

# Jewish Family Services Client Needs During Covid-19

## An Update by the JFS Vancouver Client Advisory Committee

This is a particularly difficult time for the clients of Jewish Family Services Vancouver (JFS). Before Covid-19, we were already dealing with multiple stressors such as serious illness, disability, psychological issues, addiction, aging complications, adjusting to a new life in Canada, extreme poverty, and housing and food insecurity. Many of us were already using all our emotional resources to manage issues such as:

- Physical and social isolation
- Living in unsafe conditions
- Struggling to feed ourselves and our families
- Trying to meet our basic needs

Then Covid-19 happened, adding additional physical and emotional stressors to clients who were already struggling.

*“I already felt completely beat up by a year of crises and disasters, and then Covid-19 happened”*

In this JFS Client Update document compiled and written by the JFS Client Advisory Committee (CAC), we endeavor to document the experiences of existing JFS clients and their new challenges and unmet needs during this pandemic. This report is based on client feedback (some quotes included in this document) and our own discussions. We hope to find a way to help clients during this unprecedented time and perhaps to change things for the better in the future as well.

This document captures the basic experiences and recommendations that we think are universal for many people who are low income in Canada. There is another private version of this document with specific recommendations for Jewish Family Services Vancouver, as well as a short summary document *A Summary of JFS Client Needs During Covid-19*.

### About the JFS Vancouver Client Advisory Committee

The CAC (Client Advisory Committee) is a small group of JFS (Jewish Family Services) Vancouver clients who volunteer their time to represent the client voice. We work toward identifying issues clients are facing, suggesting service improvements, and trying to help combat the social isolation and loneliness that many clients face. We are a diverse group, made up of a wide range of nationalities, ages, and sexual orientations. We are all living with the life challenges

that made us JFS clients in the first place, and we are committed to helping our fellow clients in any way we can.

In the two years since the committee formed, we have worked in such diverse directions as recommending changes to the JFS website to organizing events for clients such as Shabbat dinners and Passover Seders. Recently, as Covid-19 started to impact our community, we started a newsletter for clients and hosted a town hall with the CEO of JFS for clients.

### JFS Clients

JFS clients include seniors, disabled persons, single mothers, newcomers to Canada, as well as people with varying mental health issues. Approximately 75% of adult clients under 65 are disabled. Many clients are at high risk from Covid-19. Since mid-March, there has been an enormous increase in the number of JFS clients due to Covid-19 related job losses or the need to self-isolate due to health risk or quarantine restrictions.

### The Most Common Client Issues

#### Food

Many clients are having a difficult time getting groceries due to lack of money, needing to self-isolate because they are high risk, or difficulties with transportation. Issues include:

- Getting food from the Jewish or other food banks that will meet special dietary requirements
- Getting someone to pick up groceries for them if they have been advised to stay isolated at home
- Getting an adequate supply of fresh fruit, vegetables, bread, and dairy
- Affording groceries due to severe poverty

#### Housing

Many JFS clients are inadequately housed and live in unhealthy environments – from vermin of all types to abusive situations. There are clients who are homeless – on the street, in shelters, and on sofas. This was the reality before Covid-19 and needing to stay at home when they do not really have a safe and healthy home is exceedingly difficult. Many JFS clients are struggling with paying their rent.

This is an issue that hits very close to the committee, and we know many clients are in similar situations. Of our 5 members 2 are having housing issues; one is in an unhealthy apartment after 8 months of homelessness, and another member is likely going to lose her housing when the house she is living in is sold. Both already suffer with disabling illness.

A single person in BC on social assistance receives **\$760/month**, someone on disability receives **\$1183/month** (this includes a housing stipend of \$375/month), a senior receives a basic income of approximately **\$1450/month** (including CPP, OAS, and GIS). **It currently costs \$800-**

**\$1300/month just to rent a room in a shared house or apartment.** Thus, for many clients, even renting a room is unaffordable, let alone renting their own apartment.

Although renting a room can be a viable short-term situation, shared housing over the longer term is insecure and rarely a good solution for single mothers, seniors and people with disabilities.

#### Basic Necessities

Seniors and people with disabilities may start out with savings, but because their income is consistently less than their needs, within some years most have little if no savings left, and purchasing all basic necessities becomes difficult.

Even when clients are managing housing and food costs with subsidized housing and services like the food bank, most, especially seniors and people who have been disabled for a long time, do not have enough money to cover emergencies, let alone ongoing needs like clothing, replacing/fixing broken items, etc. Clients will walk around in the middle of winter with holes in their only pair of shoes because they do not have enough money for new shoes or boots. Their phones will be broken and they will have no money to fix their phone or buy a new one.

#### PPE and Other Supplies

Many clients, especially those who are at high-risk from Covid-19, would feel more comfortable venturing out of their apartments if they had masks, gloves, hand sanitizer, anti-bacterial cleaner and anti-bacterial wipes. Getting these items is challenging for people who are living on low income, are disabled and/or have mobility issues. There are elderly clients who are no longer going for walks because they are afraid of catching the virus, which is bad for both physical and mental well-being.

#### Home Health Care

Many clients who do need help are worried about having home health care workers come into their homes due to Covid-19 concerns. Some home health care workers are reluctant about tending clients at home for fear of getting Covid-19. This can lead to individuals not having their needs met which in turn creates a high risk of mental and physical deterioration.

With Covid-19 changes, some clients may now need help with basic housekeeping – for example, single mothers with special needs children who are no longer attending day programs.

*“I am burning out, trying to teach him and being his playmate there is no time for cleaning my home... and I can't afford it.”*

#### Transportation

For many clients, transportation is a major issue. Many do not have cars and taking public transit is risky for them.

### Childcare and Home Schooling

For clients with children, especially single mothers with special needs children, this is a profoundly impossible situation. They are trying to take care of the children's physical, social, and mental needs all while dealing with their own social isolation and poverty. They need support.

We received emails from single mothers with teenagers who are deeply concerned about the emotional and mental health of their teenagers

*"loneliness and lack of purpose due to physical inaction is hard on young men, and they may not reach out".*

Mothers are worried about their teenage daughters self-harming.

### Technology

Elderly clients often do not use or are not familiar with the internet, computers, tablets, etc. They are socially isolated and want to connect, especially with their grandchildren, but do not have the equipment or ability to get set up on communication apps like Zoom. Often they lack the financial means to get set up with equipment and home internet.

### Communications

There is a large communications gap. Clients often do not know what government and non-profit services are available to them. If they do not ask the right person the right question or find the right website, they may fail to get help they are eligible for. When we asked for feedback from clients about their current situation, we received comments about needing help with grocery delivery. That kind of support is offered by several agencies, but you have to know it is available in order to access it, and that is where some clients fall through the cracks.

### Mental and Emotional Health

Everyone is challenged by the Covid-19 pandemic. Many JFS clients were dealing with mental health and addiction issues before Covid-19 that are now exacerbated, and all JFS clients have mental and emotional challenges of living lives filled with difficulties such as ill health, poverty, and abuse.

*"Covid-19 has been depressing and frightening for me. My anxiety has been through the roof and I've had an increased number of panic attacks and migraines. My chronic health conditions have increased in severity and I have new ones. My nightmares and terrors have also increased."*

### Anxiety, Fear, Irritability and Anger

Most clients are struggling with uncertainty, anxiety, and fear. Many clients were already struggling with extreme anxiety, and this pandemic has made it significantly harder for them.

Many clients are finding themselves suddenly coping with fear and anxiety that they are not accustomed to.

Many are afraid to go outside at all – not just outside to the grocery store, but outside for a walk. This is a concern especially for seniors with multiple serious health conditions like heart disease, diabetes, and high blood pressure, who really do need exercise for their health.

Irritability and anger are affecting many due to the stress of Covid-19, especially the challenges of managing one's life when it was already full of challenges.

There is also often a feeling of frustration and anger from people living on social assistance, disability, and CPP that \$2000/month is considered a minimum income by the federal government for people who have lost their jobs, \$2000/month a minimum income for disabled students – while a single person on social assistance receives \$760/month, someone on disability receives \$1183/month, and a senior receives approximately \$1450/month.

### Social Isolation

Many housebound clients depended on family and friends visiting for social and emotional connection and are feeling deeply lonely right now. Many senior clients who were used to spending significant time with their grandchildren are missing them desperately.

*"I miss hugging my grandchildren".*

On the other hand, many housebound disabled and elderly clients are used to socially distancing, having been doing it for years:

*"I've been partially housebound and social distancing for 15 years, all while feeling sick all the time and having to watch my friends, family, and society in general being able to engage fully in life".*

At the same time, while Covid-19 has led to difficult and even higher levels of social isolation for some clients, the urgent response to the pandemic has also brought with it some positives for JFS clients. In adapting to the new social-distancing parameters, services such as telehealth, work-from-home accommodations, new online services, more home deliveries, and a tremendous variety of educational and cultural opportunities (including many synagogue activities) have also become more readily available.

### Recommendations

We have provided separate recommendations to JFS Vancouver for specific service needs and enhancements, and in this more publicly available document, we list recommendations that not only apply to JFS clients in Vancouver, but likely also apply to a broad range of people who are low income, disabled, seniors, etc.

### Food

- Develop systems/programs to have fresh produce and vegetable delivery for free or subsidized grocery deliveries
- Examine the possibility of asking home gardeners to donate to some of their produce to food banks
- Set up or connect clients with volunteers who can grocery shop for them

### Housing

- Create more permanent subsidized housing
- Create transitional apartments for people experiencing a housing crisis
- Increase funding for subsidized housing for single mothers, disabled, and seniors
- Make changes to BC provincial rent subsidy programs. Currently seniors can apply for SAFER and families with children can apply for the BC Rental Assistance Program, while single adults do not qualify for any rental subsidies (other than the \$375 housing stipend included in social assistance and disability payments)
- Advocate for changes to policies at social/subsidized housing to allow small pets. Given that numerous clients will be self-distancing for a significant period of time, small pets could be of great benefit in combating feelings of loneliness and depression

### PPE

- Arrange distribution of 2-5 cloth masks per person for low-income clients who need them
- Arrange distribution of hand sanitizer, disinfectant cleaners and anti-bacterial wipes to people who are low income and can't otherwise obtain them

### Transportation

- Set up systems where volunteer drivers can drive high risk clients without cars to medical appointments, grocery stores, etc.

### Childcare

- Help for single parents with children, especially those with special needs children. This could include:
  - Help with meals
  - Help with basic housework
  - Zoom meetings/teaching help for children

### Communications

We note that improved communications will also serve an important mental health role. A sense of reliability and trust amidst a crisis is crucial, especially for those within the community who are most vulnerable.

- Look for ways to meet information needs specific to Covid-19
- Update websites to provide easy links for needed resources

- Provide easily accessed information about relevant programs
- Provide newsletters for clients
- Provide hotlines etc. for information

### Technology

- Set up systems to get tablets or smart phones for clients without one of these devices
- Find volunteers who can get equipment set up and guide clients on their use (especially Zoom)
- Seek out cell phone providers who can offer special data and phone rates
- Longer term – examine the possibility of getting discounted internet rates or subsidies for people who are low income

### Mental and Emotional Health

- Start group Zoom meetings with counselors for people to talk about their emotions and coping strategies
- Start group Zoom meetings on interesting subjects, or communicate to clients about Zoom activities they might find interesting – subjects like Hebrew studies or book clubs
- Advocate for subsidized housing to allow small pets – many socially isolating high risk clients live alone, and pets can help with feelings of anxiety, stress, and isolation. According to the US Centre for Disease Control, studies have shown that health benefits of pets include increased fitness, lower stress, decreased blood pressure, cholesterol, and triglycerides, and decreased feelings of loneliness

## Long Term Recommendations and Advocacy

Ultimately the long-term solution is for JFS clients to have incomes that are sufficient to meet their basic needs.

### Health Supports

#### Provincial

- Advocate for changes to the Health Benefit Plan provided to people on social assistance or PWD. Currently the health benefits for dentists, physiotherapists, podiatry, glasses, etc. only cover a small fraction of the actual cost, which makes these services inaccessible to people who desperately need them for their health

### Financial Supports

Improved Financial Supports for people with disabilities

#### Federal

- Implement the recommendations of the June 2018 report on the Disability Tax Credit by the Senate Standing Committee on Social Affairs, Science and Technology [https://sencanada.ca/content/sen/committee/421/SOCI/Reports/2018-06-18\\_SS5\\_RDSP-DTC\\_FINAL\\_WEB\\_e.pdf](https://sencanada.ca/content/sen/committee/421/SOCI/Reports/2018-06-18_SS5_RDSP-DTC_FINAL_WEB_e.pdf) . Especially recommendation #14, making the

Federal Disability Tax credit a refundable tax credit, which would put an approximate extra \$1200/year into the pockets of the poorest and most disabled Canadians.

- Make the Guaranteed Income Supplement applicable to people receiving CPP Disability and not just seniors (many countries such as the US have similar federal systems. For example, in the US, people receiving federal Social Security disability also receive SSI Supplemental Security which is the same type of program as the Guaranteed Income Supplement. As a side note – recently a JFS client who receives CPP disability of \$1075 month calculated an American would get \$1700/month and medicare if they input the same years worked and amounts paid into the system.

#### *British Columbia*

- Increase income and disability assistance rates, index rates to inflation, and increase the earnings exemption, including recognizing Canada Pension Plan disability benefits as earned income. (Recommendation #83 from the Budget 2019 Consultation Report by the Select Standing Committee on Finance and Government Services [https://www.leg.bc.ca/content/CommitteeDocuments/41st-parliament/3rd-session/fgs/FGS\\_2018-11-15\\_Budget2019Consultation\\_Report\\_Web.pdf](https://www.leg.bc.ca/content/CommitteeDocuments/41st-parliament/3rd-session/fgs/FGS_2018-11-15_Budget2019Consultation_Report_Web.pdf))
- Advocate for increases to social assistance and PWD that reflect the true cost of meeting basic needs especially housing
- Extend the \$300/month PWD supplement permanently. Even as BC is opening up, many people on PWD are high risk and will have higher costs due to their need for continued social distancing

## In Conclusion

JFS Clients are deeply and profoundly appreciative of JFS Vancouver leadership and staff, the Vancouver Jewish Federation, local synagogues, and the entire Jewish Community – who are stepping up to help us all make it through the coronavirus pandemic. While other food banks shut down, the Jewish Food Bank stepped up, completely changed its processes, and went to a completely pre-pack delivery model – all while the number of clients increased. Knowing that many Jews in the community were going to need help, within just a few weeks JFS had set up a 9am-9pm hotline open 7 days a week.

We know that despite all the effort, money and good intentions of the Jewish community, as long as many clients have only 50-60% of the income they need to meet their most basic needs of shelter and food, their situations will remain in crisis mode.

Jewish Family Services are consistently dealing with clients in complete crisis. We think how much more they could help clients live full and meaningful lives with dignity if basic needs were more easily met.

Finally, as clients we are deeply saddened that when all our energies go into figuring out where we will sleep that night or how we will feed our children, we cannot fulfill our hearts' wish to fulfill the mitzvah of Tikkun Olam in whatever way we can.

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