged citizenship

GETTING OUTSIDE
Access to nature

EXPRESSING OURSELVES
Enhancing arts, culture and cultural diversity

GETTING AROUND
Safe, active and accessible transportation

LEARNING FOR LIFE
Continuous education and development

BEING ACTIVE
Opportunities for active living

HEALTHY PEOPLE
Taking care of the basics

HEALTHY ENVIRONMENTS
Healthy communities

HEALTHY ENVIRONMENTS
Well-planned built environment

A HEALTHY CITY FOR ALL

Healthy City Strategy

CITY OF VANCOUVER
Healthy City Strategy
Appendix C – Vulnerable Groups in the DTES

The DTES SIA process focused on specific groups of people within the low-income community. Achieving a healthy and equitable city for all peoples in the Downtown Eastside requires dispelling stereotypes about vulnerable populations while at the same time identifying those to whom special attention must be paid. This section outlines some particular areas of concern for members of these communities.

Women

Women aged 15 and over in the Downtown Eastside have a significantly lower labour force participation rate (42 per cent) than both women city-wide (62 per cent) and males in the Downtown Eastside (49 per cent). Despite this, the median annual income of female residents ($18,601) is slightly higher than male residents ($17,949), but it is much lower than female median income citywide ($30,053).

In 2006, there were 460 female-headed lone-parent families in the Downtown Eastside, primarily concentrated in the Oppenheimer and Strathcona sub areas. Seventeen per cent of all Downtown Eastside census families fall into this category, compared to 13 per cent of families citywide (Statistics Canada 2006).

Women in the Downtown Eastside face significant health and shelter-related challenges. Though female residents of the Downtown Eastside have a higher life expectancy than male residents (85 vs. 74 years) (BC Ministry of Health 2011), a number of distinct health issues have been identified:

- Female injection drug users have a 40 per cent higher incidence of HIV than that of male injection drug users.
- Women report higher usage of many health services, such as pharmacies, nursing care, physician care, ambulances, and mental health and outreach services.
- Women are more likely to report poor treatment by health care staff and greater difficulty keeping health-related appointments.
- Maternal health is a significant concern as the Downtown Eastside has higher rates of stillbirth, infant death, low birth weight, pre-term births, births to mothers under 20 years of age, and births to mothers 35 years of age or older than the provincial averages. (City of Vancouver Social Planning Department 2004)

In a 2008 demographic study of Downtown Eastside SRO and social housing tenants, women were a minority in both types of housing, but were considerably more likely to reside in social housing (44 per cent of respondents) than in SROs (20 per cent of respondents). Female SRO residents are among the most vulnerable populations in the neighbourhood. In the 2008 study, they were much more likely to suffer from a variety of health conditions, declining health and addictions, and to report higher usage of several health services, supervised injection sites, and community centers than male SRO residents and both male and female social housing residents. The top ranked identified needs reported by female SRO residents were housing, health and income, while the top needs reported by female social housing residents were income, health and emotional support (Vancouver Area Network of Drug Users 2009).

Though not confined to the Downtown Eastside, the estimated number of women who are homeless has slightly increased in recent years from 333 (22 per cent of City of Vancouver homeless population) in 2010 to 347 (26 per cent) in 2012 (City of Vancouver 2012). Abuse and family breakdown has been identified as the largest cause of homelessness among women (City of Vancouver 2004).
Women in the Downtown Eastside may face multiple barriers such as precarious housing, addiction and/or involvement in the sex trade, and are particularly vulnerable to violence and exploitation. Women who are members of other marginalized or vulnerable groups, such as Aboriginal women, may experience intersecting vulnerabilities and multiple forms of marginalization.

Women experience physical, mental, emotional and sexual violence. The missing and murdered women taken from the neighbourhood since the 1980s number more than 60 (Oppal 2012), and women continue to be particularly vulnerable. The Vancouver Police Department’s SisterWatch Project is intended to combat violence against women through coordination, public outreach, a tip line and town hall meetings (Vancouver Police Department).

Children and Youth

As a result of the prevalence of low-income persons (see section 1.1), child poverty is a significant issue. The proportion of children under six years of age living in low-income families in the Downtown Eastside is more than twice that of the City of Vancouver, also discussed in section 1.6. It is well known that children who experience persistent poverty in their early years face higher risks of health problems, developmental delays and behavioural disorders and are also more likely to have low incomes in adulthood.17

In addition to young people living with their families or guardians in the Downtown Eastside, there are also youth and young adults living on their own in SROs, supportive housing units and on the streets of the Downtown Eastside. In the 2012 Homeless Count, there were 164 homeless youth under the age of 25 in Vancouver—12 per cent of the total number of people counted.

Seniors

Seniors are a rapidly growing population throughout Vancouver and across Canada. The Downtown Eastside has long been home to a higher than average proportion of adults over the age of 65. In 2006, there were 3,740 seniors in the Downtown Eastside, including nearly 700 aged 85 and over. Altogether, seniors make up about 21 per cent of the population, compared with 13 per cent city wide (Statistics Canada 2006).

Seniors living in the Downtown Eastside face greater levels of poverty than other areas of Vancouver. While seniors’ incomes have been increasing on a national level and the percentage of seniors with low incomes has declined sharply (City of Vancouver Social Policy Group 2010), almost 80 per cent of Downtown Eastside seniors remain low-income (Statistics Canada 2006).

Around 1,800 seniors live alone in the Downtown Eastside, and they are more likely to be low-income than are seniors living in families (City of Vancouver Social Policy Group 2010). Seniors aged 65 and over in the Downtown Eastside are more than twice as likely to live alone than seniors living in other parts of the city (55 per cent in the Downtown Eastside vs. 29 per cent city-wide) (Statistics Canada 2006). These seniors are also more likely to be isolated from their communities and prone to accidents and falls (City of Vancouver Social Planning Department 2004).

Though only a small number of seniors are fully homeless, seniors are especially vulnerable to the risk of homelessness. A high percentage of the seniors who are homeless and seniors who live in SROs report poor health status, including medical conditions, mental illness, physical disabilities and addictions.18

17 An indicator of the challenges children face in the Downtown Eastside is the high proportion of vulnerabilities (measured using the Early Development Instrument) in kindergarten children affecting school readiness seen in section 1.6. SPARC. The Cost of Poverty in BC, 2011.

18 Ibid.
Seniors who speak limited or no English face additional challenges to their health and independence, including difficulty accessing translation and culturally-appropriate services. Within the Downtown Eastside, a large number of Chinese-speaking seniors live in or near Chinatown and rely heavily on its shops, services and social networks to meet their everyday needs.

Aboriginal Elders are highly impacted by poverty, health issues and the effects of residential schools. A number of Aboriginal groups that provide support for Elders are concentrated in the Downtown Eastside.

**Aboriginal People**

Even given a higher population in the Downtown Eastside, Aboriginal people are routinely overrepresented in vulnerable groups:

- Aboriginal people comprise 15 per cent of SRO residents in the Downtown Eastside (City of Vancouver 2008, April).
- In 2012, 32 per cent of the sheltered and unsheltered homeless were Aboriginal (City of Vancouver 2012).
- A quarter of the Downtown Eastside’s injection drug users are estimated to identify as Aboriginal (Canadian Community Epidemiology Network on Drug Use 2005, June).

Aboriginal People in the Downtown Eastside are also disproportionately affected by health challenges, including:

- greater risk of HIV infection, particularly among drug users;
- higher rates of diabetes, particularly among Aboriginal women;
- higher rates of alcoholism (City of Vancouver Social Planning Department 2004).

Aboriginal women are among the most marginalized in the Downtown Eastside and are particularly vulnerable to violence. One third of the missing and murdered women taken from the Downtown Eastside were Aboriginal (Oppal 2012). Aboriginal women disproportionately experience violence and marginalization, and are overrepresented in the survival sex trade.

**New Immigrants**

While the Downtown Eastside has relatively fewer new immigrants than the City of Vancouver as a whole, new immigrants face particular challenges. These newcomers often struggle to enter the job market and find affordable housing, and a disproportionate number of recent immigrant households are considered to be at high risk of homelessness as they spend more than 50 per cent of their income on housing (Hiebert et al. 2008, January).

**Lesbian, Gay, Bisexual, Transgender, Queer and Questioning (LGBTQ) People**

While it is not known how many LGBTQ identifying people live in the Downtown Eastside, it is clear that there is a disproportionate number of LGBTQ homeless or street-involved youth. A 2002 survey of homeless or at risk of homeless youth in Vancouver found that 33 per cent of youth 19 and younger and 24 per cent of youth 19 to 25 years old identified as LGBTQ (McCready Centre Society 2002; 2001), much higher than the number of LGBTQ identifying youth in the entire population. In 2009, 66 per cent of street involved youth reported the Downtown Eastside as their place of residence (Rachlis et al. 2009). LGBTQ street youth are more likely to be sexually exploited than their heterosexual peers (Owsianik, Jenna 2011).

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20 Ibid.
21 A 2008 McCready Centre Society Adolescent Health Survey found that less than 3 per cent of BC youth in grades 7 to 12 identify as gay, lesbian or bisexual. An estimate of youth identifying as transgender is unavailable from this survey.
Low-income Singles

Many Downtown Eastside residents live alone (46 per cent vs. 17 per cent citywide). The proportion of people living alone ranges from a low of 21 per cent in Strathcona, where much of the housing stock is in the form of detached houses and self contained apartments, to a high of 78 per cent in Victory Square, where many residents live in Single Room Occupancy buildings.

The median income for people living alone in the Downtown Eastside is less than half that of people living alone across the city (Statistics Canada 2006). Low-income people living alone are particularly vulnerable as they must rely on a single income and cannot pool resources with other household members.

Obtaining affordable and adequate housing can be a serious challenge, especially for those who are on income assistance.

Low-income Families

Though the Downtown Eastside is characterized by a large population of older adults living alone, there are many families with and without children that call the area home. Most families live in the Strathcona neighbourhood where housing units are larger. Families living in the Downtown Eastside have lower median incomes than families living in other areas of Vancouver and more than a quarter fall below the low income threshold after tax (Statistics Canada 2006). Over 45 per cent of female headed lone-parent families in the Downtown Eastside are low-income. Although there are far fewer of them, male headed lone-parent families fare slightly worse, with half falling under the low income threshold (Statistics Canada 2006).

Obtaining affordable housing that is large enough for several people is challenging for low-income families, especially in the Downtown Eastside, where much of the affordable and non-market housing stock is geared toward single adults and seniors. In 2011, there were 886 units of non-market housing for families in the Downtown Eastside, amounting to just 13 per cent of total non-market stock in the neighbourhood (City of Vancouver 2012).

Renters

The Downtown Eastside is overwhelmingly a neighbourhood of renters. Almost 90 per cent of households are rented, compared to slightly over half city-wide (Statistics Canada 2006).

Renters are a socio-economically varied group and the above numbers include higher-income renters in the neighbourhood’s newer condo buildings and converted loft apartments. Overall, renters in the Downtown Eastside are more likely than both owners in the neighbourhood and renters throughout the city to spend more than 30 per cent of their household income on housing (Statistics Canada 2006). 22

In contrast to other neighbourhoods in the city with high renter populations, the Downtown Eastside has a significant number of renters living in Single-Room Occupancy buildings (SROs). These renters are typically very low-income and face a unique set of barriers with regard to housing affordability and security. For low-income renters experiencing affordability challenges in the Downtown Eastside, there are few places to turn for lower cost housing.

22 The 30 per cent mark is a commonly accepted definition of housing affordability. Households spending at above this threshold are considered to be at risk.
Single Room Occupancy (SRO) Tenants

SRO units in rooming houses and residential hotels are a very basic and low cost form of housing provided by the private and public market. Rooms are usually about ten by ten feet in size and do not have private bathrooms or cooking facilities beyond hotplates. While SROs used to exist in several Vancouver neighbourhoods, the remaining units are overwhelmingly concentrated in the Downtown Eastside. As of 2011, there were 3,975 market SRO units and 1,522 non-market units in 155 buildings in the Downtown Eastside, illustrated in section 1.4 (City of Vancouver Housing Policy 2010). Many SROs are run-down and suffer from pest and rodent infestations, and inspections routinely reveal unsafe living conditions (Lewis et al. 2008).

Residents of SROs are typically very low-income and are unable to afford self-contained units in the conventional rental market. In a 2008 survey, 77 per cent reported annual incomes of $15,000 or less (Lewis et al. 2008). Unless they can obtain non-market housing, SROs are often the last option before homelessness (City of Vancouver 2005/06). Private SRO residents are vulnerable to rent increases that can exceed the shelter component of social assistance income or otherwise impact their ability to afford the unit. The proportion of SRO units renting at or below the social assistance shelter rate has been decreasing—in 2011, 27 per cent of private SROs were renting at this rate. All public SRO units rent at $375 (City of Vancouver 2012).23

Living in substandard housing impacts health and wellbeing (Hwang et al. 2009). In a 2008 survey, a third of SRO residents surveyed had a mental health illness and a third had a drug addiction.

Homeless People

While homelessness is a serious issue across Metro Vancouver, a significant number of homeless people reside in the Downtown Eastside, with many more traveling to the neighbourhood on a regular basis to access support services that may not be available in their own communities (City of Vancouver Social Planning Department 2004).

In 2012, the Downtown Eastside homeless population was estimated to be around 846 people.24 Most homeless people struggle with mental and physical health issues. Many people not currently homeless are at risk of homelessness.

People with Disabilities

People with physical disabilities face significant barriers to employment and to obtaining housing that is both affordable and accessible. A single person on disability assistance receives $531.42 support and $375 for shelter per month. There are 3,193 residents receiving disability assistance in the V6A postal code (Ministry of Social Development 2013);25 cases include people deemed unable to work as a result of mental and physical barriers.

23 Total SRO units include public and private. All public units rent at the social assistance shelter rate ($375) and 27 per cent of private SRO units rent at this rate—together 47 per cent of Downtown Eastside units rent at the shelter rate. The average rent of a private SRO is $416.
24 The homeless count represents an undercount of the total population. Homeless people in shelters and on the street are counted. Some people may be missed in the count. Those who are staying with friends, family or in a car are unlikely to be captured in this count.
25 V6A does not include Victory Square and parts of Gastown. Its boundaries are Clark, Carrall and Great Northern Way.
People affected by Mental Illness

Mental health issues are prevalent in the Downtown Eastside, but it is difficult to determine how many residents are affected. Mental illness may go undiagnosed and are often inextricably linked with poverty and substance abuse. It is estimated that one in five residents suffer from mental illness (City of Vancouver 2005 October).

As compared to people living in other parts of Vancouver and throughout the province, residents of the Downtown Eastside have a higher rate of depression and anxiety (BC Ministry of Health 2011, July). In 2009, 10,758 Downtown Eastside residents received mental health and/or substance use services from a general practitioner and mental health issues were the most common reason for hospitalization (BC Ministry of Health 2011, July).

Drug Users

An estimated 4,700 injection drug users resided in the Downtown Eastside in 2003. These individuals are among the most vulnerable in the Downtown Eastside as they often face multiple barriers to health and life stability. As seen in section 1.5, there are proportionally more alcohol and drug related deaths in the Downtown Eastside Local Health Area than across the City (Vancouver Coastal Health 2012).

Many drug users are homeless or at risk of homelessness. Among participants in a large, ongoing study of Vancouver drug users, almost 70 per cent lived in unstable housing (including shelter/hostel, treatment/recovery house, jail, SRO, and street) in 2007, including 25 per cent who were outright homeless (City of Vancouver Social Planning Department 2004).

Survival Sex Workers

Survival sex work/trade is the exchange of sexual acts to fill an urgent need such as food, money, shelter, safety or substance. The urgency of these needs can impact the level of agency an individual can exercise in negotiating or refusing to perform sexual acts. Sex workers are among the most marginalized populations by our society. Sex workers come from a variety of backgrounds and have a diversity of gender identities. Not all individuals that are involved in sex for trade identify as sex workers. The stigma of sex work and sex trade makes these individuals more vulnerable to violence and marginalization, and can be a barrier for individuals to access services such as housing, health care and other social services.

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26 Capture recapture analysis performed by Vancouver Costal Health (VCH), 2003.
Appendix D – Community Input: Identifying Assets, Gaps, Hopes, Fears

OUR HOMES

What We Heard:

• “I hope to have a self-contained place with a kitchen, bathroom, with self-esteem. I fear we won’t get it and we’ll be pushed out”
• “You see these condos going up, but they’re not for us”
• “I’m scared that development might limit the number of affordable housing units available to live in”
• “My hope for the DTES is that there is enough affordable housing…not condos. They push us little people out. There needs to be a decent balance between development and condominiums”
• “I fear an increase in rents. $500 for SROs that have cockroaches and mice is unacceptable”
• “I fear that I won’t be able to stay where I am. Everything I need and want is here.”
• “My biggest fear is that if they build condos all the poor people will get kicked out”
• “People need places to live so they don’t have to live on the street. It would be nice to have a raise of welfare rates so this is possible”
• “It’s a sanctuary, a castle.”
• “I’ve done the homeless shelter routine. It’s just not my home.”

Assets

• Having homes and housing
• Shelters for the homeless
• Non-market housing types
• Affordable rents
• Welfare-rate units
• Supportive housing

Gaps

• Affordable self-contained and accessible units
• Housing for homeless people
• Housing for vulnerable populations (i.e. Aboriginals, seniors, sex workers, people with mental health issues)
• Affordable artist live/work units
• Safe and adequate housing
Hopes

• That residents will all have a safe place to live
• That all housing in the neighbourhood be self-contained (with private washrooms and kitchens)
• That there will be more affordable and social housing
• That the percentage of social housing will increase in inclusionary zoning
• That living conditions will improve
• That there won’t be any more homelessness
• That shelters will stay open for the homeless
• That low-income people will be considered in future development
• That gentrification will be controlled
• That there will be affordable housing built all over the city

Fears

• That people will be displaced from the neighbourhood and not have anywhere else to go
• That there will be increased homelessness, poverty, marginalization and polarization
• That there will be a lack of housing stability due to aging SRO and social housing stock
• That there will be ‘renovictions’ (evictions for renovations that result in the unit being too expensive to return to)
• That future housing won’t be for existing residents and that there won’t be enough for everyone
• That future housing won’t be affordable and rents will rise
• That people will have to pay too much money for substandard housing
• That there will be a loss of welfare-rate units
• That people will lose their housing and as a result, lose their children
• That housing will continue to have bedbug infestations and other pest control problems
**COMMUNITY IDENTIFIED ASSETS: HOMES**

**IMPORTANT SPACES, PLACES AND THINGS IDENTIFIED BY DOWNTOWN EASTSIDE RESIDENTS**

Assets listed were identified by two or more participants at Social Impact Assessment community input workshops, summer 2012. Not all assets can be mapped to particular locations. Assets are arranged by the number of times they were mentioned, from most mentions to least mentions.

<table>
<thead>
<tr>
<th>Community Asset</th>
<th>List of Assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Home (Not Mapped)</td>
<td>41. Vancouver Native Health Society</td>
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<tr>
<td>2. Carnegie Community Centre</td>
<td>42. Woodward's</td>
</tr>
<tr>
<td>3. Oppenheimer Park</td>
<td>43. West Hotel</td>
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<tr>
<td>4. Ray-Cam Co-Operative Centre</td>
<td>44. Wish Drop-In Centre</td>
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<td>5. First United Church</td>
<td>45. Affordable food (Not Mapped)</td>
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<td>6. MacLean Park</td>
<td>46. Andy Livingstone Park</td>
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<td>7. Crab Park</td>
<td>47. Benny's Market Italian Foods</td>
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<tr>
<td>8. Strathcona Community Centre</td>
<td>48. Chinese Community Library Services</td>
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<tr>
<td>9. Dr. Sun Yat-Sen Classical Chinese Garden</td>
<td>49. Food Lines (Not Mapped)</td>
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<tr>
<td>10. Lord Strathcona Elementary School</td>
<td>50. Four Sisters Housing Cooperative</td>
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<td>11. Sunrise Market</td>
<td>51. Heart and soul (Not Mapped)</td>
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<tr>
<td>12. Union Gospel Mission</td>
<td>52. Hazelwood Hotel</td>
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<tr>
<td>13. Housing (Not Mapped)</td>
<td>53. Living Room Drop In</td>
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<tr>
<td>14. The 44 - Evelyne Saller Centre</td>
<td>54. Mauro Dan Gardens</td>
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<tr>
<td>15. Chinatown (Not Mapped)</td>
<td>55. Housing Cooperative</td>
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<td>16. DTES Women's Centre</td>
<td>56. Mission Possible</td>
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<td>17. Pigeon Park</td>
<td>57. Newport Bakery</td>
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<td>18. Strathcona Park</td>
<td>58. Orwell Hotel</td>
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<td>19. The Whole DTES</td>
<td>59. Playland</td>
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<td>20. The Dugout</td>
<td>60. Rogers Arena</td>
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<td>22. Stanley Park</td>
<td>62. Strathcona Community Garden</td>
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<tr>
<td>23. Washington Hotel</td>
<td>63. Salvation Army</td>
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<tr>
<td>24. Admiral Seymour Elementary School</td>
<td>64. Vancouver Harbour Light</td>
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<tr>
<td>25. Aboriginal Front Door Society</td>
<td>65. The Lux</td>
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<tr>
<td>26. Community (Not Mapped)</td>
<td>66. The Listening Post</td>
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<tr>
<td>27. Insite</td>
<td>67. UBC Learning Exchange</td>
</tr>
<tr>
<td>28. LookOut Shelter</td>
<td>68. Vancouver Native Housing Society</td>
</tr>
<tr>
<td>29. Lifeskills Centre</td>
<td>69.</td>
</tr>
</tbody>
</table>
LIVELIHOOD

What We Heard:

• “Welfare rates need to be increased!”
• “A person who is on normal welfare, how does he live?”
• “I’d like to see more outlets for clothing for men. It’s inexpensive, it saves money” “Brings self-esteem up to have new clothes on”
• “There’s exclusive shops around the neighbourhood. Are we even allowed to go in them or near them?”
• “They won’t hire locally. There are lots of people here who are capable of working. Give us a chance. See what we can do”
• “There are so many unaffordable places to shop”
• “We can’t stop it (development) but ideally we need to have a shopping centre for us that is affordable. The ability to buy some bedding or furniture so we don’t have to deal with Welfare and be given a little more choice because we don’t really go out of the community”
• “If I was given half a chance, I wouldn’t be so much of a burden and I could take care of myself”
• “I’m tired of not being able to shop in my neighbourhood.”

Assets

• Income security and financial supports (credit in stores, low-barrier banks, the welfare office)
• Low-cost retail (grocers, restaurants, bars, cafes, department stores, dollar stores, corner stores)
• Informal economies (street markets, vending, binning, cashing in bottles, panhandling, collecting scrap metal)
• Work and workspace
• Community-minded businesses (low-income serving, locally owned, social enterprises, family owned, small businesses, and with later hours)
• Volunteering
• Access to venues to create and sell art

Gaps

• Employment (services, supports, centres, local hiring, employee regulations)
• Income security (low incomes, low purchasing power, high cost of living, high prices)
• Affordable shops, low-income supportive retail mix, anchor stores
• An organization where people can comfortably display, create and sell their art
• Local community (non-corporate or franchise) businesses
• 24-hour cafes and vending machines
• Respect for the underground economy
• Proper utilization of retail space and second floor spaces
Hopes

• That there will be local employment opportunities for residents
• That developments will bring labour and skilled trades employment opportunities
• That there will be opportunities to ‘give back’ to the community
• That welfare rates will increase, people will have more money and eventually get off welfare
• That there will be more education and training opportunities
• That there will be less prejudice against residents involved in informal economies
• That new development will be mindful of its effects on affordability
• That there will be more businesses that serve the low-income community
• That people will have more purchasing power and choice in what they buy
• That there will be more businesses, tourists and economic revitalization in Chinatown

Fears

• That people won’t be able to get employment and support themselves and their families or that jobs will be lost
• That people from the community won’t be hired in local shops and businesses
• That new shops and businesses won’t be affordable and affordability will disappear
• That new upscale boutique shops will exclude poor people and take community space away
• That the neighbourhood is no longer attractive and people will shop elsewhere
• That development will bring more affluent people and raise the cost of living in the DTES and that prices will rise
• That stores in Chinatown will have to close because rents are too high
• That people will remain poor and government assistance won’t increase
• That artists won’t have space to create and sell their art
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COMMUNITY IDENTIFIED ASSETS: LIVELIHOODS
IMPORTANT SPACES, PLACES AND THINGS IDENTIFIED BY DOWNTOWN EASTSIDE RESIDENTS

LOCATIONS OUTSIDE THE DOWNTOWN EASTSIDE

LIST OF ASSETS

1 Carnegie Community Centre
2 DTES Women's Centre
3 First United Church
4 Oppenheimer Park
5 Strathcona Community Centre
6 Chinatown (Not Mapped)
7 Sunrise Market
8 DNC Street and Fair Market
9 Lifeskills Centre
10 Ray-Cam Co-Operative Centre
11 The Dugout
12 VANDU
13 Mission Possible
14 United We Can - Bottle Depot
15 Insite
16 Quest Food Exchange
17 The 44 - Evelyne Saller Centre
18 Union Market
19 Artist Community (Not Mapped)
20 Aboriginal Front Door Society
21 Crab Park
22 Downtown Eastside Seniors' Centre
23 Gallery Gachet
24 LookOut Shelter
25 Portland Hotel Society
26 Union Gospel Mission
27 W2 Community Media Cafe
28 Wish Drop-In Centre
29 Aboriginal Friendship Centre
30 Chinese Community Library Services
31 International Village
32 Living Room Drop In
33 Playland
34 Pantages Theatre
35 Street Markets (Not Mapped)
36 Strathcona Park
37 Stanley Park
38 Washington Hotel
39 Affordable Food (Not Mapped)
40 Affordable Housing (Not Mapped)
41 Benny's Market Italian Foods
42 Downtown Eastside Neighbourhood House
43 Entreprenising Women Making Art
44 Food Lines (Not Mapped)
45 La Casa Gelato
46 Megaphone (Not Mapped)
47 MacLean Park
48 Metrotown
49 Newtown Bakery
50 Panhandling (Not Mapped)
51 Pigeon Park
52 Pathways Information Centre
53 Russian Hall
54 Social Housing (Not Mapped)
55 Shopping (Not Mapped)
56 Vancouver Public Library
57 Victory Square
58 Work (Not Mapped)

LEGEND

 COMMUNITY ASSET

Assets listed were identified by two or more participants at Social Impact Assessment community input workshops, summer 2012. Not all assets can be mapped to particular locations. Assets are arranged by the number of times they were mentioned, from most mentions to least mentions.
OUR PLACES

What We Heard

• “Crab Park is my favourite place because it is beside the ocean. You feel accepted in Crab Park, everyone talks to everybody”

• “There should be public washrooms on every block. Start at Victory Square and just keep going all the way down [Hastings]”

• “The DTES is an interesting and exciting place to live”

• “One of the hopes I have is that Hastings Street from Carrall to Gore gets cleaned up. The drug dealers...it’s just awful. And they’re outsiders, they don’t belong to this community.”

• “The whole DTES is my favourite place”

• “I feel at home down here, I don’t want that taken away.”

• “Skid Row is where the heart is”

• “My pet peeve...will somebody please bring back some pay phones! They think everybody in the area has cell phones...bull!”

• “Accessibility to those things that are in the area--streets, sidewalks and access to buildings is important.”

Assets

• Places that support the arts
• Community centres and drop-ins
• Outdoor spaces and parks
• Educational places
• Churches
• Aboriginal, women’s, senior’s and family spaces
• Monuments and memorials
• Transit, convenient transportation, bike lanes, the railroad and the area by the railway tracks
• The public realm and street life
• ‘Hearts’ of the low-income community (i.e.: Carrall and Hastings and 100-Block East Hastings)
• Heritage and areas of cultural and historical relevance (i.e.: Chinatown and Gastown)
Gaps

- Social spaces and gathering spaces (places to hang out, places to have fun, a singles club, social space that’s alcohol free, places for families, youth spaces, playgrounds)
- Other places (computer and internet cafes, WiFi, a longhouse, a zoo, an aquarium, performance spaces, short term public storage)
- Street infrastructure and street furniture (benches, water fountains, public toilets, outdoor smoking areas)
- Streetscape improvements and beautification (better lighting, cleaner streets and alleyways, garbage bins, more visible needle boxes)
- Transportation amenities and accessibility (sheltered bus stops, more bike lanes, motorcycle parking spots, free transit)
- Active streets and public life after 5 pm
- An Aboriginal sweat lodge

Hopes

- That sidewalks, ramps and access to the waterfront be more accessible
- That historic buildings are restored
- That public transit will be more accessible (to low-income people and people with disabilities)
- That the neighbourhood will improve and get cleaned up (especially litter and discarded needles)
- For more green space, trees, flowers and a cleaner environment
- For more places for community to gather and be at night (24 hour spaces)
- That there be more Aboriginal spaces (i.e. a sweat lodge)
- That DTES residents are brought into development processes early and not seen as dispensable
- That people will continue feeling ‘at home’ as things change and not be displaced
- That there be more space for resident artists and low-income artists, commercial studio space, arts supply store, artist live/work spaces and opportunities for community arts projects

Fears

- That the heritage and human scale of the DTES will be lost
- That the City will give into developers and change the rules to benefit them at the expense of the community
- That people will lose the places in the community that they love
- That there will be too much change and that change will be drastic
- That there’ll be increased prejudice, racism, exclusion and discrimination towards poor people and they will be excluded and displaced
- That the social fabric and community connections of the neighbourhood will be compromised
- That the Chinese community will leave the area
- That parks, green space and community gardens will be destroyed and lost
- That the DTES will be a ghetto and people will be contained
- That existing art space will be lost
COMMUNITY IDENTIFIED ASSETS: PLACES
IMPORTANT SPACES, PLACES AND THINGS IDENTIFIED BY DOWNTOWN EASTSIDE RESIDENTS

LOCATIONS OUTSIDE THE DOWNTOWN EASTSIDE

LIST OF ASSETS

1 Carnegie Community Centre
2 Oppenheimer Park
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4 Crab Park
5 MacLean Park
6 Strathcona Community Centre
7 First United Church
8 Ray-Cam Co-Operative Centre
9 Dr. Sun Yat-Sen Classical Chinese Garden
10 The Street
11 Strathcona Park
12 DTES Women's Centre
13 Union Gospel Mission
14 Pigeon Park
15 Lord Strathcona Elementary School
16 The Whole DTES
17 Insite
18 People (Not Mapped)
19 Parks (Not Mapped)
20 Stanley Park
21 Victory Square
22 W Andres
23 The Dugout
24 The 44 - Evelyne Saller Centre
25 Andy Livingstone Park
26 Aboriginal Front Door Society
27 Downtown Eastside Neighbourhood House
28 DNC Street and Fair Market
29 Friends (Not Mapped)
30 Lifeskills Centre
31 Mission Possible
32 Community (Not Mapped)
33 Chinatown (Not Mapped)
34 Woodwards
35 W2 Community Media Cafe
36 Aboriginal Friendship Centre
37 Pender Community Health Centre
38 Strathcona Community Garden
39 Sunrise Market
40 The Listening Post
41 Vancouver Public Library
42 Wish Drop-In Centre
43 Artist Community (Not Mapped)
44 Admiral Seymour Elementary School
45 Community Gardens (Not Mapped)
46 Downtown Eastside Seniors' Centre
47 Gallery Gachet
48 Living Room Drop In
49 Main & Hastings
50 Playland
51 The Whole DTES (Hot Mapped)
52 Union Market
53 Chinese Community Library Services
54 Cottonwood Community Garden
55 International Village
56 Pantages Theatre
57 Rogers Arena
58 Seawall (Not Mapped)
59 Safety (Not Mapped)
60 The Street (Not Mapped)
61 Vancouver Native Health Society Medical Clinic
62 West Hotel
63 100-Block East Hastings
64 Bars (Not Mapped)
65 Beach (Not Mapped)
66 Balmoral Hotel
67 Downtown Pharmacy
68 Entering Women Making Art
69 English Bay
70 Eastside Aboriginal Space for Youth
71 Family (Not Mapped)
72 Four Sisters Housing Cooperative
73 Heart and soul (Not Mapped)
74 Hazelwood Hotel
75 Less homelessness (Not Mapped)
76 LookOut Shelter
77 Mission (Not Mapped)
78 Musqueam Gardens Housing Cooperative
79 North Van (Not Mapped)
80 Newton Bakery
81 Orwell Hotel
82 Potluck Cafe
83 Russian Hall
84 Social Areas (Not Mapped)
85 Seymour Bridge
86 Spartacus Books
87 Sheway
88 Science World
89 TransLink (Not Mapped)
90 UBC Learning Exchange
91 Unitled We Can - Bottle Depot
92 Vancouver Women's Health Collective
93 Vancouver Native Housing Society
94 Washington Hotel

LEGEND

COMMUNITY ASSET
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WELL-BEING (General)

What We Heard

- “You know, living and working here, thank God for all these parks [...] When you’ve only got a single room with a hot plate, it’s so important to have these venues, even pubs [...] You’ve got to get out, you know, when you don’t have a living room.”
- “We need kid friendly spaces—people are respectful when they see kids”
- “I hope there will be more families moving in here”
- “People still need to go to the bathroom at different times; the bathrooms need to be open 24 hours.”
- “There are a lot of kids. There is a need for a drop in for a 24 hour drop-in for youth.”
- “There needs to be more scholarships and education for inner city residents.”

Assets

- Schools, learning centres, classes, libraries, literary projects and readings
- Lifeskills training
- Drug-use and addictions groups, networks, education and treatment
- Programs for mothers with barriers, family resource centres and family-friendly areas
- Physical activity, recreational programming and leisure infrastructure (especially when tailored to vulnerable groups)
- Parks and dog parks
- Gardens and community gardens
- Public squares
- The seawall and the beach

Gaps

- Schooling and educational opportunities
- Aboriginal culture education (opportunities to learn about cultures and languages, Aboriginal schools and family programs)
- Training programs
- Education about the DTES outside of the neighbourhood
- Internet cafes and computer access
- Recreation and recreation infrastructure
- Bigger, more and better daycares
- Kid-friendly spaces and events (playgroups, indoor playgrounds, places to have fun)
- Family activities that suit special needs and parent support
- More support for parents that results in less child apprehension
Hopes

- For more language schools and cultural integration resources
- For opportunities to continue or finish education
- For educational opportunities that allow you to raise a family at the same time
- That there will be more recreation infrastructure and programming
- For an affordable and accessible recreation centre
- That there’ll be more programs for single fathers
- That there’ll be more families and safe places for children
- That youth will be better protected as change occurs
- That school grounds and parks can be cleaned more often (e.g., needles removed)
- To have more birds, flowers, and beautiful spaces
- That people can have their own yards or garden plots
- That there are more green spaces
- That the green spaces in the neighbourhood will be safer
- That streets will be cleaner and better
- For more neighbourhood events

Fears

- That there won’t be enough education and training to help people get work
- That youth will lose their programs
- That low-income people will be pushed out and that their children will be excluded
- That parents will lose their children if they can’t afford to keep their housing
- That some parks won’t be for low-income people anymore and that they’ll only be for people who live in new condos
- That everything will turn into concrete and there won’t be any green space. That nature, trees, grass and community gardens will be lost
- That views will be lost and the waterfront will be taken away
- That development will have a negative effect on the environment and will cause pollution
Community Identified Assets: General Well-Being

Important Spaces, Places and Things Identified by Downtown Eastside Residents

Locations Outside the Downtown Eastside

List of Assets

1. Oppenheimer Park
2. Crab Park
3. Carnegie Community Centre
4. MacLean Park
5. Strathcona Community Centre
6. Ray-Cam Co-Operative Centre
7. Dr. Sun Yat-Sen Classical Chinese Garden
8. Strathcona Park
9. Lord Strathcona Elementary School
10. Stanley Park
11. Parks (Not Mapped)
12. Playland
13. Pigeon Park
14. Victory Square
15. Admiral Seymour Elementary School
16. VANDU
17. Andy Livingstone Park
18. Vancouver Public Library
19. Strathcona Community Garden
20. Community Gardens (Not Mapped)
21. Home (Not Mapped)
22. Lifeskills Centre
23. Play (Not Mapped)
24. Seawall (Not Mapped)
25. Sheway
26. Science World
27. Union Gospel Mission
28. Aboriginal Friendship Centre
29. Aboriginal Front Door Society
30. Biking (Not Mapped)
31. Britannia Secondary School
32. Britannia Community Centre
33. Cottonwood Community Garden
34. Crabtree Corner
35. The 44 - Evelyne Saller Centre
36. UBC Learning Exchange
37. Bike lanes (Not Mapped)
38. Beach (Not Mapped)
39. Chinatown (Not Mapped)
40. Chinese Community Library Services
41. Downtown Eastside Seniors’ Centre
42. DNC Street and Fair Market
43. Eastside Aboriginal Space for Youth
44. First United Church
45. Mission Possible
46. Phil Bovier Family Centre
47. The Listening Post
48. Vancouver Native Health Society Medical Clinic

Legend

Community Asset

Assets listed were identified by two or more participants at Social Impact Assessment community input workshops, summer 2012. Not all assets can be mapped to particular locations. Assets are arranged by the number of times they were mentioned, from most mentions to least mentions.
What We Heard

Well-being - Food Access

• “We need an affordable grocery store”
• “This is supposed to be the poorest area but we don’t have a food bank”
• “A lot of the food that has been given doesn’t even get to us”
• “I need my own kitchen so I can store food without it getting stolen all the time”
• “I have a fridge and hot plate, but there’s no food bank or affordable options around”
• “There’s a coffee shop down the street with cookies for $4 and drinks up to $9”
• “There are so many unaffordable places to shop”
• “My diet is a lousy catch as catch can”
• “I can’t afford to buy a piece of meat”

Assets

• Free and low-cost pre-prepared food options
• Food provided at shelters and supported housing AND drop-ins as part of social programming AND health care
• Being able to use informal economies to get enough money to buy food
• Low-cost grocers AND bakeries AND cafes AND restaurants AND Chinese restaurants
• Food redistribution centres AND food banks AND social enterprises (food-related)
• Low-cost malls AND department stores AND dollar stores AND corner stores
• 24-hour cafes AND restaurants
• Community gardens
• Friend’s houses (who cook for them)
• Food delivery

Gaps

• Purchasing power, adequate incomes and access to affordable food
• Independence from the charitable food model, easier ways to get free food and good quality donated food
• Affordable grocery stores, bakeries, butchers, fish shops, farmer’s markets and restaurants
• Nutritious and good quality food AND access to fresh water
• Access to Aboriginal food
• Education around the Right to Food
• Access to community gardens and farms and the food that comes from them
• Access to kitchen facilities to prepare food
• Access to Aboriginal foods
Hopes

- That there’ll be more restaurants and grocers in Strathcona
- That people can grow their own food
- That people will have better access affordable and nutritious food
- For more places to get coffee and real breakfast (not soup) early in the morning
- For more and better free food
- For cheaper restaurants

Fears

- About food affordability and upscale food retail
- That rents will rise so high there will be no more money for food
- That development will stop and reduce free food opportunities and options
- That there will no longer be Chinese shops and food options which would result in loss of community
- That people won’t have any choice as to where to eat
- Around cost of food and higher prices near Woodward’s
Assets listed were identified by two or more participants at Social Impact Assessment community input workshops, summer 2012. Not all assets can be mapped to particular locations. Assets are arranged by the number of times they were mentioned, from most mentions to least mentions.

**COMMUNITY IDENTIFIED ASSETS: FOOD ACCESS AND SECURITY**

**IMPORTANT SPACES, PLACES AND THINGS IDENTIFIED BY DOWNTOWN EASTSIDE RESIDENTS**

**LOCATIONS OUTSIDE THE DOWNTOWN EASTSIDE**

**LIST OF ASSETS**

1. Union Gospel Mission
2. Carnegie Community Centre
3. Sunrise Market
4. First United Church
5. The 44 - Evelyne Saller Centre
6. DTES Women’s Centre
7. Salvation Army Vancouver Harbour Light
8. The Dugout
9. Lifeskills Centre
10. Chinatown (Not Mapped)
11. Oppenheimer Park
12. Downtown Eastside Neighbourhood House
13. Mission Possible
14. Quest Food Exchange
15. Washington Hotel
16. Wish Drop-In Centre
17. Home (Not Mapped)
18. LookOut Shelter
19. Strathcona Community Centre
20. Union Market
21. Army & Navy
22. Food Lines (Not Mapped)
23. Downtown Eastside Seniors’ Centre
24. Living Room Drop In
25. McDonald’s (Not Mapped)
26. Nester’s Market
27. Portland Hotel Society
28. Sheway
29. Strathcona Community Garden
30. Cottonwood Community Garden
31. Food Assets (Not Mapped)
32. Free food (Not Mapped)
33. Potter’s Place Mission
34. Ray-Cam Co-Operative Centre
35. Strathcona Park
36. Affordable food (Not Mapped)
37. Affordable Housing (Not Mapped)
38. Admiral Seymour Elementary School
39. Aboriginal Front Door Society
40. Benny’s Market Italian Foods
41. Corner Store (Not Mapped)
42. Dr. Peter AIDS Foundation
43. Gospel Mission
44. London Drugs
45. La Casa Gelato
46. MacLean Park
47. Newtown Bakery
48. No Frills
49. New Brandiz Fast Food
50. Ovaltine Cafe
51. Pizza (Not Mapped)
52. Prime Time Chicken Ltd
53. Potluck Cafe
54. Playland
55. Street Markets (Not Mapped)
56. Social Housing (Not Mapped)
57. Services (Not Mapped)
58. Safeway (Not Mapped)
59. Save on Meats
60. Superstore
61. The Door is Open
62. West Hotel
63. vans on the street (Not Mapped)

**LEGEND**

- **COMMUNITY ASSET**

Assets listed were identified by two or more participants at Social Impact Assessment community input workshops, summer 2012. Not all assets can be mapped to particular locations. Assets are arranged by the number of times they were mentioned, from most mentions to least mentions.
What We Heard

Well-being – Social Services

• “We need more places with free clothing”
• “We need more walk-in clinics with less waiting time”
• “We need more centres for seniors that are distinct and dedicated to them”
• “We need drop-ins, the places we have now are not adequate. There needs to be a 24 hr drop-in place for people to go at whatever time”
• “I have a mental health issue. I took early retirement and lost my pension. I moved to the DTES and feel like it is my home. People talk to each other here”
• “I hope that there are more services for the handicapped. For example, food bank deliveries for the handicapped”
• “Good health and good health services are the most important”
• “There used to be lots of services geared towards low-income but we’re losing them one by one”
• “I’d say at least 50 per cent of the people on the street have mental health problems and they have no place to go. They’re stuck in “nowhere” land”
• “There are a lot of kids. There is a need for a drop in for a 24 hour drop-in for youth.”

Assets

• Affordable and free services
• Accessible, street-level and community-based services
• Faith-based organizations that provide social programming and resources
• Services tied to housing
• Community centres and drop-in centres
• Libraries and neighbourhood houses
• Aboriginal services
• Specialized services for people with multiple barriers

Gaps

• Addiction, recovery, harm reduction and detox-on-demand supports and services
• Laundry service, showers and public bathrooms
• Employment centres and supports
• Specialized supports for Aboriginals, women, families with special needs, men with children, seniors, youth, ex-inmates and other vulnerable groups
• Better quality and access of services and transit to services
• Counselling, wellness programs and self-help groups
• A crisis centre with a suicide hotline AND 24-hour emergency care
• Places and psychiatric support for people with mental health issues
• Outreach, advocacy and peer support workers and liaisons
• Training for support workers

Hopes

• For better and more health services and facilities
• That Riverview reopens and for more mental health treatment centres
• For more help for people with alcohol and addiction issues
• For more support for people getting out of recovery and rehab
• That the existing health services in the DTES remain operating
• For more injection and inhalation sites and harm reduction
• For more places for people to store their belongings
• For more advocacy support
• For supports for families
• For 24-hour drop-in centres and more spaces for community at night
• For more seniors facilities
• That drugs are legalized and decriminalized
• That people are helped and not abandoned
• That there are enough resources
• For more accessibility for people with disabilities

Fears

• Around loss of services, programs and facilities resulting in future displacement
• That youth programs will be shut down due to cutbacks
• That long-standing services will be demolished and the trust that they’ve spent years building will be destroyed
• That donations will dwindle
• That services are being too heavily used and won’t have adequate capacity anymore
• That organizations and service providers will be in charge and the residents will have no control
• That there’ll be more stigma associated with addiction and recovery houses
• That the government will use the services in the neighbourhood as an excuse for moving more people with drug addiction and mental illness into the neighbourhood to control them
Communities identified assets: health and social services

Important spaces, places, and things identified by Downtown Eastside residents

Locations outside the Downtown Eastside

List of assets

1. Carnegie Community Centre
2. DTES Women’s Centre
3. Ray-Cam Co-operative Centre
4. Strathcona Community Centre
5. Union Gospel Mission
6. VANDU
7. Insite
8. First United Church
9. Lifeskills Centre
10. The 44 - Evelyne Saller Centre
11. Vancouver Native Health Society Medical Clinic
12. Pender Community Health Centre
13. Mission Possible
14. Oppenheimer Park
15. The Bugout
16. Living Room Drop In
17. Wish Drop-In Centre
18. Downtown Community Health Clinic
19. Crabtree Corner Family Resource Centre
20. Services (Not Mapped)
21. Sheway
22. The Listening Post
23. PACE
24. Admiral Seymour Elementary School
25. Aboriginal Front Door Society
26. Chinatown (Not Mapped)
27. Downtown Eastside Neighbourhood House
28. Downtown Eastside Seniors’ Centre
29. Vancouver Women’s Health Collective
30. AA meetings (Not Mapped)
31. Aboriginal Friendship Centre
32. Antoinette Lodge
33. Downtown Medical Clinic
34. Dr. Peter AIDS Foundation
35. Dr. Sun Yat-Sen Classical Chinese Garden
36. Health Clinics (Not Mapped)
37. Health Contact Centre
38. Jacob’s Well
39. Network of Inner City Community Services Society
40. Portland Community Clinic
41. Pathways Information Centre
42. Salvation Army
43. Strathcona Mental Health Team
44. The Door is Open
45. UBC Learning Exchange
What We Heard

Well-being: Inclusion, Belonging, Safety

• “Get rid of the bars that are down here at DTES—that’s where most of the money is going or on drugs. We need stiffer penalties for drug dealers”
• “People are fearful for their safety because they feel like it’s not their neighborhood anymore”
• “I’m hoping that we can start working together, to get the stigma gone; a neighborhood is ALL INCLUSIVE. We need better integration”
• “It would be nice if every once and a while women could be treated like Queens”
• “I fear walking in the area, past the bottle depot. There are so many fights and stabbings”
• “I’d like to see no more violence and that everyone has homes”
• “I fear snobby people. There is an increased presence of security that harass and discriminate against us”
• “I don’t like people taking advantage of this neighbourhood from the outside”
• “There has to be more protection for the vulnerable people down here”
• “There’s nothing to control the fighting out there, drinking, squealing tires (in reference to bars and clubs in the area). For 3, 4 nights a week, that’s what you get.”
• “It isn’t just the noise, it’s the implications. It’s mostly young people who don’t get that this is a community of people who live here.”
• “Change has led to tension”
• “My fear is that as things start to build and grow we are not going to have this close knit community. It’s frightening.”

Assets

• The people in the neighbourhood, friends and family
• Community spaces, centres, places to socialize and gathering places
• Churches and faith-based organizations
• Chinatown and cultural community
• Memorials, heritage and historical sites
• Artists community and space
• Harm reduction and addiction services
• Outdoor spaces
• Areas: the whole neighbourhood, Main and Hastings, Carrall and Hastings, Hastings and Princess, Gastown, Strathcona and the 100-block East Hastings
• Qualities: Heart and soul, camaraderie, justice, inclusion, acceptance, support, familiarity, being nonjudgmental
Gaps

- Places, businesses and areas that make low-income people feel included
- Places for arts and cultural activities, dance, music, artists and fun to flourish
- More friends and good friends
- Recognition for First Nations people
- Interaction and connections between different groups of people
- Payphones that function and free phones
- Things that create pride in the DTES and better branding of the DTES
- Joy, happiness, peace, love, compassion, empowerment, human dignity, respect
- Control over changes in the neighbourhood, a voice that can be heard and a stronger connection to City Hall
- Crime, gangs, drug dealers, violence and street disorder
- Good relationships and harassment-free communication with beat cops
- Sense of security and police protection
- Safety for women

Hopes

- For better training for the police
- For more police patrols to improve safety and a community police centre
- That the drug scene gets cleaned up and drug dealers leave the area and get arrested
- That the DTES gets safer and less crime
- For slower traffic and more controlled crosswalks
- For a DTES mission, vision and principles to formally created and adhered to
- That residents are brought into development processes early to contribute to decisions that will affect their community and empowerment
- That the DTES can survive as a place where you don’t get pushed out and people continue to feel at home as things change
- That people are supported and the area is protected
- That everything will stay good within people and they will keep family and friend connections
- That people can get along, more multiculturalism and more communication
- For more trust, more friendship, more care
- For vicarious experience, empathy and wisdom
- For a change in attitudes, help with non-discrimination
- For more opportunities for community art and mural projects
Fears

• That people will be displaced over time and pushed out of the neighbourhood
• That social connections and sense of community will be lost and that people won’t feel ‘at home’ in the neighbourhood anymore
• That there will be an increase in prejudice and racism and vulnerable people will increasingly become an ‘underclass’
• That landlords, stores and restaurants will discriminate, disrespect and exclude low-income people
• That gentrification will be used as social control
• That the low-income community won’t be respected and protected
• That change in the demographics and influx of new residents will lead to problems, violence, distrust, isolation, dislocation and further vulnerability and insecurity
• That “police brutality” will get worse
Assets listed were identified by two or more participants at Social Impact Assessment community input workshops, summer 2012. Not all assets can be mapped to particular locations. Assets are arranged by the number of times they were mentioned, from most mentions to least mentions.
## Appendix E – Community Quotes

### Comments About Community Assets

<table>
<thead>
<tr>
<th>Location</th>
<th>Quote</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>411 Service Centre</strong></td>
<td>“The 411 service centre was really great, but it’s not there anymore. We need places like that.”</td>
</tr>
<tr>
<td><strong>Carnegie Centre</strong></td>
<td>“We need more places like Carnegie, with more interaction.”</td>
</tr>
<tr>
<td></td>
<td>“I’ve been 19 years in the DTES. I was homeless with a baby. I left an abusive relationship, and I felt happy and welcomed here because of the library and parks. I feel welcomed here at Carnegie.”</td>
</tr>
<tr>
<td></td>
<td>“The Carnegie is a good place to go to escape, a good place to relax.”</td>
</tr>
<tr>
<td><strong>Crab Park</strong></td>
<td>“Crab Park is my favourite place because it is beside the ocean.”</td>
</tr>
<tr>
<td></td>
<td>“You feel accepted in Crab Park, everyone talks to everybody.”</td>
</tr>
<tr>
<td><strong>DTES Street Market</strong></td>
<td>“There are so many people there… it’s growing. Even people from out of the DTES come here now. It’s a way to meet new people and important as a way to make money and not get bothered by police.”</td>
</tr>
<tr>
<td><strong>DTES Women’s Centre</strong></td>
<td>“I feel safe there. I can meet my girlfriends there without worrying.”</td>
</tr>
<tr>
<td></td>
<td>“I go there every day for coffee and just to get out of my home.”</td>
</tr>
<tr>
<td></td>
<td>“DTES Women’s Centre is the most important spot for me.”</td>
</tr>
<tr>
<td></td>
<td>“Women don’t realize how much these places help us out a lot. They need more places like this, with clothing and advocacy.”</td>
</tr>
<tr>
<td><strong>The Dude’s Club</strong></td>
<td>“The Dude’s Club is a place a man can go on a Thursday. It’s Men’s Health night. I can get food there and everyone is welcome. It’s great to have.”</td>
</tr>
<tr>
<td><strong>The Dugout</strong></td>
<td>“The Dugout and the services it provides—food, soup in the mornings. They have the best Green Pea soup in Vancouver. They give out cakes and pies.”</td>
</tr>
<tr>
<td></td>
<td>“The Dugout is a good place to start in the morning.”</td>
</tr>
<tr>
<td></td>
<td>“[The Dugout] is kind of like a safe haven when there’s nowhere else to go. Better than sitting in your room.”</td>
</tr>
<tr>
<td></td>
<td>“I really appreciate The Dugout. Coming here at 12:30 every day has really saved my bacon.”</td>
</tr>
<tr>
<td></td>
<td>“The Dugout is an oasis.”</td>
</tr>
<tr>
<td></td>
<td>“I come to The Dugout to stay sane, give back, meet new people.”</td>
</tr>
<tr>
<td><strong>First United Church</strong></td>
<td>“I’m really appreciative of First United and the shelter, but that’s not enough for how people live on a permanent basis.”</td>
</tr>
<tr>
<td></td>
<td>“It’s an important place, especially that I’m worried about the people that really need it. They’ll accept the extreme, they don’t pick and choose and turn away.”</td>
</tr>
<tr>
<td><strong>Life Skills Centre</strong></td>
<td>“There are different things you can learn about. If I miss a meeting here [VANDU], I can go there…. There are things that I never knew but I learned about in the Rock Group there.”</td>
</tr>
<tr>
<td></td>
<td>“They have arts and crafts at LifeSkills. It’s totally therapeutic doing something with your hands and then watching the smile on their face when you give it to them.”</td>
</tr>
<tr>
<td><strong>My Home</strong></td>
<td>“It’s a sanctuary, a castle.”</td>
</tr>
<tr>
<td></td>
<td>“I’ve done the homeless shelter routine. It’s just not my home.”</td>
</tr>
</tbody>
</table>
### Comments About Being Low-Income

#### General

- “I don’t want us to become statistics.”
- “Give any of us a chance, see what we can do.”
- “We need a break. We need a chance to look after ourselves.”
- “We (poor people) still contribute to society.”
- “You have to have hope or you’re dust.”
- “If I was given half a chance, I wouldn’t be so much of a burden and I could take care of myself.”
- “No one has asked my opinion before.”
### General

**Cont.**

- “Bad luck is my disability.”
- “I hope that the mayor and council will get a conscience, have integrity, think outside of affluence and realize that the poor are valuable.”
- “I’m only financially poor.”

### Affordability

- “I can’t afford to buy a piece of meat
- “There are so many unaffordable places to shop”
- “I can’t afford to live in Dunbar. Buy a 10,000 sq ft. penthouse. Where do I feel at home? Where do I fit in?”
- “Please help us help ourselves. Give us enough money to live like human beings not animals.”
- “Who can live on $175/month? (amount of income assistance left over after paying rent) I can’t.”
- “I’m afraid I’ll end up back in jail for nonpaid tickets. Sometimes I don’t have enough money for the bus.”
- “Welfare rates need to be increased!”
- “A person who is on normal welfare—how does he live?”
- “I’m tired of not being able to shop in my neighbourhood.”
- “There’s a coffee shop down the street with cookies for $4 and drinks up to $9.”
- “I have a fridge and hot plate, but there’s no food bank or affordable options around.”

### Discrimination

- “We are ostracized in our own neighbourhood.”
- “I fear snobby people. There is an increased presence of security that harass and discriminate against us.”
- “I fear that the City would rather see us dead.”
- “There’s exclusive shops around the neighbourhood. Are we even allowed to go in them or near them?”
- “I feel left out, too tired of living in a state of solitude!”
- “So many of the stores show disrespect to poor people.”
- “When revitalize, reorganize, regenerate words are used it’s as if we’re dead/zombies.”
- “There seems to be a feeling of hope that they don’t want you to get better so they can keep looking down on you.”
- “I’m tired of discrimination from people when we go outside of the DTES.”
- “Demonization of the inhabitants of the DTES has to stop.”
- “Need to have some respect for the poor, give us some place to be.”
- “People judge us because of our postal code. We’re known Canada-wide as the poorest postal code.”
- “In Vancouver, being poor is a crime.”
- “I feel more comfortable with people in my neighbourhood/class.”
- “It’s changing. We have to not forget that we were here first. We want you to see us for who we are and what we are. Down here it’s safe. We always will be here. We shouldn’t be looked down upon.”
- “There’s some places we don’t feel comfortable.”
### Discrimination Cont.

- “This city is for everybody, not just the rich.”
- “It’s not a crime to be poor.”

### Resources

- “Why do we have to beg for places to live?”
- “Welfare rates need to be increased!”
- “Mostly everything is done for the rich, not for the poor. It’s so hard to go to a concert, hockey game. For people 30-60 years old, particularly men, there’s nothing for men to do.”
- “My diet is a lousy catch as catch can.”
- “People need places to live so they don’t have to live on the street. It would be nice to have a raise of welfare rates so this is possible”
- “It is like living in a Charles Dickens novel.”
- “I’d like to see more outlets for clothing for men. It’s inexpensive, it saves money. It brings self-esteem up to have new clothes on”
- “There’s nothing good for the poor, we’re getting shafted.”
- “There used to be lots of services geared towards low-income but we’re losing them one by one.”
- “Lunch is good enough. Your stomach shrinks after a while.”
- “My friend used to work in a fish processing plant, that work is gone. Now she is looking for dishwashing jobs but no one is hiring.”
- “I am trying to get a home—I was turned down 4 times in 2 days.”
- “You see these condos going up but they are not for us.”
- “They won’t hire locally. There’s lots of people here who are capable of working. Give us a chance.”
- “Because the ‘housing’ has no cooking facilities, people have to go to the free food services.”
- “People need a couple hundred square feet with a bathroom, so they can feel good about themselves. When you feel penned in, how can you help the community?”
- “A lot of our people are put into slum hotels. Mice, cockroaches, back upped toilets that drain into showers. These are unfit for people to live in.”
- “I fear snobby people. There is an increased presence of security that harass and discriminate against us.”

### Vulnerability

- “You are an easy target for a bully.”
- “On cheque day seniors get abused and stolen from. I see it all the time, it’s terrible.”
- “People don’t feel safe going out to change their checks on pension day because they get robbed.”
## Comments About the DTES:

<table>
<thead>
<tr>
<th>Uniqueness</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I don’t fit in in other places.”</td>
</tr>
<tr>
<td>“DTES—there’s nothing like it in the world.”</td>
</tr>
<tr>
<td>“It’s a neighbourhood that you can’t find anywhere else in Vancouver”</td>
</tr>
<tr>
<td>“This is not the poorest postal code, we are the richest.”</td>
</tr>
<tr>
<td>“It makes me calm, I have time to relax before I go to work, I get out of the DTES every day. But then it also makes me miss the DTES because people are so different. I like taking the bus, I learn so many different things and get into so many conversations.” (on taking the bus to the pharmacy on Kingsway)</td>
</tr>
<tr>
<td>“It’s the friendliest part of the province. Where else can you get credit at a store?”</td>
</tr>
<tr>
<td>“It’s a multicultural place.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>“You don’t see the mayor in the neighbourhood. He needs to hear from us.”</td>
</tr>
<tr>
<td>“Where is the balance here?”</td>
</tr>
<tr>
<td>“It’s too bad the gentry down here—as we call it, don’t interact much...don’t come in here to see what’s going on.”</td>
</tr>
<tr>
<td>“Get rid of the bars that are down here at DTES—that’s where most of the money is going or on drugs. We need stiffer penalties for drug dealers”</td>
</tr>
<tr>
<td>“People who live here are more scared and angry.”</td>
</tr>
<tr>
<td>“I have been here for a month and I am staying at a place that has black mold, bed bugs, cockroaches, mice etc.”</td>
</tr>
<tr>
<td>“If I had 1 million dollars I wouldn’t want to live in the DTES.”</td>
</tr>
<tr>
<td>“There are more people in line ups than before.”</td>
</tr>
<tr>
<td>“We need more affordable housing, more support workers, more treatment workers, more workshops on a daily basis. Different programs of all kinds. More First Nations that are committed to help our people, more politicians that are willing to walk in our shoes to see how hard it is to live down here in the DTES.”</td>
</tr>
<tr>
<td>“Rich people don’t fit in with poor people. There’s a lot of animosity.”</td>
</tr>
<tr>
<td>“I’m here out of necessity because of my income.”</td>
</tr>
<tr>
<td>“There’s no life here. It’s hell.”</td>
</tr>
<tr>
<td>“When I left Winnipeg, I found myself in the downtown core doing things I shouldn’t be doing. The downtown core seems to drag me back—that’s why I’m here.”</td>
</tr>
<tr>
<td>“There’s a new whack of remand centres. They pick on the DTES, I mean where else are they gonna get people from?”</td>
</tr>
<tr>
<td>“For 3, 4 nights a week, that’s what you get. There’s nothing to control the fighting out there, drinking, squealing tires.” (in reference to bars/clubs in the area)</td>
</tr>
<tr>
<td>“I don’t like people taking advantage of this neighbourhood from the outside.”</td>
</tr>
<tr>
<td>“There’s just too many bars and nightclubs in one spot.”</td>
</tr>
</tbody>
</table>
### Challenges Cont.

“One of the hopes I have is that Hastings Street from Carrall to Gore gets cleaned up. The drug dealers...it’s just awful. And they’re outsiders. They don’t belong to this community.”

“I hope that we can get the DTES cleaned up—especially Pantages, which is shameful.”

“I hope to get out of here. 10 years ago I was in college and full of ideas. Now I’m just full of hate. I hate this place, I hate these people.”

“It is a hard life here. You see so much pain.”

### Safety

“20 years ago you could bring people down here. Now you can’t. It’s disgusting. It makes me sick. Going from bad to worse.”

“I fear walking in the area, past the bottle depot. There are so many fights and stabbings”

“You can’t go out. I’ve been robbed several times in the daytime.”

“I see a lot of things happening to elders and kids here. I saw a 12 year old begging her boyfriend (who was old enough to be her father) begging her boyfriend for drugs. I’m scared for these young people.”

“I see a lot of things happening to elders and kids here. I saw a 12 year old begging her boyfriend (who was old enough to be her father) begging her boyfriend for drugs. I’m scared for these young people.”

“I ran into a girl on the street who got beaten and was lying all bloody on the street. It would be nice if every once and a while women could be treated like Queens.”

“I used to draw and paint but everything gets stolen down here.”

### People

“This has always been the low-income area.”

“It’s the best place to work and the best people are in the DTES.”

“We’re all here as caring people. That’s what I love about the DTES.”

“Down here, if you’re rude to somebody, chances are somebody will call you out on it.”

“People try to help people down here.”

“All the women here are survivors”

“I love the people, I love the DTES.”

“There’s a lot of beautiful people around this whole neighbourhood.”

### Importance of Neighbourhood

“The DTES is an interesting and exciting place to live.”

“This is our culture and our land.”

“Skid Row is where the heart is.”

“The whole DTES is my favourite place.”

“The whole DTES is important to me. I have been living and working here for 20 years.”

“The whole DTES is important to me with the exception of crappy housing”

“I consider this my hood. I have been here since 1980.”

“Most of us have been down here most of our lives.”

“I feel at home down here. I don’t want that taken away.”

“In the DTES you can be however you want to be and be accepted.”
Importance of Neighbourhood Cont.

“I’ve been living upstairs for 6 years. It’s the first place in my life I’ve been part of a community. I know my neighbours and I’ve never felt like that anywhere before. There’s lots of great help and support down here.”

“They herd the drug addicts and sick people down here and that’s why I get so much help.”

“It’s the friendliest place in the country.”

“I feel like I have pretty good neighbours and that’s important. A few good neighbours tend to keep me afloat.”

“The streets are for everybody.”

“I have a mental health issue. I took early retirement and lost my pension. I moved to the DTES and feel like it is my home. People talk to each other here”

“On the street, it is all people I went to high school with, my cousins my relatives.”

“It’s the only community where I work in and everyone says ‘Hi.’”

“I feel safe all over. I love coming down here.”

“It’s a place where I learned not to show judgment.”

“You come down here and feel accepted.”

“People can die with dignity in their neighbourhood with their family and friends.”

Gaps

“There should be public washrooms on every block. Start at Victory Square and just keep going all the way down [Hastings]”

“My pet peeve...will somebody please bring back some pay phones! They think everybody in the area has cell phones...bull!”

“I’d like to see no more violence and that everyone has homes”

“There has to be more protection for the vulnerable people down here”

“People still need to go to the bathroom at different times; the bathrooms need to be open 24 hours.”

“There are a lot of kids. There is a need for a drop in for a 24 hour drop-in for youth.”

“This is supposed to be the poorest area but we don’t have a food bank”

“A lot of the food that has been given doesn’t even get to us”

“I need my own kitchen so I can store food without it getting stolen all the time”

“We need more places with free clothing”

“We need more walk-in clinics with less waiting time”

“We need more centres for seniors that are distinct and dedicated to them”

“I hope that there are more services for the handicapped. For example, food bank deliveries for the handicapped”

“Good health and good health services are the most important”

“There used to be lots of services geared towards low-income but we’re losing them one by one”

“I’d say at least 50 per cent of the people on the street have mental health problems and they have no place to go. They're stuck in “nowhere” land”
Comments About Neighbourhood Change

<table>
<thead>
<tr>
<th>Displacement</th>
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<tbody>
<tr>
<td>“It’s NIMBY backwards. They are coming in my backyard and telling me I have to go.”</td>
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<tr>
<td>“There is development encroachment from Cambie and from Main, encroachment on the DTES is coming from two directions and they’re checker boarding—putting a building here and another there. They’re trying to legislate the DTES out of business, legislate us out without any recourse and count on peoples’ lack of ability to see understand what is going on.”</td>
</tr>
<tr>
<td>“Change would affect the whole community and push the people that are poor (addicts etc.) into other places. The change may cause more homelessness in Vancouver. We are people too, the government needs to transform the area, not destroy it. The government needs to hear the unheard people and not push them out of their place called home and a place where everybody is family that takes care of everybody and each other.”</td>
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<tr>
<td>“Vancouver change is and has been in the name of greed and oppression. Long overdue are laws to stop developers from banishing low and even moderate income people from this city.”</td>
</tr>
<tr>
<td>“Condos are going up. Can’t they be built for the people of the DTES? Can’t the people stay? There’s disrespect and judgement. It’s sad.”</td>
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<tr>
<td>“What are they going to do with these people? Where are they going to put them (the ones who are going to be displaced)? There’s no hope at all.”</td>
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<tr>
<td>“I don’t want to move. I don’t want to be forced out.”</td>
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<tr>
<td>“I fear that I won’t be able to stay where I am. Everything I need and want is here.”</td>
</tr>
<tr>
<td>“You can’t build a bunch of condos and force people out. We’ve got to live somewhere.”</td>
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<tr>
<td>“My biggest fear is that if they build condos all the poor people will get kicked out”</td>
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<tr>
<td>“We were here first. It feels like they’re trying to push us out”</td>
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<tr>
<td>“It is valuable property and we are poor. They are just going to push us out.”</td>
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<tr>
<td>“We’re not going without a fight.”</td>
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<tr>
<td>“Gastown is expanding—they use that to push up the rents and they are pricing us out of the area.”</td>
</tr>
<tr>
<td>“I fear that all the services will be shut down or that the rent will raise and no one will be able to stay and the community will disperse.”</td>
</tr>
<tr>
<td>“I know the neighbourhood. I am scared that I’m going to get pushed out and have to travel further to access what I need.”</td>
</tr>
<tr>
<td>“My biggest fear is that if they build condos all the poor people will get kicked out.”</td>
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<tr>
<td>“I’m afraid facilities will be closed or not replaced. It’ll be hard to go there if they are pushed out further.”</td>
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<tr>
<td>Gentrification</td>
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<tr>
<td>--------------------------------------------------------------------------------</td>
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<tr>
<td>“We want gentrification to stop.”</td>
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<tr>
<td>“Gentrification is increasing homelessness.”</td>
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<tr>
<td>“You don’t need to invite the world to a neighbourhood that needs to grow up organically.”</td>
</tr>
<tr>
<td>“I like change if it is organic and slow-change that comes from the neighbourhood, rather than from outside of it...change initiated by residents and community members. Why do people in boardrooms and towers get to play board games with our homes?”</td>
</tr>
<tr>
<td>“I’ve been working here since the 70s and they knew that City Hall was going to gentrify them.”</td>
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<tr>
<td>“It’s bad how the rich people are moving in.”</td>
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<tr>
<td>“The DTES is up for grabs for profit.”</td>
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<tr>
<td>“Gentrification only makes people’s lives rougher. They treat us like lepers.”</td>
</tr>
<tr>
<td>“It’s horrible. So shee shee la la. (The condos, day spas and high end stuff opening up). They could have at least made it funky so it fits the community. It makes my skin crawl. The developers have no idea of the neighbourhood. It’s going to be really sad to see the community spirit and love for this neighbourhood be demolished.”</td>
</tr>
<tr>
<td>“The DTES is getting overrun by money, new condos.”</td>
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<tr>
<td>“The neighbourhood is being taken over by people who have no respect for people who have lived here.”</td>
</tr>
<tr>
<td>“They are ripping down housing that is $375/month and putting up condos.”</td>
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<tr>
<td>“Change is good as long so we can stop gentrification.”</td>
</tr>
<tr>
<td>“Change is not too good. We do not need upscale shops.”</td>
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<tr>
<td>“I fear the neighbourhood has become trendy; in 30 years there will be nothing left.”</td>
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<tr>
<td>“I have no hope for this place. The politicians are all crooked and in bed with the developers.”</td>
</tr>
<tr>
<td>Housing</td>
</tr>
<tr>
<td>“If they build 100 condos, build 100 lower-income units. 50/50 is fair.”</td>
</tr>
<tr>
<td>“I fear an increase in rents. $500 for SROs that have cockroaches and mice is unacceptable”</td>
</tr>
<tr>
<td>“My hope for the DTES is that there is enough affordable housing....not condos. They push us little people out. There needs to be a decent balance between development and condominiums”</td>
</tr>
<tr>
<td>“I’m scared that development might limit the number of affordable housing units available to live in”</td>
</tr>
<tr>
<td>“Why are you building condos when there are so many people living on the street? A lot of condos going up which is not right because they are sitting there empty and we’re homeless. A lot of us could be using these apartments that are now standing empty.”</td>
</tr>
<tr>
<td>“Legislation allows developers to develop any height as long as there are a pitiful few low-income suites. It’s a disgrace to our low-income citizens.”</td>
</tr>
<tr>
<td>“There should be a moratorium on condos in the DTES.”</td>
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### Benefits

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<th>Statement</th>
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<tbody>
<tr>
<td>“Change is good if it is happening for us not to us.”</td>
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<tr>
<td>“I like to see them build condos. It employs people.”</td>
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<tr>
<td>“I hope there will be more families moving in here”</td>
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<tr>
<td>“I do feel it’s possible to change things…to be better than what we have.”</td>
</tr>
<tr>
<td>“One of the hopes I have is that Hastings Street from Carrall to Gore gets cleaned up. The drug dealers…it’s just awful. And they’re outsiders, they don’t belong to this community.”</td>
</tr>
<tr>
<td>“We can’t stop it but ideally we need to have a shopping centre for us that is affordable. The ability to buy some bedding or furniture so we don’t have to deal with Welfare and be given a little more choice because we don’t really go out of the community”</td>
</tr>
<tr>
<td>“Change is good only if it betters the future for our children and families. As long as the change benefits the families with children and single families.”</td>
</tr>
<tr>
<td>“If it (development) can give us jobs, like cleaning the buildings/maintenance…I think if they include us that will make it work.”</td>
</tr>
<tr>
<td>“Development brings new life. Now we are segregated, rich and poor. We can stay here. People will move here from somewhere else too.”</td>
</tr>
<tr>
<td>“If you increase people’s surroundings, you increase how they feel about themselves.”</td>
</tr>
<tr>
<td>“Just give a small percent to us.”</td>
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<tr>
<td>“We need to make something for us out of development. I hate walking downtown and seeing someone sleeping on the street.”</td>
</tr>
<tr>
<td>“Change is good as long as it’s positive and benefits the DTES residents.”</td>
</tr>
<tr>
<td>“People with money might come here and buy our art.”</td>
</tr>
<tr>
<td>“Change is only good if it helps the people that need help.”</td>
</tr>
<tr>
<td>“Anything is better than it was before, it will change abundance. A change into a higher dimension: heart-based instead of ego-based.”</td>
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</table>

### No Change

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<thead>
<tr>
<th>Statement</th>
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<tbody>
<tr>
<td>“As things are, they will remain. Nothing will change.”</td>
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<tr>
<td>“The DTES doesn’t really change. It just shifts, rotates.”</td>
</tr>
<tr>
<td>“I’d like the neighbourhood to stay the same way.”</td>
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<tr>
<td>“Keep this community as is.”</td>
</tr>
<tr>
<td>“I like the fact that there’s a mix down here now…I don’t want to see that change and become gentrified like Yaletown.”</td>
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### Fear

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<th>Statement</th>
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<tbody>
<tr>
<td>“Development is like Godzilla. We live in fear.”</td>
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<tr>
<td>“People are fearful for their safety because they feel like it’s not their neighborhood anymore”</td>
</tr>
<tr>
<td>“I’m scared it’s (development and neighbourhood change) going to change the whole meaning of the DTES.”</td>
</tr>
<tr>
<td>“It is scary (changes in the DTES). It is a lockout. They don’t care about Mother Earth. There’s a lack of respect.”</td>
</tr>
<tr>
<td>“I don’t know if this is a pride thing, but I fear that all these years of struggle we’ve all had here in this community…has no meaning. It will just get wiped away. […] My hope is that the struggle to improve will keep on.”</td>
</tr>
<tr>
<td>“My fear is that as things start to build and grow, we are not going to have this close-knit community. It’s frightening.”</td>
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<tr>
<td>General</td>
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<td>-----------------------------------------------------------------------</td>
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<tr>
<td>“The area should be developed and the people here should be distributed—not just in one spot. It should be taken back by the City. Don’t know why the City let it become like this. The SROs are nasty and a lot of HIV, Hep C.”</td>
</tr>
<tr>
<td>“Change is inevitable.”</td>
</tr>
<tr>
<td>“I don’t like people taking advantage of this neighbourhood from the outside”</td>
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<tr>
<td>“I’m just gonna deal with it...everybody’s just gonna have to deal with it...it’s gonna change.”</td>
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<tr>
<td>“There’s no control. There’s no thought for people who live here.”</td>
</tr>
<tr>
<td>“Development kills community spirit, turfs out people who built community, who’ve been here for years and years. It will take away their voices, will make it more of a police state.”</td>
</tr>
<tr>
<td>“When we change something in the DTES it’s always about money.”</td>
</tr>
<tr>
<td>“The developments don’t make us feel at home.”</td>
</tr>
<tr>
<td>“It’s changing. We have to not forget that we were here first. We want you to see us for who we are and what we are. Down here it’s safe. We always will be here. We shouldn’t be looked down upon.”</td>
</tr>
<tr>
<td>“Change? I’m living with it.”</td>
</tr>
<tr>
<td>“I feel pretty sad to see what’s happening since I’ve been here a long time.”</td>
</tr>
<tr>
<td>“It’s all so much about money it seems hopeless.”</td>
</tr>
<tr>
<td>“Development? Boo!”</td>
</tr>
<tr>
<td>“One of the things I find most distressing is that these changes are going to affect the youth.”</td>
</tr>
<tr>
<td>“Eventually, it will take a long time, but we will all get along.”</td>
</tr>
<tr>
<td>“We want everyone to be able to co-exist.”</td>
</tr>
<tr>
<td>“It isn’t just the noise, it’s the implications. It’s mostly young people who don’t get that this is a community of people who live here.”</td>
</tr>
<tr>
<td>“Change has led to tension”</td>
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</tbody>
</table>
Appendix F – Further Reading

For more detailed information on the Downtown Eastside, refer to the following documents:

- City of Vancouver. (2013, September). Downtown Eastside Local Area Profile 2013.
REFERENCES


City of Vancouver. (2012). Downtown Eastside Local Area Profile.


City of Vancouver. (2008, April). Downtown Eastside Demographic Study of SRO and Social Housing Tenants.


Hill, Kelly. (2010). Mapping Artists and Cultural Workers in Canada’s Large Cities: A study prepared for the City of Vancouver, the City of Calgary, the City of Toronto, the City of Ottawa and the Ville de Montreal based on 2006 census data. Hill Strategies Research Inc.


Lewis, M., Boyes, K., McClanaghan, D., and Copas, J. (2008, April). Downtown Eastside Demographic Study of SRO and Social Housing Tenants. Report prepared for the City of Vancouver, BC Housing and The Vancouver Agreement.
McCreary Centre Society. (2002). Between the Cracks: Homeless Youth in Vancouver.

McCreary Centre Society. (2001). No Place to Call Home: A Profile of Street Youth in British Columbia.


