

March 23, 2010

Honourable Madeleine Meilleur
Minister of Community and Social Services
Hepburn Block, 6th Floor
80 Grosvenor Street
Toronto ON M7A1E9

Honourable Laurel Broten
Minister of Children and Youth Services
56 Wellesley Street West, 14th Floor
Toronto ON M5S 2S3

Ms. Gail Nyberg
Chair, Social Assistance Review Advisory Council
Daily Bread Food Bank
191 New Toronto Street
Toronto ON M8V 2E7

Dear Minister Meilleur, Minister Broten and Ms. Nyberg:

Re: Social Assistance and Health

The social assistance review is part of *Ontario's Poverty Reduction Strategy, Breaking the Cycle*. On behalf of the Ontario Public Health Association (OPHA) and the Association of Local Public Health Agencies (alPHa), representing Ontario's 36 Boards of Health and affiliates, we applaud your commitment to poverty reduction for children and their families and for undertaking this review.

Many of the things that affect the levels of health within our communities lie outside the direct control of the health sector. Many of these social determinants of health fall to the control of the Ministry of Community and Social Services and the Ministry of Children and Youth Services. It is in that context that local public health in Ontario would like to offer initial comments related to the social assistance review.

Ontario's public health sector has a long track record of addressing the social determinants of health. One example dates back to 2001, when Kimberley Rogers, a 40 year old student who was 8 months pregnant, died while on house arrest for welfare fraud. Her crime was to receive \$13,500 of annual social assistance while also in receipt of student loans. At the Coroner's Inquest, the Sudbury & District Health Unit reported on the cost of nutritious eating, which highlighted the inadequacy of social assistance rates based on local food costing done annually by the Health Unit using the Nutritious Food Basket protocol. As you embark upon the review, we remind you of the following recommendation made by the Coroner following the inquest into Ms. Rogers' death.

The Ministry of Community, Family, & Children's Services and the Ontario Works Program should assess the adequacy of all social assistance rates. Allowances for housing and basic needs should be based on actual costs within a particular community or region. In developing the allowance, data about the nutritional food basket prepared annually by local health units and the average rent data prepared by Canada Mortgage and Housing Corporation should be considered. Rationale: To ensure that social assistance rates are adequate and adjusted annually if necessary.

The coroner's recommendation is strongly supported by public health. It is our request that you recommend that the Ontario Works (OW) and Ontario Disability Support Program (ODSP) rates be revised and increased so that they are based on actual local living costs, including housing and food. The cost of food is collected annually by each of 36 health units across Ontario via the Nutritious Food Basket survey, but currently this data is not used to inform social assistance rates. The survey is based on a protocol established by the Ontario Ministry of Health and Long-Term Care. As well, OW and ODSP rates need to be indexed annually to reflect inflation, especially if, as predicted, we are entering a time of rising food costs.

The Basic Allowance includes a nutrition allowance which should meet the daily nutritional needs as determined annually by the cost of the local Nutritious Food Basket survey results, with the remainder set to enable recipients to afford other basic needs including transportation, clothing, and personal care items.

In addition, since housing costs demand the lion's share of monthly incomes, we ask that the shelter component maximum for OW clients be set at 85 – 100 percent of the median market rent for each local housing market, based on annual surveys conducted by the Canadian Mortgage and Housing Corporation.

As public health practitioners, we know that improvements in health outcomes of the more than 1.5 million Ontarians living below the poverty line will have a significant positive impact on overall population health. This will, in turn, reduce pressures on the overextended public health care system and contribute to the current government's stated goal of making Ontarians the healthiest Canadians.

In 2009, a report entitled *Sick and Tired: The Compromised Health of Social Assistance Recipients and the Working Poor in Ontario*¹ found higher rates of chronic disease and poor health in social assistance recipients when compared to the non-poor. In some cases, these rates were 7.2 times higher. Addressing and preventing poverty makes good sense: it is a long term investment in the future of Ontario's population, especially its children.

The Poverty Reduction Act 2009 requires that governments develop poverty reduction strategies at least every five years and they consult with those living in poverty. We recommend that the social assistance review, a component of the poverty reduction strategy, be undertaken based on the same principle of inclusiveness and engagement of people affected.

¹ Wellesley Institute, Community Social Planning Council of Toronto, University of Toronto. [Sick and Tired: The Compromised Health of Social Assistance Recipients and the Working Poor in Ontario](http://socialplanningtoronto.org/reports/sick-and-tired-report-released/) accessed from <http://socialplanningtoronto.org/reports/sick-and-tired-report-released/> March 15, 2010

We look forward to this review and, in particular, its adoption of local food and shelter costs that are indexed as new rates are established. We also look forward to an inclusive process that incorporates the voices and lived experiences of the thousands of Ontarians who have firsthand experience of social assistance. We hope the panel will work with those who are impacted by unemployment or disability to ensure that any proposed changes are both significant and sound.

We wish you success and speed in your deliberations. You have embarked upon critical work that will make a difference in the lives of many vulnerable Ontarians and, if done effectively, will contribute to improvements in health. You have our support and best wishes.

Sincerely,



Liz Haugh, President
Ontario Public Health Association



Valerie Sterling, President
Association of Local Public Health Agencies

/mt

- c: Sandra Laclé, Chair, Social Determinants of Health Workgroup
Rosana Pellizzari, Council of Medical Officers of Health and Member, Social Determinants of Health Workgroup Member
Connie Uetrecht, Executive Director, Ontario Public Health Association
Linda Stuart, Executive Director, Association of Local Public Health Agencies