An Evaluation of the Impact of Charlie’s Food Bank – A Support Program for Pet Owners in the Downtown Eastside

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Table of Contents

ACKNOWLEDGEMENTS .................................................................................................................. 3
ABSTRACT ........................................................................................................................................ 4
INTRODUCTION .................................................................................................................................. 5
  Purpose of this Report .................................................................................................................. 5
  Background ................................................................................................................................... 5
STUDY GOALS ..................................................................................................................................... 10
CONCEPTUAL FRAMEWORK ....................................................................................................... 10
  Impact Evaluation Approach ..................................................................................................... 10
METHODOLOGY .............................................................................................................................. 11
  Study Design .............................................................................................................................. 11
  Procedure ................................................................................................................................... 14
  Analysis ....................................................................................................................................... 15
FINDINGS ........................................................................................................................................ 16
  Benefits ....................................................................................................................................... 16
  Areas for Improvement .............................................................................................................. 22
DISCUSSION .................................................................................................................................... 25
RECOMMENDATIONS .................................................................................................................... 30
RESEARCH LIMITATIONS ............................................................................................................ 32
FUTURE RESEARCH DIRECTIONS .............................................................................................. 34
IMPLICATIONS FOR PUBLIC HEALTH RESEARCH, POLICY, AND PRACTICE .................. 35
CONCLUSION ................................................................................................................................... 36
CRITICAL REFLECTION ............................................................................................................... 37
CITATIONS ......................................................................................................................................... 39
APPENDICES .................................................................................................................................... 46
  Appendix A: Interview Guide for Clients .................................................................................. 46
  Appendix B: Interview Guide for Volunteers ........................................................................... 48
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Abstract

This paper reports on an impact evaluation conducted amongst clients and volunteers of Charlie’s Food Bank. Charlie’s Food Bank has been a staple of the Vancouver Downtown Eastside for the past 15 years through the provision of pet food, veterinary services and other pet related supports provided to homeless and low-income pet owners. The evaluation sought to examine the impact and contribution of Charlie’s Food Bank services on the lives of clients. The findings of the evaluation suggest that pet services provided by Charlie’s Food Bank contribute not only to pet care but client well-being through emotional and mental health benefits, social connectedness and community building. The results also point to the importance of using strengths-based, trauma-informed, and ecologically informed service delivery techniques in order to best serve the needs of the Downtown Eastside homeless pet owners.
Introduction

Purpose of this Report

This capstone project is a qualitative evaluation of Charlie’s Food Bank (CFB), a charity outreach program for homeless and low-income pet owners in the Downtown Eastside (DTES) neighborhood in Vancouver, Canada. This paper will offer an overview of how CFB is easing the struggles faced by low-income and homeless pet owners population in Vancouver, and provide insight into the added impacts of the program. The paper will begin by first reviewing the literature around homeless and low-income pet ownership, and look at the characteristics of CFB within the wider context of similar international charities. Next, the findings from a qualitative evaluation conducted among staff and volunteers at CFB will be discussed. Finally, the possible implications of this evaluation within wider public health research and practice will be explored.

Background

Benefits and Challenges of Pet Ownership

There are several reasons why low-income and homeless pet owners own animals. Serving as a source of love and friendship, an animal can provide great comfort, and act as a strong buffer to loneliness (Kidd & Kidd, 1994; Labrecque & Walsh, 2011; Thompson, McManus, Lantry, Windsor & Flynn, 2006; Rew, 2000). These benefits to pet ownership have been found to be particularly meaningful for homeless individuals who suffer higher rates of social isolation, and can feel socially rejected and stigmatized by society (Goodman, Saxe, & Harvey, 1991).
In addition to these emotional-social benefits, pets have been found to improve mental health (Rhoades, Winetrobe & Rice, 2014; Irvine, 2013; Kidd & Kidd, 1994; Rew, 2000; Singer, Hart, & Zasloff, 1995). A study among street-based youth that quantitatively analyzed levels of depression, PTSD, and loneliness, revealed that all three indicators were significantly lower in the youth with pets than those without (Rhoades et al., 2014). Considering that experiences of poverty and homelessness are correlated with higher rates of mental health issues and mental illness, the benefits that pet ownership provides should not be overlooked (Rhoades, et al., 2014).

In addition to companionship and mental health benefits, pet ownership among homeless individuals has been associated with improvements in the quantity and quality of social connections individuals have with other people. For those who might lack meaningful relationships and trust, caring for a pet can create common ground to speak about with others (Rew, 2000). It has also been suggested that the presence of a pet can help to lower aggression (Irvine, 2013; Labrecque & Walsh, 2011; Taylor, Williams & Gray, 2004). Together, these factors can enable some owners to form meaningful interpersonal relationships.

While there can be numerous benefits from owning a pet, an animal can present significant challenges for those living in poverty. For example, restrictions on where animals are permitted can cause difficulties with service access when caring for a pet (Taylor, et al., 2004). Transportation systems and services such as retailers often do not allow pets to accompany their owners (Taylor, et al., 2004). Furthermore, homeless pet owners can face social stigma. This stigma stems from
the perception that homeless individuals are incapable of caring for their companion (Irvine, Kahl, Smith, 2012). Such perceptions may prevent individuals from accessing the care they need for their animals, as service providers may refuse to serve individuals in this population (Irvine, Kahl, Smith, 2012). Additionally, low-income and homeless individuals struggle to pay for pet food and veterinary care expenses (Kidd & Kidd, 1994). As a result, individuals sometimes sacrifice their own personal health care needs to care for their animal (Irvine, 2013; Taylor et al., 2004; Rhoades et al., 2014).

**Pet Support Charities**

Over the past fifteen years a number of charitable organizations across North America have recognized the struggles faced by homeless and low-income pet owners, and have stepped up to provide select pet care services.

In Canada, The Humane Society runs charity pet food programs for homeless and low-income individuals in Calgary, Winnipeg, Ottawa, and Toronto (KibbleCanada.com, n.d.). There are also a small number of independent programs that have been started in the Canadian Maritimes by individuals who gather pet food donations to try to help homeless individuals care for their pets (KibbleCanada.com, n.d.).

In the state of Oregon, the Pongo Fund is a well-established charity pet support program that is currently comprised of over 100 volunteers (ThePongoFund.org, 2015). This organization is making pet food available to a significant number of struggling pet owners in their area, claiming to have provided
over eight million meals to pets in need so far. They also offer a ‘meals on wheels’ program delivering pet food to seniors, as well as free spay/neuter appointments to individuals who meet the needs-based criteria (ThePongoFund.org, 2015).

While a number of programs exist across North America, no evaluations of support services for pet owners could be found.

**Charlie’s Food Bank**

Charlie’s Food Bank was opened in Vancouver, Canada in the year 2000, amidst this context of increasing attention to the needs of homeless pet owners. Seeing a large number of homeless individuals struggling to provide for their animals, the British Columbia (BC) Society for the Prevention of Cruelty against Animals (SPCA) Chief Animal Health Officer, Dr. Jamie Lawson, started a donation based, weekly program that offers services to support pet owners to care for their pets. Regional Animal Welfare Manager, Kim Monteith, soon joined him. The goal of the organization was to ensure the health and welfare of all animals in the low-income DTES neighborhood.

Although significantly smaller than the Pongo Fund, with a team of ten regular volunteers and two BC SPCA managers, CFB currently distributes approximately 5000 kilograms of cat and dog food every month (BC SPCA, 2013). This distribution takes place every Thursday morning at the Mission Possible building located in the DTES, where CFB volunteers give out a variety of donated goods including, pet food, cat litter, pet treats, as well as various other pet toys and accessories. Additional weekly pet services are offered, including nail trimmings,
care advice and animal training tips (BC SPCA, 2013). CFB clients are required to register and provide contact information, as best they can. While the target population for the program is individuals who are low-income or homeless and living in the DTES, all individuals with a Vancouver address, as well as those who are homeless or temporarily housed within the city, are eligible for CFB services. If individuals indicate that they live outside of Vancouver, they are encouraged to seek care in their local area.

CFB also provides monthly veterinary care services and free access to spay or neutering for one pet per family. Veterinary services occur during the CFB service on the last Thursday of every month, when between two and four veterinarians see a limited number of animal patients. To ensure equal access to all, owners may only seek veterinary care for one pet, they must show proof of low-income status, and their animals must already be spayed/ neutered. Once they are registered, a pet owner can come as many times as they wish to seek CFB assistance. Veterinary services include routine medications such as flea protection and check-ups, as well as a limited number of specialized medications. For surgical appointments and emergency situations, clients are referred to the BC SPCA hospital where payment plans are negotiated on a case-by case basis.

Evaluation

While there are many pet care services that CFB provides to low-income and homeless pet owners, no evaluation has been conducted to assess the impact the organization has on their client’s lives. An evaluation may expose the major benefits
of the program; guide future program decisions and create support for policies that would expand the benefits the service provides (Centre for Disease Control, 1999). An evaluation may also persuade potential funders to invest and thereby increase the program’s service capacity and reach (Harris, 2010). Alternatively, if the program inadvertently has negative impacts on the population it serves, an evaluation can help to expose these areas and identify opportunities for improvement (CDC, 1999).

**Study Goals**

The goals of this evaluation are to: 1) Provide CFB management with input concerning the impact that the program has on the lives of their clients. 2) Suggest areas for improvement that might increase the impact of the program 3) Suggest additional ways CFB may be able to diminish the struggles faced by low-income and homeless pet owners in Vancouver.

**Conceptual Framework**

**Impact Evaluation Approach**

Impact evaluation has been defined as an evaluation that “assesses changes in the well-being of individuals, households, communities or firms that can be attributed to a particular project, program or policy” (The World Bank, 2011). This form of assessment has been used increasingly in recent years, due primarily to the push to demonstrate a program’s impact on the populations it seeks to support.
(Mohr, 1995). Unlike an outcomes evaluation, which analyzes whether or not an organization’s specific targets have been met, an impact evaluation seeks to disclose the various ways that client’s lives have changed as a result of the program. Through this evaluation approach, intended and unintended impacts of a program can be explored (Khandker, Koolwal & Samad, 2010).

An impact evaluation approach is suitable to this study for multiple reasons. While CFB collects regular output data and has found they are successfully meeting their goals of feeding low-income and homeless individuals’ pets, by distributing over 5000 KG of pet food each month (BC SPCA, 2013), no evaluation has looked at how CFB impacts on the lives of their clients. CFB service providers need to be attentive to the unique needs and vulnerabilities amongst the population they serve (Hopper, Bassuk, & Olivet, 2010). Many individuals living in the DTES live with mental illness and have experienced trauma, social stigma and negative experiences seeking care in the past (Hwang & Bugeja, 2000). An impact evaluation of CFB can help determine whether the organization adequately addresses the needs that the low-income and homeless population has in order to feel safe seeking assistance.

**Methodology**

**Study Design**

The evaluation of the CFB was conducted using a qualitative evaluation approach. This design was chosen because qualitative data can be used to gain an in-depth and contextual understanding of the participants’ experiences with the program and/or the impact of the program (Harris, 2010). Furthermore,
stakeholder feelings, thoughts, and activities associated with the program can be explored and used to support future changes in the program (Harris, 2010). Unlike a quantitative approach, a qualitative approach allows the interviewer to ask open ended questions which are designed to encourage detailed responses (Harris, 2010).

This study was also designed to be a collaborative process between CFB coordinators, volunteers and the Principal Investigator/Interviewer. During the design of the study and in the weeks prior to the interviews, conversations took place between CFB managers, volunteers, and the Principal Investigator to discuss questions for the interviews and the best ways to conduct the interviews (where, when, how individuals would be recruited). Collaboration through ongoing open and informal discussions between the project stakeholders was intended to increase the likelihood that this evaluation would offer meaningful insights into CFB’s program.

Sample

Purposive sampling was used to recruit participants. Purposive sampling is a nonrandom selection of participants commonly used when the evaluation goals are to understand the context of a specific group of people (Harris, 2010). This selection approach was chosen in order to obtain meaningful feedback from participants who had utilized the program consistently, and who had a thorough understanding of how the program works. Recruitment was conducted at the CFB, during service hours, with the assistance of CFB Program Manager Kim Monteith. Due to her fifteen years of experience working with homeless individuals in the DTES, Kim Monteith
has extensive knowledge about a large number of the CFB program users.

In an effort to increase the chances that information about the impacts of CFB would be provided, inclusion criteria were designed to ensure that each participant chosen had at least a minimal level of awareness of the CFB services. Participants were required to have used CFB services a minimum of six times in the twelve months prior to the interview, be 19 years of age or older, and have the capacity to provide informed consent. All participants were provided ten dollars in cash for participating in the interview, through funding that was generously provided by CFB.

A total of eight interviews were conducted, seven of the interviews were one-on-one with CFB clients and volunteers, and one interview was conducted with a pair of married clients. In total, six clients and three CFB volunteers were interviewed. Two out of the three volunteer participants were formerly CFB clients, one of whom continues to live in the DTES today. It was seen as useful to ask both clients and volunteers for their perspectives because service providers often have different perspectives on impacts from program participants (Harris, 2010). Furthermore, interviewing volunteers who were formerly clients added diverse perspectives on the types of impacts that CFB has on the lives of clients.

While acquiring a representative sample was not attempted, the intention was to ensure diversity among the study participants. Ethnicity and gender were not directly asked in interviews, however the group of participants came from diverse gender and ethnic groups, including one self-identified Aboriginal Canadian, and one self-identified immigrant Chinese Canadian. At the time of interview one client
identified as living in his car, four clients identified that they were in socially supported forms of housing, and one stated that he was living in a publically supported single room occupancy hotel (SRO). Three out of the five clients owned dogs, while the other three clients owned cats. All three volunteers identified as pet owners as well.

Interview Guide

Prior to the interviews, the Office of Research Ethics at Simon Fraser University granted approval for the study and the interview guide on February 18th 2015. Different sets of questions were used for clients and volunteers in order to explore the thoughts and experiences relevant to their positions. Clients were asked about their living situation, their lives, and their struggles as a pet owner. The questions also addressed the impacts that CFB had on client’s lives, and ways the program might be improved. Interviews with volunteers focused on experiences volunteering at CFB, their perceptions of the strengths of the program, the impacts they have observed, and areas where CFB could be improved. Because two volunteers interviewed were originally clients, and in order to understand broader impacts of the organization, volunteers were also asked about how they came to volunteer at CFB, their living situation and the impact of CFB has had on their lives. (See Appendices A and B for Interview Guides).

Procedure

Interviews were conducted between February 26, 2015 and April 16, 2015. The interviews were conducted at the Mission Possible site during the hours of the
weekly Food Bank donation distribution. They took place in a private room with a closed door. This location was chosen in order to protect participant confidentiality as well as to ensure the safety of the interviewer. Interviews were between 20-45 minutes in length.

**Informed Consent and Confidentiality**

Two consent forms were used in this study, one for volunteers and one for CFB clients. Individuals were asked to consent to the audio recording of their interviews. Confidentiality could not be guaranteed to participants because interviews were conducted at CFB during hours of operation, however the information provided by participants during the interview was kept strictly confidential by the principal investigator and project supervisor. Audio files and transcriptions were kept on password-protected laptop computers stored in a locked cabinet in a locked office.

**Analysis**

While objectivity in analysis could not be entirely ensured it was maximized through the use of a rigorous qualitative procedure. After each interview, the recording was transcribed using Nuance Dragon Naturally Speaking software. After all the interviews were transcribed, interviews were entered into the qualitative analysis software program NVivo. Using NVivo software, interviews were classified and analyzed using a thematic content analysis approach. This involved sorting the interview statements into themes and subthemes that were categorized for analysis. Initial parent themes were first identified and subsequently, sub-themes emerged
and were amalgamated, coded and analyzed. Throughout the analysis process a reflexive journal was kept to document the potential biases and thoughts of the principal investigator.

**Findings**

Qualitative themes were organized and are presented here as benefits and potential areas for program improvement.

**Benefits**

The following themes capture the perceived benefits of the CFB service for low-income and homeless pet owners. While the themes were restricted to human benefits, it is important to note that all the interviewees also described significant health benefits for the animals that received care at CFB.

The most prominently stated themes surrounded an increased *access to support*, how the service created a *financial safety net* for clients, and the *emotional security* that individuals received. Frequently stated themes also included the *consistency* of the service, and ways that CFB inspired individuals to *give back*. Benefits that were less prominently described included ways that CFB allowed individuals the opportunity to form *connections to others* and develop a *sense of community*, as well as ways that the service facilitated *lifestyle changes* for some CFB clients.

**Access to Support**
All interview participants indicated that CFB provides clients with a sense of relief by making it significantly easier to access services for their pets. The central location of the CFB service in the DTES was identified as helpful to pet owners needing food or other services for their pets. Multiple clients noted that Kim Monteith plays an important role in easing issues with access to pet care services. As one client stated,

*It’s helpful, a relief, sometimes (my dog) is not feeling well and you can know that you can take him to the vet and take him to go see Kim if it’s an emergency...*

For one client, CFB volunteers provided invaluable pet care advice:

*I never really had cats in my life, and this is why I come here, Charlie’s is always good to help when you need it.*

With Kim Monteith and the CFB program volunteers providing valuable support directly within the DTES community, clients reported feeling secure in knowing that they will likely have an access point to pet care services.

**Financial Safety Net**

In addition to easing struggles associated with access to pet care, CFB was reported to provide relief to clients by ensuring they will not be crippled by financial burdens related to pet care. For example, multiple clients noted that they felt great comfort in knowing that if a medical emergency occurred, the BC SPCA would assist in covering immediate veterinary costs. As one client stated, “*A lot of*
people here can’t afford anything... and that is one thing off their mind.” This sense of relief from their pet-related financial risk was a commonly reported impact of CFB.

Consistency

The consistency of having the services available every Thursday morning with regular and dependable volunteers was described as beneficial to many clients. Both the volunteers and clients indicated that having CFB as a weekly service in the DTES for over a decade contributed to consistency in client’s lives: it’s been Thursday mornings for 14 years, don’t change it...because that is their routine, and that’s the first step in getting better in a lot of things...” Furthermore, by having consistent staff each week, CFB makes it easier to access service: “I see (that one volunteer) here every time, and the other familiar faces. It’s the same volunteers all the time so it’s so much easier to approach them”. This reliability in the service fosters feelings of comfort in seeking assistance.

Emotional Security

All clients indicated that having CFB available in the DTES provided them with feelings of emotional security. They found great comfort in knowing that due to CFB, they were able to keep their pets. This emotional security was profoundly felt due to the impact pets have on their owners’ lives. In the interviews pets were described as mechanisms for companionship, a sense of purpose and responsibility. Animals were also described as helping individuals surrounding their symptoms of mental illness. As one client noted about his dog, “I consider him therapy for me...because I suffer from PTSD”. To emphasize the benefit CFB provides, one client
imagined what would happen to the mental health of DTES pet owners if they were not able to keep their pets: “A lot of these people could be dead if they couldn’t have this pet. A lot of them would be in prison or be in a mental institution or something like that.” According to both clients and volunteers, CFB plays a major role in keeping pets in peoples’ lives and, thereby, contributes to their client’s well being.

Connections to Others

Due to the time spent standing in line for pet supplies, and the wait time to see a veterinarian, clients described CFB as an important opportunity to connect with other individuals. As one client stated, “everybody has to stand, and talk, and at least once a week you can talk to people and people can have conversations.” This was seen as a gateway for improving communication in the community: “well it just opens doors, for the longest time, because I’m so tall, and have short hair, and wear glasses, people thought I was a cop.” Once these types of social barriers were broken, clients found they could build positive relationships with other pet owners. One volunteer reported that CFB is one of their few opportunities to socialize with familiar people during the week: “I don’t have a social life and nobody asks me to go anywhere, so it just gets me out doing something”. To different degrees, this opportunity to connect with others was found to have a significant impact on clients’ lives.

A Sense of Community

CFB was repeatedly described as a key resource in the DTES that helps to establish a sense of community among pet owners. As one client stated, “Its a huge
community down here... Like after today I'm going to see these people some place else and we all have something in common.” The community of pet owners was found to promote feelings of personal security and belonging: “…and everyone knows my elevator at home is broken today and that I needed to get my cat to the vet...I will need help packing her up the stairs when I get home.” CFB in the community was described, as a mechanism for connecting people to something larger, and for promoting a sense of interdependence.

Lifestyle Changes

Many clients and volunteers reported that their lives had progressed since they began using CFB. One client explained how CFB facilitated their ability to go back to school:

When I told them I was going to school in January for six weeks they gave me a huge bag (of pet food) instead of a little bag and they said, ‘in a couple of weeks you know if you need just send a friend with a note.

For one participant who started as a client and is now a long-time volunteer, the organization facilitated a significant life transformation. This individual reported that volunteering at CFB helped to build the confidence and self-esteem they needed to break a cycle of poor health choices and addiction. It has allowed for improved health and well-being. Volunteering at CFB has further allowed this individual to gain work experience, leading to new employment opportunities:

You go so far down into that abyss and you don’t think anyone is going to accept you ever again, because you’re always being put down and
you’re always standing in a lineup ... I didn’t think anyone would ever accept me again and then Kim actually handed that clipboard over to me and accepted me for who I was at that time. I started volunteering here for three years before I finally had enough self worth to apply for another job... but Kim accepted me for who I was and I think that’s what broke the barrier... I think it might’ve helped me in staying clean.

**Giving Back**

The generosity of the CFB service was found to inspire a number of clients to give back to the organization and to other pet owners in their community. All the clients said they were inspired to spread the word to others about CFB, and to advocate for the program: “I like to make myself an advocate on the street, I just volunteer myself by speaking out.” Additionally, three clients said that they find ways to donate to CFB when they can.

For two participants, giving back meant volunteering at CFB: “I was standing in the line-up, and I thought, ‘why am I in line when I could volunteer’”. This act of volunteering was described, not only as giving individuals a sense of self-efficacy and confidence, but also having notable effect on the service received by other CFB clients. A volunteer who was a former client identified the positive impact that peer volunteers can have on new service users:

*They didn’t want to come to Charlie’s because they thought they’d be judged, but when they saw that I was there and doing the intake. It made a big difference.*
Thus, CFB impacted the lives of those who decided to volunteer, and these individuals in turn had a positive impact on others.

**Areas for Improvement**

While feedback was mainly positive, multiple ways that CFB could increase its positive impact were identified. The most prominent areas of improvement expressed by participants were ways that CFB could better deliver services, such as creating a *stress free environment* with *appropriate service delivery* that consistently meets the needs of their clientele. Less prominent themes included areas where impact could be enhanced through *additional resources* and services, such as pet *day care*, as well as a few suggestions regarding the program's *reach*.

**Stress Free Environment**

A concern identified by both clients and volunteers was the cramped space of the CFB site. It was observed that the crowded nature of the space makes the food bank feel noisy and disorganized. It makes some interactions unnecessarily stressful. One client feared that their cat would run out the door during a veterinary appointment, as there is no separation between the veterinary care tables and the food and supplies donation tables. Problems with the physical space were not only stressful for clients; they were also reported to make service delivery more difficult for volunteers.

**Appropriate Service**
Multiple participants noted that certain CFB volunteers did not greet clients with warmth and empathy: “There is the odd person who is a little authoritarian, I'll leave it at that.” It was pointed out by a client who is now a volunteer that this can be an impediment to access for some homeless individuals in the community: “you can say one word or even in a voice that is loud and that is a barrier for some people”. Both volunteers and clients emphasized the importance of CFB clients being consistently met by service providers without judgment or aggression.

It was also reported that interactions between volunteers and clients sometimes become stressful when volunteers are unaware of the circumstances of their client’s lives, their pets, and the types of struggles they face in the DTES. One client stated, “you can talk about the downtown Eastside but you don’t understand us.” Because some pets require follow-up visits, it was recommended that all volunteers be better aware of client’s circumstances and the general difficulties faced by those living in the community.

Suggestions were made by 2 volunteers for regular meetings to help volunteers to understand the circumstances faced by many DTES pet owners. To increase the knowledge surrounding individual clients, weekly debriefs were suggested:

I think there needs to be a debriefing after every one, there are heartbreaks or people lost an animal but the rest of the team doesn’t know, and we say something maybe the next week and maybe it’s not appropriate, so I think a brief needs to be done.
It was found that regular meetings and weekly debriefing sessions between volunteers could help to avoid painful and stressful situations.

**Additional Resources**

Even with CFB assistance, many clients stressed that the ability to afford services, such as pet food and veterinary visits was a major challenge in their lives. Two clients identified paying for x-rays and surgeries for their pets as a major source of stress. When it comes to affording food, it was stated that it is relatively easy to find a free meal for a human in the DTES, however it is not so easy to find a proper meal for a pet.

When asked what additional resources would be helpful, there were only a small number of suggestions. One client and one volunteer indicated that some cat owners struggle to transport their cats when they need to take them from their homes, and suggested advertising for increased cat kennel donations. Other needed services included a wider range of medication, grooming services, and regular dog-training sessions.

**Day Care**

All three clients who were dog owners revealed that pet ownership impeded access to services (including charity meal services, retailers, transit services and medical services). As one client said about a daily meal service, “I stopped going places like that because (my dog) can't go with me”. As another dog owner stated, “Where am I gonna leave him... I mean, I'm refusing heart surgery because I can't go in with him”. It was suggested that a regular pet day care service for those who work
or have appointments would greatly increase the impact of CFB. By giving individuals a safe and trusted place to leave their pet, a day care service could potentially work to better serve the needs of CFB clients.

**Reach**

Most clients interviewed stated that CFB could potentially do more to reach Vancouver pet owners in need of their support. Two clients felt that CFB should be offered more than one time each week. Clients who cannot make Thursday mornings found it was sometimes hard to get the services they need for their pet.

Additionally, two volunteers and one client reported that bringing services into socially supported housing units was a way that CFB could increase impact. By taking services directly to the people in their homes, those who are unable to attend CFB weekly could receive services. As one volunteer stated, “whatever illness they may be suffering from or disability maybe, we are missing the boat a little bit there.” Increased outreach would allow some of the low-income and homeless pet owners with physical or social barriers to access the pet related services they need.

**Discussion**

There has been no previous evaluation of how a program that provides pet support services to low-income and homeless individuals may impact clients’ lives. This impact evaluation sheds light on the wide range of perceived benefits of the CFB program, as well as elements of this service that may be improved or expanded to better meet the needs of struggling pet owners.
CFB was found to improve access to pet care for individuals dealing with homelessness and/or poverty. Consistent with the literature, this study indicated that having a centrally located service has a positive impact on the lives of clients (Zuvekas, Nolan, Tumaylle & Griffin, 1999). Among the wide variety of health services aimed at vulnerable individuals, such as HIV/AIDS support programs, and drug user safe infection sites, the research suggests that community-based programs play a vital role in delivering services to homeless and low-income populations (Arno, 1986; Small, Rhodes, Wood & Kerr, 2007). For individuals who struggle with homelessness and poverty, having community-based programming available in the neighborhood where they live can greatly increase the likelihood of individuals’ ability to access the support services they need and thus decrease the amount of stress in their lives (Arno, 1986; Small et al., 2007). Located in the heart of the community, CFB was well located to serve the target population.

Having a safe person, such as a champion or ‘outreach worker’ to help guide vulnerable individuals through the service system can enable individuals to get the information and access to pet support that they need (Zuvekas et al., 1999). Like many community outreach workers, Kim Monteith was found to play an important part in facilitating clients’ and former clients’ access to services. As individuals who are known in the community to be safe to approach, champions like Kim Monteith may decrease service users’ stress and anxiety around access to support (Zuvekas et al., 1999). As has been found for health services to humans, health services for pets are often facilitated by a champion to guide clients through the system.
Another way that CFB was found to enable access to support for disadvantaged pet owners was through provision of a financial safety net. The added financial costs associated with owning a pet can be extremely difficult to bear for many individuals, especially for those dealing with poverty (Kidd & Kidd 1994). Financial safety nets like CFB have been found to promote economic growth in the long term, and act as a buffer from financial instability (Conning & Kevane 2002). Clients interviewed in this study felt a profound sense of relief at the alleviation of financial stress. Financial struggles are associated with higher rates of stress, anxiety and mental health issues (Gidugu, Rogers, Harrington, Maru, Johnson, Cohee, & Hinkel, 2014). Through easy access to complimentary pet care services, CFB is promoting the mental well-being of the population they serve.

On top of simplifying access to pet care for individuals, CFB clients indicated that the predictability and consistency of CFB, every week for the past fifteen years, was highly beneficial to their lives. Many homeless and low-income individuals deal with major instability in their lives as they cope with issues such as housing and financial insecurity (Hwang & Bugeja, 2000). For those who may be suffering from mental health and/or substance use issues, routine can play an important role in their mental well-being and recovery (Adams & Grieder, 2004). The opportunity to form a regular plan, such as scheduling a weekly visit to CFB, can be an important part of improving health and well-being (Adams & Grieder, 2004).

Besides providing access to support and facilitating emotional well-being, CFB was described as providing a deep sense of emotional security for DTES pet owners. It enabled individuals to feel like they could safely keep their beloved pets,
knowing they have access to assistance to meet their animal’s dietary and medical needs. Consistent with the literature, all participants identified emotional and mental health benefits from owning a pet, including companionship, affection, a sense of purpose, responsibility, and a perceived reduction in symptoms of mental illness (Kidd & Kidd, 1994; Labrecque & Walsh, 201; Thompson, et al., 2006; Rew, 2000). The latter impact is particularly important due to higher than average rates of mental illness and mental health problems among low socio-economic status and homeless populations (GVRSC, 2014, Goodman, et al., 1991; Scheid, Brown & Tony, 2011).

Additionally, this study suggested that CFB facilitates individuals’ ability to form relationships. Factors such as social stigma, limited trust, and mental health challenges make social interactions a major challenge for some pet owning homeless individuals (Irvine et al., 2012). This is significant because there are many important health benefits to connectedness, including social support, feelings of safety, and well-being (Berkman, 1995). Many of the clients interviewed found that interacting with others at CFB contributed to increased feelings of trust, well being, and reduced feelings of social isolation.

Along with the connections formed between clients, DTES pet owners described an improved sense of community. In their pivotal study on the importance of building a sense of community in First Nations villages in Canada, Chandler and Lalonde (2003) found that community building helps to create a sense of identity, belonging and security (Chandler & Lalonde, 2003). In this study, consistent with the literature, community was found to be important for many
individuals in establishing wellness and positive mental health (Chandler & Lalonde, 2003). CFB has contributed to a community of pet owners through the development of a greater sense of belonging and increased interdependency among neighbors.

In addition to the aforementioned benefits, it was perceived that the strengths-based approach that CFB takes within their organization has enabled some individuals to make positive life changes. A strengths-based approach is one that views clients as people with talents and strengths rather than as cases or diagnostic labels and it has been shown valuable in service provision, especially for those suffering from mental health and substance use issues (Adams & Grieder, 2004). CFB’s use of this approach was evident in its policy of engaging clients in volunteer roles.

Along with life changes, both the services themselves and the approach of the CFB program appear to have promoted altruism in the community. Most of the participants in this study reported that the services received at CFB inspired them to give back or help others in some way. The literature finds altruism is common when individuals receive services that are truly meaningful to their lives and they feel empathy for individuals in similar life situations (Batson, Duncan, Ackerman, Buckley & Birch, 1981). Whether advocating for the program in the DTES or becoming a peer volunteer, all the clients found they were in some way motivated to give back to CFB and the community.

As a final benefit, many clients and volunteers emphasized the effect of incorporating peer-volunteers who want to give back to DTES low-income and homeless pet owners. Peer support has practical, emotional and social benefits.
Peers can find inspiration in the supportive individuals they relate to, and this may lead them to make positive life changes (Gidugu et al., 2014). The value of peer support in the creation of community and support of others has been known since the early 1990’s, thanks to Alcoholics Anonymous and similar programs; however it continues to be rare in homeless health care service delivery (Gidugu et al. 2014). Similar to findings in the literature, this study showed that peer-volunteers assist individuals in seeking services, and increase CFB’s ability to help clients in need.

**Recommendations**

While clients and volunteers saw profound benefits of CFB, it was also suggested that the low-income and homeless population in the DTES could be better supported. Clients found that there was a small number of volunteers who were meeting clients with a severe and authoritative tone of voice. This was perceived as stemming from a lack of empathy for the circumstances faced by homeless and low-income individuals in the DTES. One possible improvement CFB could consider would be to increase aspects of trauma informed service delivery. The elevated amount of trauma and post traumatic stress disorder in the homeless population is well documented within academic writing; however trauma-informed care has not been adequately incorporated into services within this sector (Mills 2015, Goodman et al., 1991). Trauma informed care promotes non-judgmental attitudes, limiting punitive behaviors, and realistic expectations (Hopper et al., 2010). Due to the vulnerability of the clientele at CFB, the importance of volunteers understanding the struggles faced by many homeless and low-income individuals was emphasized.
Beyond trauma informed care, knowledge surrounding the social reasons for the situations individuals face in the DTES context was emphasized as important. The literature suggests that by providing service that is ecologically informed, an organization can promote understanding and empathy for others (Fisher, 2008). In the DTES struggles faced by individuals include high rates of mental health and substance use problems, as well as other socio-economic instabilities, which are factors that increase the vulnerability of a highly concentrated population living in poverty (Hopper et al., 2010). Two volunteers identified the need for CFB to provide training meetings to educate or remind volunteers of these factors. Ecologically based training could be an effective mechanism for helping clients to feel safe in accessing CFB services.

As a further complement to ecologically based and trauma-informed services, the study participants also mentioned the importance of volunteers’ familiarity with the circumstances of individual pet owners. Provision of care that incorporates individual needs is generally better care (Adams & Grieder, 2004). Volunteers can better assist clients by learning about their pets. This person-centered service approach can help to avoid situations where people have to re-explain painful issues each week. Meetings and debriefs after CFB operation hours were suggested in order to remind volunteers about the context, share experiences, and avoid unnecessarily stressful interactions with clients.

To increase the positive impacts of the service, suggestions were made about how CFB could better serve the wider low-income and homeless pet owner population. This study accentuated that low-income and homeless individuals in
Vancouver continue to face financial barriers that make caring for a pet challenging. While inequities will likely never be erased, targeted campaigns to provide needed resources, such as cat kennels, could help to better serve the target population.

Additionally, three participants in the study suggested a pet day care service could be beneficial. As stated previously, some low-income and homeless pet owners struggle with accessing services because they have no safe place to leave their pets (Taylor et al., 2004). Consistent with other studies, pet owners at CFB were found to be sacrificing vital services such as health care in order to be with their animals (Taylor et al., 2004). By providing a regular pet day care service, access to other services could be facilitated, and the health of some DTES pet owners could be improved.

Finally, participants felt that it would be beneficial for the program to have a wider reach within the community to bring services to low-income pet owners in their homes. Individuals with physical and mental health barriers can struggle greatly in accessing services (Hwang & Bugeja, 2000). Recognizing this issue, The Pongo Fund in Oregon developed a ‘Meals on Wheels’ pet food delivery service for seniors and disadvantaged individuals (ThePongoFund.org, 2015). This is a model that CFB could consider adding to provide extra support to low-income pet owners in the city of Vancouver.

**Research Limitations**

Due to the nature of the study and the small number of interviews conducted, there is a lack of generalizability of the results of this study.
There is also the possibility of bias in this study. There may have been a response bias, as clients may have provided exceedingly positive feedback, due to the fact that the interviewer was an internal volunteer with the organization. Because clients continue to use the service, they may not have wanted to reflect negatively on the food bank services out of fear of future repercussions, such as poorer quality service provision. Additionally, confirmation bias by the principal investigator may have affected the results of this study. Preconceptions of how the individuals might answer questions in the interviews may have caused the principal investigator to favor themes that matched preconceived notions. The use of an external evaluator with interviews conducted at a more neutral location could potentially improve the validity of responses given by participants and decrease the chance of confirmation bias.

While an attempt was made for the research process to be collaborative, the study was not as collaborative as the principal investigator hoped. Overall, CFB stakeholder’s participation in the study design and implementation was limited to revision of materials and assistance with recruitment. The level of collaboration could have been improved through more structure and planning in the initial stages of the study. In developing a collaborative plan, the roles and responsibilities of each of the stakeholders could have been established and times could have been scheduled for formal conversations to review the study details and findings.

One further limitation that was felt by multiple interview participants was that they wished they had been able to prepare for the interviews in advance. Providing the participants with the research questions prior to the interviews may
have led to more in depth discussion and insights into benefits of the program and areas for improvement. For example, there were no responses about ways that having CFB in the DTES could produce negative impacts. While it may be that there were no perceived negative consequences to the community, it is also possible that participants needed further time for reflection.

**Future Research Directions**

While this evaluation has illuminated many perceived areas for improvement in the CFB program, a study that involves interviews with a wider range of homeless and low-income pet owners in Vancouver may reveal more understandings of the program’s impacts and areas for improvement. Interviewing new-users of CFB could reveal more information about the initial impacts of the service on the lives of individuals. Additionally, interviews with low-income and homeless pet owners who do not use CFB services could inform areas of program improvement or extension in order to benefit more pet owners in need of assistance.

Many additional struggles of homeless and low-income pet owners could not be explored here. In the literature homeless pet owners have been found to face a great deal of stigma due to beliefs that individuals living in poverty should not have pets (Irvine et al., 2012). In the interviews for this study there was no direct mention of stigma, or discussion around whether the CFB service decreases the amount of stigma faced by low-income pet owners in Vancouver. More research into the stigma faced in Vancouver, particularly around accessing services, could better
inform CFB actions and potentially improve the lives of the DTES pet owner population.

Another area of difficulty faced by many low-income and homeless pet owners that could not be explored in this paper was access to housing (Rhoades et al., 2014; Singer et al., 1995). The literature shows that a great number of social housing providers, including shelters, and rental providers, do not allow tenants to own pets, forcing individuals to sacrifice a warm safe shelter in order to stay with their animal (Singer et al., 1995). While two participants in this study who were dog owners expressed struggles with securing housing, there was no discussion around ways that CFB could potentially intervene to improve the situation. Further research into the housing related struggles faced by pet owners in Vancouver could be beneficial for informing strategic actions, and could lead to better support of low-income and homeless pet owners in the city.

**Implications for Public Health Research, Policy, and Practice**

Learning about the perceived value of CFB, and how it is considered to be a core part of the DTES community, could be useful information for health system planners. As a community based program with regular clients, there may be ways of integrating CFB services with other programs attempting to meet the needs of low-income and homeless individuals in the DTES. For example, pet care advice could be given by CFB staff members as part of integrated health promotion efforts that currently take place in the community. Agencies could also help their clients by
informing them about CFB services. Based on the significant role the organization plays in many DTES pet owners’ lives, health service providers could also work with CFB to better reach their target populations. For instance, if individuals are struggling to access specific health care information, educational materials could be provided at the CFB site.

Additionally, this project points to the importance of having effective service delivery strategies that address the barriers that low-income and homeless individuals face, whether they have a pet or not. Implementing service approaches that are ecologically informed, trauma informed, and person-centered may prove to have a high degree of impact on the lives of vulnerable service users. Finally, the findings indicate the positive effects of peer-delivered programming for low-income and homeless populations. With the integration of service approaches that are sensitive to the barriers that low-income and homeless individuals face, there may be the opportunity to positively impact a greater number of individuals’ lives.

**Conclusion**

By drawing on qualitative interviews with CFB clients and volunteers, this project was able to bring to light the impacts of the pet food program. CFB was found to offer a number of benefits to their clients; the service directly improves access to consistent pet care services and provides opportunities to form relationships and a sense of community. It also provides multiple mental health benefits including relief from financial stress, and emotional support. Consequently,
the service has worked to help people move forward in life and it has motivated individuals to give back to their community.

At the same time, the study revealed elements of service provision that could be improved or expanded upon in order to best meet the needs of the DTES population. With a greater focus on trauma informed service and person-centered service the organization may be able to maximize their impact on their clients’ lives. They could also consider extending their resources and reach. These findings can be used to motivate further research aimed at improving the lives of low-income and homeless pet owners, and inform effective approaches to delivering quality services to this population.

**Critical Reflection**

Looking back on the experience of conducting this capstone project there were multiple lessons learned. While I am glad to have chosen a research topic that I am passionate about, multiple challenges were presented by how close I felt to the subject matter. As a long time volunteer with CFB, I constantly needed to consider how my own opinions and feelings influenced my research practices and results. I found it challenging at times to be objective in my research, and to be concise in my writing.

One lesson I took away from this project was about the importance of having a clearly defined population. I had difficulty defining the population of CFB clients and relating this group to the literature. Individuals who are homeless and own pets face different challenges than those with stable shelter. As a result, it was
challenging to write about these two groups of individuals as one study population.

Establishing more clarity around the population parameters early on in the project would have helped me to streamline the research and writing processes.

Finally, I learned that a clearly defined scope for an evaluation project is important. I initially tried to cover too many research questions, and consequently, I struggled to define themes during my analysis. Through deeper reflection about the purpose of the study before starting the interviews there may have been an opportunity to gain more understanding of the benefits of CFB and the areas for improvement. This also would have saved time and energy in the analysis and writing stages of the research. Overall I feel that this project allowed me to develop skills in research evaluation, and it helped me to gain in-depth understanding of multiple issues that are important to public health research and practice.
Citations


Tisol. Tisol Pet Food Bank. Retrieved October 1, 2015 from:

[http://www.tisol.ca/pfb/](http://www.tisol.ca/pfb/)

Appendices

Appendix A: Interview Guide for Clients

Principal Investigator: Lindsay Vine, BA,
Master of Public Health Student, Simon Fraser University

Community Collaborators: Kim Monteith,
Manager of Animal Welfare, BCSPCA

Sara Dubois, PhD, RPBio,
Chief Scientific Officer,
Manager, Scientific Programs, BC SPCA

Supervisor: Denise Zabkiewicz, PHD,
Faculty of Health Sciences,
Simon Fraser University

Impacts of Pet Support in the Downtown Eastside: An Evaluation of Charlie’s Food Bank

Introduction

Hello, my name is Lindsay Vine and I am conducting an evaluation for Charlie’s Food Bank. I would like to read with you a consent form and if you are still interested in participating in the study afterwards I would like to ask you a few questions about your experience with the Charlie’s Food Bank. I will also be asking about what struggles in service access you face as a pet owner in the Downtown Eastside and how your use of Charlie’s impacts your day-to-day life.

Questions

• To begin, can you tell me a bit about yourself and your pet? (age, where you live, how long have you lived there)

• How long have you had your pet, have you always had a pet? How old is your pet?

• What has been your experience as a pet owner living in the downtown Eastside?
• Can you tell me about why your pet is important to you?

• How did you first hear about Charlie’s Food Bank?

• Can you describe how you got involved with Charlie’s and what your involvement with Charlie’s Food Bank has been like?
  • What types of services have you used?

• What impact has Charlie’s Food Bank had on your life?
  • Do you think having Charlie’s has any impacts on your health?

• What are some things that you think the program is doing well?

• What would you say the program’s weaknesses are?

• What are some ways that you think Charlie’s could be improved?

• In your mind how has Charlie’s Contributed to the community in the Downtown East side?

• Do you see any disadvantages to the services that Charlie’s provides? Please explain.

• From your experiences as a community member, what do you see as the service needs of pet owners in the community? Here I’m thinking more broadly about how pet owners live in the community rather than just the services that Charlie’s provides.

• As a pet owner, do you find that you face challenges in accessing services (such as health and housing services) for yourself? Please explain.

• What thoughts do you have on how the community could work to better meet the needs of pet owners?

• Is there anything you would like to tell me about that maybe I didn’t cover in my questions?

**Conclusion**

Thank you very much for your time and participation in this project.
Appendix B: Interview Guide for Volunteers

Principal Investigator: Lindsay Vine, BA,
Master of Public Health Student, Simon Fraser University

Community Collaborators:
Kim Monteith,
Manager of Animal Welfare, BCSPCA

Sara Dubois, PhD, RPBio,
Chief Scientific Officer,
Manager, Scientific Programs, BC SPCA

Supervisor:
Denise Zabkiewicz, PHD,
Faculty of Health Sciences,
Simon Fraser University

Impacts of Pet Support in the Downtown Eastside: An Evaluation of Charlie’s Food Bank

Introduction

Hello, my name is Lindsay Vine and I am conducting an evaluation for Charlie’s Food Bank. I would now like to read along with you a consent form and if you are still interested in participating in the study afterwards I would like to ask you a few questions about your experience with the Charlie’s Food Bank and the impacts that you find the program has on your life and the lives of the clients.

Questions

1. How did you first hear about Charlie’s Food Bank?

2. When did you start working with Charlie’s and how did you get involved?

3. Do you live in the Downtown Eastside?

4. Can you tell me a bit about your involvement as a (Volunteer/Staff member) with Charlie’s Food Bank? (How often do you volunteer? What is your role?)
5. What impact does working with Charlie's Food Bank have on your life?  
(What impact does it have on your health?)

6) What do you think are the greatest strengths of the program, in terms of providing effective service to Charlie's clients?

7) What are some ways that you think Charlie's could be improved in order to better serve its clients?

8) What do you think are the greatest benefits that come from having Charlie's Food Bank offered in the Downtown Eastside community? Please explain.

9) Do you see any concerns with having the services that Charlie's provides in the community? Please explain.

10) Lastly, reflecting on the community more, what changes do you think could be made in the Downtown Eastside to make accessing services easier for pet owners?

**Conclusion**

Thank you very much for your time and participation in this project.