

# The Punishing Bureaucracy of Welfare:

Policy recommendations to improve  
income assistance provision in BC



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Sanctuary Health  
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South Asian Mental Health Alliance  
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Care Not Cops, never ceded x<sup>w</sup>məθk<sup>w</sup>əyəm, skwχwú7mesh & səlilwətał lands

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## The Punishing Bureaucracy of Welfare: Recommendations to improve income assistance provision

This document contains policy recommendations within a framework of reducing the **punitive and carceral approach** the Ministry of Social Development and Poverty Reduction (MSDPR) brings to service provision. Recommendations are made with recognition that income assistance remains rooted in harmful ‘[workfare](#)’ culture, but with the spirit of mitigating the harm, stress and distrust this has created.

This report urgently requests that the MSDPR **immediately raise the rates** for the main classifications of financial support, income assistance (IA) and disability rates (PWD), by **minimally tripling the non-shelter rates** and indexing rates to inflation. For example, this would increase the single person monthly IA rate from \$560 to \$1680, and PWD from \$983.50 to \$2950.50. In the absence of rent-geared-to-income and other accessible social housing, the shelter rate should be made flexible to meet the housing crisis with the response people deserve across regions (i.e., the average cost of appropriate housing in a given area). This change would be a life-saving intervention as mortality rates have [long been](#) linked to income in Canada. Poverty kills.

The 22 recommendations that follow strive to align with broader disability justice movements, particularly those that champion [cross disability solidarity and collective liberation](#), where no bodies are left behind, as well as orientations of equity and justice. These are changes that could be made in the immediate term without causing undue harm in the process.

Many of the recommendations share a thread of promoting access to fundamental necessities including healthcare, housing, nutrition, and identification documents needed to access essential services and maintain a dignified quality of life. These recommendations honour family, kin and community, and intend to relieve unnecessary burdens that people living in poverty experience while navigating this system. (Please note that both PWD and IA are classified together as ‘IA,’ unless otherwise stated).

### Recommendations

#### 1. Abolish the financial penalization of couples.

**Rationale:** Couples who live together and access IA have their supports cut by approximately \$300. This can be a barrier to pursuing healthy relationships or leaving unhealthy ones. It causes various other challenges, including in the case of death, as the bereaved partner can be denied recognition as next of kin. It is a deterrent to be transparent about partnerships to care providers, limiting therapeutic relationships and supports.

#### 2. Immediately discontinue PWD ‘spousal restrictions.’

**Rationale:** Care Not Cops supports calls to ‘[can the cap](#).’ Individuals are denied access to PWD if their partner is not MSDPR affiliated and earns more than \$1,948 per month. No earning exemptions exist for spousal income, which is deducted from payments. This prevents people from



having their own income source, creates barrier for the progression of healthy relationships, and can trap people in abusive ones. A recent government commissioned report found that single, working-age women have the [highest rate of poverty in BC](#), and experience [double the violent victimization](#) of men nationally. [One survey](#) reports that 3 out of 5 trans women report having experienced intimate partner violence (rates of intimate partner violence remains under-measured outside of the gender binary).

3. Make direct deposit an option beyond cheque day.

**Rationale:** People deserve autonomy over how they receive their income. There is a significant association between cheque day and [overdose deaths](#). Currently, if people split their cheque voluntarily, some of the payments have to be physically picked up. Using threats of ‘splitting’ someone’s cheque involuntarily, however, should cease to be an option.

4. Low barrier coverage of all funeral expenses arranged by formal or informal relations of someone who has passed away as an active recipient of IA.

**Rationale:** Funeral coverage is limited to cremation or local burial. Little funding is available to transport the deceased person to another community, or to obtain a reasonable casket and/or appropriate spiritual items. Supporting this takes intensive coordination across a number of services. For many, this means an inability to participate in ceremony in their respective homelands, a possible contradiction of Article 11 of [UNDRIP](#).

5. Immediately end the requirement of monthly income stub reporting.

**Rationale:** Care Not Cops agrees with the broad recommendation by the [British Columbia Expert Panel on Basic Income](#) to terminate all workfare-oriented policies. Many people do not have the technology required to submit on ‘My Self Serve,’ which is difficult to operate regardless. This creates an added burden of attending a physical office and waiting in line.

6. Terminate the practice of requiring reports of ‘any other kind of money received’ outside of employment income.

**Rationale:** Living in poverty often means being compelled to find informal ways to generate income, including sex work, selling used goods, and binning or collecting cans. These reporting requirements incentivize riskier ways to receive payment and store money; and it can mean harassment from MSDPR workers or suspension of essential supports.

7. Increase threshold for current asset limits for applicants of IA from \$5,000 to the level of the annual exemption (see: #8), and eliminate asset tests for re-accessing. Eliminate the two-month wait from loss of work to being eligible for support.

**Rationale:** Care Not Cops supports the [British Columbia Expert Panel on Basic Income’s](#) similar recommendation to eliminate asset tests for people on regular assistance if they access IA multiple times, particularly because people with disabilities frequently experience discrimination in the workplace, and the process of claiming wrongful dismissal is inaccessible for most. This can contribute to individuals falling further into the cycle of poverty.



8. Immediately increase the annual earnings limit from \$15,000 to \$34,999, followed by 20 cents reduced for each dollar earned between \$35,000 and \$44,000.  
**Rationale:** Strict and low annual earnings limits pose barriers for people to obtain employment and compounds harm by ensuring people receiving this benefit remain in poverty. Allowing more people to become eligible for PWD while they are working will facilitate earlier access, so the support can truly act as a safety net, and not as a last resort for when people's health has severely declined.
9. Never withhold an entire cheque for administrative reasons.  
**Rationale:** Low level IA supports compel the need to take on interpersonal and formal debts with an expectation that repayment will occur on the day of cheque issue or immediately afterwards. Withholding an entire cheque puts people at risk of violence and further debt.
10. Discontinue cutting off rent and financial support payments to people who become incarcerated for longer than three months; and permit all people with warrants or who are incarcerated to apply for income support as new recipients.  
**Rationale:** Discharge from prison to homelessness and complete poverty increases numerous measured 'risk factors,' including overdose death (BC government reports that people who have experienced incarceration are [7 times more likely](#) to die by overdose). Warrants are issued for wide-ranging reasons, and keeping people in poverty does not increase safety.
11. Immediately end the requirement to share details of an unexpected event to access a food, shelter or clothing crisis supplement. This includes never asking for a police file number.  
**Rationale:** This worker discretion is costly in wages for the MSDPR and other organizations. It is seemingly rooted in an idea that people living in poverty should not be trusted. It is not trauma-informed to request that people share stressful or traumatic events without adequate mental health support. Instead, offer transparent guidelines to crisis grant limits and amounts that can be accessed as needed.
12. Triple the food crisis grant that is available max. once per month from \$40 to \$120.  
**Rationale:** [BC Stats](#) shows food prices increased by 9.8% from February 2022 to 2023 (\$40 was set several years prior). The current food crisis grant does not reflect current food prices.
13. Create a pathway for people who are undocumented to receive the full array of MSDPR support. Develop a slush fund for MSDPR workers to administer directly to healthcare facilities when MSP is inaccessible based on immigration status.  
**Rationale:** Many people face barriers to obtaining immigration status or adequate documents. This change would ensure access to supports regardless of immigration barriers, as well as fair and equitable healthcare to all.
14. In collaboration with the Ministry of Health, abolish the 3-month waiting period for Medical Service Premiums (MSPs) coverage by including automatic coverage for those who have successfully applied for IA; and cover MSP costs for international students while working toward the elimination of these MSP fees altogether.



**Rationale:** Care Not Cops strongly supports [Sanctuary Health, the Centre for Gender & Sexual Health Equity's and IRIS](#) call to 'end the 3-month wait.' Emergency healthcare coverage can be advocated for via the Ministry of Health, this drains worker resources and should not be necessary.

15. Include permanent residence cards (new and replacements) in coverage under ID supplement funding.
 

**Rationale:** Other forms of ID are covered to reduce barriers from healthcare to employment, the same logic should be applied for people seeking their federally administered permanent residency card.
16. Develop in-house MSDPR language services to give people the option to schedule appointments and interact with the system in their respective language.
 

**Rationale:** Language can be a major barrier to accessing support, and coordinating across multiple services to navigate the system is extremely difficult.
17. Create and rapidly scale-up a pathway for non-MSDPR workers to approve crisis funds through a certification program.
 

**Rationale:** This change would empower community resources to directly support people, and decrease the number of MSDPR phone calls and office walk-ins. Organizations such as BC Housing have trained community partners to complete certain housing assessments, the MSDPR should consider this approach.
18. End the practice of reducing income and rent for those participating in accredited treatment or residential care programs that have fees; instead pay the facility fees directly.
 

**Rationale:** Care facilities tend to only provide people's basic survival necessities, not other bills and costs. For some, this is a primary barrier to attending a care or treatment facility.
19. Discontinue sending letters to PWD recipients to consent for CPPD eligibility.
 

**Rationale:** Instead have this completed during the application process, with the option to be revoked; 'grandfather' in current recipients. This letter uses jargon that leaves some PWD recipients afraid of their income being discontinued. The administrative paperwork is extremely complex and confusing, and puts people at risk of having their PWD temporarily suspended.
20. Offer direct funding for housekeeping or cleaning services for those who need it.
 

**Rationale:** Cleaning and housekeeping, especially with many people forced to live in inadequate shelter, can be extremely difficult for those living with a disability(ies). Home support programs almost exclusively support with physical self-care tasks such as bathing and dressing, and are largely inaccessible due to strict criteria and program capacity.
21. Move away from 'third party agreements,' where an outside non-profit takes over the administration of a client's income assistance if their behaviour has been labeled 'challenging' or 'aggressive.'



**Rationale:** This process limits access to MSDPR community integration support workers, and other supports, which compounds marginalization and exclusion from state services. Many of these recommendations would reduce conflict overall between recipients and workers if taken in full.

22. Develop capacity for MSDPR to complete BC Services cards in-office.

**Rationale:** Not having adequate photo ID can perpetuate barriers to activities of daily living, for example public transit (not having photo ID that matches a Compass Card can result in ticket and targeting by transit police), accessing the Greater Vancouver Food Bank, accessing healthcare facilities, obtaining a bank account, etc. ICBC requires attestation for people who do not have other ID, and not everyone can access somebody that will take the time, and be eligible for the attestation requirements.

In addition to the costs saved by lifting people out of poverty across different areas of government, including decreased reliance on policing, many of these recommendations would directly reduce costly MSDPR worker discretion and create clear standards. They would likely positively impact rates of burnout and moral distress. Minor ‘tweaks’ have added more confusion to this complex and carceral system. This drains public resources through numerous organizations, often funded by similar areas of government, that provide support to navigate ministry services (i.e., two \$28-40 per hour workers debating whether to release a \$40 dollar crisis grant to an individual).

These recommendations have been created with consideration of the social determinants of health, by a group of health and social service workers who have witnessed and/or experienced the barriers IA recipients face while navigating this system. These changes will positively impact the lives of people who often experience intersecting means of oppression and improve public safety, with the acknowledgement communities should continue to be made stronger than these reforms.

Funding symbolic solutions, such as ‘systems navigators’ without a surplus of support to navigate (a role some of the authors get paid to do, but remain critical of); ‘housing hubs’ with no additional housing; or shifting the shelter rate to \$500 from \$375, are not solutions. They tend to further complicate the bureaucracy of income security in BC. **These recommendations call for much broader transformation.** Material resources should be transferred as directly as possible to the people who need them. Increased bureaucratic processes equates to more wealth being stolen on route by labour wage and organizational administrative costs, while only adding to the stress and trauma of trying to survive while living in poverty in BC.

