

Title: **Support for Bills S-233 and C-223 “An Act to develop a national framework for a guaranteed livable basic income”**

To: **Board of Health**

From: **Health Equity Team**

Date: **2024-09-19**

Approved by: **Dr. Natalie Bocking**

In Camera? Yes No

Overview

- Upstream income-based solutions, such as a guaranteed livable basic income, are needed to address poverty, income insecurity, and household food insecurity and their significant impacts on health and well-being.
- Opportunities exist to influence healthy public policy through support for “An Act to develop a national framework for a guaranteed livable basic income” which is currently moving through the Senate (S-233) and the House of Commons (C-223).

Recommendations to the Board of Health

THAT the Board of Health endorse Middlesex-London Health Unit’s letter supporting Bills S-233 and C-233 and that a letter communicating this endorsement be sent to the Prime Minister of Canada, Deputy Prime Minister and Minister of Finance, Minister of Health, House Leaders, Standing Senate Committee on National Finance, and local Members of Parliament.

Background

In the Haliburton, Kawartha, Pine Ridge District area, 8.7% of Northumberland households, 10.2% of Kawartha Lakes households, and 12.9% of Haliburton households, live in poverty and struggle to pay for rent, bills and healthy food [1].

When families cannot afford to buy the food they want and need to maintain good health, they are food insecure. Food insecurity is a symptom of poverty. Poverty keeps people from meeting their basic needs like housing, food, clothing, education, medication. When people are not able to meet their basic needs, they cannot achieve the physical, mental, and social well-being needed to be productive and contributing members of society.

Every year, the Haliburton, Kawartha, Pine Ridge District Health Unit (HKPRDHU) conducts the Nutritious Food Basket survey to monitor food affordability in the area. The 2023 results show that people's incomes, especially those reliant on social assistance, are not adequate to keep pace with the rising costs of housing, food and other basic needs [2].

Health Impacts of Food Insecurity and Poverty

The health consequences of food insecurity and poverty incur significant costs to Canada's publicly funded healthcare system. Adults in food insecure households are more likely to be diagnosed with a wide range of chronic conditions, including mental health disorders [3], higher stress and anxiety [4], non-communicable diseases [5], and infections [6]. Research also shows that children and teens in food insecure households are more likely to have poorer health, develop chronic conditions like asthma and develop mental health conditions such as depression, social anxiety and suicidal thoughts [7], [8], [9]. Food insecurity also makes it difficult to self-manage conditions through diet [10]. Research linking food insecurity data from population health surveys with administrative health records has provided strong evidence that food-insecure people are more likely to be hospitalized for a wide range of conditions, stay in hospital longer, more likely to be readmitted to hospital and die prematurely (before the age of 83) from all causes except cancer [11].

People living in poverty are more likely to experience poorer health, have two or more chronic conditions, be food insecure, have more injuries, be more likely to have a disability, use health care services more frequently and live shorter lives [12].

Guaranteed Livable Basic Income

Income has been identified as the most important determinant of health and relates to many other determinants including education and literacy, healthy behaviors, inadequate housing, and employment conditions [13]. Upstream income-based solutions are necessary to effectively reduce poverty and food insecurity. In 2015, the Association of Local Public Health Agencies (alPHA) endorsed the concept of a basic income guarantee as a policy option for reducing poverty and income insecurity and for providing opportunities for people with lower incomes [14].

Basic income guarantee is an unconditional cash transfer from the government to citizens to provide a minimum annual income and is not tied to labour market participation. It is an essential component of a strategy to effectively eliminate poverty, ensure all Canadians have a sufficient income to meet their basic needs, and live with dignity and to eliminate health inequities.

Existing federal policies, such as Old Age Security (OAS) and Guaranteed Income Supplement (GIS) programs for seniors, and Canada Child Benefit (CCB) for parents are forms of guaranteed income programs. These policies show evidence of positively addressing food insecurity and improving health outcomes. In a cohort of low-income, single adults over 65 years receiving OAS/GIS, the risk of food insecurity reduced by 50% compared to older adults aged 55-64 years not eligible for seniors' pensions [15]. Among families receiving CCB, the prevalence of severe food insecurity among low-income families with children decreased significantly compared to low-income families without children [16].

“An Act to develop a national framework for a guaranteed livable basic income” is currently moving through the Senate (S-233) and the House of Commons (C-223). The Bill requires “the Minister of Finance to develop a national framework for the implementation of a guaranteed livable basic income program throughout Canada for any person over the age of 17, including temporary workers, permanent residents and refugee claimants”. The framework includes measures to: 1) determine what constitutes a livable basic income for each region in Canada; 2) create national standards for complementary health and social supports; 3) ensure participation in education, training, or the labour market is not required to qualify; and 4) ensure implementation does not result in a decrease in services or benefits related to health or disability.

Senate Bill S-233 is being considered by the Standing Committee on National Finance after passing the second reading (April 2023) and House of Commons Bill C-223 was read a second time and is in the Order of Precedence after an initial debate (May 2024). The Bills require support to continue moving through the Senate and House of Commons.

Public Health Support

The HKPRDHU has provided longstanding support for income-based solutions to reduce rates of poverty and household food insecurity. In 2016, the HKPRDHU Board of health endorsed a position statement on a basic income guarantee, acknowledging that eliminating poverty is an urgent health, human rights and social justice issue that requires action on the part of the municipal, provincial and federal governments. Further, HKPRDHU Board of Health acknowledged that a basic income guarantee is an essential component of a strategy to effectively eliminate poverty and ensure all Canadians have a sufficient income to meet their basic needs.

In 2017 Lindsay was one of four cities selected to pilot Ontario's Basic Income. The premature termination of that source of income left devastating effects on recipients, who had begun to improve their physical and mental health, labour market participation, food insecurity, housing stability, financial status and social relationships [17], [18], [19], [20]. In the summer of 2018, the HKPRDHU Board of Health wrote a letter to the Premier urging for the reinstatement of the Basic Income pilot.

In 2020, HKPRDHU Board of health endorsed Simcoe Muskoka District Health Unit's letter to Prime Minister Trudeau, the Honourable Chrystia Freeland and the Honourable Bill Morneau recommending the evolution of the Canada Emergency Response Benefit (CERB) into a basic income for all Canadians, during the COVID-19 pandemic and beyond.

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