



Addressing Food Insecurity and Poverty

in the
**County of Haliburton, City of Kawartha
Lakes and Northumberland County**

Table of Contents

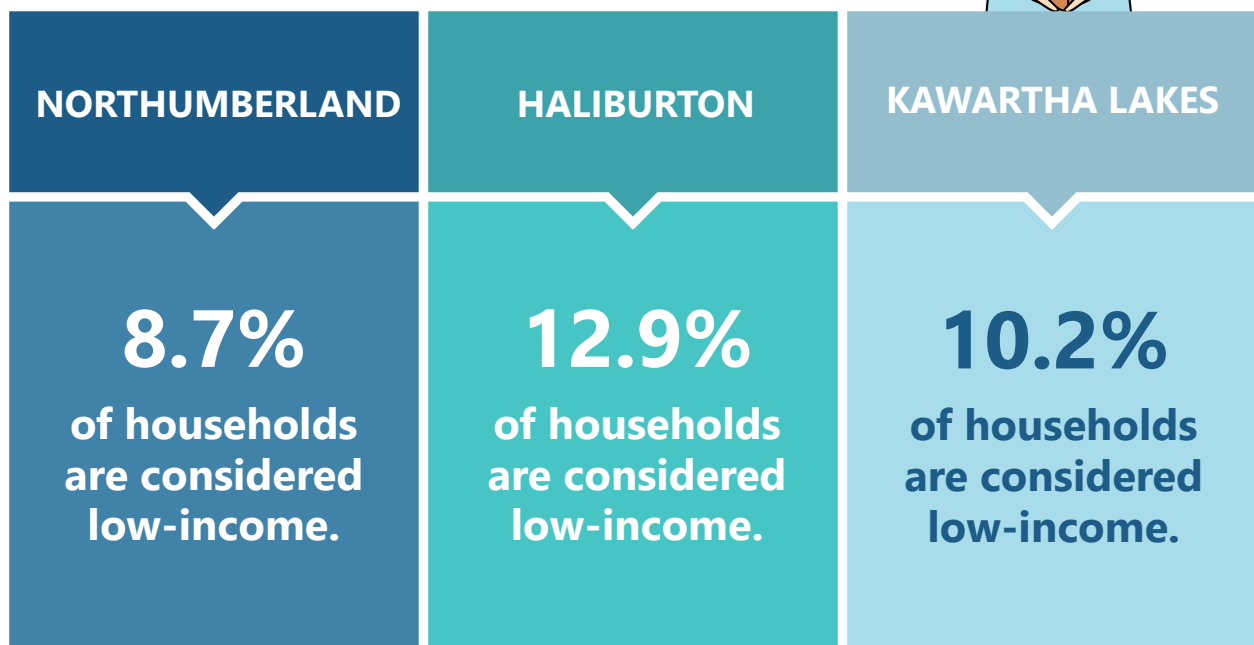
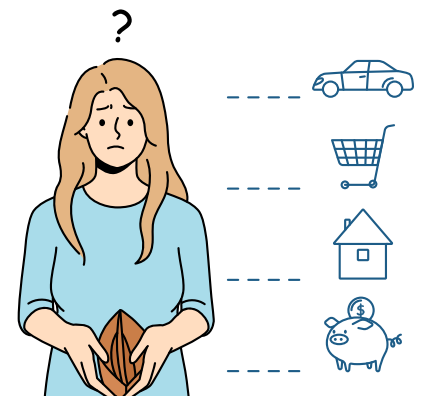
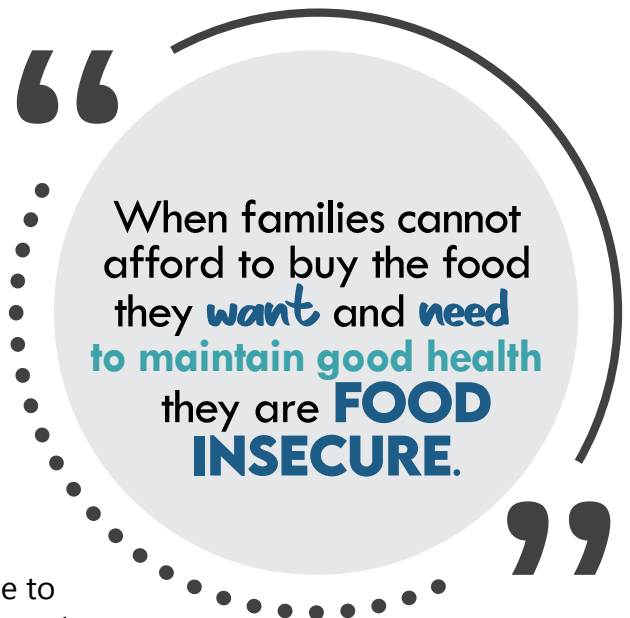
Food Insecurity and Poverty	1
Monitoring Food Affordability	2
Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area:	
Family of Four (Median Income)	3
Family of Four (Minimum Wage)	4
Family of Four (Ontario Works)	5
Single Parent with Two Children (Ontario Works)	6
Single Senior Person (Old Age Security/Guaranteed Income)	7
Single Adult Person (Ontario Disability Support Program)	8
Single Adult Person (Ontario Works)	9
Food Cost is Not the Issue	10
Food Insecurity and Household Makeup	11
Food Insecurity and Health	12
Food Charity Programs Cannot Address Food Insecurity	13
Addressing the Root of Household Food Insecurity	14
Increasing Minimum Wage	14
Improving Employment Standards	14
Increasing Social Assistance Rates	15
Providing a Basic Income Guarantee	15
How You Can Make a Difference	16
Educate Yourself	
Support Income-Based Solutions to Food insecurity	
Support Companies That Pay Their Employees a Living Wage	
Be Kind and Compassionate	
References	17

Food Insecurity and Poverty

For many people and families, buying enough healthy food once a week to stock fridges and pantries is nothing more than a mundane task that must be done. But for families who live in poverty being able to afford healthy food is a constant struggle.

In 2020, based on the Low-Income Measure - After Tax (LIM-AT), 8.7% of Northumberland County (Northumberland) households, 10.2% of City of Kawartha Lakes (Kawartha Lakes) households, and 12.9% of the County of Haliburton (Haliburton) households, were considered low-income and struggle to pay for rent, bills and healthy food¹. When families cannot afford to buy the food they want and need to maintain good health, they are food insecure².

In 2019, a local survey estimated that for the Haliburton, Kawartha, Pine Ridge District Health Unit (HKPR District Health Unit) area, 10.9% of households, due to a lack of money, didn't have enough to eat, worried that there would not be enough to eat, or didn't eat the quality or variety of foods they wanted to³.



Monitoring Food Affordability

Since 1998, Ontario Public Health Units have been mandated to monitor food affordability using the Nutritious Food Basket (NFB). The NFB is a survey tool that measures the cost of basic healthy eating as represented by current national nutrition recommendations and average food purchasing patterns. This measure relates the cost of the food basket to individual and family income to assess their ability to afford nutritious food.

The 2022 NFB results for HKPR District Health Unit area show how different household incomes can affect healthy eating for the following scenarios:



Family of Four
Median Income



Single Senior Person
Old Age Security/Guaranteed Income



Family of Four
Minimum Wage



Single Adult Person
Ontario Disability Support Program (ODSP)



Family of Four
Ontario Works



Single Adult Person
Ontario Works



Single Parent with Two Children
Ontario Works

Please Note:

Data from the 2022 NFB should not be compared with previous years due to changes in costing processes and methodology.

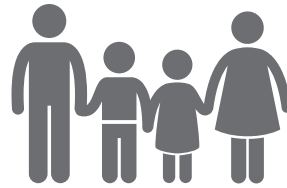
How are incomes calculated?

Incomes are calculated for the month of May/June 2022. They include maximum entitlements based on income tax information from 2020 and assumes that residents file their taxes and apply for all available tax benefits and credits.

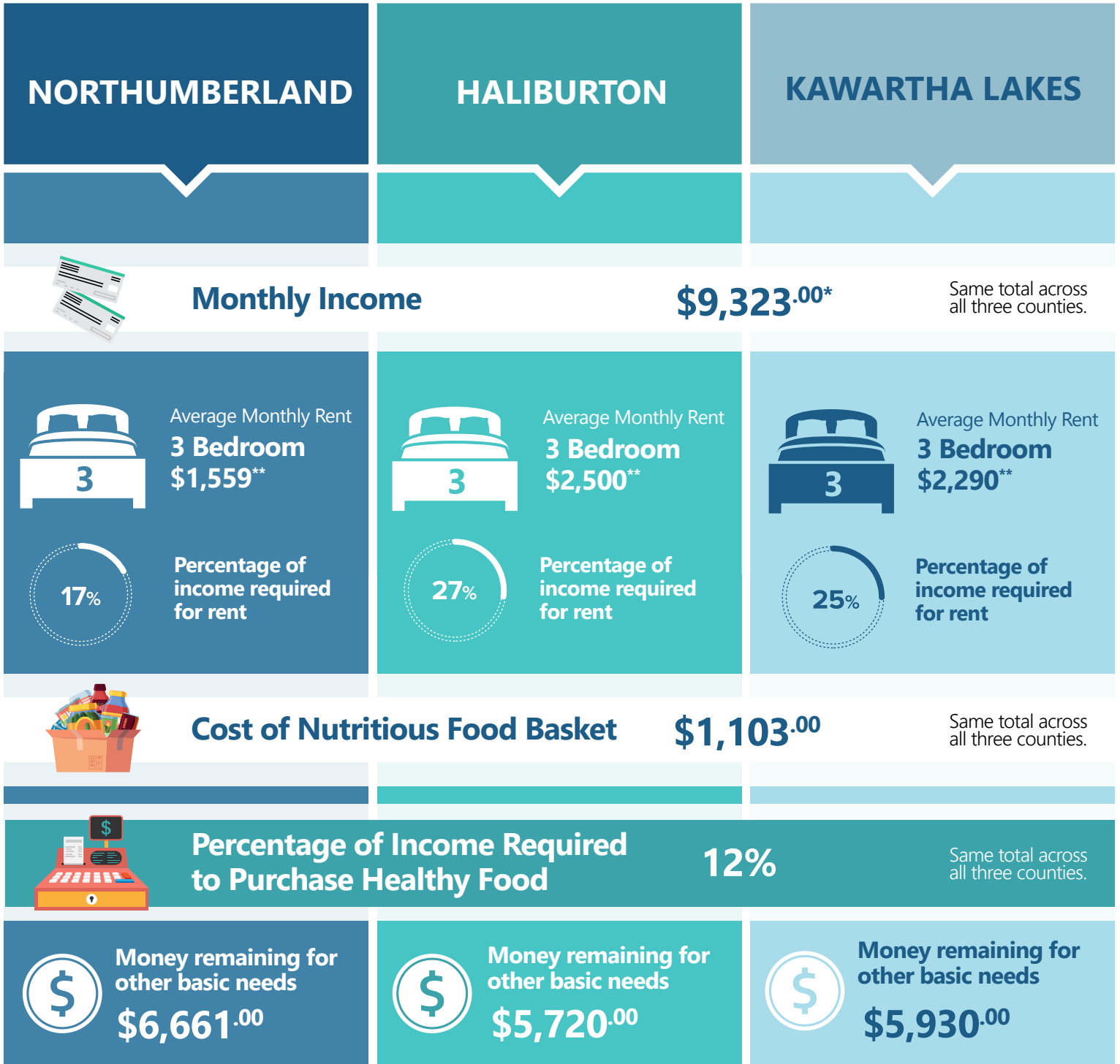
How are housing costs estimated?

Housing cost in Northumberland County is based on 2022 Average Market Rent (AMR) as provided to Northumberland County Housing Corporation by the Ministry of Municipal Affairs and Housing in April 2022. These rates are the average of a combination of long-term rental agreements, rent geared-to-income housing, and current market value. **There are presently no listings in Northumberland County consistent with the given AMR prices.** In City of Kawartha Lakes and the County of Haliburton, housing is based on the **actual available average rent** as calculated by the City of Kawartha Lakes Housing Services during the second quarter of 2022. While the City of Kawartha Lakes Housing Services try and capture as many publicly available listings as possible, there may be missed rental opportunities, or that there may be limited listings available from time to time, as in the case for the County of Haliburton.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



**Family of Four
Median Income**



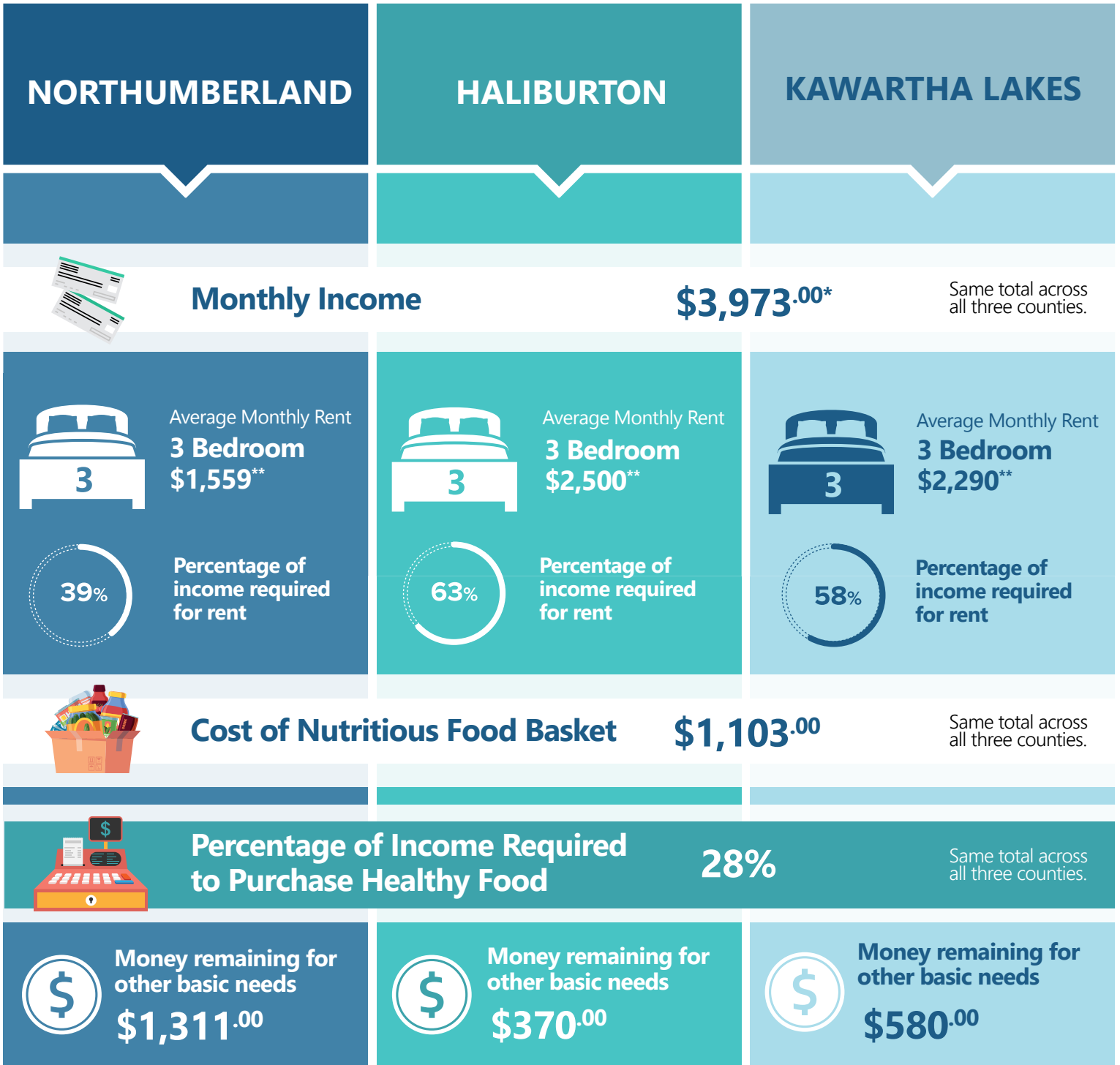
* Median income after tax, including credits and benefits.

** Average monthly rent may or may not include utilities.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



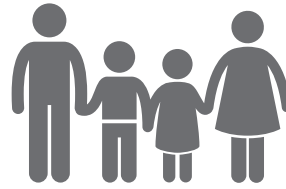
Family of Four
Minimum Wage



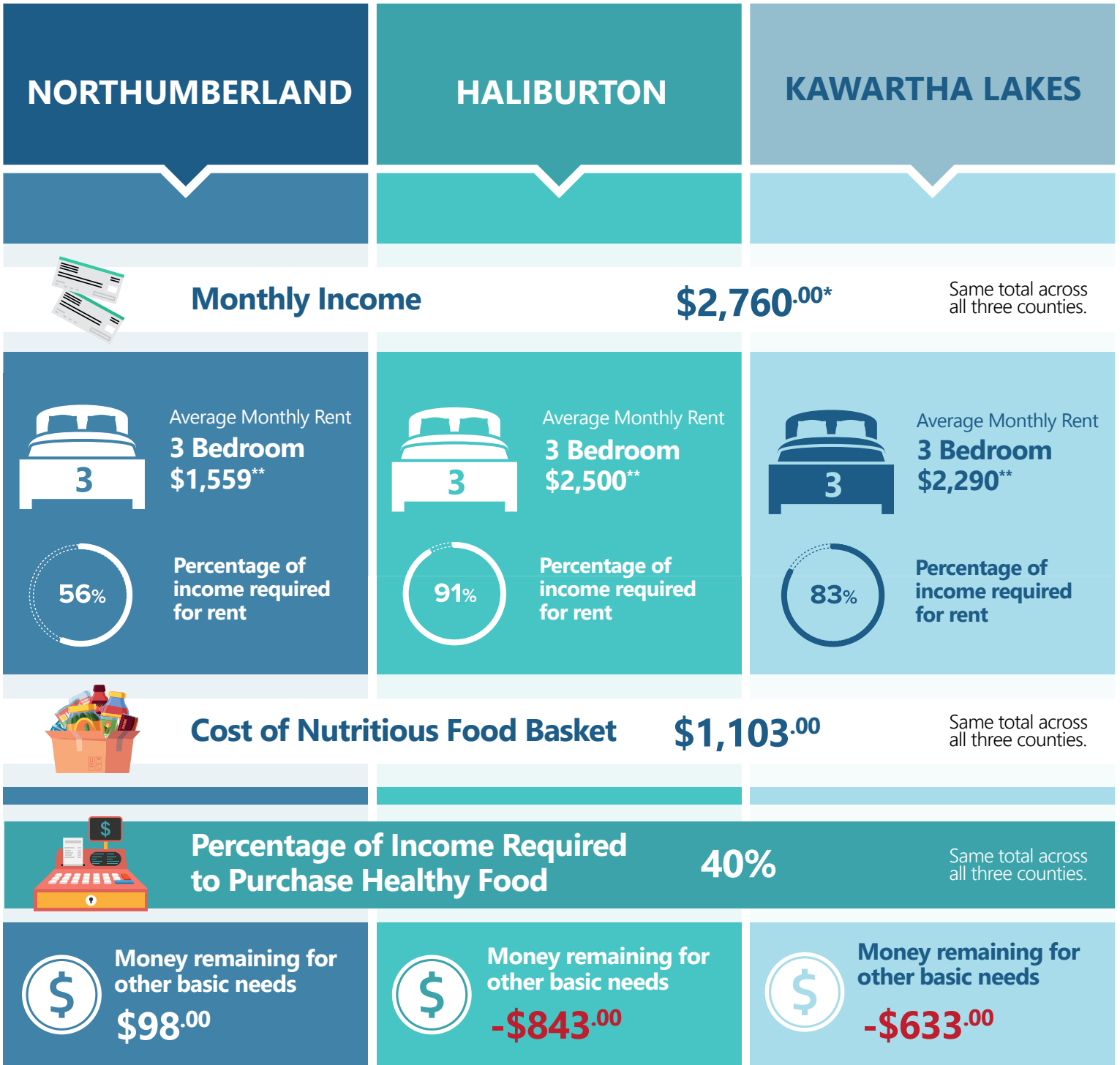
* Including credits and benefits.

** Average monthly rent may or may not include utilities.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



Family of Four
Ontario Works



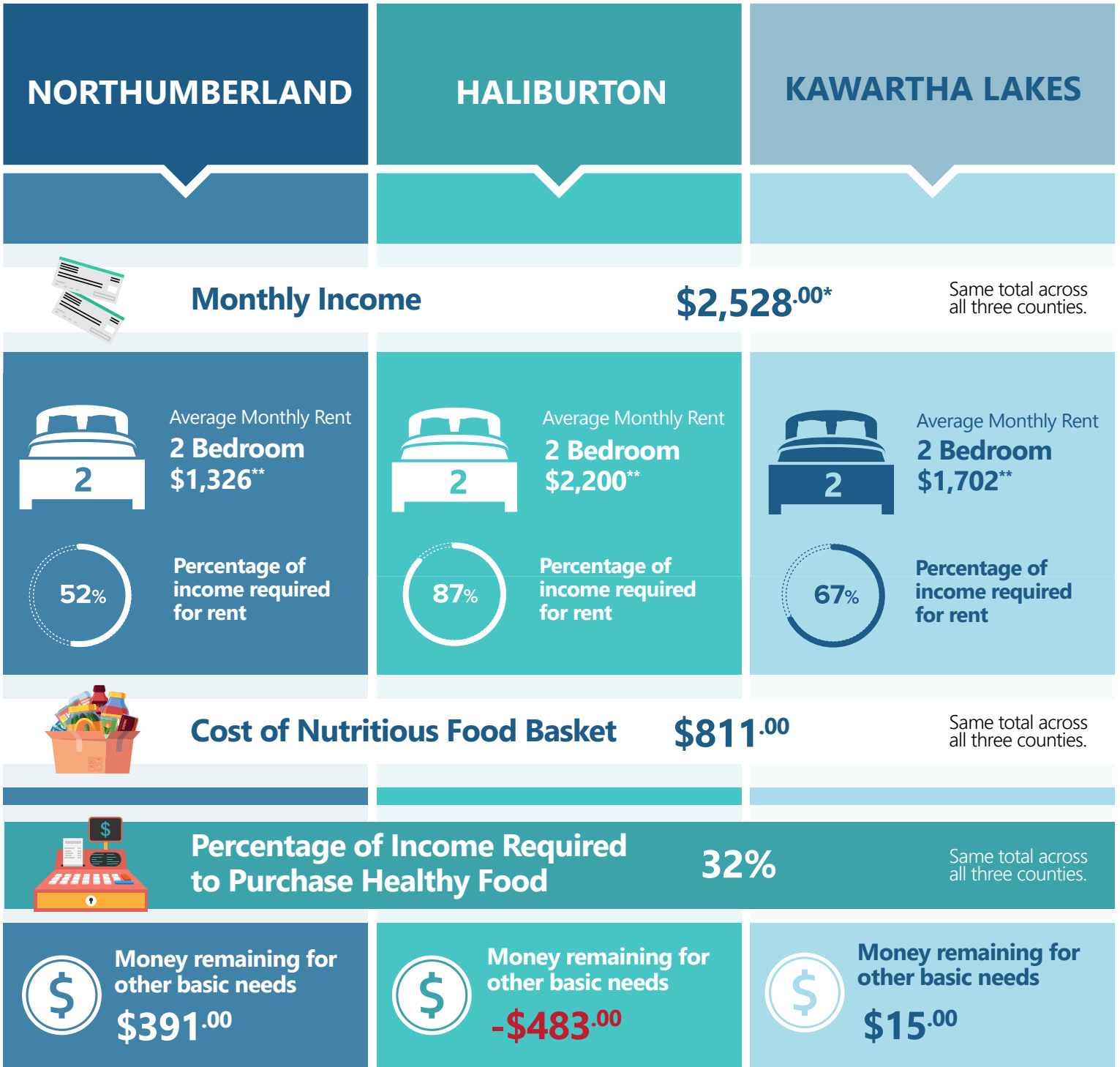
* Including credits and benefits.

** Average monthly rent may or may not include utilities.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



**Single Parent
with Two Children**
Ontario Works



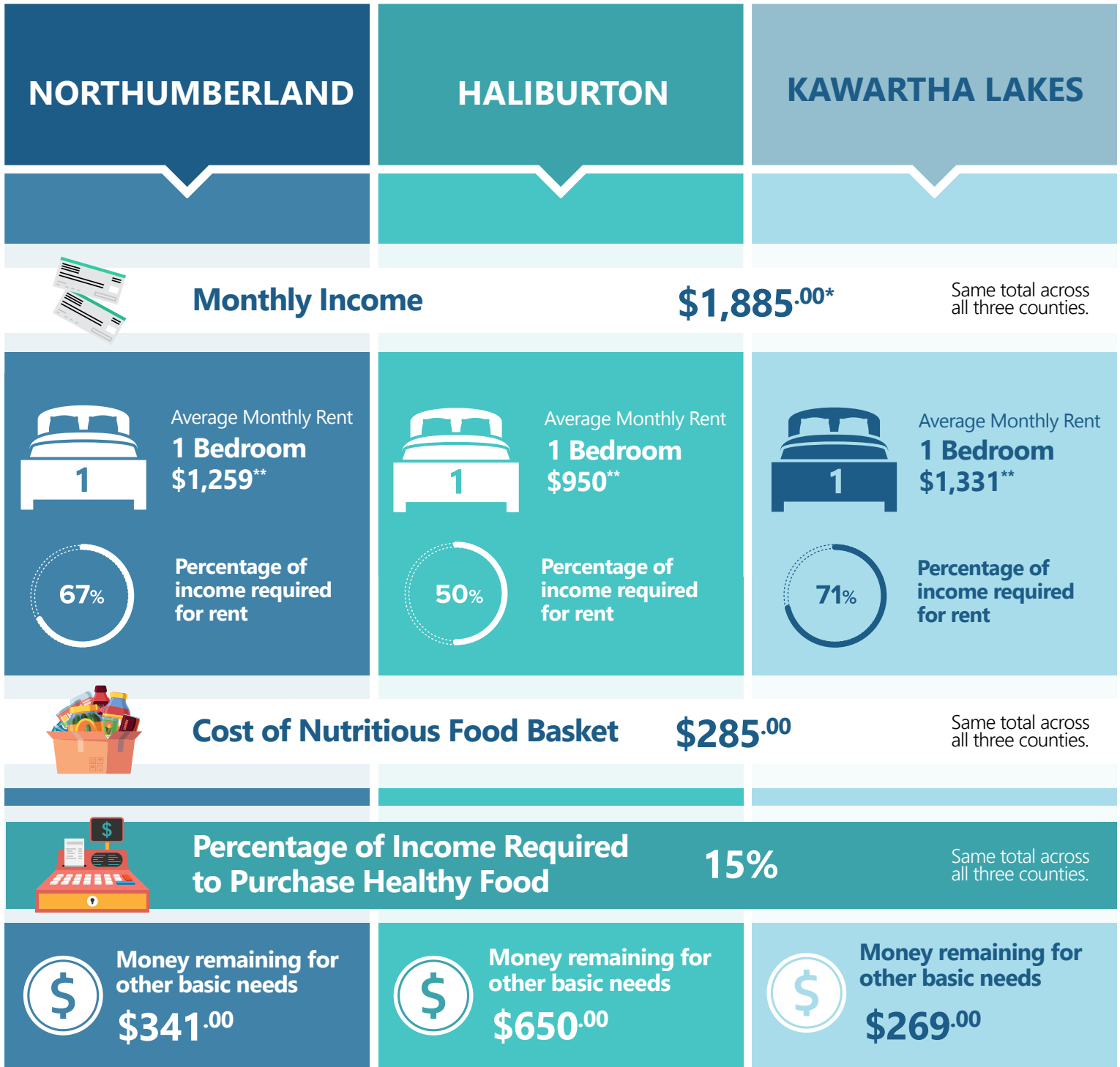
* Median income after tax, including credits and benefits.

** Average monthly rent may or may not include utilities.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



Single Senior Person
Old Age Security/
Guaranteed Income



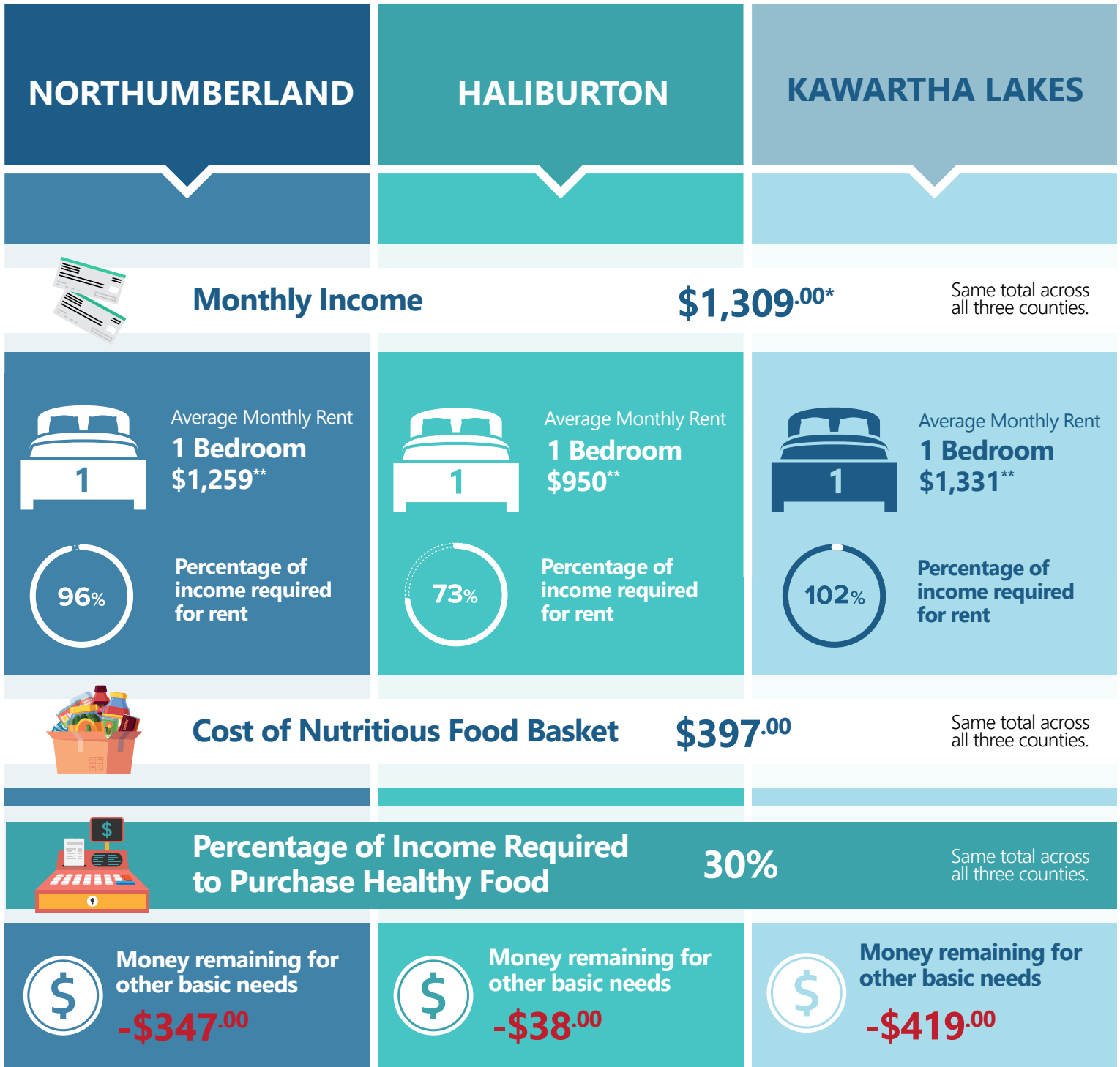
* Median income after tax, including credits and benefits.

** Average monthly rent may or may not include utilities.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



Single Adult Person
Ontario Disability Support Program (ODSP)



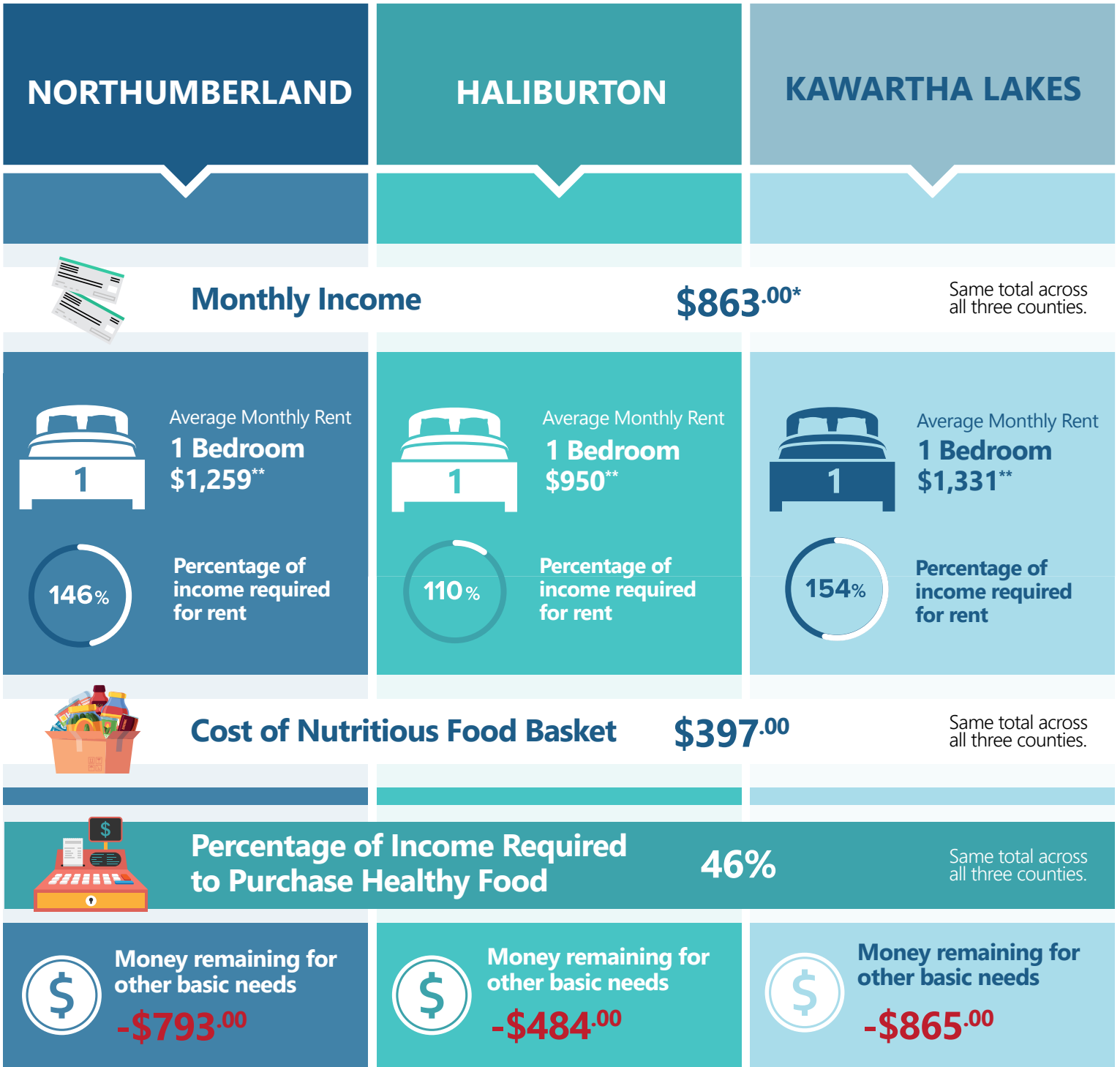
* Median income after tax, including credits and benefits.

** Average monthly rent may or may not include utilities.

Comparison of Household Incomes and Expenses for Families in the HKPR District Health Unit Area



Single Adult Person
Ontario Works



* Median income after tax, including credits and benefits.

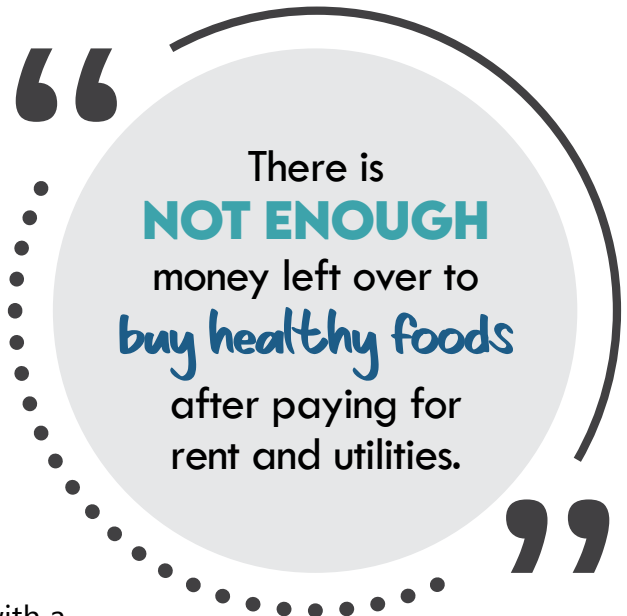
** Average monthly rent may or may not include utilities.

Food Cost is Not the Issue. Incomes Are Just Too Low.

According to the Canada Mortgage and Housing Corporation (CMHC), housing is considered affordable when rental costs make up no more than 30% of one's income⁴. However, in all of the scenarios included in this report, with exception to the family earning median income the cost of rent exceeds 30% of the household's income. What's more, vacancy rates are very low and units such as a bachelor apartment, one-bedroom, and three-bedroom apartment are difficult to find.

For many individuals and families already struggling with a limited income, they do not have sufficient funds to purchase nutritious food, let alone other basic necessities. Expenses such as food are often sacrificed over the need to stay housed.

In short, the inability to purchase food is not because food prices are too high, but because people's incomes are too low. There is not enough money left over to buy healthy foods after paying for rent and utilities.



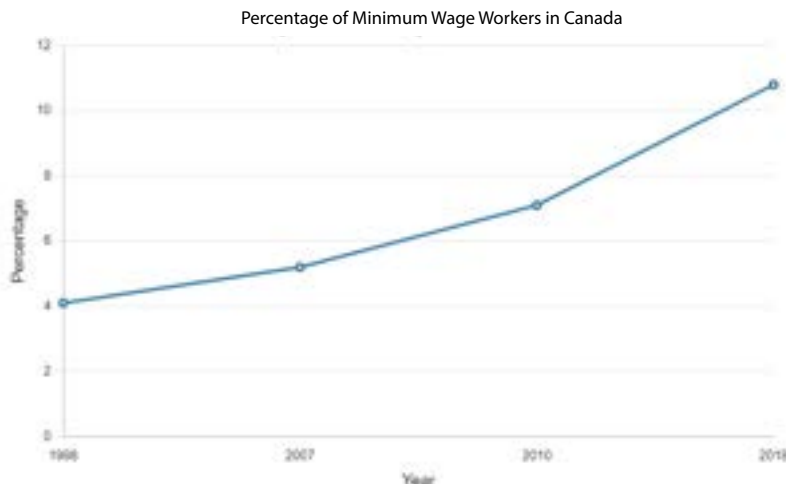
According to the Canada Mortgage and Housing Corporation, housing is considered affordable when rental costs make up **no more than 30% of one's income.**

Food Insecurity and Household Makeup

The risk of food insecurity to a household is strongly related to their source of income. Households whose main source of income is from social assistance (welfare and disability support programs) experience food insecurity in much greater proportions than households with other sources of incomes. In 2021, 63.1% of Canadian households relying on social assistance were affected by food insecurity⁵.

Contrary to popular belief, having a job or working does not protect families from food insecurity either. In 2021, 13.7% of Canadian households whose income came from wages, salaries and self-employment were also food insecure⁵. In Ontario, 48.2% of food insecure families worked jobs with wages, salaries or were self-employed⁵. This is a large number of working households that are still food insecure. Income from the jobs of these households is not enough for their basic needs⁶. It is necessary to ensure jobs pay enough and provide support for those with instable jobs, or precarious employment (see section on Improving Employment Standards).

The number of minimum wage workers continues to grow in Canada. It rose from 4.1% to 5.2% between 1998 and 2007⁷. By 2010 this number grew to 7.1%. In 2018, 10.4% of all employees earned minimum wage⁷. In 2018, 15% of minimum wage employees were from Ontario, making Ontario the province with the greatest number of workers earning minimum wage⁷.



In 2018:

15%

15% of minimum wage workers in Canada were from Ontario.

In 2021:

63.1%

Canadian households relying on social assistance were affected by food insecurity.

13.7%

Canadian households whose income came from wages, salaries and self-employment were also food insecure.

In addition to income, there are other interrelated factors that increase a household's risk of experiencing food insecurity.



38.1%

of households led by a female lone-parent were food insecure⁵.



20.9%

of households led by a male lone-parent were food insecure⁵.



25.9%

of households living in rental housing are food insecure⁵.



Households with an income earner identifying as a **visible minority**, especially Indigenous, are much **more likely to be food insecure** compared with households with a white income earner⁵. The uneven distribution rates of food insecurity reflect deeper societal issues of systemic racism and colonialism.

Food Insecurity and Health

Studies show **adults** in food insecure households are more likely to be diagnosed with a wide range of chronic conditions, including:

- >>> mental health disorders⁸
- >>> higher stress and anxiety⁹
- >>> non-communicable diseases¹⁰
- >>> infections¹¹

Research also shows that **children and teens** in food insecure households are more likely to:

- >>> have poorer health¹²⁻¹⁴
- >>> develop chronic conditions like asthma¹²⁻¹⁴
- >>> develop mental health conditions such as depression, social anxiety and suicidal thoughts¹²⁻¹⁴



When families don't earn enough, food is often the first thing to be cut so that they can pay for other necessities such as shelter, childcare, medications, utilities, etc.¹⁵⁻¹⁷.

Spending less on food means less healthy meals are eaten, if any at all. Food insecurity also makes it difficult to self-manage conditions through diet¹⁷. All this combined further worsens mental and physical health, which leads to higher healthcare costs^{10, 18}.

Food insecurity is bad for health and is a serious social and public health problem in Canada.

Food Charity Programs **CANNOT** Address Food Insecurity

Food charities, such as food banks and soup kitchens offer short-term relief for people who cannot afford to buy their own food.

The Ontario Food Bank Association acknowledges that they cannot solve food insecurity¹⁹. According to statistics, only 20% of those who are food insecure use food banks². This could be due to several reasons such as non-availability of food that meets a person's or families' personal and cultural preference²⁰⁻²¹, stigma²², geographical distance, and hours of operation. Food banks are only able to offer food to their clients once to twice a month in their municipalities, depending on the municipality²³. Further, food received by families from food banks may only last three to six days at most.

In short, while food banks and other charitable food programs do help some of the most urgent food needs experienced by a small minority of food insecure people, they are unable to address the issue of insufficient incomes, which is the root cause of poverty and food insecurity.

“
Only 20%
of those who are
FOOD INSECURE
use food banks.
”

What are food charities?

Food charities, such as food banks and soup kitchens offer short-term relief for people who cannot afford to buy their own food. **However, they are unable to address the issue of insufficient incomes, which is the root cause of poverty and food insecurity.**



ADDRESSING THE ROOT of Household Food Insecurity

To tackle the issue of household food insecurity, we need income-based strategies that address poverty. Some of those strategies include:

- >>> Increasing minimum wage to a living wage
- >>> Improving employment standards
- >>> Increasing social assistance rates
- >>> Providing a basic income guarantee



Living Wage

=
\$19.05
per hour



Minimum Wage

=
\$15.00
per hour



Workers deserve not only fair wages, but fair **WORKING CONDITIONS** that protect their *dignity, health and well-being.*

Increasing Minimum Wage

Minimum wage is a government mandated amount of money that employers must pay their workers per hour of work. Anti-poverty advocates have long voiced their concern that minimum wage is not enough to live on. Minimum wage does not provide enough money to pay rent, buy groceries, and support a family. Wages must allow households to pay for basic necessities such as housing, food, child-care, and transportation and provide for a decent quality of life.

Increasing minimum wage to the amount of a living wage²⁴ would reduce food insecurity. A living wage would allow people to pay their bills and buy healthy, sufficient food. It would also give people the opportunity to become active, contributing members to their community. The 2022 living wage for Northumberland County, the City of Kawartha Lakes, and County of Haliburton was \$19.05 per hour²⁵.

Improving Employment Standards

People who work in precarious employment not only struggle with low wages but also with the general unpredictability of their work. Precarious employment describe jobs that are temporary, part-time, contract, on-call positions, without benefits and without definite futures²⁶. Such employment is growing in the low-wage sector workforce²⁷. Unfair wages and unjust employment standards perpetuate the problem of poverty and food insecurity. Workers deserve not only fair wages, but fair working conditions that protect their dignity, health and well-being.



Increasing Social Assistance Rates

In 2020-21, there were over **595,000 cases** in Ontario's social assistance program, which includes:

36% Ontario Works (OW)²⁸ recipients

64% Ontario Disability Support Program (ODSP)²⁸ recipients

In the summer of 2022, the Progressive Conservative government announced a 5% increase to the ODSP as part of its budget and plan "to build a stronger province and economy"²⁹. The monthly benefit rates for a single adult are currently \$1,169 for ODSP and \$733 for OW³⁰. The announced increase would see an extra \$58 per month to ODSP recipients and nothing for OW recipients.

The scenarios in this report demonstrate that even with the maximum amount of tax credits and entitlements, social assistance rates are inadequate for households to live with dignity, particularly for single adults without children. Advocates have long been calling on the government to raise social assistance rates indexed to inflation to meet the soaring cost of living³¹⁻³². However, there have not been any major reforms to social assistance in Ontario for over twenty years.

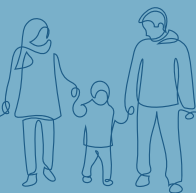


Providing a Basic Income Guarantee

A Basic Income Guarantee (BIG) is considered by many economists and researchers as an economically sound and an effective policy option to provide security, dignity and reduce poverty and inequity³³. A BIG is an unconditional income transfer from the government to individuals and families that is not tied to labour market participation. It allows everyone an equal chance to meet their basic needs, live with dignity, and participate in society.

The benefits of a BIG resulting from the savings of indirect cost of poverty and food insecurity far outweigh the cost of implementing the program. Evidence has shown BIG having positive impacts for individuals, families, communities and society as a whole³³.

There have not been any major reforms to **SOCIAL ASSISTANCE** in Ontario in **over 20 years.**



How You Can **MAKE A DIFFERENCE**



Educate Yourself

Learn more about the root causes of poverty and food insecurity. Understand that food charity programs cannot end food insecurity.

Go to www.odph.ca/centsless to learn more.



Support Income-Based Solutions to Food Insecurity

Write to your local member of parliament and member of provincial parliament and tell them that you support a basic income guarantee and increases to minimum wage and social assistance rates. Find a sample letter here:

www.odph.ca/what-can-you-do



Support Companies That Pay Their Employees a Living Wage

Talk to local businesses and choose to buy their products and services.



Be Kind and Compassionate

Everyone has their own story. Don't make judgements about people living in poverty.



References

1. [Statistics Canada. 2022. \(table\). Census Profile. 2021 Census of Population. Statistics Canada Catalogue no. 98-316-X2021001. Ottawa. Released September 21, 2022.](#)
2. [Ontario Dietitians in Public Health. No Money for food is...Cent\\$less.](#)
3. RRFSS (Jan-Dec 2019), HKPRDHU and the Institute for Social Research (ISR), York University.
4. [Canada Mortgage and Housing Corporation. Affordable housing in Canada. 2018.](#)
5. [Tarasuk V, Li T, Fafard St-Germain AA. \(2022\) Household food insecurity in Canada, 2021. Toronto: Research to identify policy options to reduce food insecurity \(PROOF\).](#)
6. [Food First NL and Proof. The minimum wage: a powerful tool to reduce food insecurity. 2022.](#)
7. Dionne-Simard D, Miller J. Maximum insights on minimum wage workers: 20 years of data. Statistics Canada Labour Statistics Research papers. Catalogue n. 75-004-M-2019003. September 11, 2019.
8. Jessiman-Perreault G, McIntyre L. The household food insecurity gradient and potential reductions in adverse population mental health outcomes in Canadian adults. *SSM -Population Health*. 2017;3:464-72.
9. Vozoris NT, Tarasuk VS, Household Food Insufficiency Is Associated with Poorer Health. *The Journal of Nutrition*. 2003;133(1):120-126.
10. Tarasuk V, Mitchell A, McLaren L, McIntyre L. Chronic physical and mental health conditions among adults may increase vulnerability to household food insecurity. *Journal of Nutrition*. 2013;143(11):1785-93.
11. Men F, Gundersen C, Urquia ML, Tarasuk V. Association between household food insecurity and mortality in Canada: a population-based retrospective cohort study. *Canadian Medical Association Journal*. 2020;192(3):E53-E60.
12. McIntyre L, Williams JV, Lavorato DH, Patten S. Depression and suicide ideation in late adolescence and early adulthood are an outcome of child hunger. *Journal of Affective Disorders*, 2013;150(1):123-129.
13. Kirkpatrick SI, McIntyre L, Potestio ML. Child hunger and long-term adverse consequences for health. *Archives of Pediatrics & Adolescent Medicine*. 2010;164(8): 754-762.
14. Melchior M, Chastang JF, Falissard B, Galéra C, Tremblay RE, Côté SM, Boivin M. Food insecurity and children's mental health: a prospective birth cohort study. *PloS One*. 2012;7(12): e52615.
15. Fafard St-Germain AA, Tarasuk V. Prioritization of the essentials in the spending patterns of Canadian households experiencing food insecurity. *Public Health Nutrition*. 2018;21(11): 2065-2078.
16. Isselmann DiSantis KI, Grier SA, Odoms-Young A, Baskin ML, Carter-Edwards L, Rohm Young D, Lassiter V, Kumanyika SK. (2013). What "Price" Means When Buying Food: Insights from a multisite qualitative study with Black Americans. *American Journal of Public Health*. 2013;103(3):516-22.
17. [Ontario Dietitians in Public Health. \(2020\). Position statement and recommendations on responses to food insecurity.](#)
18. Tarasuk V, Cheng J, de Oliveira C, Dachner N, Gundersen C, Kurdyak P. Association between household food insecurity and annual health care costs. *Canadian Medical Association Journal*. 2015;187(14):E429-E436.
19. [King A, Quan A. Hunger report 2018, a looming crisis: senior hunger in Ontario. Ontario Association of Food Banks. 2018.](#)

References cont.

20. Tarasuk V, Dachner N, Loopstra R. Food banks, welfare, and food insecurity in Canada. *British Food Journal*. 2014;116:1405-1417.
21. Loopstra R, Tarasuk V. The relationship between food banks and household food insecurity a month low-income Toronto families. *Canadian Public Policy*. 2012;38: 497-514.
22. Tarasuk V, Fafard St-Germain AA, Loopstra R. The Relationship Between Food Banks and Food Insecurity: Insights from Canada. *Voluntas*. 2020;31:841–852.
23. Tsang S, Holt AM Azevedo E. An assessment of the barriers to accessing food among food-insecure people in Cobourg, Ontario. *Chronic Diseases and Injuries in Canada*. 2011;31(3):121-128.
24. [Ontario Living Wage Network. What is a living wage.](#)
25. [Ontario Living Wage Network. Rates.](#)
26. [Poverty and employment precarity in southern Ontario \(PEPSO\) research group. Getting left behind: who gained and who didn't in an improving labour market. 2018.](#)
27. [Sekharan, V. Infographic: precarious and low-wage employment. 2015.](#)
28. [Maytree poverty rights change. Social assistance summary, Ontario. 2022.](#)
29. [Government of Ontario. Ontario's plan to build supporting stronger province and economy.](#)
30. [Maytree poverty rights change. Ontario should reinvest its savings in social assistance and raise benefits now. 2022.](#)
31. [Government of Ontario. Income security: a roadmap for change. 2017.](#)
32. [Income security advocacy centre. Open letter: Doug Ford, double social assistance rates now! 2022.](#)
33. [Basic Income Canada Network. About Basic Income.](#)