

Position Statement – Income Security

Income is a social determinant of health, and Casey House believes that adequate income is essential to health and well-being. We believe that people deserve to be viewed for their humanity amidst the challenges they face and regardless of their socio-economic position, both within and beyond our hospital. Casey House believes that all levels of government have a role to play in supporting policies and programs to ensure that everyone has an adequate level of income to meet their basic needs, and that income is not a barrier to obtaining the fundamentals people need for optimal health.

“Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.”ⁱ

– Universal Declaration of Human Rights, *Article 25*

UN General Assembly, 1948

In 2019, about 3.7 million people in Canada (10% of the population) lived below the *Official Poverty Line*ⁱⁱ (\$25,572 per year), and 1.8 million lived below the “deep income poverty threshold”ⁱⁱⁱ (\$19,179 per year). While the overall poverty rate has been decreasing in recent years, certain populations are particularly impacted: that same year, over one million working-age (18-64) adults with disabilities lived below the poverty line^{iv}; 35% of working-age single adults without children (compared to about 10% of “couple families”) lived below the deep income poverty threshold^v; and poverty is more prevalent among Indigenous, racialized, and LGBTQ+^{vi} individuals.

For decades, governments have implemented several programs and policies to tackle issues of income insecurity, however the current system of supports is convoluted; in a recent report on an in-depth analysis of the need for social policy reform in Canada, the current system has been described as “*inadequate, complex, intrusive, paternalistic and disrespectful of the very people it is intended to serve.*”^{vii} In terms of adequacy, the amount of income people receive is not enough to afford a basic standard of living, particularly with the continually rising cost of living. The cost of housing alone is high and rising relative to people’s incomes, and the housing market has not produced viable housing options for all income levels^{viii}. For instance, more than 10% of households in Canada are in core housing need^{ix} (they live somewhere unsuitable, inadequate, or unaffordable and cannot afford alternative housing in their local community).

In addition to inadequate levels of income, government social assistance programs come with high barriers to access and continue to be tied to one’s ‘employability’ – a

long-time principle that no longer aligns with the reality of today's labour market, where many low-wage jobs are precarious and temporary. Moreover, health and social supports that reduce poverty and improve income security have been insufficient, and stigma around social assistance puts up additional barriers: many landlords will not rent to people whose incomes are received through these programs^x, and some health care providers do not take on patients who receive social assistance, despite having extended health benefits through said programs.

Ontario context

- In 2021-22, one in 14 Ontarians (6.9%) under 65 received social assistance^{xi}
- In 2021-22, single adults without children comprised the majority of social assistance cases^{xii}
- In 2021, total welfare incomes for single adults without children were below both the Official Poverty Line (\$25K/year) and the deep income poverty threshold (\$19K/year)^{xiii}
- Welfare income amounts in constant dollars (adjusted for purchasing power) for single adults in Ontario have been stagnant since the mid-1990s^{xiv}
- As of October 2022, minimum wage is \$15.50/hour – below the average living wage of \$19.72/hour^{xv}

In Ontario, social assistance programs are deeply inadequate: the maximum monthly rates for a single person on Ontario Disability Support Program (ODSP) or Ontario Works (OW) are \$1,228 and \$733 respectively, for basic needs and shelter. These amounts have been stagnant for decades^{xvi} and don't help reduce poverty among those who receive supports. Even in stronger economic times, these rates are far below the poverty line^{xvii}, and are subject to “clawbacks” (a reduction in the amount of money provided) when even modest amounts of income are earned through employment, creating a “poverty trap”. Even when people have some form of housing, social assistance is still not enough to pay for food, transportation, and other basic needs, and the standard of payments being provided monthly (rather than bi-weekly) leave people vulnerable to finding other, higher risk means of having their basic needs met when their financial resources run out while waiting for the next pay period.

The extremely low levels of income, and the burdensome system that administers government income support programs, create barriers to safe and healthy living. These realities are intensified when the system of supports is challenging to navigate and/or when stigma around social assistance prevents people from accessing those basic needs. And, when the basic needs required for a modest standard of living (as per Statistics Canada's *Market Basket Measure (MBM)*^{xviii} are financially out of reach, complex physical and mental health challenges are exacerbated and have a cumulative impact on people's health and well-being. These basic needs include shelter, food, clothing and footwear, and transportation – as well as other necessary goods and services.

Examples of how the inability to afford basic needs impacts health and well-being

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| <p style="text-align: center;">HOUSING</p> <p>The absence of a safe, stable place to sleep makes it difficult to attain stability and adhere to a daily routine. As a result, chronic physical pain can intensify, emotions may become less regulated, and medication routines are easily disrupted – all of which also make it difficult for people to have the wherewithal to access available care and services. Basic furnishings such as mattresses can be prohibitively expensive, and it’s additionally stressful in cities where bed bug infestations are common.</p> | <p style="text-align: center;">FOOD & DRINKING WATER</p> <p>Lack of access to food, for which inadequate income is a key determinant, has been associated with a wide range of physical and mental health concerns including chronic conditions and infectious diseases^{xix}. The impact this has on the body and mind is exacerbated when people are immuno-compromised, and intensified when the cost is even higher for nutritious food, special diets, and culturally appropriate food. Even when community food programs are available, accessing them requires much time and effort, leaving little energy to attend to other needs.</p> |
| <p style="text-align: center;">MOBILE PHONE & INTERNET</p> <p>Without a mobile phone and reliable internet access, people are unable to follow-up on medical appointments; call 911 during medical emergencies, including when people are at risk of drug poisonings and overdoses; and stay connected with loved ones which is critical for social and emotional well-being. This reality also makes it difficult to apply for government income and housing support programs, the processes for which are increasingly online-only and require two-factor authentication.</p> | <p style="text-align: center;">TRANSPORTATION</p> <p>Even where public transit exists, it costs money and is not always affordable. As a result, people may have no option but to walk long distances to reach services. This can put additional stress on the physical body, especially for those with mobility issues, and the time it takes can also lead to missed appointments and deter people from attending to their health needs.</p> |

Systemic barriers to health and well-being have a profound effect on people’s lives, and those living at the intersection of income insecurity, chronic health conditions, and precarious housing or homelessness require sufficient income, health and social to meet their basic needs.

Calls to action

A role for all levels of government

1. We call on all levels of government to support, improve and/or invest (as applicable) in **income, health, and social supports**, including:
 - Income support policies and programs, for people of all ages, that respond to the cost of living, are indexed to inflation, and provide people with the income they need when they need it

- Voluntary trusteeship programs to help more people manage their finances and build financial stability, and financial literacy programs tailored to the needs and realities of people who are income insecure
 - A diverse range of affordable housing options and supports, including emergency shelter, transitional and/or supportive housing, social housing, and government-subsidized rental housing that is accessible for all income levels
 - Housing benefits and supplements that help people afford the cost of rent
 - Extended health benefits for people with low incomes, including through social assistance programs
 - Wrap-around services that promote physical, mental, cultural, and social well-being, alongside financial assistance
 - Engage people with lived experience of income insecurity when developing policies and programs
2. We call on all levels of government to improve (as appropriate/applicable) **access to income support programs** by:
- Designing income support programs to be accessible, simple, clear and transparent, and with a view to those who are hardest to reach
 - Integrating a judgment-free and trauma-informed approach to the administration of income support programs
 - Support people as they transition from social assistance programs to seniors' benefits

For more information about Casey House's public policy and advocacy work, and a glossary of key terms, visit caseyhouse.ca/our-insights/advocacy.

ⁱ UN General Assembly. (1948). "Universal declaration of human rights" (217 [III] A). Paris.

Retrieved from <http://www.un.org/en/universal-declaration-human-rights/>

ⁱⁱ <https://www.canada.ca/en/employment-social-development/programs/poverty-reduction/national-advisory-council/reports/2021-annual.html#h2.9>

ⁱⁱⁱ <https://maytree.com/wp-content/uploads/Recommendations-to-strengthen-the-social-safety-net-for-people-in-greatest-need.pdf>

^{iv} <https://maytree.com/wp-content/uploads/Recommendations-to-strengthen-the-social-safety-net-for-people-in-greatest-need.pdf>

^v <https://maytree.com/wp-content/uploads/Recommendations-to-strengthen-the-social-safety-net-for-people-in-greatest-need.pdf>

^{vi} <https://irpp.org/research-studies/basic-income-and-a-just-society-synopsis/>

^{vii} <https://irpp.org/research-studies/basic-income-and-a-just-society-synopsis/>

^{viii} Falvo, N. (2022). Chapter 1: What causes homelessness? In Falvo, N. (Ed.), Introduction to homelessness in high-income countries: An open access e-textbook. Retrieved from <https://nickfalvo.ca/>

^{ix} Statistics Canada. (2023). "To buy or to rent: The housing market continues to be reshaped by several factors as Canadians search for an affordable place to call home" Accessed at: <https://www150.statcan.gc.ca/n1/daily-quotidien/220921/mc-b005-eng.htm>

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- ^x <https://www.thestar.com/news/gta/2022/09/16/discrimination-in-action-people-surviving-on-social-assistance-shut-out-in-torontos-red-hot-rental-market.html>
- ^{xi} <https://maytree.com/social-assistance-summaries/ontario/>
- ^{xii} <https://maytree.com/social-assistance-summaries/ontario/>
- ^{xiii} <https://maytree.com/welfare-in-canada/ontario/>
- ^{xiv} <https://maytree.com/welfare-in-canada/ontario/>
- ^{xv} <https://www.cbc.ca/news/canada/toronto/living-wage-q-a-2022-1.6655130>
- ^{xvi} Maytree
- ^{xvii} Welfare in Canada, 2021: <https://maytree.com/welfare-in-canada/>
- ^{xviii} <https://www12.statcan.gc.ca/census-recensement/2021/ref/dict/az/Definition-eng.cfm?ID=pop165>
- ^{xix} What are the implications of food insecurity for health and health care? <https://proof.utoronto.ca/food-insecurity/what-are-the-implications-of-food-insecurity-forhealth-and-health-care/>; Public Health Agency of Canada. Key Health Inequalities in Canada: A National Portrait. Ottawa: Public Health Agency of Canada; 2018: <https://www.canada.ca/en/public-health/services/publications/science-researchdata/inequalities-housing-below-standards-infographic.html>