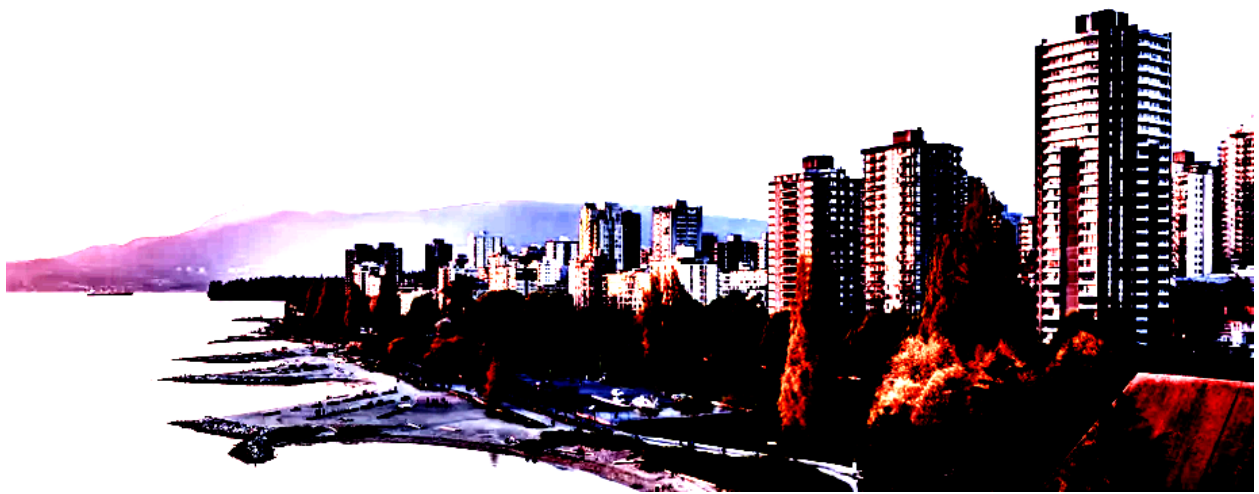


# Moving Backwards

2021 Downtown Vancouver Food Asset & Need Scan



September 2021

# Moving Backwards – A Downtown Vancouver Food Asset and Need Scan

September 2021

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This project was led by Union Gospel Mission, with a goal of assessing the current state of food access, needs, key stakeholders, and gaps, particularly considering significant changes made because of the COVID-19 pandemic.

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For clarification or suggestions about this work, please contact [churchrelations@ugm.ca](mailto:churchrelations@ugm.ca).



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## Introduction

This report assesses the state of food access for vulnerable individuals in Vancouver’s West End and Downtown neighbourhoods, (collectively referred to as “downtown” in this report), within the traditional homelands of the ṣxʷməθkʷəy̓əməʔł təməxʷ (Musqueam), Skwxwú7mesh-ulh Temíxw (Squamish), and səłilwətaʔł (Tsleil-Waututh). We offer it with gratitude and humility as we continue to learn about the rich, yet often painful and inequitable history of this region.



Included is a summary of key informant interviews with staff and volunteers from churches and community organizations that run supportive food programs for vulnerable individuals. This report is not an exhaustive list of food supports in this part of Vancouver, but instead aims to capture the overall availability of – and need for – further programs.

Recommendations are made with a particular focus on community meals and emergency programs that started or shifted with COVID-19. This report highlights strengths, key stakeholders, and gaps in service; and then charts ways to build on the good work being done. It is modeled after “Food Brings Community,” the 2020 Richmond Food Access Report.<sup>1</sup>

We recognize that loneliness is a key challenge in large cities like Vancouver, and the pandemic took its toll on isolated individuals and their ability to cope. One service provider observed that she saw how the forced isolation caused people to “move backwards” in their mental health. It was not noticeable at first – some even thrived in the early days of the pandemic. But as it dragged on, we saw increased difficulties and stresses. Our programs, too, moved backwards in many ways, as we were forced to revert to line-ups and take-out dishes. It is our hope that this analysis also inspire the energy, perspective, and determination to now move forward.

This report also reflects our commitment to work towards the recommendations made in the 2015 Truth and Reconciliation Commission of Canada as we aim to understand and address the lasting impacts of residential schools and other discriminatory practices. In particular, we are guided by the Call to Action 19, which outlines the need to measure and close gaps in health outcomes between Aboriginal and non-Aboriginal communities.<sup>2</sup>

## Framing

Evidence tells us that food programs do not end hunger - only an adequate income will do that<sup>3</sup>. Still, every shared meal, every bag of groceries, and every personal story matters as we work

<sup>1</sup> <https://www.richmondfoodsecurity.org/resources/resources-from-rfss/food-access/>

<sup>2</sup> [https://ehprnh2mwo3.exactdn.com/wp-content/uploads/2021/01/Calls\\_to\\_Action\\_English2.pdf](https://ehprnh2mwo3.exactdn.com/wp-content/uploads/2021/01/Calls_to_Action_English2.pdf)

<sup>3</sup> Tarasuk V, Mitchell A. (2020) Household food insecurity in Canada, 2017-18. Toronto: Research to identify policy options to reduce food insecurity (PROOF). Retrieved from <https://proof.utoronto.ca/>

alongside our vulnerable neighbours and those with the power to influence the policies, budgets, and systems that could eliminate food insecurity and chronic poverty.

Although it will be some time before we understand the full impact of the COVID-19 pandemic, already we know that on top of the challenges that already existed, the virus impacted the ability of nearly half of Canadian residents to meet their financial obligations and essential needs.<sup>4</sup> Beyond the economic, all of us have felt the psychological and social stress caused by the uncertainty and evolving restrictions. The pandemic also inspired new levels of collaboration, creativity, and generosity.

## Demographics

Downtown Vancouver is about 5% of the city's land and 17% of the population (109 000 people). From 1996 to 2016, Downtown's overall population grew by 256%. Notably, Downtown Vancouver also has 69% more seniors (aged 65 and older) than children (aged 0-14).

The central source of the information presented here is the City of Vancouver 2020 Social Indicators Profiles for the West End<sup>5</sup> and Downtown<sup>6</sup>, which were derived from the 2016 census. As with any census data, we recognize limitations. For instance, individuals experiencing homelessness or those who live in secondary suites are often missed by the census. Furthermore, as the census data is now five years old, it does not capture recent trends, including the impact of COVID-19.

Downtown has more density than other parts of Vancouver, amplifying some social challenges. Food insecurity tends to impact certain demographic groups, such as seniors, lone-parent families, and low-income families. The percentage of seniors living alone is 61% in the West End and 37% in Downtown, which is significantly higher than the rate for the City of Vancouver as a whole at 29%.

Lone-parent families account for 35% of families with children in the West End and 32% in Downtown; and although these percentages have decreased since the 1990s, they remain slightly higher than the city average of 29%. Over 80% of single parents are female. Single mothers are more likely to face significant socioeconomic challenges, such as food insecurity and lower income.

Regarding economic standing, about 25% of West End and Downtown residents alike (compared to the city average of 20%) have incomes below the National Poverty Line, which is determined by comparing the family disposable income to the cost of basic needs in a community. By this measure, the West End is the third poorest neighbourhood in the city, and Downtown is the sixth. The West End also has the second lowest median household income. Poverty disproportionately affects certain demographic groups, such as new immigrants or non-permanent residents, individuals with no post-secondary education, Indigenous individuals, Black individuals, other visible minorities, and those

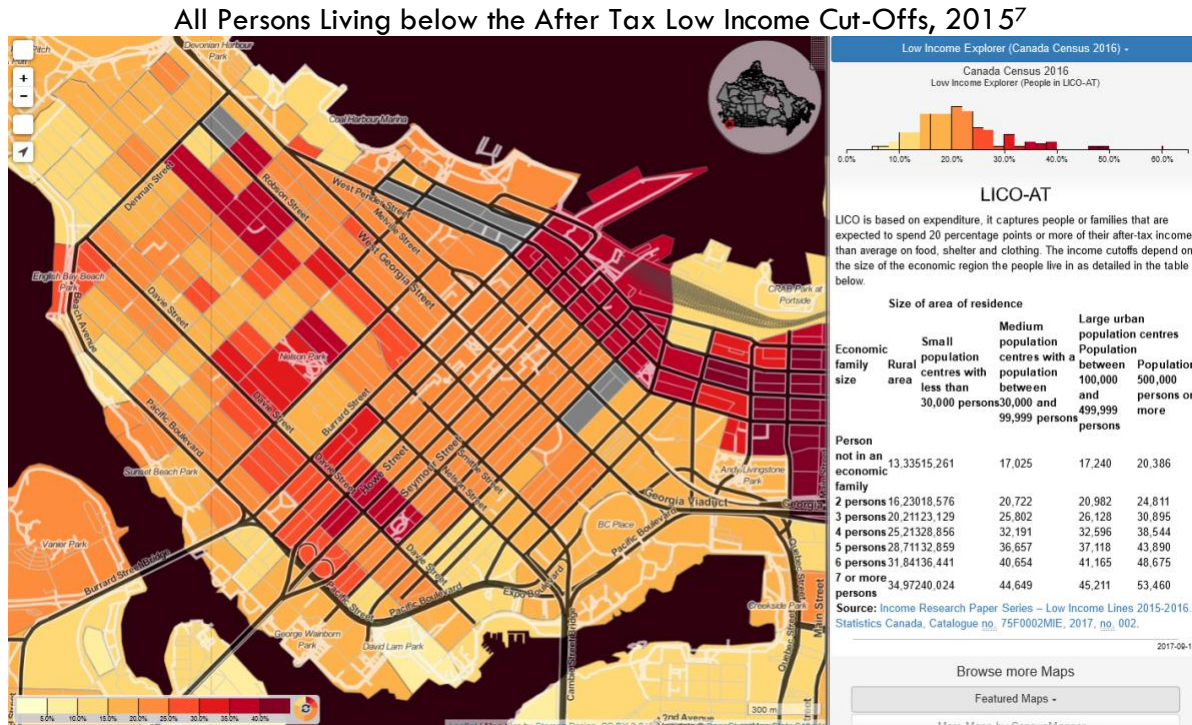
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<sup>4</sup> Men F, Tarasuk V. Food insecurity amid the COVID-19 pandemic: food charity, government assistance and employment. Canadian Public Policy 2021; Published online. Available from: <https://www.utpjournals.press/doi/abs/10.3138/cpp.2021-001>

<sup>5</sup> <https://vancouver.ca/files/cov/social-indicators-profile-west-end.pdf>

<sup>6</sup> <https://vancouver.ca/files/cov/social-indicators-profile-downtown.pdf>

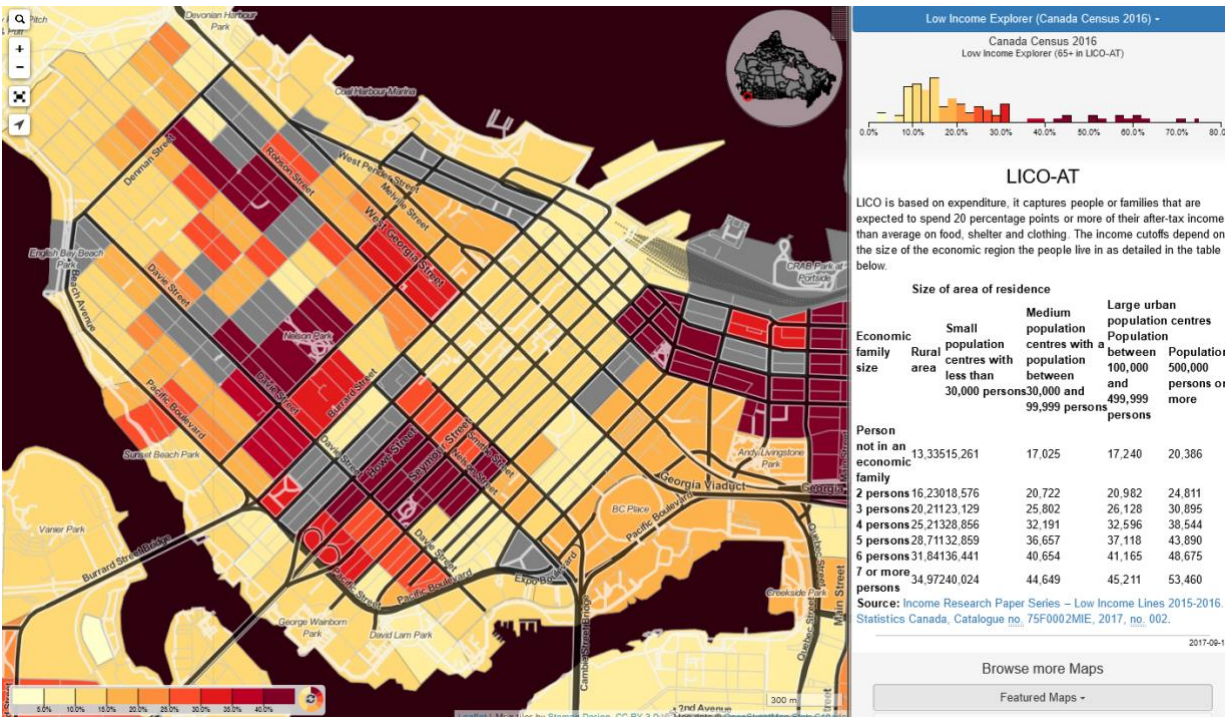
with a non-English first language. Incomes in the City of Vancouver are more polarized than the country overall, and this is exacerbated further in Downtown, where 20% of residents are among the bottom 10% of earners in Canada and 19% are among the top 10% of earners. The West End skews toward poverty, with proportions very close to the national average for each decile, except for 19% of residents being in the bottom 10% of incomes nationally.



Persons Aged 65+ Living below the After Tax Low Income Cut-Offs, 2015<sup>8</sup>

<sup>7</sup> [www.censusmapper.com](http://www.censusmapper.com)

<sup>8</sup> [www.censusmapper.com](http://www.censusmapper.com)



## Food Supports

We who live in cities purchase most of what we eat, and thus an adequate income is necessary to access nutritious, acceptable, enjoyable food. Anything we grow tends to supplement our diet, rather than provide significant nutrition. There is a weekly downtown farmers market,<sup>9</sup> but it is too costly for low-income individuals unless they can access a coupon program.<sup>10</sup> We are not aware of a low-income market on the downtown peninsula selling rescued food like the Quest Food Markets do.<sup>11</sup>

Because more than 95% of people downtown live in rental apartments or other multi-unit dwellings, some have a balcony but yard space is exceedingly limited. Very few have access to a community garden plot. For those who do, growing space offers less than ideal conditions with tall buildings limiting sunlight, variable soil quality, pests like skunks and raccoons, potential theft of produce, and squatters who lack adequate shelter. Community gardens include Rooted for Life (connected with Friends for Life), the SPEC rooftop garden, Mole Hill housing complex, Nelson Park Garden, Stanley Park Garden (mostly decorative plants), and Davie Village. There are school gardens at King George Secondary and Lord Roberts Elementary, the latter being the first school garden in Vancouver.

<sup>9</sup> <https://eatlocal.org/markets/downtown/>

<sup>10</sup> <https://bcfarmersmarket.org/coupon-program/how-it-works/>

<sup>11</sup> <https://questoutreach.org/access-food/>

To address the growing need for food security, several churches and organizations offer food programs and other supports. **Appendix A** shows the downtown section of the Vancouver Free and Low-Cost Food Program Map.<sup>12</sup> **Appendix B** summarizes the meals and hampers that different programs have made available (as of Summer 2021). Although these are quality supports, not everyone who needs assistance can reach them, and those who do reach them don't necessarily find them an easy way to access food.

Massive changes had to be made in response to COVID-19. All in-person meal programs were paused, as host buildings closed, volunteers hung back, distancing measures were required, and we did not know what was safe, particularly for older adults. Several new, though temporary, programs were introduced such as frozen meals, brown bag takeaway meals, and expanded grocery hamper pick-up and delivery programs. More changes forced by the pandemic are detailed later in this report.

Overall, usage of food programs has risen (20%, by some estimates) during the pandemic. Significant resources were (and some still are) available, either to individuals (e.g., CERB) or to organizations (new grant streams, increased donations, or unexpected surplus food such as donated perishables from restaurants under closure orders closed). But these supports are neither reliable nor sustainable.

## Other Programs & Supports

Several food providers reported that many of their guests visit multiple food programs per week, often traveling a distance from home for a meal or grocery hamper (which must then be carried back home). Some guests are coming from as far as Maple Ridge and Richmond for the downtown food supports. Individuals who struggle with access to food also often need support with housing, labour, financial, and health services.

Food programs are a place of connection, where we can help our vulnerable neighbours connect to services like:

- The West End Senior's Network (WESN) "Seniors in Need" fund (one-time financial support for a budget shock like a dental bill)
- Donation and delivery of pet supplies for individuals with pets who cannot get out (pets are significant companions)
- More meal and hamper programs started offering delivery, as it was increasingly difficult or unsafe for vulnerable individuals to get out, especially if they had to self-isolate for two weeks.

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<sup>12</sup> <https://maps.vancouver.ca/foodmap/>



# Program Logistics & Changes

## Food Service

The pandemic has forced service providers to make significant changes in food sourcing, preparation, and serving:

- Programs recognized the daily/weekly meal they provide could be one of the more positive things in their guests' day, and that guests needed even more **nutrient dense food** than usual, so they switched to more comfort food, increased the protein and vegetables, and took a little extra care in service.
  - Many participants also request healthy food, especially fresh vegetables, as they have limited income to purchase good food, let alone capacity to store and prepare it.
- Some programs that had been preparing their own food were faced with COVID closure of their facility, so switched to having their meal prepared in an offsite kitchen and **servicing it outdoors**.
- Programs like the West End Seniors Network (WESN) started a program where volunteers would **grocery shop** for vulnerable seniors, though this is limited to certain stores, and there is a delivery fee (plus the individual pays for their own groceries).
- Gordon Neighbourhood House partnered with the WESN to provide **frozen meals** through the pandemic. Meals were provided by donation and had to be subsidized, as donations did not cover the costs.
- Directions Youth Services started a **Pantry Program**, which gave their clients (vulnerable youth) access to more shelf-stable foods, fresh fruits and vegetables, and snacks.

## Rescued Food

Some organizations operate almost entirely on donated food, purchasing only a few staple ingredients and the takeout containers needed to serve food to program participants. This saves money, but does take a dedicated individual to find, transport, and plan around food donations, and it requires more creativity to make balanced meals. Several food rescue organizations exist to help connect excess food with the programs highlighted in this report, including Food Mesh<sup>13</sup>, FoodStash<sup>14</sup>, and Food Runners.<sup>15</sup>

Organizations like AIDS Vancouver, which focus on individuals with specific health needs, saw strengthened partnerships and larger donations from bakeries and other retailers, but the food available did not meet the nutritional requirements of their clients. Financial donations are still needed to supplement the donated foods with items appropriate for the aging population among

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<sup>13</sup> <https://foodmesh.ca/>

<sup>14</sup> <https://www.foodstash.ca/>

<sup>15</sup> <https://www.vancouverfoodrunners.com/>

their clientele, culturally appropriate foods for people from different ethnic backgrounds, and baby food for young families. People living with chronic diseases like HIV and heart disease need more nutrient-dense foods, which are costly.

## Program Capacity

Early in the pandemic many guests were afraid to visit the community programs to which they were accustomed because no one knew what was safe, especially for vulnerable individuals; therefore, demand decreased initially. But beginning in the fall of 2020 (about six months in), many programs reported that demand for support increased significantly.

- Programs with **shelter beds** had to decrease their numbers (in some cases by half) to allow for recommended distancing, but still experienced several COVID outbreaks. The meal component was one of the challenges, because food was the convening point, with many high-touch services.
- All programs (and individuals who run them) have a finite capacity, and must **take breaks** occasionally, often in the summer months or around Christmas time. While these rhythms are necessary for long term sustainability, it is important to communicate with guests and nearby programs if closing (even for a week), as this increases the demand on other programs. Many supportive programs (and staff) did not take a break during the first year of the pandemic, because needs were significant, which will take a toll.
- Programs that relied on **volunteer labour** for cooking, serving, and cleaning lost most of that labour during the pandemic, which put more stress onto paid staff (who were themselves stretched and had to quarantine at times if potentially exposed to the virus)
- As organizations re-open to the public and once again prioritize their pre-COVID mandate and programs, many are **ceasing the emergency food supports** they started in response to COVID.
- Several meal and grocery delivery programs must maintain a **waitlist**, as they receive more requests than they can accommodate.

## Addressing Needs Beyond Food

Acute hunger and chronic malnourishment are usually connected with deeper needs, and thus the programs that provide food also address other issues. Coast Mental Health estimates the need for outreach services, emergency support, and healthcare referrals have increased in the past year by 51%, and more than 40% of their clients need but don't have rent subsidies. In response, Christ Church Cathedral created a new full-time outreach worker (starting September 2021).

We also acknowledge that spiritual hunger is often adjacent to any physical malnourishment. Most faith communities are open with their beliefs in the programs they run, and are culturally sensitive, recognizing that their guests may or may not be interested in conversations around spiritual matters. We will continue examining together how faith and spirituality are best shared in respectful ways.

## Changes Beyond Food

Each wave or round of restrictions brought both challenges and new supports. For example, when cafés and restaurants closed, perishable food donations increased for community programs, but the outbreaks (or similar stresses) have ripple effects. Need for food supports increases, but availability of staff and volunteers decreases (and the food still needs to go somewhere).

Other key challenges beyond food procurement:

- Participants want to be back inside – many miss the **connections** experienced through shared meals.
  - When other programs like art, language, and music classes shut down, important **communication channels** for vulnerable individuals are interrupted.
  - For some, picking up a daily meal was their only point of human contact.
  - No one can thrive in isolation, no matter what their socio-economic status.
- The **environmental cost** (and dollar value) of using single-use dishes, necessary for safety and capacity (fewer volunteers, more staff on sick-leave)
- While the crisis led to much generosity and a “we’re all in this together” atmosphere, the restrictions and distancing lead in many cases to a **decrease in agency**, as vulnerable guests were no longer able to help the programs they had been part of
- Guests and volunteers were inspired to think about each other’s **safety**, and still some chose not to follow **recommend protocols** (i.e., wearing masks, getting vaccinated), which added tension to already stressful settings
- While many organizations saw an increase in **financial donations and grants** available, some previously established fundraising events (i.e., annual galas) were canceled, which left a gap in some organizational budgets.

It was also significant that people who live in SRO’s and social housing were more likely to be out during the day pre-pandemic, when a large part of their day was finding food in or beyond their neighbourhood. But during the pandemic, people stayed home more because not only was it unsafe to be out but also food was made available in their apartment buildings. While this was a positive change in many ways, some mental health challenges became more evident and required more onsite support.

## Underserved Populations

A crisis like the COVID-19 pandemic disproportionately affects vulnerable individuals, as many of the existing supports disappeared or changed, and challenges emerged and compounded. We asked service providers who they see as the most underserved and struggling populations Downtown Vancouver:

- **Street entrenched** – homeless individuals in this part of the city tend to be more visible (often hanging out in front of certain clubs or on certain streets/alleys), but also more transient (and more subject to seasonal changes) than in other parts of the city. They may

accept services (i.e., a ride to a shelter for an overnight stay), but are less likely to stay connected, often returning to their community.

- The closing of the Strathcona Park homeless encampment (April 2021) for the 250 people who resided there meant that supports focused there were redeployed. Those campers needed support where they went, such as SRO's or different parks.
- Despite some good services, many homeless individuals seem to feel neglected.
- **Vulnerable youth** need support, but the agencies that work with them seem to have relatively strong funding.
  - Youth with active addiction tend to be non-adherent to care, and struggle to get out of the chaotic lifestyle.
  - Vancouver's 2020 Homeless Count<sup>16</sup> found 54 children under 19 years of age (2%) and 139 youth between 19 - 24 years (6%) experiencing homelessness in Metro Vancouver, or 8% of the homeless population. This was down from 16% in 2017 and 20% in 2014, the only age group where count results showed a reduction.
- **People living in SRO's** (single room occupancy hotels) that aren't social housing or don't offer services like meals and mental health support.
- Many **supportive or transitional housing** places expect residents to cook for themselves, but residents still appreciate and rely on food deliveries, even if only bread.
  - The units often have kitchenettes, but residents may have limited capacity to get groceries and supplies for food preparation.
- People **without a specific diagnosis** (i.e., supports for HIV+, cancer, etc., but little for people who are struggling generally).
- People who live **paycheque-to-paycheque**, but may be one step/stress away from homelessness
  - Could benefit from more prevention efforts (i.e., financial literacy class) paired with food security programs
  - Often have mobility challenges and find it hard to get to affordable grocery stores
  - No **affordable (subsidized) grocery** option downtown.
- **Seniors** who need food support (i.e., have low income and do not live in subsidized housing), but cannot afford programs like Meals on Wheels<sup>17</sup> or Better Meals<sup>18</sup>, although many do better when they are able to access their pension and Old Age Security funds.
- **Newcomers** and individuals with language barriers, who do not know about the supports they can access.
- **Single parent families** – a teacher who worked at the elementary school in Yaletown shared that he was shocked at how many low-income families were present in his classroom (a stereotype we do not usually associate with the area).

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<sup>16</sup>[https://www.vancitycommunityfoundation.ca/sites/default/files/uploads/2020HomelessCount\\_MetroVan\\_PreliminaryDataReport.pdf](https://www.vancitycommunityfoundation.ca/sites/default/files/uploads/2020HomelessCount_MetroVan_PreliminaryDataReport.pdf)

<sup>17</sup> <https://www.carebc.ca/meals-on-wheels.html>

<sup>18</sup> <https://www.bettermeals.ca/>

The Dr Peter Centre and SFU published “Food as Harm Reduction<sup>19</sup>,” in 2017, a report that explored the connections between food provision, food security and harm reduction for people living with HIV who use drugs. Findings included 77% of all respondents indicating that drug use did affect their diet, including what they ate (64%), when they ate (60%) and where they ate (40%). All respondents used some form of food assistance, either a food bank program (91%), and/or a free or low-cost meal program (81%) and/or a community kitchen program (30%).

## Pandemic Lessons

This unprecedented season led us to prioritize safety as we never had before, and we had to figure out what that meant practically. As we move out of the pandemic, we will open programs and dining spaces gradually and offer a hybrid model (both sit-down and take-out meals) to ease back into normal. Services like buffet meals and self-serve offerings will take longer to reintroduce. Each program will have to custom fit public health recommendations to their setting and population. Food program staff also highlighted these key lessons learned this past year:

- **Partnerships** are increasingly important as we work out new best practices, or need to take unexpected time off (for vaccination side effects, to quarantine, etc.), or need to respond to concurrent crises, like the heat dome in June 2021 (with several days of record-breaking high temperatures that severely impacted vulnerable people).
  - Many groups worked with partners they had not connected with before, including caregivers, schools, faith communities, public and non-profit organizations.
  - When **relationships between organizations** existed, we could act quickly to set up or change programs that met the changing needs.
- Similarly, when **therapeutic, trusting relationships were in place with clients** before the pandemic hit, we were a source for trusted information, and were able to continue providing support and a safe place to come.
  - We need to continue to hold space for durable healing relationships – staff, key volunteers, and regular patrons can tell when someone is particularly struggling, and can either provide further support or connect them to it.
  - Having a core group of staff/volunteers was also an asset, as they trusted each other and their community, pivoting together to be responsive to the changing recommendations.
  - People (especially vulnerable seniors) need extra support as they were often fearful early in the pandemic and continue to hear mixed messages as it drags on.
- Caring neighbours and congregants looked for ways to **contribute**, especially in the early days, and when given direction where able to do significant work.

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<sup>19</sup> <https://www.sfu.ca/geography/research/community-engagement/food-as-harm-reduction.html>

- In later waves of COVID-19 infections, many felt increasing fatigue with connection to our neighbours, faith, generosity, and their sense of mission, all which impact each organization's ability to maintain services
- It was surprising how quickly we reverted to using plastics and single use take-out containers. Although they are easier, they are costly, especially if purchasing compostable containers, and they generate an **environmental** impact, not least as litter.
- Place-based, **neighbourhood** approaches are especially important in a crisis like the pandemic, as **travelling** even across the metro area becomes increasingly difficult.
- Food provision was not part of all **emergency management plans**, but it needs to be (i.e., not all identified city emergency hubs were accessible for sorting and preparing food). It was often the neighbourhood houses, churches, and small non-profits that could pivot quickly.
  - The City cannot do the work alone.
- Expect that in a crisis, many **policies and operating procedures** will need review and revision, which will take time to research, write, and implement.
- Many **aspects of life are connected**, so a small challenge can have ripple effects; a rent increase or elevators out of service for a few days impacts one's ability to access food, which impacts physical and mental health.

## Recommendations

While this season has been hard in unprecedented ways, the sense of everyone being in this together was a positive outcome. All levels of society were affected. One person interviewed noted they talked more with other health providers, even food suppliers and delivery personnel, on a deeper level. More than ever, we saw that **connection is our deeper need, and shared food is a key way to do that. As one service provider said, "Our main job now is to bring back the table."** Other key recommendations include:

- While the general sentiment among food providers is collaborative, a few frustrations were expressed about other organizations developing relations with "their" grocery stores and other food donors, "stealing" what they expected to receive. While we do not endorse rescued food as the answer for food insecurity,<sup>20</sup> there is an abundance of food available, and food rescue efforts do enhance the nutrition and hospitality offered by community food programs. We will continue **to foster good working relationships between different organizations, keep the focus on dignified food sharing.**
  - We must work to have each agency contribute their strength (e.g., some have space and a licensed kitchen, some have more connections to vulnerable clients)
- Many food programs are **volunteer-run** or have a coordinator with only enough hours to manage program logistics. While these kinds of programs contribute significantly to the net of care, they are less likely to contribute to **planning conversations or addressing**

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<sup>20</sup> <https://zerowastecanada.ca/tag/food-rescue/>

**larger, systemic challenges** of poverty and chronic health challenges. Therefore the agencies in a position to do so, must take the lead.

- We must continue proactively **addressing the natural fears and anxieties** we will encounter as we interact more and more, which may be expressed as angry outbursts – we must not punish such responses, but respond with **trauma-informed care**.
- There are **grants** available for organizations who provide food, but it takes significant time and skill to apply successfully for them. Those on the front lines and working at capacity to meet the needs of their vulnerable clients appreciate support accessing these grants.

## Areas for Further Research/Exploration

- We recognize the need to measure and **close gaps in health outcomes** between Indigenous and non-Indigenous communities, but we did not find specific data on food insecurity for vulnerable Indigenous individuals in downtown Vancouver. Some estimate the Indigenous population is growing in the West End, but we do not know the scope of support needed.
- While we have learned much about what a **trauma-informed response** is and why it is necessary for vulnerable individuals, we can do more to put these practices in place.
- Many food programs are open to all, aiming **for low barrier support**, but as numbers grow, programs can get overwhelmed, becoming unable to provide quality supports. Therefore, some form of inter-agency **registration** can help tailor support for individuals and ensure equitable access (e.g., link2feed).<sup>21</sup>
- Several organizations expressed questions about the value of **(re)starting programs in their building** versus supporting programs in other sites (i.e., supportive housing units or spaces like The Gathering Place<sup>22</sup>) where vulnerable individuals already congregate, or using more of a “hub-and-spoke” model that coordinates programs centrally yet delivers them in smaller locations throughout the neighbourhood.

## Conclusion

As the people, programs, settings, and culture around us change, if we do not move forward by adapting, we essentially move backwards. We will continue to be in a season of rapid change for some time, and have the opportunity to use lessons learned through the pandemic to improve care for our vulnerable neighbours. As one service provider reminds us, “Our hospitality needs to look like an extension of our lives, not charity.”

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<sup>21</sup> <https://www.link2feed.com/>

<sup>22</sup> <https://vancouver.ca/parks-recreation-culture/gathering-place-community-centre.aspx>

# Appendixes

## Appendix A – Free & Low-Cost Food Programs in Vancouver





## Appendix B – Food Program Details

This is not an exhaustive list of available food supports Downtown Vancouver, as some organizations give out hampers, coupons, or gift cards to their clients. These numbers also vary from week to week, and as the seasons change.

Organization	In-House Meals/Day or Week*	Drop-In Meals/Day or Week	Hampers + Groceries	Other Notes & Future Plans
Christ Church Cathedral		~400/week (divided 3 - 4 times/week)	Monthly Subsidized Veg market	
First Baptist		~80 meals 1/month		
Westside Church		~ Bi-monthly Fridays ~ approx 125 meals total. - Many get seconds from our 125.		Sit-down meals to resume in the Fall of 2021
Central Presbyterian Church		125 meals/week (Tuesdays)		Primarily seniors, few street-entrenched guests
Belkin	~400 meals/day	None (though a few bag meals for people who pass by)		
The Gathering Place	~20 B + L + D from New Continental	~120 B + 200 L + D (subsidized price) + ~30 free meals	Exploring some food hampers + cooking classes with food donated from Food Bank	
Dr Peter Center	24 Residents get daily meals	~70 B + L meals daily for HIV+ individuals		For HIV+ People only (~400 registered in Vancouver)
Directions Youth Shelter (Family Services of Greater Vancouver)	~700-800 /week	24/7 support for Youth	Pantry program	Sit-down meals + cooking-baking classes (food literacy, food skills)
Catholic Charities	70 dinners (food from Gathering Place)			
Soul Kitchen	~350 meals/week at More Than a Roof Housing Units			Also provide the food for some of the other org's in this chart, who serve and connect with guests
West End Seniors Network		800 meals for seniors (55+)/week	80 hampers	
Aids Vancouver	Hampers distributed (2-3x/month) dependent on government cheque week	NA	Hampers of food items that support AIDS patients (meat, dairy, grains,	Wish to have more flexibility (culturally appropriate foods, baby foods) and a higher budget to support their patients fully- Funding

<b>Organization</b>	<b>In-House Meals/Day or Week*</b>	<b>Drop-In Meals/Day or Week</b>	<b>Hampers + Groceries</b>	<b>Other Notes &amp; Future Plans</b>
			fruits + veg only)	needs to be secured.
Coast Mental Health	Cafeteria with limited seating (most are takeaway meals- see next cell)*  *has 52 facilities in BC, Downtown locations include Resource Center and Clubhouse - member based	1020 meals a week (in-house @ 2 Downtown locations- Clubhouse and Resource Center)- during Covid-takeaway)	Care packages (not limited to food items)- 1200 during Covid for those who are homebound	Hopeful to open cafeteria to larger capacity (dependent on PHA regulations)
Gordon Neighbourhood House		300 frozen meals/week		Able to give some grocery gift cards, farmers market coupons, and virtual cooking classes (ingredients provided to participants)
Community Builders	300 beds across 5 facilities (continental breakfast + catered lunch by HAVE)			

\*Only available for program residents or registered participants