

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health / CEO

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MONITORING FOOD AFFORDABILITY AND IMPLICATIONS FOR GOVERNMENT PUBLIC POLICY AND ACTION

Recommendations

It is recommended that the Board of Health:

- 1) Request that the Minister of Children, Community and Social Services continue to include episodic and short-term disabilities within the definition of disability for the Ontario Disability Support Program.*
- 2) Request that Bill 60, An Act to amend the Ministry of Community and Social Services Act to establish the Social Assistance Research Commission proceed to the Standing Committee on the Legislative Assembly to set evidence-based social assistance rates premised on local living costs.*
- 3) Request that Health Canada update the food list in the National Nutritious Food Basket to reflect the recommendations in the 2019 Canada's Food Guide, and develop a national food-costing protocol to facilitate consistent and effective monitoring of food affordability.*
- 4) Forward Report No. 070-19 re: Monitoring Food Affordability and Implications for Government Public Policy and Action to Ontario boards of health, the City of London, Middlesex County, and appropriate community agencies.*

Key Points

- The Nutritious Food Basket survey results for 2019 demonstrate that incomes are not adequate for many Middlesex-London residents to afford basic needs.
- Food insecurity has a pervasive impact on health, and there is a need for income-based solutions.
- Action to address food insecurity and poverty is needed at all levels of government, including support for community programs (such as the [Community Volunteer Income Tax Program](#)), monitoring food affordability, and social assistance rates that reflect the cost of basic needs.

Background and Survey Results

Food insecurity, defined as inadequate or insecure access to food due to financial constraints, is a key social determinant of health. It impacts one in seven households in Middlesex-London, with negative effects on physical and mental health that are worse among disadvantaged groups. On average, adults who are severely food-insecure cost the healthcare system 2.5 times more each year than food-secure adults.

In May 2019, the estimated local monthly cost to feed a family of four was \$916.27. Estimated food costs are a snapshot of prices at the time of data collection. In general, food is affordable for Middlesex-London residents who have adequate incomes; a family of four with a median income needs to spend only about 11% of their after-tax income on food. Households with low incomes spend up to 37% of their incomes on food – not because food costs too much, but because their incomes are too low.

Compared to 2018, Middlesex-London households today have \$2 to \$84 less remaining per month after paying for housing and food (see [Appendix A](#)). These scenarios highlight that Middlesex-London residents

with low incomes cannot afford to eat healthily after meeting other essential needs of basic living. [Appendix B](#) provides an overview of local food insecurity, income inadequacy, and related opportunities.

Opportunities

Initiatives that target income inadequacy are most effective in reducing household food insecurity. Each year, more than \$1 billion dollars in tax credits and benefits available to households go unclaimed in Canada. Free tax clinics help vulnerable community members file their taxes and apply for all eligible tax credits and benefits. Health Unit staff are working with local community partners to increase community capacity and to reduce barriers to access free income tax preparation clinics provided through Revenue Canada's [Community Volunteer Income Tax Program](#). In 2018–19, community volunteers completed 13,040 income tax returns – an increase of 170 tax returns from 2017–18.

The Government of Ontario is currently conducting a social assistance review. After significant criticism of the announcement that the [Transition Child Benefit](#) (TCB) would be canceled, the government announced that they would not cancel the TCB. As part of the review, the government also announced that the definition of disability for the Ontario Disability Support Program (ODSP) would be aligned with federal guidelines. This would make qualifying for ODSP more challenging, particularly for people with episodic or shorter-term disabilities and health conditions, including some mental health conditions. In these instances, individuals would need to rely on the lower benefit amount from Ontario Works.

In May 2019, [Bill 60, An Act to amend the Ministry of Community and Social Services Act to establish the Social Assistance Research Commission](#) was referred to the Standing Committee on the Legislative Assembly. This bill would establish an advisory group that annually recommends regional social assistance rates for Ontario based on actual costs, including food, shelter, and transportation. Similar bills have been introduced previously but have not passed the committee stage (see [Report No. 063-16](#)); however, this current bill was co-sponsored by members of both the government and the opposition. Bill 60 could improve incomes for people on social assistance, which would substantially improve health.

It is recommended that the Board of Health request that the Ministry of Children, Community and Social Services continue to include episodic and short-term disabilities within the definition of disability for the ODSP (see [Appendix C](#)). Further, it is recommended that the Board of Health request that Bill 60 proceed to the agenda of the Standing Committee on the Legislative Assembly, to set evidence-based social assistance rates that are premised on local living costs (see [Appendix D](#)).

Continuing this Important Work

Routine monitoring of food affordability helps generate evidence-based policy recommendations. In 2019, twenty-nine Ontario public health units used the Nutritious Food Basket (NFB) protocol to monitor food affordability as mandated by the Population Health Assessment and Surveillance Protocol, 2019. With the release of the new Canada's Food Guide (CFG), the types and proportions of food included in the NFB costing protocol have become outdated. Therefore, it is recommended that the Board of Health request that Health Canada update the food list in the National Nutritious Food Basket to reflect the 2019 CFG recommendations and to develop a national food-costing protocol to facilitate consistent and effective provincial/territorial and local food affordability monitoring (see [Appendix E](#)).

This report was prepared by the Healthy Living Division.



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