

The background of the entire page is a vibrant rainbow with wavy, painterly stripes in shades of yellow, orange, red, green, blue, and purple. The word "Pride" is written in a large, orange, cursive font with a white dotted pattern and a dark red drop shadow. Below it is a smaller orange ampersand "&".

*Pride*  
&

# **POVERTY**

**2SLGBTQA+ PEOPLES' STORIES  
OF ACCESSING SOCIAL ASSISTANCE IN TORONTO**

# **THE PRIDE & POVERTY STUDY:**

**TWO-SPIRIT, LESBIAN, GAY, BISEXUAL, TRANS, QUEER AND ASEXUAL  
(2SLGBTQA+) PEOPLES' EXPERIENCES WITH SOCIAL ASSISTANCE IN THE  
GREATER TORONTO AREA**

## **COMMUNITY REPORT**



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<https://lgbtqhealth.ca/projects/experienceswithsocialassistance.php>.

### **A note about language**

We use '2SLGBTQA+' as an acronym for sexual and gender minorities. It encompasses Two-Spirit, lesbian, gay, bisexual, transgender, queer, asexual, and other minorities. While we had hoped to include intersex people in this study, none of our participants identified as intersex, and so we are unable to speak to their experiences. We place "2S" at the beginning in appreciation of the fact that Two-Spirit people were on this land prior to the arrival of settler people. We also do this to mark our commitment to reconciliation in our research. We acknowledge that 'Two-Spirit' is an English-language term and can refer to gender identity, sexual orientation, or other identities.



## EXECUTIVE SUMMARY

Two-spirit, lesbian, gay, bisexual, trans, queer and asexual (2SLGBTQA+) people in Canada and elsewhere experience health and economic inequities relative to their cisgender, heterosexual peers. Although poverty is widely understood to be a critically important determinant of health, few studies have investigated the relationships between poverty and health in 2SLGBTQA+ populations. One salient topic related to poverty that has been particularly overlooked, despite its relevance to 2SLGBTQA+ people, is social assistance. Consequently, this project aimed to address these research gaps, focusing on the Greater Toronto Area (hereafter Toronto). The Pride & Poverty Study was a community-based, mixed methods study consisting of an online survey, focus groups, and interviews with 2SLGBTQA+-identified individuals who have experienced poverty and/or receipt of social assistance.

Overall, our participants shared with us that the income support provided through social assistance was necessary, particularly given the many barriers faced to maintaining stable, well-paid employment. However, engaging with social assistance systems was difficult and often dehumanizing. Participants described how the social assistance system keeps people in poverty, rather than serving as a support system to lift people out of it. The financial support provided was generally inadequate to meet basic needs, and the system was difficult to navigate. Our

participants described many hurdles with little or no support available to help them. The barriers included systemic factors (e.g., an inaccessible process), interpersonal factors (e.g., experiences of discrimination from caseworkers), and individual or internal factors (e.g., emotional distress and experiences of shame). Our data suggest that collectively, these barriers can all be connected back to discrimination associated with sexual orientation and/or gender identity, poverty, and other intersecting identities and experiences (including race, gender, and disability, among others).

**Based on our data, we recommend a variety of system-level and service delivery changes to improve the experience of accessing social assistance for 2SLGBTQA+ people.**

- ▼ **Broad-strokes transformation of the social assistance system** is needed to move away from a penalizing and individualist system to one that acknowledges and addresses the roles of heterosexism, cissexism, colonization, racism, ableism, and other intersecting forms of oppression in producing and sustaining poverty.
- ▼ **Social assistance rates must be increased to levels that allow for a living wage** among those who rely on Ontario Works, the Ontario Disability Support

Program, or other forms of social assistance as their primary sources of income.

- ▼ Above and beyond these essential increases in rates, we need **increased investments in social assistance systems** to address the problems created by high staff turnover and overburdened case workers.
- ▼ **Coalition-building between anti-poverty organizing and 2SLGBTQA+ organizing** can help to achieve the goal of social assistance system transformation. 2SLGBTQA+ people experiencing poverty have rarely been foregrounded in 2SLGBTQA+ activism, and 2SLGBTQA+ issues have rarely been explicitly visible in anti-poverty activism. For anti-poverty and 2SLGBTQA+ advocates and researchers, bringing our organizing together is necessary to strengthen our collective voice.

**At the social assistance programming and delivery level, we recommend:**

- ▼ **Expanding the health benefits available to social assistance recipients** as an important component of the work to reimagine the social assistance system as one that serves to bring people out of poverty, rather than to entrap them in it.
- ▼ Participants also suggested **examining the feasibility of giving clients the option of being paired with workers who share aspects of their identities** so that workers can genuinely understand client needs. At a system-wide level, this requires prioritizing representation of 2SLGBTQA+ people (alongside other intersecting identities) within the social assistance workforce.
- ▼ **Providing 2SLGBTQA+-related education for all those working in the social assistance system** will better equip them to work effectively with 2SLGBTQA+ people. This can be provided as continuing education to staff and should address such issues as appropriate use of pronouns and other gendered language, how to ask clients respectfully and appropriately about sexual orientation and gender identity, and the relationships between homophobia, biphobia, transphobia, and poverty for 2SLGBTQA+ people.
- ▼ At all levels of social assistance delivery, consider **providing opportunities for 2SLGBTQA+ people to disclose their sexual orientation and gender identity**. We fully support individual autonomy for 2SLGBTQA+ people to make decisions about whether, when, and how they choose to disclose – particularly given that at present, our data suggest that such disclosure will not always be safe for 2SLGBTQA+ people. However, providing opportunities for disclosure facilitates opportunities for these important aspects of identity to be taken up in service delivery.
- ▼ We also recommend **considering the implications of/placement of security officers at social assistance offices**. Many 2SLGBTQA+ people (particularly those who are also Black and/or Indigenous) have experienced violence at the hands of police, so a visible security

presence can be a significant barrier to access.

- ▼ Finally, **providers can be advocates for 2SLGBTQA+ people.** Where there are shortcomings in the system that negatively impact 2SLGBTQA+ people, workers can advocate on behalf of our communities, so the burden of advocacy does not always fall on clients themselves.

Social assistance systems are important and necessary for 2SLGBTQA+ people, given the employment- and disability-related

impacts of the intersecting forms of discrimination our communities face. However, at present, the structure of the system serves to reproduce this discrimination and the poverty that results from it. Transforming social assistance systems will be a necessary component of addressing the economic and health inequities faced by 2SLGBTQA+ people in Ontario. We urge policy makers, service providers in the social assistance system, and anti-poverty and 2SLGBTQA+ advocates to draw on the expertise of 2SLGBTQA+ people with experiences of poverty in doing this important work.

# INTRODUCTION

## BACKGROUND

Two-spirit, lesbian, gay, bisexual, trans, queer and asexual (2SLGBTQA+) people (including those in Canada) experience health, social, and economic inequities relative to their heterosexual and cisgender (non-trans) peers (1-3). Increasingly, researchers are highlighting that poverty and other socioeconomic factors are causes of poor health among people who experience discrimination – a point communities have long argued (4-9).

Experiences with social assistance have been identified as a possible link between poverty and health among people that experience discrimination (10,12). In an Ontario study, social assistance recipients were more likely than people who were not social assistance recipients to report high stress, as well as a wide range of poor health outcomes (10). The authors of that study suggest that poor health among social assistance recipients is due to the stress they experience in social assistance systems, which are under-resourced and often stigmatize recipients (10). Social assistance recipients marginalized because of their sexual orientation, gender, race, disability, or other differences may be more likely to experience stigma and discrimination and, by extension, stress and poor health outcomes after engaging with social assistance systems (12).

## AIMS

Although poverty is a critically important determinant of health, few studies investigate the relationships between poverty and health among 2SLGBTQA+ people, or possible factors that sustain these inequities (1-3, 6, 13 ). Similarly, we were unable to find published research on the experiences of 2SLGBTQA+ people accessing or trying to access social assistance services. This knowledge gap results in the failure to consider issues regarding 2SLGBTQA+ people in poverty and/or the conditions surrounding access to social assistance in policy development and practice. Consequently, this project aimed to address these research gaps, focusing on Toronto.

We hope this project will help us understand what is needed to support the health and well-being of 2SLGBTQA+ community members who are experiencing poverty, specifically with respect to their experiences accessing social assistance. Ultimately, we hope this research will help address the economic and associated health inequities faced by 2SLGBTQA+ people in Canada.

## METHODS

The Pride & Poverty Study was done in partnership with three community-based organizations: Queer Ontario, the Ontario Coalition Against Poverty, and the Senior Pride Network. Participants in our study self-identified as 2SLGBTQA+, lived in Toronto, were experiencing or had experienced poverty and/or social assistance, and were 18 years old or older. Participants were recruited through electronic and hard copy

flyers distributed by the research team and on social media.

A total of 20 people participated in our online survey (information about these participants is provided in Table 1). Of the 20 participants, 13 were receiving social assistance (including Ontario Works (OW), Ontario Disability Support Program (ODSP), and Canadian Pension Plan (CPP) – Disability, three were not currently receiving

TABLE 1 – PARTICIPANTS IN THE QUANTITATIVE SURVEY

QUANTITATIVE STUDY PARTICIPANTS	SAMPLE (n=20)
<b>Gender (check all that apply)</b>	
– Woman	7 (35.0%)
◦ Cis woman	4 (20.0%)
◦ Trans woman	2 (10.0%)
– Man	8 (40.0%)
◦ Cis man	4 (20.0%)
◦ Trans man	3 (15.0%)
– Nonbinary	5 (25.0%)
– Two Spirit	4 (20.0%)
– Genderfluid	3 (15.0%)
– Agender	1 (5.0%)
– Genderqueer	1 (5.0%)
<b>Sexual Identity (check all that apply)</b>	
– Two Spirit	1 (5.0%)
– Gay	5 (25.0%)
– Lesbian	2 (10.0%)
– Bisexual	9 (45.0%)
– Pansexual	7 (35.0%)
– Asexual	1 (5.0%)
– Demisexual	3 (15.0%)
– Queer	8 (40.0%)
– Questioning	1 (5.0%)



<b>Age (Range 22 – 61)</b> <ul style="list-style-type: none"> <li>– 50+</li> <li>– 35-49</li> <li>– 30-34</li> <li>– 25-29</li> <li>– 24 or less</li> <li>– Not reported</li> </ul>	3 (15.0%) 3 (15.0%) 5 (25.0%) 4 (20.0%) 4 (20.0%) 1 (5.0%)
<b>Racial/Ethnic/Cultural Identity (check all that apply)</b> <ul style="list-style-type: none"> <li>– Aboriginal/First Nations</li> <li>– Black</li> <li>– Latin American</li> <li>– Mixed</li> <li>– South &amp; West Asian</li> <li>– White</li> </ul>	3 (15.0%) 4 (20.0%) 1 (5.0%) 3 (15.0%) 2 (10.0%) 12 (60.0%)
<b>Highest Education Level</b> <ul style="list-style-type: none"> <li>– High school incomplete</li> <li>– High school complete/GED certificate</li> <li>– Community college completed</li> <li>– Bachelor's degree completed</li> <li>– Master's degree completed</li> </ul>	2 (10.0%) 6 (30.0%) 7 (35.0%) 4 (20.0%) 1 (5.0%)
<b>Difference/Disability/Diversity (check all that apply)</b> <ul style="list-style-type: none"> <li>– Mobility-related differences/disabilities</li> <li>– Mental health/learning disability/neurodiversity</li> <li>– Sensory/communication differences/disabilities</li> </ul>	7 (35.0%) 14 (70.0%) 8 (40.0%)

ing social assistance but had in the past, two had applied for social assistance and were waiting for a decision, one had applied for social assistance but was denied, and one had never applied for social assistance but was living in poverty.

Focus groups of approximately 90 minutes took place on Zoom videoconferencing technology due to the COVID-19 pandemic. Two focus groups were held with eight people in total. People who did not have access to the technology required to participate in a Zoom focus group had the option of completing a telephone interview.

We conducted three telephone interviews overall, for a total of 11 participants (more information about these participants is provided in Table 2). Of these 11 participants, eight were currently accessing social assistance (including OW, ODSP, CPP, CPP-Disability, Employment Insurance, and other forms of social assistance) and three were in the process of pursuing social assistance.

An honorarium of \$50 was provided to interview and focus group participants, while a \$15 honorarium was provided for completing the survey.

TABLE 2 – PARTICIPANTS IN THE QUALITATIVE SURVEY

QUALITATIVE FOCUS GROUP/INTERVIEW PARTICIPANTS	COMPLETE SAMPLE (n=11)
<b>Gender (check all that apply)</b> <ul style="list-style-type: none"> <li>– Man <ul style="list-style-type: none"> <li>◦ Cis man</li> </ul> </li> <li>– Woman <ul style="list-style-type: none"> <li>◦ Cis woman</li> <li>◦ Trans woman</li> <li>◦ Two Spirit Woman</li> </ul> </li> <li>– Nonbinary</li> <li>– Agender</li> </ul>	4 (36.4%) 4 (36.4%) 4 (36.4%) 2 (18.2%) 1 (9.1%) 1 (9.1%) 3 (27.3%) 1 (9.1%)
<b>Sexual Identity (check all that apply)</b> <ul style="list-style-type: none"> <li>– Lesbian</li> <li>– Gay</li> <li>– Bisexual</li> <li>– Two Spirit</li> <li>– Queer</li> </ul>	2 (18.2%) 3 (27.3%) 3 (27.3%) 1 (9.1%) 2 (18.2%)
<b>Racial/Ethnic/Cultural Identity (check all that apply)</b> <ul style="list-style-type: none"> <li>– Black</li> <li>– Indigenous</li> <li>– Mixed</li> <li>– West or South Asian</li> <li>– White</li> </ul>	2 (18.2%) 1 (9.1%) 2 (18.2%) 2 (18.2%) 6 (54.5%)
<b>Age</b> <ul style="list-style-type: none"> <li>– 65+</li> <li>– 50-64</li> <li>– 30-49</li> <li>– 18-29</li> </ul>	1 (9.1%) 4 (36.4%) 2 (18.2%) 4 (36.4%)
<b>Difference/Disability/Diversity (check all that apply)</b> <ul style="list-style-type: none"> <li>– Mobility-related differences/disabilities</li> <li>– Mental health/learning disability/neurodiversity</li> </ul>	1 (9.1%) 10 (90.9%)

## RESULTS

Participants indicated that although the income support provided by social assistance was necessary, engaging with social assistance systems was difficult, stressful and, for many, dehumanizing. The financial support provided was generally inadequate

to meet basic needs, and the system was difficult to navigate. Participants described many hurdles to jump through with little or no support to help them. The factors that survey participants reported made it difficult

**TABLE 3: FACTORS THAT PARTICIPANTS REPORTED WERE BARRIERS TO ACCESSING SOCIAL ASSISTANCE**

FACTORS THAT MADE IT DIFFICULT TO ACCESS SOCIAL ASSISTANCE	FREQUENCY
Too much emotional distress/depression/anxiety	65.0%
Worried about experiencing discrimination	45.0%
Lack of fixed address	40.0%
Didn't have info I needed to be able to access social assistance	35.0%
Process required to access social assistance not accessible for me	30.0%
Required documentation from people I couldn't safely access it from	25.0%
Worried about friends/family finding out	25.0%
Worried I'd be harassed for being on social assistance	25.0%
Concerned about anonymity/confidentiality	20.0%
Didn't have necessary identity documents	15.0%
Had too much savings/financial assets to qualify	15.0%
Incarcerated	15.0%
Social assistance doesn't recognize my relationship/family dynamics	15.0%
Citizenship status	10.0%
Hospitalized	10.0%
Worried about another service provider finding out	10.0%
Lack of support from medical doctor	5.0%

for them to access social assistance are summarized in Table 3.

As Table 3 shows, barriers reported by survey participants include systemic factors (e.g., an inaccessible process), interpersonal factors (e.g., worry about experiencing discrimination), and individual factors (e.g., emotional distress). Our interview and focus group data suggested these barriers may be connected to discrimination participants faced because of their sexual orientation and/or gender identity, poverty, or other intersecting identities and experiences (including race, gender, and disability). Discrimination was experienced at the systemic level (i.e., in the design and function of the social assistance system), the interpersonal level (i.e., in interactions with workers and others involved with social assistance and related systems), and at the individual level (i.e., when discrimination at the systemic and interpersonal levels was internalized and experienced as distress, shame or guilt). In the sections that follow, we highlight key findings at each of these levels.

## SYSTEMIC

*"IT'S BEEN HARD, BUT I MEAN, THAT'S JUST HOW THE SYSTEM WORKS, AND EVERYBODY SEEMS TO BE SUFFERING UNDER IT."*

### Trapped in a Cycle of Poverty

Participants noted that the social assistance system failed to lift them out of precarity. In many instances, participants indicated that the social assistance system trapped them in a cycle of poverty, preventing them from

achieving the financial security they needed to leave the system. Essentially, participants felt "stuck" in the system.

This cycle of poverty comes about in multiple ways. Strict eligibility requirements prevent social assistance users from escaping the cycle of poverty. Participants reported having to prove they were "at their worst" to be eligible for social assistance, and not being permitted to access other support to improve their situation.

*"... I've heard from other people who've accessed social work caseworkers and how they have to constantly play a role in front of them or beg for certain allowances. So even though they're struggling, they're constantly having to prove that they're struggling. And I feel that way a lot of the time, too. Like any time, I do have to contact my insurance company... you feel like you really have to show that you're in struggling mode and even though you are, you're still worried."*

– Focus Group Participant

Participants often did not seek support to get a job in fear they would be denied social assistance, and people with invisible disabilities feared that they'd be denied social assistance if they couldn't prove they were "disabled enough."

*"...I don't even want to find a job right now because I'm just like, I don't know exactly how it works, but I'm pretty sure I'll get cut off... I don't know how it works for ODSP, but I think for me it would be like, 'oh, you're capable of working now, ok, you're done'. So, there's no real incentive. So again, if there was more of those flexible options where it's like, we're not going to just cut*

*you off, there would be probably many people on disability support who were like, they'd feel better if they can contribute a bit, but that doesn't exist..."*

– Focus Group Participant

In our survey, 30% of participants indicated that they did not get the help they needed for fear of losing social assistance, while 15% had difficulty accessing social assistance because they were deemed to have too many financial assets to be eligible. Individuals working full-time for minimum wage, for example, do not meet the financial eligibility requirements to access social assistance. At the same time, full-time minimum wage work does not generate enough income to cover basic needs, given the high cost of housing. This financial disparity is made worse when individuals earn minimum wage over a period of many years:

*"... Earning a minimum wage income, that automatically put me out of the social assistance group... And with this, I could not even pay rent with my income, so I've been living in rooming houses for the last 47 years..."*

– Interview Participant

Participants noted that the amount of money they receive through social assistance is not enough to cover expenses they incur simply to survive:

*"... it has never been enough to really support me. And so, every time I've had something that was supposed to be like 100% of my needs, I've always had to work under the table."*

– Focus Group Participant



Often, social assistance payments do not even cover rent, particularly since they do not increase to match rises in rent costs.

*"... for instance, housing...Rent went up. The [ODSP] housing allowance didn't go up. So, I wouldn't be where I am if I didn't get a subsidy [from an Indigenous organization]. And that certainly wasn't from, you know, ODSP..."*

– Interview Participant

Housing is considered to be "affordable" in Canada when it costs no more than 30% of one's household income. However, among



our 20 survey participants, 30% spent 50-100% of their household income on housing, 50% spent 30-49% of their household income on housing, and only 5% spent less than 30% of their household income on housing (15% were unsure). Almost half of our survey sample (40%) reported that their current housing was precarious.

### **Making “Choices” to Make Ends Meet**

As a result of insufficient funds provided by social assistance, participants reported having to make “choices” that were inhumane, such as having to choose between being able to eat or pay their phone bill – an essential cost given the need to access services, particularly during the pandemic.

*“So, this is the reality... if I do choose to buy myself something that costs more money, then I make a conscious choice that I’m certainly not going to eat as long. The one bill that I do have is my cell. Well then oh my goodness, you fall behind on that. Well, they don’t like your credit rating or whatever, and then you really have no contact. So, you make choices. Do you want to eat? And even then, you’re limited to what you want to eat. Or do you pay a cell phone bill?”*

– Interview Participant

Participants noted that the social assistance system limited their choices in regard to housing and relationship status. People using social assistance reported lacking the money to be selective about their housing, and often living in precarious housing situations or accepting mistreatment from landlords because leaving their current residence was not an option.

*“...the lack of choice, it’s literally you could be restricted where you live...”*

– Interview Participant

Likewise, participants noted that getting married or living with a partner would result in a loss or reduction of benefits, and therefore was not possible.

*“When my partner and I had a combined household income of <\$50,000, I was told I could only receive \$536 a month because my partner was earning income...this would have left me with \$36 a month after rent.”*

– Quantitative Survey Participant

The issue of social assistance limiting choices for people in the system is especially relevant to 2SLGBTQA+ people as a lack of choice for this population could result in a lack of safety. For example, if people lack the financial agency to choose where they live, they cannot avoid anti-2SLGBTQA+ discrimination. Moreover, systems are highly cis/heteronormative, putting 2SLGBTQA+ people at risk if they choose to present non-normatively. As a result, 2SLGBTQA+ people report choosing whether to jeopardize their safety by using their correct pronouns and/or identifying as queer within the system, or to hide this aspect of themselves for self-protection.

*“...I feel like for my own safety, I would probably even if I was leaning more towards, they/them pronouns, I would probably still like use she and her, just because, you know, it’s a heteronormative space.”*

– Focus Group Participant

This issue especially affects Two-Spirit people, as cisgender and heterosexual norms are enforced by colonialism. Notably, in our quantitative survey, 45% of participants indicated that worries about discrimination made it difficult for them to access social assistance.

### **Hoops and Red Tape: An Inaccessible and Under-Funded System**

Participants also indicated that the social assistance system made support highly inaccessible. Participants reported facing processes that were more difficult to navigate than they needed to be. They described long wait times to access services, lack of communication between social assistance systems and other government agencies, and tedious paperwork to be completed.

*"... if I have a big support outside of the province of Ontario, then I have to leave all this assistance, all this paperwork, and reapply in a different province. I had lived in Sudbury for a few years and even just going up there and reapplying and getting this information and paperwork and the wait – the wait meant when I moved from here and went up to Sudbury, I was at a homeless shelter there. Because I had to wait 'til my documentation was approved..."*

– Interview Participant

There is no support in applying for social assistance for people with disabilities, so paperwork posed an even greater barrier for these populations. In our survey, 20% of participants indicated not getting the help they needed due to challenges with execu-

tive functioning; 65% of participants indicated that emotional distress, depression, or anxiety made it difficult to access social assistance; and 30% of participants reported it was difficult to access social assistance because the process was not accessible. There were also additional issues with paperwork for queer and trans people who were getting their name and/or pronouns changed.

*"In terms of stuff maybe specific to queer and trans communities, there can be delays in your applications if you are also like concurrently working on changing your identity documents, so if you're changing your name or something like that, that can really slow down the whole process and sometimes you'll have to redo certain stages of it."*

– Focus Group Participant

Moreover, unique and specific logistical barriers existed for people in greater levels of poverty – ironically, the people social assistance should support best. People could not access assistance without a fixed address yet didn't always have housing if they were in extreme precarity. Forty percent of survey participants indicated that lack of a fixed address made it difficult to access social assistance. Likewise, many social assistance communications were done online, yet people in extreme poverty could not access the technology required to do so.

*"... we haven't even discussed the digital divide. For example, not having a device and not having internet and just having a phone..."*

– Interview Participant

Additionally, participants report that social assistance staff were overworked as a result of understaffing and underfunding, resulting in staff who were inaccessible and/or under-trained and underinformed. Due to a lack of knowledge, staff often failed to provide clarity about the benefits to which participants were entitled, what supporting resources were available, and what relevant policies stated. Participants reported outdated resources, if any at all. In our survey, 35% of participants indicated that not having the appropriate information made it difficult for them to access social assistance, while 20% indicated that they didn't get the help they needed because they didn't know where they could get it. One participant explained:

*"Nobody really educates you on that either. I had to like, look it up myself. Nobody taught me that you could apply for a disability tax credit. So, there's definitely a lack of knowledge about what's available to you."*

– Focus Group Participant

In some cases, staff errors resulted in severe consequences for the clients. Errors such as being misinformed about their eligibility or not being given imperative information regarding changes to the program resulted in consequences such as being further in debt or having payments be delayed.

*"I received Ontario Works very consistently... But when I went off to university, obviously I stopped because of going on OSAP. And you can only receive one social assistance at a time... But my Ontario Works worker was specifically like, 'I know you're going to school and you're receiving*

*OSAP, but I'm still going to pay you anyways'... Ontario Works workers were literally begging me to come into the office saying, 'you have to pay for bills, you have to pay for rent, etc., etc., so, you need to come and apply so that way we can help you out.' And so, I did, even though I wasn't going to. And then after I applied and they considered me to be approved, two days later, they called me back into the office and say: 'We messed up. You're not eligible now. You owe us money again.'... I'm sure that there are lots of queer individuals as well that went through similar experiences with just a lack of Ontario Works workers knowing their own policies and then us having to like pay for their mistakes, which is unfair because now, I'm \$1,400 in debt to Ontario works for their own misunderstandings, like it had nothing to do with me not knowing the system."*

– Focus Group Participant

Even when staff were informed and wanted to support clients, the understaffing and underfunding of the system rendered it impossible for them to do so without going overtime or beyond their roles, and therefore they often could not, regardless of intentions.

*"So much of it, too, has to do with their own ability to do all those things because they're so overworked and they're so understaffed that if they're going above and beyond, they're doing it on their own time. They're doing it because they care so much, and they're rarely supported in that..."*

– Focus Group Participant

## Caught in a Web of Systems

Finally, participants noted that the social assistance system was but one actor in a web of systems that work together to keep people in poverty, especially 2SLGBTQA+ individuals. These systems included employment, family, and educational systems.

Anti-LGBTQA+ oppression and practices in the workplace prevent 2SLGBTQA+ people from engaging with the workforce and force them into precarity. For example, if a workplace has homophobic or transphobic hiring practices, people will not be hired there if they do not present as cis/heteronormative.

*"I think a big issue that leads to a disproportionate number of LGBTQ folks receiving assistance is that a lot of jobs are unintentionally homophobic in their hiring practices. So, what I mean by that is sometimes when you're applying for jobs ... I just feel in hiring practices if they see you a queer folk in competition with the straight folks, they're more likely to hire a straight folk than they are to hire you because they don't think that you best represent their job."*

– Focus Group Participant

It may also be difficult for trans or nonbinary people to fit into binary gendered workplace roles or meet gendered dress codes.

*"I think a lot of people have difficulty navigating dress codes in the queer community for work..."*

– Focus Group Participant

These barriers to work may be exacerbated for 2SLGBTQA+ people who are neurodivergent and/or disabled and may need additional accommodations for transportation or sensory issues that are also ignored.

*"... part of the issues I was having was not feeling like I fit in at work due to feeling like I'm not straight or cis... On top of that, I'm neurodivergent... Things like noise and lighting were constant issues almost everywhere I worked, and they just didn't really take it seriously. They put me next to a noisy printer. And when I said that was an issue.. their response was pretty much, oh yeah ok, and then we'll see what we could do, but not doing much about it... part of it is just the gender norm expectation... unfortunately, when you're already dealing with stress, I feel like even the little things like noises and things affect you even more..."*

– Focus Group Participant

The cis/heteronormative family structure also enforces poverty for 2SLGBTQA+ individuals. In families that are queerphobic or transphobic, 2SLGBTQA+ people do not receive support or a safe place to live, and in some instances are kicked out of their homes. This results in homelessness, lack of

education, poor  
employment  
outcomes, and





inevitable reliance on social assistance which leads to a cycle of precarity.

*"... In my experiences and speaking with other queer youth, a lot of us have been disowned by our families. Right, so in my case specifically, I was thrown out at the age of 18 and didn't have a family support [system]. So, I was unfortunately forced to access Ontario Works..."*

– Focus Group Participant

The educational system that trains social service providers perpetuates cis/heteronormative curricula, resulting in social assistance workers who are not adequately informed on 2SLGBTQA+ issues, and therefore cannot adequately assist 2SLGBTQA+ people in escaping the cycle of poverty.

*"... I used to do a lot of training for social workers and social service workers. And so often they had no idea of why it was relevant that they should know or care about sexual orientation, gender diversity."*

– Focus Group Participant

## **The Myth of Equal Opportunity**

From our data, it was evident that the social assistance system is designed to align with economic policies that value individual (rather than collective) responsibility and assume that each person is equally able to achieve economic success through full-time employment. Participants' experiences of transphobia, homophobia, biphobia, and intersecting forms of discrimination show this assumption to be untrue:

*"... there isn't support for people like me who go from job to job to job because the assumption is everybody's looking for full time perm[anent]. And there's bias toward that, but not everybody can work full time..."*

– Focus Group Participant

The structure of social assistance ignores the impact of structural determinants of health as well as systemic discrimination that contributes to unemployment and poverty. One example of this is the issue of inadequate affordable housing:

*"... ODSP doesn't help you in housing, to find housing. They give you a housing allowance: \$457. You can't even get half a room for that now? So of course, you end up using your whole cheque and the government or this worker makes it sound like, well, you're not being responsible enough. You know, how you're handling your money..."*

– Interview Participant

The cyclical poverty described by our participants was reinforced by systemic oppression. As an example, discrimination against trans and non-binary people is widespread in employment settings; in our study, this discrimination resulted in under-employment and inadequate income, as well as in disability associated with ongoing workplace harassment and related stress. As a result, trans and non-binary people were particularly likely to require income supports and as a result be impacted by the inadequate rates. Intersecting forms of discrimination (e.g., racism, ableism, sexism, fatphobia) also contributed to the cycle of poverty in similar ways. For



example, if social assistance payments do not provide enough funding to cover basic expenses, one may not be able to afford food, and consequently have a poor diet that leads to weight gain. This may lead to experiences of fatphobia in the workplace (as well as across other systems) and, in turn, barriers to safely remaining in the workforce, resulting in a reliance on social assistance, which starts the cycle all over again.

*"There's a lot of fatphobia... in my experience, it's very multi-layered because it's like my weight is in relation to my income bracket, which is, you know, so it's not just poor life choices, it's just kind of life circumstance..."*

– Focus Group Participant

Participants indicated that the social assistance system blamed, disciplined, and punished users for their circumstances rather than addressing the systemic factors that led to poverty, making accessing social assistance a dehumanizing process overall.

## INTERPERSONAL FACTORS

The discriminatory belief systems that underpinned the policies and practices described in the prior section – that is, heterosexism, cissexism, monosexism, classism, ableism, and racism, among others, also manifested in the interpersonal interactions that our participants had in the process of accessing social assistance, particularly in interactions with their social assistance workers. Participants in our study acknowledged that the system was underfunded and understaffed, leading to high turnover, inconsistent staffing, and in turn,

poorly educated staff. However, these systemic issues worsened the negative interpersonal encounters described by our participants. A primary interpersonal issue experienced across social assistance recipients was difficulty contacting social assistance workers and a lack of staff engagement. When staff did contact clients, it was often in impersonal ways. Participants cited cases where workers would only communicate by email, refusing phone calls or in-person visits and creating a lack of human connection.

*"...It makes me cry... the lack of treating you like a human."*

– Interview Participant

*"... even though they're ODSP office... there's nothing there, like I feel like there's no support whatsoever. I've asked certain questions. You're lucky to get a phone call back. Of course, now all they want to do is through email... I usually like to meet somebody in person. I feel like that's how I get to know somebody. And I also feel they get to know me..."*

– Interview Participant

Moreover, participants described being treated poorly by workers who perceived them as "undeserving." Although the social assistance system is designed to support any person experiencing poverty, some social assistance recipients are considered more "deserving" of support than others. These notions of deserving and undeserving poor were deeply imbued with racism, heterosexism, cissexism, ableism, and other forms of oppression:

*"...it's hard enough being in the system, but then to say you're gay or Two-Spirited, I feel like it could be more risky..."*

– Interview Participant

As a result of these notions of "undeserving poor," participants noted that they often could not be their full selves (as queer, trans, racialized, someone with a disability, etc.) without putting their benefits in jeopardy. Instead, participants felt that they had to appear to be a "model minority" – that is, to perform the values and appearance of white, cisgender, heterosexual, able-bodied/minded, middle-class people of the gender deemed appropriate by the worker. Otherwise, if they did not perform "model minority values," participants feared that hostile workers might enact queerphobia, transphobia, fatphobia, racism, sexism, ableism, ageism, classism, and/or sanism. For example, workers may not believe their circumstances, or may stereotype them as "dangerous" (i.e., as indicated by presence of security guards at support offices). One participant described an experience of this:

*"[The Ontario Works office] would mail the checks separately, so like housing and basic needs, and my mailbox was secure, and my landlord had stolen my rent portion. So, I had to go down to Ontario Works and petition that and try and get them to reissue a cheque... [the worker] was like 'for the record, I didn't believe you whatsoever, and I've heard from other workers that you're a difficult client', right?"*

*So, it's just like very inappropriate behaviours and almost like pushing [me] into a corner to retaliate so they [can] get you suspended, or call the police on the Black aggressor, Black male."*

– Focus Group Participant

Participants were very aware that workers had the power to enact systemic oppressions by withholding their benefits and other needed resources. When we asked survey participants about the times they needed help or support but

couldn't access it, 60% reported not accessing the help they needed because they were afraid of losing social assistance. This concern was reflected in our qualitative data as well:

*"... if the worker doesn't like my tone or my body language, they'll punish me by withholding certain resources, not inform you of certain benefits you are entitled to, as well as just being pretty abrasive and hostile due to maybe my race or my sexual orientation."*

– Focus Group Participant

As a result, participants often chose to "strategically closet," attempt to "pass," or "tone down" their identities when engaging with social assistance workers to avoid hostility and maintain safety.

*"You have to be super nice, and you have to present yourself in certain ways like your clothes have to be a particular level of cleanliness and presentableness as it*



were. It's all this respectability politics stuff. And that's always at the forefront, if I've ever had to access these kinds of services, that if I don't do this, I'm putting myself at risk."

– Focus Group Participant

At the same time participants feared their identities could put them at risk, they also described how workers and the social assistance system forced them to make some identities invisible.

*"There's no conversations about gender... I use she and her pronouns dominantly, but I'm also exploring with they/them. But that's never a conversation that would be had. Sexuality is also never a conversation that's had, and I don't know if that's just because it's irrelevant to intake or something like that. I don't know, but also like it being part of your identity, you would assume that it does play a role in your everyday life."*

– Focus Group Participant

While some participants felt that acknowledgement of their identities by social assistance workers would improve their experience accessing social assistance services, social assistance systems mostly rendered their identities invisible by treating individuals as a number. When asked about coming out to their social assistance worker about their Two Spirit identity, one participant noted:

*"... I don't know if I've actually said, 'yes I'm Two Spirited and dot-dot-dot-dot-dot'. The issues that I had [accessing social assistance], I don't know how much more that would have made of impact. I mean, I can't even get through the front door, just the*

*number that I'm listed, you know, my, as they call [it], membership number. You know, it's hard enough... being Two Spirited, I don't even remember a form acknowledging that part, I don't remember a form even ever saying gay; it took them long enough to have Indigenous."*

– Interview Participant

As per Table 4 below, it was rare that participants were asked about 2SLGBTQA+-related stresses, supported in their sexual orientation or gender identity, offered 2SLGBTQA+ resources, encouraged to make connections in the 2SLGBTQA+ community, or referred to helpful 2SLGBTQA+ services by their social assistance workers. Evidently, a major consequence of ignoring identities within the social assistance system is that this prevents staff from providing identity-specific referrals to clients (such as 2SLGBTQA+ specific ones for queer and trans clients).

*"... there are benefits to knowing those parts of your identity, such as them being able to give you alternative resources that are maybe LGBTQ friendly...maybe knowing that part of your identity might be helpful for them to give you, yeah, referrals to other organizations. In my experience, at least my Ontario Works workers never referred me to any other organizations..."*

– Focus Group Participant

As a result of these negative interpersonal interactions, our participants wished for a social assistance system in which workers valued, supported, and even shared their identities. As seen in Table 5 below, most of

TABLE 4 – PARTICIPANTS’ EXPERIENCES WITH SOCIAL ASSISTANCE WORKERS

	FREQUENCY			PERCENT		
<i># of participants with a social assistance worker</i>	11			55.0%		
<b>(n=11)</b> <b>SERVICE PROVIDER...</b>	<b>NEVER</b>	<b>RARELY</b>	<b>SOMETIMES</b>	<b>OFTEN</b>	<b>ALWAYS</b>	<b>UNSURE</b>
Asked about 2SLGBTQA-related stresses	63.3%	9.1%	18.2%	-	9.1%	-
Assumed you were heterosexual	27.3%	-	36.4%	9.1%	9.1%	18.2%
Was supportive of your sexual orientation	45.5%	9.1%	9.1%	9.1%	18.2%	9.1%
Suggested 2SLGBTQA+ resources	63.6%	-	18.2%	-	18.2%	-
Encouraged you to make 2SLGBTQA+ community connections	72.7%	9.1%	9.1%	-	9.1%	-
Referred you to a helpful 2SLGBTQA+ groups/service	72.7%	9.1%	-	9.1%	9.1%	-
	<b>FREQUENCY</b>			<b>PERCENT</b>		
<i># of participants with a social assistance worker who are gender diverse</i>	7			35.0%		
<b>(n=7)</b> <b>SERVICE PROVIDER...</b>	<b>NEVER</b>	<b>RARELY</b>	<b>SOMETIMES</b>	<b>OFTEN</b>	<b>ALWAYS</b>	<b>UNSURE</b>
Asked about trans/genderqueer/Two Spirit-related stresses	57.1%	-	14.3%	28.6%	-	-
Assumed you were cisgender	14.3%	28.6%	-	-	57.1%	-
Suggested trans resources	71.4%	14.3%	-	-	14.3%	-
Encouraged you to make connections in the trans community	71.4%	-	14.3%	14.3%	-	-
Referred you to a helpful trans group/service	71.4%	14.3%	-	14.3%	-	-

the top factors that participants suggested to improve access to social assistance for 2SLGBTQA+ people were related to accessing an environment that would be free from discrimination: 65% of participants wanted

staff who were similar to them, 55% wanted nonjudgmental staff, and 10% wanted social assistance encounters to take place in an anti-oppressive space.



**TABLE 5 – FACTORS THAT WOULD MAKE IT EASIER FOR INDIVIDUALS TO ACCESS SOCIAL ASSISTANCE**

WHAT WOULD MAKE IT EASIER TO ACCESS SOCIAL ASSISTANCE?	FREQUENCY	PERCENTAGE
Staff and/or volunteers who are similar to me	13	65%
Convenient location	11	55%
Nonjudgmental staff and/or volunteers	11	55%
Anti-oppressive space	10	50%
Being involved in developing the program or service	9	45%
Environment that addresses sensory accessibility	9	45%
Forms that are inclusive of all gender identities	8	40%
Physically accessible space	5	25%
Knowing other people who access the program/service	5	25%

## INDIVIDUAL FACTORS

The systems-level and interpersonal level factors described above also affected our participants on the individual level, leading to feelings of guilt and shame, and a broad range of physical and mental health impacts.

### The System Produces Guilt and Shame

As a result of systemic discrimination against people in poverty, shame and guilt regarding accessing social assistance are often internalized. Individuals often feel shame in seeking help from an oppressive system and from negative stereotypes perpetuated about those who access social assistance.

*“There’s another level of shame which is these organizations in a lot of ways have caused me a lot of harm. So, admitting that I need help from them is kind of like admitting defeat to the perpetrator of harm or*

*something like that, which is just shameful...”*

– Focus Group Participant

The consequence of such shame is that individuals often stay silent about accessing social assistance, limiting opportunities for community support and resistance.

*“There’s so much shame associated with accessing these services, as well as this idea that, like you’re not supposed to talk about them, right? Like, I think that is related to the shame...”*

– Focus Group Participant

Responses to our survey also reflected these experiences of shame. For example, 25% of participants indicated that concern over family or friends finding out made it difficult for them to access social assistance; 20% indicated that concerns about anonymity in the system were a factor as well. Furthermore, when participants were asked about times that they didn’t have access to help or



support they needed, 40% said that they didn't get help because they were afraid of what others would think. For 2SLGBTQA+ individuals, there is often additional inter-sectional shame regarding poverty and 2SLGBTQA+ identity.

*"...there's so much tied up to shame and guilt for me. Whether it was my financial situation or lack thereof... shame and guilt have encompassed so much, which includes my sexuality, which includes so much of all the parts of myself, being Two Spirited, too..."*

- Interview Participant

Moreover, as mentioned in our discussion regarding systemic barriers participants faced, the social assistance system often entraps people in a cycle of poverty. This often results in intergenerational poverty, where children are born into poverty and are also unable to escape it. Such intergenerational poverty is often paired with intergenerational shame, as children feel ashamed for being unable to escape the precarious circumstances that they were born into.

*"For my own experience, I guess I would say that there's a lot of shame associated accessing social services. Of course, it's personal because I do come from a background where my entire family was living off the social services. So internally, I have a lot of shame like, oh, maybe I'm following like falling into the system of poverty again, which I like, you know, in so many levels been trying to get out of and trying to be the cycle-breaker."*

- Focus Group Participant

However, participants also noted that 2SLGBTQA+ people are often better able to acknowledge the systemic causes of poverty and therefore blame themselves less for their circumstances, resisting against the social assistance system which attempts to blame clients for its shortcomings.

*"There is shame associated with it typically, but I think for me at least like less so with other queer folks, because I think all the people I know who do access social services are queer to trans and I think it just feels more normalized and less shameful in those communities. I think it's usually like discussed in the larger context of like political issues that exist and kind of create these systems..."*

- Focus Group Participant

## **Health Impacts of Poverty**

Participants unanimously noted that the social assistance system, as well as the greater system of poverty, had negative impacts on their physical and mental health. Physically, one effect was weight gain, as individuals could not afford healthy meals (as even if food banks provided food, it was not always healthy) or fitness (as sports and fitness costs were high).

*"... sports are a financial cost. I am fat because I am not eating well because I don't have money to eat well..."*

- Focus Group Participant

Mentally, participants noted that fear of not being able to afford their basic needs or poor experiences with social assistance workers led to anxiety and exhaustion.

*"... I have anxiety and depression already and the way that that just builds up when you're not sure if you're actually able to, to afford things and being so grateful whenever someone sends a gift card your way or something for groceries, but then never really being sure if that's going to happen, right?"*

– Focus Group Participant



Participants on social assistance also indicated that they had poor access to certain forms of healthcare and other supports because they were unaffordable to them (see Table 6 for details). For example, 50% of our survey participants indicated that there had been a time when they couldn't access or had limited access to necessary prescription medications:

*"Due to the high cost of my medication, I often have to skip doses and ration what I have; I also take a lower dose than what my doctor prefers because of the cost."*

– Quantitative Survey Participant

Mental healthcare such as psychotherapy was also often unaffordable yet not covered by social assistance.

*"... psychotherapy... It is a literal lifesaver. And I don't have the money, I can't go".*

– Focus Group Participant

Likewise, people on social assistance were often only able to access emergency dental services, but could not afford regular dental check-ups that weren't covered by social assistance support.

*"I have not always been in jobs that had health insurance and did not have access to dental care for most of [my] twenties."*

– Quantitative Survey Participant

Participants all indicated that psychotherapy and regular dental services would have had drastically positive impacts on their health and wellness had they been provided to them.

*"... mental health supports, dental services like all the things that are considered sort of like incidental as like the way that they're talked about, it's like they're not considered primary, but they're like, if we don't have them, we can't survive..."*

Focus Group Participant

As a final note, participants noted that if they were eligible to access specific health services through the social assistance system due to disabilities, there were often hurdles in getting approval for them.

*"... They're often just like so many hoops to jump through, especially with health issues where you need sign offs from a lot of different providers, where it might take months to get those appointments or, for instance, I'm a [university name redacted] student, and I was trying to get funding for a mobility device for this year, for returning*

**TABLE 6 – TYPES OF HELP OR SUPPORT PEOPLE ON SOCIAL ASSISTANCE  
COULD NOT ACCESS BECAUSE THEY COULDN'T AFFORD IT**

(n=10, check all that apply) TYPES OF HELP OR SUPPORT PEOPLE ON SOCIAL ASSISTANCE COULD NOT ACCESS BECAUSE THEY COULDN'T AFFORD IT	PERCENT
Therapy/counselling	70.0%
Medication	60.0%
Help with racial/cultural/ethnic identity issues	50.0%
Massage therapy	50.0%
Group counselling	40.0%

*Other types of support mentioned by fewer than 40% of participants included: academic counselling/support, crisis services, help with gender identity issues, help with sexual orientation issues, help with social class/income level issues, medical devices, mobility aids, occupational therapy, physical therapy, support from a peer, and transition-related support.*

*to campus learning. And there's just like, sure, but it's going to have to be approved by this OSAP disability office first and then two specialists who you won't be able to get an appointment with for a year. And so, there's just a lot of bureaucratic stuff that gets in the way and not only mentally, but for me also physically end up impacting my health when I don't have access to certain disability related services or things like funding for forearm crutches..."*

– Focus Group Participant

## **SURVIVAL STRATEGIES AND OTHER ACTS OF RESISTANCE**

While participants experienced many challenges with the social assistance system and faced ample consequences of poverty, they developed many survival strategies and methods through which to resist the systemic, interpersonal, and individual

barriers that were imposed upon them. Perhaps the most important were strategies to meet their basic needs, given that social assistance often failed to do this. Participants outlined how working under the table was a method many of them used to cover basic expenses without compromising the support received through social assistance.

*"... There is few who can match my resourcefulness. Like working to this day, under the table. So that my benefits are not affected. And work for cash..."*

– Interview Participant

In the 2SLGBTQA+ community in particular, sex work is a common source of under-the-table work for individuals in need of extra income, given the discrimination many individuals (and particularly trans women of color) face in traditional employment:

*"I think that's a very prominent issue, in the queer community that are on social assistance is needing to get extra money. I don't know, maybe I'm generalizing, but at least in my experience, people resort to sex work."*

– Focus Group Participant

Where social assistance failed to provide adequate or specific supports (such as food support, housing support, mental health support, and identity-specific referrals), participants sought other sources of help, and particularly community-based resources (e.g., Indigenous organizations, youth shelters, etc.), on their own.

*"... I get my support in other ways than my ODSP..."*

– Interview Participant

These resources were better able to give them the help they needed and felt safer. One participant shared:

*"... there were just a lot of these community groups that I've accessed, sometimes there's flyers or something for groups that sound incredible, and it'll be, oh, apply for our eight week, I don't know, music mentorship program, and you'll get a five hundred dollar or four-hundred-dollar honorarium..."*

– Focus Group Participant

Similarly, where adequate information was not provided, users did their own research (e.g., for resources, how to complete paperwork, closest office locations, etc.).

*"When it came more specifically to services, I've just recently been through trying to figure out a move. And so, I was*

*trying to deal with some kind of level of maximum rent I could pay. And I was able to find on my own because I had no other support to do it, an agency worker who was sending me so many things I was ineligible for. And so, it became looking to rely on whatever skills I found, or I could lean back on and try to think of anything new about trying to look for a place knowing that I only had a specific amount of money..."*

– Focus Group Participant

Participants prided themselves on developing a network of information sharing amongst peers to keep each other informed regarding beneficial resources as well as changes to social assistance rules.

*"Coming from a marginalized community, being both queer and Black, whenever I meet with folks with similar intersections, I try to share as much resources as possible, like, 'hey, there's this housing resource'..."*

– Focus Group Participant

As a whole, participants found that fostering a support network of peers and community of people with shared experience allowed them to share information and helped combat the shame they sometimes felt related to being on social assistance by normalizing their experiences.

*"... I'm not taking on that crap that I feel that the system, I feel, puts on you or people's, other people's views, like the negative views. Being around more people, too, you know what? This is very systemic."*

– Interview Participant



The sense of shared experience was especially validating when connection occurred between members of 2SLGBTQA+ communities, as 2SLGBTQA+ identity is often made invisible by the system.

*"I'm part of and have been connected to the local Bi+ community for many, many years... I've felt comfortable to a point in sharing my experiences [with poverty and social assistance] and I read what other people experience when they talk about accessing social services and their struggles – I guess it's some kind of a small and mutual support network. It's been able to develop because different people have different workers, different experiences..."*

– Focus Group Participant



*"... when my brother passed away recently and it's a 2 days drive up there, no support from ODSP, to get up there. I didn't have the money if it wasn't for community – individual community – support. Now, this is from individuals. I would not have gotten up there because I couldn't even get community support. From one: [community name redacted], my community up north; two: From the few agencies that I do know of here in town, in Toronto, there was nothing, I was told, available..."*

– Interview Participant

Participants also described combatting shame by reclaiming their identities. Often, internalized shame had led them to hide and try to erase parts of themselves. However, over time, some participants found that they were able to better resist systemic and interpersonal discrimination when feeling pride in and embracing all aspects of themselves instead:

*"... now that I'm reclaiming my Two Spirit-ness, which is about my Indigenous culture, I am learning more, and it just seems to encompass more of who I am. Then [social assistance case workers] get to know a little more of who I am..."*

– Interview Participant

At the same time as participants outlined the empowerment that could come through resisting discriminatory systems, they also described the labor involved in doing so. It was an unfair and often impossible burden on social assistance recipients to require them to find their own resources and otherwise survive a system that was very effective at keeping them in poverty. Participants also noted feeling that sharing resources with



fellow peers became a burden of responsibility because they felt that no one would help them escape precarity if not for each other:

*"About wanting to share the resources with anyone else who might find them useful: I think that's such a wonderful thing. But then it's also a double-edged sword of like, it's exhausting to feel, oh no, I need to spend time sharing all these resources because no one else will if I don't tell them about it. And that's a big responsibility to have with every person you encounter*

*who might benefit from them, which is a lot of people."*

– Focus Group Participant

Surviving in a social assistance system that dehumanizes people and traps them in a cycle of poverty is, in itself, an act of resistance. While the resourcefulness and resilience of 2SLGBTQA+ people surviving poverty needs to be recognized, significant changes to the social assistance system are required to enable 2SLGBTQA+ people to thrive.

## RECOMMENDATIONS

Based on our data, we recommend a variety of system-level changes to improve the experience of accessing social assistance for 2SLGBTQA+ people (and other people living in poverty – particularly those who experience intersecting systemic oppressions).

**1. Broad-strokes transformation of the social assistance system is needed** to move away from a system that presumes that every individual is or should be economically sufficient (and penalizes those who are not or cannot be). A preferable system would acknowledge and address the roles of heterosexism, cissexism, colonization, racism, ableism, and other oppressions in producing and sustaining poverty. Band-aid solutions will not work: the underlying values and premises of our social assistance system are flawed in ways that reproduce economic disparities for 2SLGBTQA+ and other marginalized populations. We need to rebuild the system, a process that should be led by people with lived experience of poverty and social assistance (including 2SLGBTQA+ people). This call-to-action echoes previous reports such as the ODSP Action Coalition's 2011 call for a human rights framework in social assistance programs. Nonetheless, systemic change continues to be needed, so we augment the calls of others who advocate for social assistance system transformation and highlight the need to involve 2SLGBTQA+ people in the process.

**2. Social assistance rates must be increased to levels that allow for a living wage** among those who rely on Ontario Works, the Ontario

Disability Support Program, or other forms of social assistance as their primary sources of income. Current rates are insufficient to meet basic needs, including those related to housing and food security, forcing recipients into unsafe and discriminatory housing and work environments. Again, this call augments the efforts of ongoing advocacy from anti-poverty organizations around Ontario, particularly the ODSP Action Coalition.

**3. In addition to increasing the rates, increase investments in social assistance systems.** Right now, social assistance systems are underfunded in ways that result in unmanageable workloads for case workers, resulting in high staff turnover. This, combined with the move to delivering many services remotely, means that 2SLGBTQA+ people often feel they are unable to develop supportive relationships with their caseworkers (or others in the social assistance system). A knowledgeable, competent, and trusted worker is a necessary precondition for many of the service delivery changes we recommend below.

**4. Coalition-building between 2SLGBTQA+ organizing and anti-poverty organizing** can help to achieve these goals. Often, the concerns of 2SLGBTQA+ people living in poverty have not been foregrounded in 2SLGBTQA+ activism, and while many individuals active in anti-poverty organizing identify as members of the 2SLGBTQA+ communities, 2SLGBTQA+ issues often have not been explicitly visible in anti-poverty activism. Bringing our organizing capabilities together – in collaboration with other communities working for

economic justice – will strengthen our collective voice.

Beyond fundamental changes to the social assistance system, our data point to other systemic changes that will improve the experiences of 2SLGBTQA+ people:

**5. Expand the health benefits available to social assistance recipients,** as an important component of the work to reimagine the social assistance system as one that serves to bring people out of poverty, rather than to trap them in it. Given the high rates of disability in 2SLGBTQA+ communities, and the reality that good health is foundational to economic sufficiency (and vice versa), extended health benefits (e.g. psychotherapy, dental care, and prescription medications) are needed to improve the wellbeing of clients, equipping them to better combat precarity. This is particularly true in light of the profound health impacts of discrimination and trauma experienced by 2SLGBTQA+ people.

**6. Give clients the option of being paired with workers who share aspects of their identities,** and lived experience, so that workers can understand client needs. At a system-wide level, this requires **prioritizing representation of 2SLGBTQA+ people (alongside other intersecting identities) within the social assistance workforce.**

We also recommend changes in service delivery that can be made by social assistance administrators and caseworkers. These recommended changes will help work towards making the social assistance system a safer space for 2SLGBTQA+ people to access and aim to address both the physical and emotional safety of 2SLGBTQA+ people. Specific suggestions include:

**7. Provide 2SLGBTQA+-related education for all those working in the social assistance system** to better equip them to work effectively with 2SLGBTQA+ people. This can be provided as continuing education to staff and should address such issues as appropriate use of pronouns and other gendered language, how to respectfully and appropriately ask clients about sexual orientation, gender identity, and related issues (e.g., pronouns used), and the relationships between homophobia, biphobia, transphobia, and poverty for 2SLGBTQA+ people. In particular, trans and non-binary people experience widespread discrimination in social service and employment settings, so social assistance workers need training to work appropriately with these communities. Workers need to be respectful, accepting, and validating of 2SLGBTQA+ identities to create a safer environment for 2SLGBTQA+ clients. Although beyond the scope of the social assistance system, this would ideally be paired with **enhancements to curricula in programs that train future social assistance case workers** (e.g., social service worker programs) to ensure that foundational education is in place before service providers enter the workforce.

*“Having worked with so many social service workers, like they need better training, like to just deal with the diversity of humanity that they’re going to see, especially as we’ve been talking about, that there are so many queer and trans folks who are going to be trying to like access services who they’re just not prepared to serve...”*

– Focus Group Participant

**8. Provide opportunities for 2SLGBTQA+ people to disclose their sexual orientation and gender identity.** We support individual

autonomy to decide whether, when, and how individuals choose to disclose—particularly given that our data suggests disclosure may not be safe for 2SLGBTQA+ people. However, asking about sexual orientation and gender identity, whether as part of demographic information on intake questionnaires or as a direct question from caseworkers, signals that such information is considered relevant to providing service to 2SLGBTQA+ people. Our participants wished that their sexual orientation and gender identity were not treated as an afterthought, addressed only if the client brings it up. Participants indicated a preference for workers to indicate that they support clients on matters of sexuality and gender identity. By doing so, workers can support clients in feeling welcomed to a conversation about their identities, so they do not feel that discussion of their identities will be considered irrelevant, or worse, impact their access to needed benefits. Of note, this recommendation hinges on the prior one: before asking about sexual orientation and gender identity, workers must be trained in how to ask these questions respectfully and how personal information should be taken up in service delivery.

*“... while doing the whole intake process, I think it’s also important to actually ask somebody about their pronouns...”*

– Focus Group Participant

### **9. Consider the implications of/placement of security officers at social assistance offices.**

Many 2SLGBTQA+ people (particularly those who are also Black and/or Indigenous) experience violence at the hands of police, so a visible security presence can be a significant barrier to access. Treating social assistance recipients like they constitute a threat reinforces the

shame and dehumanization of the social assistance system.

*“... I think changing the atmosphere of the office itself, so making it feel more welcoming when you’re going in, maybe putting security guards at the office instead of having them right at the door so you don’t feel like you’re walking into a jail or like police station?”*

– Focus Group Participant

**10. Finally, providers can be advocates for 2SLGBTQA+ people.** Where there are shortcomings in the system that negatively impact 2SLGBTQA+ people, workers can advocate on behalf of our communities, so the burden of advocacy doesn’t always fall on clients themselves.





## CONCLUSIONS

This study found that overall, 2SLGBTQA+ people experience many barriers to accessing social assistance. These barriers act at the systemic level (a social assistance system that works to keep people in poverty), the interpersonal level (in interactions with discriminatory workers) and at the individual level (when experiences of discrimination get internalized in the form of shame or guilt). Although many of the problems of the social assistance system identified in this study are not specific to sexual orientation and gender identity, experiences of homophobia, biphobia and transphobia uniquely create barriers to access for 2SLGBTQA+ people. In addition, the social context of discrimination means that 2SLGBTQA+ people are particularly likely to need to access social assistance (because of barriers to employment, and high rates of disability – both intimately connected with discrimination on the basis of sexual orientation and gender identity). As a result, 2SLGBTQA+ people are disproportionately impacted by problems with the social assistance system such as the insufficient rates that fail to cover even basic needs.

Some limitations of this study are important to consider. First, conducting research with people living in poverty during the COVID-19 pandemic presented many challenges, and we have not sufficiently represented the experiences of 2SLGBTQA+ people who lack access to private internet. Research using face-to-face methods is needed to supplement our findings. Also, our research

focused on experiences accessing social assistance in the Greater Toronto Area. We know that 2SLGBTQA+ people living outside of major urban centres experience distinct barriers to accessing services and supports, and these will be important to capture in future research. Finally, while we hoped to include intersex people in this study, none of our participants identified as intersex so we are unable to speak to their experiences. Similarly, while we did have some asexual and demisexual participants in our quantitative survey, none of the participants in our qualitative component identified as asexual, so our study does not adequately explore how those on the asexual spectrum experience social assistance. More research is needed to better reflect these and other identities that are often inadequately represented in 2SLGBTQA+ research.

Despite these limitations, this study offers important insights into the ways that the social assistance system currently fails to meet the needs of 2SLGBTQA+ people – a group that already experiences economic disparities as a result of societal heterosexism and cissexism. Changes are needed to support our communities in moving out of poverty and ultimately achieving social and economic justice for 2SLGBTQA+ people.



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