



Social determinants of health: A home, a job, a friend

Do you support increasing investment to prevent and address the crisis of homelessness so that every Ontarian has a safe place to call home?

Do you support raising the minimum wage to \$15 per hour on January 1, 2019?

Social determinants of health

The conditions in which people are born, grow up, work, live, and age are known as the social determinants of health.¹ The reason some people are healthy and others are not is linked to these conditions of daily life as well as the wider set of economic, political, and social systems that drive factors such as: income and its distribution; access to necessities such as food, housing, and health care; employment and working conditions; discrimination and social inclusion.^{2 3}

Nurses know that meaningful action on poverty is critical to sustaining lives, supporting health, and enabling human dignity. That is why Ontario's registered nurses, (RN), nurse practitioners (NP) and nursing students continue to implore our elected leaders to accelerate action to assist the daily struggles of 1.9 million people in the province living with low income. The most recent Statistics Canada data reports 14.3 per cent of Ontarians (or 1,945,000 persons) meet the low income measure⁴ after tax (LIM) in 2015.⁵ This is broken down as 15.8 per cent for those under 18 years; 14.2 per cent for those 18 to 64 years; and 12.5 per cent for Ontarians 65 years and over.⁶

Progressive public policy can and is making a difference. Ontario's Poverty Reduction Strategy⁷ with its investment in the Ontario Child Benefit has helped to decrease poverty for Ontarians under 18 years from 18.9 per cent in 2012 to the previously mentioned 15.8 per cent in 2015. That works out to 87,000 fewer children living in poverty over three years. A continuing challenge, recognized by the province itself, is that marginalized populations including people with disabilities, recent immigrants, persons in female lone parent families, Indigenous persons living off-reserve, and unattached individuals had significantly higher poverty rates of 32.6 per cent in 2014⁸ (compared with 13.8 per cent for all Ontarians in 2014.)⁹

A home, a job, a friend

Pat Capponi,¹⁰ well known poverty activist, author, and one of the founders of Voices From the Street (a program run by Working For Change)¹¹ says: "a home, a job, a friend" is all people need to ensure "stability, love, a safe place to live, a purpose."¹² Paid work should be a pathway out of poverty that covers basic needs, and be sufficient to provide people with the opportunity to



participate in the “economic and social fabric of their community”¹³ as a living wage aspires to do.

Affordable, inclusive housing

Record cold temperatures, dangerously overcrowded shelters, and public disputes between politicians and anti-poverty activists¹⁴ put a spotlight on the issue of homelessness during January and December. The affects of being homeless to a person's health and human dignity are devastating. To our shame as a society, mortality data in Ontario's largest city has only been officially tracked over 2017 and shows an alarming two individuals per week dying while homeless in Toronto.¹⁵ Overcrowding in the permanent shelter system contributes to deaths and hospitalizations from violence¹⁶ as well as outbreaks of infectious diseases such as streptococcus¹⁷ and influenza.^{18 19} Those unable to access a shelter bed end up in warming centres or 24-hour drop in centres that do not meet shelter standards set out by the city of Toronto or the United Nations.²⁰

With over 5,400 people in Toronto's emergency shelter system on average each night throughout December 2017 and well over 700 people at warming and drop-in centres in January 2018,²¹ people being turned away from shelters highlights the desperate need for increased shelter capacity.^{22 23} The city of Toronto's failure is not unique in the province. On any given night, it is estimated that there are about 12,000 Ontarians who are homeless and shelters across the province report being over-capacity throughout the year.²⁴ This crisis of people sleeping rough on our streets, on chairs in warming centres, or on the floor in places of worship must be addressed. Specific solutions will vary by community. In Toronto, for example, RNAO joined our members to urge the immediate opening of 1,000 new shelter beds and the opening of emergency shelters at the Fort York and Moss Park armouries.²⁵ Ottawa's shelter system has had to be creative in meeting over-capacity challenges exacerbated by the loss of beds due to a December fire.²⁶

Those who are visibly homeless are only the tip of the "affordable housing iceberg." Sadly, beneath that iceberg there are even larger numbers of people who are staying with friends or "couch surfing" (hidden homeless), living in overcrowded, substandard, inadequate housing, living in core housing need, and living in unaffordable housing.²⁷

Across Canada in 2014, 12.7 per cent of urban households were in need of affordable housing.²⁸ Ontario was the outlier province with the highest proportion of urban households in need at 16.1 per cent.²⁹ The four communities in the country that had the highest percentage of households in need were in Ontario: Peterborough at 21.8 per cent; Toronto at 19.9 per cent; Kingston at 18.7 per cent; and St. Catharines-Niagara at 17.9 per cent.³⁰



Despite over \$4 billion in provincial funding for affordable housing since 2003, wait lists have increased by 45,257 households.³¹ In 2015, there were 171,360 households across the province waiting for rent-geared-to-income housing.³² The average wait time for applicants housed in 2015 across Ontario was 3.9 years; however, the predicted wait time for recent applicants in high demand regions is 14 years.³³ Even women in Toronto who are fleeing from domestic violence (who are put on a special priority list for social housing) have an average wait of 10 months.^{34 35} This is completely unacceptable.

It is estimated that there are 35,000 Canadians who are homeless on a given night and at least 235,000 Canadians experience homelessness in a year.³⁶ Mass homelessness in Canada is the result of decisions by governments to stop investing in affordable housing. Structural shifts in the economy leading to more precarious, low-paying jobs, and reduced spending on health and social supports are also to blame.³⁷ Over the last 25 years, Canada's population has increased by almost 30 per cent but annual national investment in housing has decreased by over 46 per cent.³⁸ In 1989, the per capita spending on federal housing investments was \$115 per Canadian but by 2013, that figure dropped to just over \$60 per person (in 2013 dollars).³⁹ To make things even worse, existing social housing is being condemned⁴⁰ or at risk of being closed^{41 42} due to neglected repairs of the aging social housing stock.

As RNAO recommended to the Ministry of Municipal Affairs and Housing in 2015 when it was updating the province's Long-Term Affordable Housing Strategy, one way to reverse this trend is to invest one per cent of the province's budget in affordable housing. The money will help create new housing stock and address the backlog of existing affordable housing units in need of repair.⁴³ In 2014, the Ontario Non-Profit Housing Association calculated that a provincial commitment of \$1.3 billion per year, over 10 years (or roughly one per cent of province's annual budget), would be needed to assist households in need of better housing and to help address homelessness.⁴⁴ One per cent of Ontario's budget is about \$1.5 billion.⁴⁵

The ability to access affordable housing must be extended to every Ontarian who needs it, including people with physical, sensory, cognitive (including developmental) and learning, mental-health, and acquired-brain injury disabilities. Universal design in the built environment is increasingly recognized as a cost-effective, sustainable best practice critical to accessibility and ease of living for everyone as our population ages.^{46 47} Meanwhile, people looking to buy barrier-free houses find that supply is scarce⁴⁸ and even progressive developments such as the Toronto's Regent Park's 2,083 social housing units and 5,400 market-rate apartments were not designed for people with any type of disability.⁴⁹

The cost of not having affordable housing and adequate health and social supports can take its toll on individuals, families, and communities. The status quo, which has resulted in high rates of homelessness, also generates high financial costs for society. A recent economic analysis found



that the average annual cost of health, social, and criminal justice services per homeless person with mental illness in five Canadian cities averaged \$53,144, with Toronto being the highest at \$58,972.⁵⁰ The Mental Health and Addictions Leadership Advisory Council's 2016 recommendations include urging the province to create at least 30,000 units of supportive housing over 10 years for people with mental health and addiction issues.⁵¹

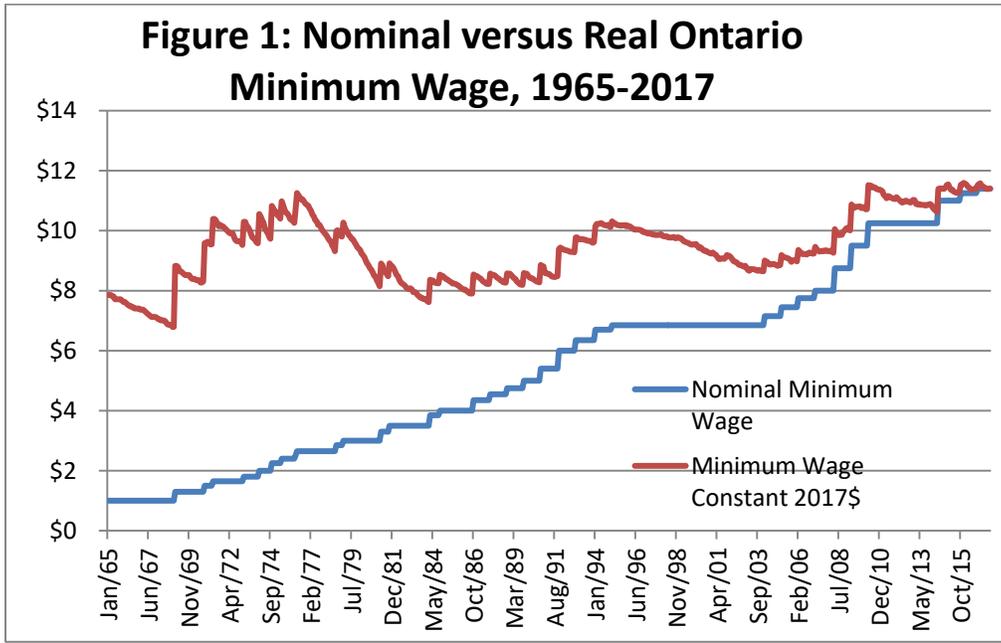
Preventing homeless by addressing poverty, income insecurity, direct and systemic forms of violence, including all forms of discrimination⁵² is crucial. To prevent and address chronic homelessness, it is also essential to close critical service gaps in mental health and addiction services. Investments must be made to provide all Ontarians with high quality and accessible mental health and addiction services.⁵³ Harm reduction, supervised injection services, and overdose prevention services also need investment to address the current overdose crisis.

Raising the minimum wage to \$15 per hour

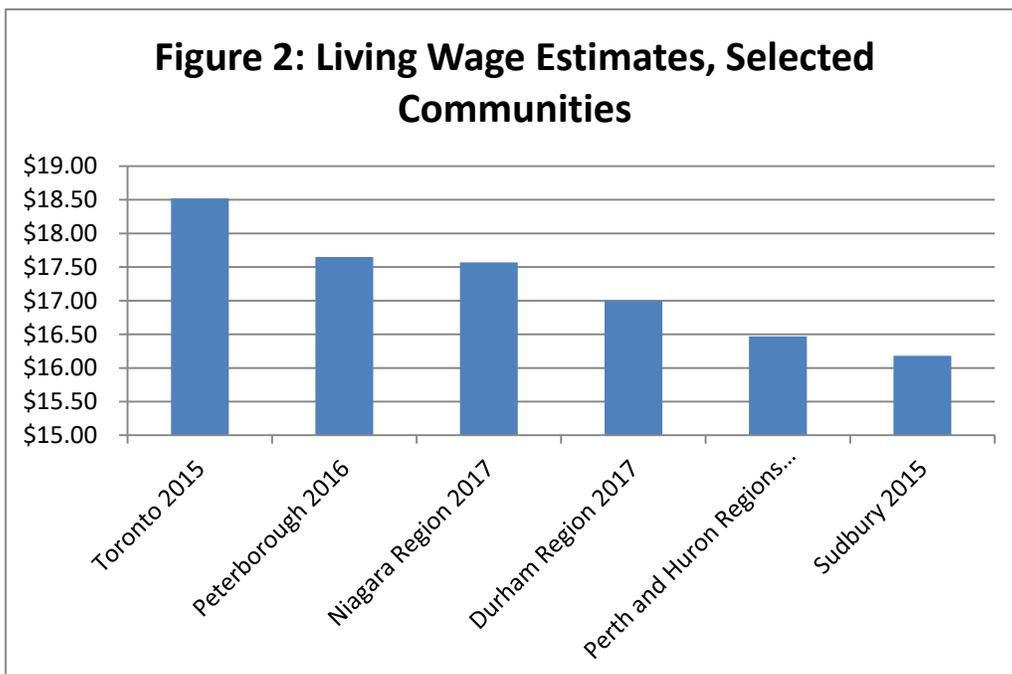
The Ontario government can be credited for introducing and passing Bill 148, *Fair Workplaces, Better Jobs Act, 2017*⁵⁴ to address issues with the province's outdated employment and labor laws. With precarious employment as the "new norm",⁵⁵ it is critical that employment and labour standards be strengthened and enforced to address social stress across the income spectrum. While RNAO has commented extensively on the need for labour reform,^{56 57 58} the focus of this backgrounder is to reinforce RNAO's support for Bill 148's planned minimum wage of \$15 per hour on January 1, 2019 with annual inflation adjustments thereafter.⁵⁹

Ontario's nominal⁶⁰ minimum wage in 1965 was \$1 an hour, which was 42 per cent of Ontario's average industrial wage.⁶¹ There have been gradual increases in the minimum wage except for a nine-year period from 1995 to 2004 when it was frozen at \$6.85 per hour and a four-year period from 2010 to 2014 when it stood unchanged at \$10.25 per hour.

While the nominal minimum wage trend shown in Figure 1⁶² may appear to be positive, the picture is less rosy once adjusted for inflation. Despite productivity gains,⁶³ the real minimum wage in 2017 isn't that much different than the mid-1970.⁶⁴



For comparison purposes, let's consider what workers actually need to get by. As shown in Figure 2, an increasing number of communities^{65 66 67 68 69 70} in Ontario are calculating the living wage to reflect what a family of four would need to “meet its basic needs, participate in the economic and social fabric of their community, and purchase items that can help them escape marginal subsistence.”⁷¹ There is a significant mismatch between the living wage and minimum wage, as well as rates for Ontario Works and the Ontario Disability Support Program.





Public health units across the province continue to document the gap between the cost of nutritious food and shelter in the context of low social assistance rates and precarious, low paid employment. Let's look at the Perez and Smith families,⁷² for example, who live in Toronto:

Cheryl and Raoul Perez are married with two children – ages 8 and 14. Cheryl has not been able to keep a steady job due to her depression. Raoul works in retail, and earns minimum wage. He brings in \$1,976 a month in wages. Their three bedroom apartment is \$1,544 per month and does not include hydro. The Perez family spend 47 per cent of their monthly income on rent and 26 per cent on food. That leaves them \$868 each month to cover other basic needs such as transportation, child care, household and personal care items, and clothing. Their situation would be much worse without the \$1,115 they receive each month for the Canada Child Benefit.

In comparison, a neighbouring family of four with a median income, the Smiths, who have two children of the same age and who both work have a combined income of \$7,992 per month from employment after taxes. They spend 20 per cent of their income on rent, 11 per cent of their income on food, and have \$5,496 left each month.

Low wages, inadequate social assistance rates, and high shelter costs mean that a significant number of Ontarians go hungry. Put simply, their health is compromised because of food insecurity. According to the Canadian Community Health Survey, there were 594,900 food insecure households in Ontario in 2014.⁷³ Income is the strongest predictor of food insecurity so as can be expected, the probability of food insecurity rises as household income declines.⁷⁴ Households depending on dangerously low social assistance rates are particularly vulnerable. In 2014, the proportion of households reliant on social assistance who were food insecure in Ontario was 64 per cent.⁷⁵ Proof that having a job is not a guarantee for being able to get by is that the majority of food insecure households in Canada (62.2 per cent) were reliant on wages from employment.⁷⁶ In 2014, the proportion of food insecure households reliant on wages and salaries in Ontario was 58.9 per cent.⁷⁷ Unfortunately, Ontario has not been able to monitor trends in food insecurity since then as the province opted not to include it as part of the Canadian Community Health Survey for 2015 and 2016.⁷⁸ It is critical that the province be able to track food security as a key determinant of health as a means of evaluating the impact of implemented and proposed changes such as the Ontario Poverty Reduction Strategy,⁷⁹ Ontario Basic Income Pilot,⁸⁰ Changing Workplaces Review,⁸¹ and Income Security: A Roadmap for Change.⁸²

The minimum wage must apply equally without exemptions by age or sector. Ontario is the only province/territory that permits employers to pay a lower minimum wage to young workers.⁸³ In addition, the vast majority of jurisdictions in Canada (except for British Columbia, Ontario, and Quebec) do not allow a lower wage for those who serve liquor.⁸⁴



RNAO's SOCIAL DETERMINANTS OF HEALTH ASKS

- Work with other levels of government to ensure adequate shelter space in communities across the province to address the crisis of homelessness
- Invest in mental health, addiction, and harm reduction services to prevent and address chronic homelessness
- Create at least 3,000 units per year of supportive housing for people with mental health and addiction issues over the next ten years
- Invest one per cent of Ontario's budget (\$1.5 billion) to address the backlog of existing affordable housing units in need of repair and to create new affordable housing stock
- Amend the building code to require all new multi-unit buildings incorporate the principles of universal design for accessibility and visitability
- Increase the minimum wage to \$15 per hour on January 1, 2019 with annual inflation adjustment every year thereafter, without exemptions by age or sector



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