



Community Sector Council
Newfoundland and Labrador

Accelerating Change



Vibrant
Communities

Many Moving Parts

2021 Report

Policy on the Rock: Health, Food, and Poverty Reduction

29 March 2021

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Martha Muzychka

*Vibrant Communities is an initiative of the
Community Sector Council Newfoundland and
Labrador (CSC NL)*

pharmacare
housing and shelter
health equity
indigenous trauma
universal basic income
hunger
living wages
poverty reduction
strategies
diversity
homelessness
social determinants of
health
stigma
digital divide
connectivity
food insecurity
provincial federal
cooperation
lived experience
ability challenges
claw backs

Community Sector Council Newfoundland and Labrador (CSC NL)



The Community Sector Council Newfoundland and Labrador (CSC NL) is committed to strengthening and promoting the essential role of voluntary and non-profit community organizations in a prosperous and inclusive society.

- Our **mission** is to encourage citizen engagement, promote the integration of social and economic development and provide leadership in shaping public policies.
- Our **vision** is for an inclusive society that supports individuals, families and communities.

We believe the community sector is central to social and economic progress.

Thank you to First Light for our Land Acknowledgement

We respectfully acknowledge the land on which we gather as the ancestral homelands of the Beothuk, whose culture has now been erased forever. We also acknowledge the island of Ktaqmkuk (Newfoundland) as the unceded, traditional territory of the Beothuk and the Mi'kmaq. And we acknowledge Labrador as the traditional and ancestral homelands of the Innu of Nitassinan, the Inuit of Nunatsiavut, and the Inuit of NunatuKavut.



We recognize all First Peoples who were here before us, those who live with us now, and the seven generations to come. As First Peoples have done since time immemorial, we strive to be responsible stewards of the land and to respect the cultures, ceremonies, and traditions of all who call it home. As we open our hearts and minds to the past, we commit ourselves to working in a spirit of truth and reconciliation to make a better future for all.

Vibrant Communities acknowledges with thanks,
the support of the Government of Newfoundland and Labrador.



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Watch our recorded proceedings online.

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[Hour Three: Poverty Reduction with Scott McAfee](#)



 Community Sector Council
Newfoundland and Labrador
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Communities

POLICY ON THE ROCK 2021

MONDAY 29 MARCH 2021

 Martha Muzychka Moderator	 Sister Elizabeth Davis Health Accord NL	 Sarah Crocker Food First NL	 Scott MacAfee National Advisory Council on Poverty
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What is Policy on the Rock?

CSC NL conducts *Policy on the Rock* annually to focus community-based learning on policy development, emerging trends and anti-poverty initiatives. Hosted by *Vibrant Communities*, an initiative of CSC NL, the event brings people together from the public, non-profit and private sectors, as well as individuals with first-hand experience of low income or poverty. The event supports networking and promotes sharing insight on how to make change. The 2021 event *Health, Food and Poverty Reduction* was entirely virtual and well-attended. Some overarching themes emerged:

Poor health outcomes and poverty are inextricably bound together. Reducing poverty will improve health and cost the system less. The health lens needs to be combined with a poverty lens.

Ensuring adequate income and wages to meet the basics of food and shelter, is the best approach to meeting health care challenges and offsetting unnecessary health care expenses. As the province moves toward a more highly technical and internet-based system of health care, our presenters and attendees caution policy-makers not to allow lack of Internet connectivity, personal skills or personal devices to widen the gap between those who have access to health care and those who do not.

Federal and provincial pandemic responses to COVID-19 showed that Canadians and their governments care about responding to social problems of income and food insecurity.

This creates potential to capitalize on the knowledge about poverty which emerged in the 2020-2021 pandemic, to absorb its lessons, and to work for change. Attendees want to meet the opportunities for positive change based on how citizens, elected officials and policy-makers now feel about equitable access, having been through the emergency income measures taken during the pandemic. No one wants to lose the momentum during COVID-19 responses.

No one can stand alone in this battle and no one program or policy change will eradicate poverty. 'This only works if we all work together' was a common theme for discussion.

Champions have advocated for universal drug services, basic incomes and programs for the vulnerable, to varying measures of success, for decades. Knowing the tools exist to tackle poverty while governments delay enacting pharmacare or pilot basic income initiatives, while clawing back benefits at low personal income levels, frustrates those who are

asked consistently to ensure the voice of the community is heard. Advocates believe the messages have been clear and they remain steadfast in their desire for joint action which respects their lived expertise, and is based on federal-provincial cooperation.

Three main speakers, six 'discussants' and more than 100 registrants participated in this discussion. CSC NL thanks them for their time and insights. Additionally, CSC NL thanks the NL Association of the Deaf for their ASL interpretation during the event.

One of Our voices at Policy on the Rock 2021

"There are many moving parts to any poverty reduction strategy. However long it takes to get a universal basic income, right now, we already have the tools and the tool kits, we have the programs and can start right away, with provincial and federal governments, to reduce poverty."

Health Equity and Re-imagining Health for All



Elizabeth M. Davis co-chairs Health Accord NL, which has been consulting widely across the province on health care and outcomes. It was created in 2020 by the Government of Newfoundland and Labrador.

Our work as Health Accord NL is part of a much larger global reality. It is within that reality that we work in Newfoundland and Labrador to bring about the kind of change we need to reach better health outcomes and to come much closer to health equity between us and others in Canada and within our own province. We can't do that alone. We can't do that in our traditional divides. If we don't find the ways to come together to make this happen, it will not be happening and we deserve to have it happen.

Elizabeth M. Davis

Elizabeth Davis focused commentary on digital technology and the potential for impact of online tools on improving health and access to services. To set the tone, she illustrated an immense need for change. In Newfoundland and Labrador:

- We have the worst life expectancy, highest death rates for cancer, cardiac disease and stroke; and the highest rate of chronic disease in Canada.
- Since 1981, there's been only a 6% increase in spending but 23% increase in health spending.
- We have the worst health system performance across all Canadian provinces.
- We have the highest per capita spending on health care in Canada and we provide the worst value for spending in health care.
- Our population is aging rapidly: we have a low percentage of children, a high percentage of seniors, and a drop in our rural populations.
- We have a 50-year-old institution-based system with an imbalance between community-based services and hospital services.

Health Accord NL online town halls early in 2021 have demonstrated agreement on the need for change and identified primary areas of concern for our citizens. Across

Newfoundland and Labrador, these included addictions, mental health, cost of living, road quality, chronic disease, distracted driving, bullying, unemployment, seniors' resources, food insecurity, and language and culture. While overall our residents have worse health than those in other Canadian provinces, some of us have poorer health than others, particularly among the five Indigenous communities.

A needed shift in health care thinking and approaches...

Embracing an expansion of technology-based health care is among six directions under consideration at Health Accord NL. The Health Accord wants to change the emphasis from the costs of care, to a focus on 'whose health will be affected positively or negatively' by our decisions in health care. As citizens and policy makers identify the areas of responsibilities in future, one important area is digital technology; Davis referenced the United Nations' work on digital transformation, calling for equity of access to Internet functionality world-wide.

Pertinent Points

- The leading determinants of health are income and social status, education and working conditions.
- Emerging technologies will grow in the areas of e-commerce, mobile money and digital identification.
- We lack digital equity in the province, so there is a need for policy frameworks to support economic, social and digital inclusion.
- Special efforts are needed with traditionally marginalized groups to bring them to the forefront and promote them being welcomed.
- Important investments in human capital and infrastructure must be accompanied by smart regulatory frameworks.
- Diverse voices must be brought to the policy table including people from developing countries and from traditionally marginalized groups, such as women, youth, Indigenous people, rural populations and older people.

"I also am conscious ... that there is this very passionate push for universal basic income, and how everything we've talked about has that single thread of poverty across it in so many ways, including stigma, including access to the basic needs of life today, as opposed to 50 years ago. And it's a provincial issue and it's a federal issue. We have been clear within the Health Accord NL that we need to pursue this quite strongly - that it is an area where governments have always spoken about supporting it and have never done anything about it. It's a strange kind of phenomenon in that regard, but, we can do it."

~ Elizabeth M. Davis, Health Accord NL

Discussion on Re-imagining Health for All

First Voice spokesperson Daphne March discussed the need for Indigenous peoples to speak about their health from their own lived experience.

In our community, I carried a lot of shame. I didn't want to have any part of it but with my talking to other people, I had to embrace my culture in order for me to get back to who I needed to be as an Indigenous person.

Daphne March



- Currently the health system is failing Indigenous peoples, not just in the province, but across the country.
- The weight of intergenerational trauma leads to high rates of suicide among Indigenous peoples.
- Over medication is a challenge in the health care system - Indigenous peoples are losing their children to addiction, who are living precarious lives with homelessness, food insecurity, and illness.
- It is important to ensure Indigenous people are represented not only on the committees of Health Accord NL, but all facets of planning and development as change moves forward. March quoted her father: 'words are great but actions are better'.
- Indigenous peoples have been disconnected from their culture and traditions to the point many may not even know they are Indigenous.
- We need emotional intelligence to help people 'be who they are supposed to be', to ensure empathy in the system and to reflect kindness.

March's lived experience brings her to recommend holistic healing with the seven key teachings and the perspective of seven generations forward. This needs to be complemented and supported by science and research in health and Indigenous experience and knowledge.

We need kindness, we need empathy, and we need education for our people... our people are dying alone in our streets and in our hospitals. It's heartbreaking.

Daphne March, Indigenous Leader with First Voice

What we do see is access to devices and access to connectivity is hugely determined by the level and source of an individual's income. In the past year, those of us who have the knowledge and the ability to tap into internet technology have been able to maintain our employment and continue supporting ourselves and our families, while other individuals who have been unable to do that have had significant employment loss and income loss.

Norma Alford



TechKNOWtutors program manager Norma Alford discussed how pandemic response swiftly exposed the width of the digital divide with requirements for working, learning and reaching services, remotely. This has implications for access to healthcare if more aspects of health services go online.

- The digital divide crosses socioeconomic boundaries but basic access to devices and connectivity is deeply connected to an individual's resources and income.
- Clearly many people in rural areas continue to rely on dial up service and public Wi-Fi, and our province's internet costs are among the highest in Canada, exposing people to risk and also unreliable access.
- Youth are a particular concern due to issues of safety and also competency.
- Devices are essential at all ages. Examples abound of parents with children out of school during the pandemic response, trying to do homework on a cellphone.
- The digital divide leaves many people unable to make informed decisions about their health and wellbeing because of their general lack of access to online information and services.
- Connectivity is a 'need to have' and not a 'want to have' - the pandemic has kept people apart, increased isolation and sharpened awareness on how essential Internet access is to everyone.

Alford referred to a quote by the UN Secretary-General Antoni Guterres, June 2020: *"The digital divide is now a matter of life and death for people who are unable to access essential health-care information. It is threatening to become the new face of inequality..."*

People often rely on public wi-fi. Over the past year, what we've seen is when those hot spots like libraries, fast food restaurants close, a significant amount of the vulnerable population loses their access and their connectivity. On top of that, public wi-fi can be a little more unsafe and a little more unreliable, which again puts many individuals at risk.

Norma Alford



Participant Voices on Health for All

*"As a woman with a disability, I have lived experience. I couldn't work a full-time job without having benefits and I couldn't access a full-time job because I would get cut off of government funding and that includes my benefits. **You can't work part-time and receive benefits**, so the system is very frustrating. There are not a lot of jobs with benefits."*

*"There are **approximately 7.5 million Canadians** who don't have any public or private coverage for their meds."*

*"It's disturbing that the federal Liberals, Conservatives and Bloc Quebecois very **recently voted down the Bill C-213** on pharmacare."*

"How can we afford to spend \$35 million to a US company to build software that will identify savings in the health care system?"

Re-imagining Health for ALL

*"You can have all the ability, all the skill, all the knowledge, all the health apps in the world, but **if you can't afford internet**, if you can't access it, then all of that goes to waste."*

*"Healthcare is often a voting issue and poverty isn't, but if healthcare and poverty are the same issue **it becomes a voting issue** and can maintain traction in the public policy discourse."*

Food Security and Income – Sharing Community Voices for Systems Change



Sarah Crocker coordinates programs at *Food First NL*, where research on food security underlines the importance of income to locating, reaching, and buying food.

In Newfoundland and Labrador, 14.7% of households experience food insecurity and within the city the rate is higher. It is one in six households, just over 16%. And that is actually the highest of all metropolitan areas in Canada. (Source: Proof 2017-2018 University of Toronto)



Food First NL encourages open discussion about food security in our province and the need for citizens to make connections to discuss its impacts. Food insecurity affects all aspects of people's lives, their health, well-being, ability to work, and ability to learn. Community engagement to inform people and policy makers can lead to action on food. A recent Food Assessment of St. John's, based on 802 survey responses, provided this insight:

- Fewer than 20% of people making less than \$29,000 annually used a car to get their food.
- At least 10% of all respondents had used a food bank.
- Improving income solutions, such as increasing wages and social assistance rates, was the top choice of ways to combat food insecurity in every single income category of respondents, from the lowest (between \$20K and \$29K) to the highest (over \$100K).
- Youth respondents most often focused on income solutions. People over the age of 70 were more focused on improving retail solutions.
- Respondents recommended better transportation options, and increasing or improving access to food growing opportunities, fishing and hunting.

- Respondents thought it was important that food programs support local vendors.

Responses were similar across neighbourhoods. Income solutions were a priority across the whole of the metro area, whether respondents lived in suburbs, the downtown or the east end.

Food insecurity causes many health issues - heart disease, diabetes and high blood pressure are all complicated by poor diet.

There's a chance now to make a really big impact, like the members' bill for universal basic income. These kinds of solutions are gaining traction and there's a willingness because we have this crisis of a public health emergency, so that action needs to be taken.

~ Sarah Crocker

Discussion on Food Security



Ivan Emke, Research Professor, Memorial University supports efforts aimed at local food sovereignty. He asked participants to focus on nine simple concepts while embarking on the journey to create change.

I don't think you can create community without food. I know people have tried. You can try but it won't be much of a community. Sharing food and producing food together is a pan-cultural ritual of the highest value.

~ Ivan Emke

1. **Why bother with food?** Food is not about calories. It's about a social context. "Where we cook together, we eat together, we share together. A disconnection from that is as important as a disconnection from nutritious food as well. I don't think you can create community without food.
2. **Why can't we just all buy it at a store?** The value of growing food and the value of gardening is not just in the food itself. It is largely in the social and the therapeutic value of working with plants and with animals, as well as wider healthy benefits. During COVID-19, so many people discovered they have a kitchen and space for a garden because those things helped people to deal with the stress.
3. **Where are we at the moment?** Newfoundland and Labrador produces between 10 and 12% of our own food - still too low compared to other countries as we assess the ability to provision for ourselves.

4. **How do we grow more food?** There are lots of ways, starting with reducing dependence on commercial agriculture by increasing our community agriculture efforts.
5. **What is self-provisioning?** It is growing, gathering, and hunting; the best source of meat while self-provisioning in NL is moose, and we have eight million pounds a year, or a quarter of a pound per person per week in this province.
6. **Growing more food requires dedicated space.** Open up more land for community-based agriculture and community gardens. This includes changing municipal regulations about garden sizes and small food animals. We can learn from newcomers who are used to self-provisioning in other countries and where it is expected in a civilized society.
7. **Scale up food production.** We need to grow more of our own food this year than we did last year, and next year we need to grow more food than we did this year. We need to look at season extension using greenhouses and other tools.
8. **We need to support local.** It is okay if you don't want to grow, gather or hunt yourself but make sure you buy local, support local vendors and seek local suppliers.
9. **Make big plans.** Tiny steps together make big ones. To quote a UK gardener: *'By doing something infinitesimally small, like this tiny little gesture in this tiny little group in a tiny little country somewhere, you're working towards something that makes you feel more hopeful.'*

Debbie Wiseman discussed successful efforts by *Sharing the Harvest NL* to change legislation that kept hunters from donating moose and caribou meat to NL foodbanks.

A lot of times when you speak up about something that's important to you, you're told, 'nobody cares, you are just one person complaining.' But a small group of people can really make a difference if they're passionate about the thing they're advocating for and are willing to look outside the box and look at things differently and figure out different ways to do things.

~ Debbie Wiseman



Efforts to change legislation can take a lot of time, and having a receptive change-maker in a position of authority is key to making it happen.

Facing knowledge that 26,000 people per year use foodbanks, of whom two out of five are children, allowing food banks to use excess meat supplied by hunters seemed to *Sharing the Harvest NL* volunteers, to be a simple solution to some issues contributing to this insecurity.

Wiseman talked about the frustrations her group experienced trying to meet with elected officials. She said when there was a change in leadership and there was a cabinet shuffle, things moved very quickly after being in a stagnant phase. Wiseman said this demonstrated how critical political will can be to effecting real change.

Volunteers advocated, created a petition, generated media attention, partnered with like-minded groups, and offered to create a pilot project as a model. And, the change happened.

The process for donations is simple: a hunter gets meat butchered at a government facility and has it packaged and frozen to ensure food safety and quality and the meat is coded to track the source. A local furniture company on the Northeast Avalon donated a freezer for interim storage. The lessons learned on advocating for change, include:

- Focusing on and supporting small changes at the individual and group level to build momentum.
- Taking advantage of good timing and seizing the opportunities as they appear.
- Promoting and supporting a return to self-provisioning traditions to improve access to local, healthy food.
- Collecting information and data through community food assessments and other sources to support change efforts.
- Adapting activities to meet the energy needs of people (not everyone has time or resources to create a garden) so adjust strategies to meet a variety of experiences.
- Recognizing how much passion and belief in the project/activity can really drive energy and effort for success.

People who are on income support - they are not living on these levels - they are just surviving, if that.

~ Participant



Participant Voices on Food Security

“Commitment across all sectors is necessary, bring insights and strengths from each, all levels of gov and various sectors, all have skin in the game and have flexibility and skills in different areas. COVID-19 offered opportunity where everyone had the challenge at once, the same things are coming up from time and time again.”

*“When wages go up, the money earned does not stay in the employee’s pocket. It gets spent and boosts the economy at the local level. To the extent that we can keep purchases local, whether for housing, health, food or anything else, **everyone will benefit.**”*

**Food
Security
and
Income**

*“Food security and pharmacare is often a tossup, **especially for seniors in poverty**, having to choose whether to spend money on food, or medication?”*

“Many of these issues require a whole-government approach. Often government will come together for one project at a time, disbanding when done and coming back together for the next thing, rather than for a longer-term approach with more durable connections between issues. Including all sectors, maintain connections and regular collaboration are important to driving action.”

The Power of Poverty Reduction Strategies



Engagement is a big piece of the process of developing a proper poverty reduction strategy. It's almost as important or more important than the actual final product. How you do things, why you do things, matter. If we can engage the people that have the lived expertise of poverty in the process of developing the program or product or process that will make their lives better, we have to put them at the center of the conversation.

~ Scott MacAfee

Scott MacAfee, Fredericton, chairs the National Advisory Council on Poverty, which advises the Government of Canada annually on progress meeting poverty reduction goals outlined in 2018.

The National Advisory Council on Poverty has learned some lessons about collaborating on how to make change. MacAfee provided an overview of the impact poverty reduction strategies have had across Canada, and urged participants to take away these lessons:

- **Have a common goal** - federally and provincially there is a united effort to reduce poverty by 20% in 2020, 30% by 2030, and 50% by 2050.
- **Shift from lived experience to lived expertise** - this shift still recognizes academic credentialing but prioritizes individual and community knowledge. Those who live in poverty understand it best; their expertise is crucial.
- **Establish clear mandates** - the national council has three: report progress annually, provide independent advice, and have ongoing conversations about poverty.
- **Recognize unequal change** - while poverty in Canada has gone down by about 10%, it has not gone down equally across the country. The lack of affordable housing and food insecurity are two major components to address but the Advisory Council understands needs in health equity, early learning, child care, literacy, and numeracy, to name only some.
- **Establish a common agenda** - Advisory Council members learned early that many poverty reduction strategies focused on what governments wanted to achieve. Poverty reduction efforts need mutual reinforcement. What we can do to make people's lives better on a daily level must be grounded in a collaborative process to engage with people and to make change happen.

Discussion on Poverty Reduction Strategies



I'm trying to be positive about pharmacare. It's been decades since it was first brought up - the mid-1960s, when Medicare was introduced in this country, and we've had studies...a commission, we've had committees, consultations, so far and so forth, including the recent one by Dr. Eric Hoskins...all that effort in advocating and we still don't have pharmacare.

~ Ed Sawdon

Ed Sawdon provided a short summary of the work he has carried out over the last two decades, advocating for a national pharmacare plan.

Sawdon said most of the provinces have some form of a provincial plan. Some of these are more generous than the Newfoundland and Labrador Provincial Drug Plan (NLPDP). Sawdon said his advocacy has focused on promoting a national, accessible, and portable pharmacare plan.

- Recent research concluded creating a universal national plan that replaced all the other provincial plans (both public and private) would result in a savings of more than \$4B in prescription expenditures.
- The pandemic has shown everyone where there are gaps in the social safety net. People have lost their jobs, and with that they have also lost their work health and drug plans. Provincially, people have to wait and apply for one of three existing plans.
- An alternative would be to have pharmacare as part of the public medical/health plan, rather than ask citizens of NL to apply for one of three plans in the province.
- Universal access plus a universal basic income would make a huge difference to people's health and well being.

Growing up, I knew there were two kinds of people: those who had money and those who did not. My definition of poverty is very simple: if you do not have enough income to provide for the basic necessities of life and participate in society the way others do, then you are living in poverty.

~ Mark Nichols

Mark Nichols said any discussion of health outcomes, food insecurity, and poverty reduction has to address the role the provincial minimum wage plays in all of that. Nicholas described his own lived experience of growing up in poverty to illustrate the short term and long-term impacts poverty has on people.



Nichols said growing up he knew there were two kinds of people: those who had money and those who did not. He said his definition of poverty is very simple: if you do not have enough income to provide for the basic necessities of life and participate in society the way others do, then you are living in poverty.

- Poverty reduction can start with changes in two key areas: improving income support programs and raising the provincial minimum wage. Even the recent increase to \$12.50/hour creates a single-worker income of only \$26K a year.
- A single person with a minimum wage job could expect to spend between 50 and 60% of their wage on rent for a one-bedroom apartment. This exceeds the accepted benchmark of 30% for shelter costs. Nichols asked participants to imagine trying to support a family; the consequences are consistent: you don't pay rent, you get evicted. You don't pay your electricity bill, you lose your heat and lights. The only place where there is wiggle room is in the food budget.
- Improving minimum wages must be central to any poverty reduction strategy.
- There is significant support for a \$15 minimum wage. Nichols said that while this is still not a living wage, it would lift a number of people out of poverty. A bigger issue is the number of under-waged people we have in the province.

Nichols cited 2019 data, which found there were 48,900 people who made less than \$15 per hour. This means one in four workers in Newfoundland and Labrador earns \$31,200 or less a year. Nichols said this fact has far reaching consequences for quality of health and well being, given that income and social status are the leading indicators for health.



Participant Voices on Poverty Reduction Strategies

"The Poverty Reduction Strategy was published in 2005 in our province, yet **we seem to be still dealing with many of the same issues we've been talking about for years**. I know change can be slow, but we need to reflect on where we were, what has been done, and determine why movement, particularly change in income, etc. is moving so slowly."

"Yes, we need an updated poverty reduction strategy but actual reduction of poverty requires **action at both the provincial and the federal level.**"

"We have been talking for years - **it's time for action**"

Poverty Reduction Strategies

"I think it's really worth reflecting on the fact that, nationally, during the pandemic, \$2000/month was set as the minimum amount someone could get by on (as the CERB amount) and that's **double what the same individual would receive** on income support."

"For human dignity, let's take away the stigma. **Universal programs take away stigma.**"

"For persons with disabilities pharmacare, dental, **\$15 wage is not enough**. If someone on income support leaves to take on employment, they lose the benefits under the Special Assistance Programs. This involves walking aids, wheelchairs and repairs to such, oxygen, C-Pap/Bi-Pap machines and supplies as well as to other medical supplies like bandages and attends...also home care. Even with private insurance, a deductible on all this would not be affordable. Plus, leaving income support for employment would mean loss of a rent subsidy."

"One outcome of the Poverty Reduction Strategy, that didn't last, was indexing income support rates to inflation. **Without indexing, we're actually making a policy choice for income support to go down every year.**"

Participant Voices in Breakout Sessions

Participants at Policy on the Rock 2021 had a lot to say about the complexity of tackling poverty. The 2020/2021 pandemic response in Newfoundland and Labrador and Canada has left them with a deep impression that things can change when they must, but that no one solution or government, or approach, will get the job done.

There is support for the message that health care policy must recognize and address basic income issues in society or continue to achieve poor outcomes in health care services. Working in collaboration, across community, private and government sectors is a real need. The many moving parts of poverty reduction, to be strategic, require not only the current programs aimed at alleviating the effects of poverty on individuals, but a cross-country commitment to stigma-free, universal supports.

A measure of impatience is clear among advocates who attended the sessions. Examples of federal parties supporting universal pharmacare, but failing to agree on how to implement it - of elected officials agreeing to work on poverty but failing to put the committees in place to work on solutions - of paying consultants for trimming budgets based only on mathematics - of cutting benefits to new workers who can't get equivalent disability benefits in the workplace, even at entry levels - of paying laid off workers more during COVID-19 than income-assisted persons receive on a regular basis, of lack on Internet in rural area....these policy directions all rankle.

Yet, there is much good will. Participants were encouraged by the pandemic response, by an emerging and publicly stated plan to update the province's poverty reduction strategy, by the existence of a Health Accord with a longer term, ten-year planning approach, by the burgeoning recognition that lived experience of poverty means lived expertise, by the growing understanding that indigenous, disabled and racialized citizens cannot be passive recipients of programs, but recognized players in making change. Policy on the Rock is designed to amplify the voice of citizens and policy-makers. Thank you to all.

USEFUL READING RESOURCES

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2. A Basic Income for Newfoundland and Labrador: Opportunities, Options, and Analysis

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3. Potential Economic Impacts and Reach of Basic Income Programs

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CSC NL maintains an anti-poverty reading list at our Vibrant Communities webpage.

<http://communitysector.nl.ca/vibrantcommunities/policyontherock/readinglist>



Vibrant Communities

A Project of the

Community Sector Council Newfoundland and Labrador



Sister Elizabeth Davis left our participants with a blessing that encouraged everyone to remain focused on goals, even when the seas get rough, and to seek strength from our surroundings.

*“On the day when
the weight deadens
on your shoulders
and you stumble,
may the clay dance
to balance you.*

*And when your eyes
freeze behind
the grey window
and the ghost of loss
gets in to you,
may a flock of colours,
indigo, red, green,
and azure blue
come to awaken in you
a meadow of delight.*

*When the canvas frays
in the currach of thought
and a stain of ocean
blackens beneath you,
may there come across the waters
a path of yellow moonlight
to bring you safely home.*

*May the nourishment of Earth be yours,
may the clarity of light be yours,
may the fluency of the ocean be yours,
may the protection of the ancestors be yours.*

*And so may a slow
wind work these words
of love around you,
an invisible cloak
to mind your life.”*

John O'Donohue, from *Anam Cara: A Book of Celtic Wisdom*