



Monitoring Food Affordability in Grey Bruce



**THE COST OF EATING WELL &
THE URGENT ISSUE OF FOOD INSECURITY**

2024

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Food insecurity is:

- When people cannot afford the food their household needs. (1)
- A range of experiences, from people worrying about running out of food before they can afford more, to compromising food quality, to skipping meals or eating less because of not having enough money.
- A serious and growing public health issue and social determinant of health.
- Best addressed through an income response.

Household food insecurity is not hunger or malnutrition. Food insecurity can not be solved by giving people food.

Food insecurity is a warning sign

Food insecurity is a sign that a household does not have enough income to meet basic needs. They may be missing mortgage payments or rent payments, not filling necessary prescriptions, or not able to pay for gas or other transportation costs.

18.3%

of Grey Bruce households experienced Food Insecurity in 2021-2023.¹²



Food insecurity has serious, lasting, and costly health consequences.

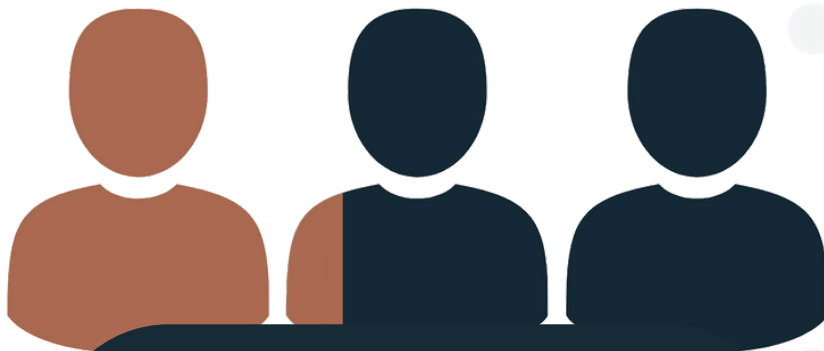
Experiencing food insecurity increases the risk of infectious diseases, early mortality, and chronic diseases like heart disease, high blood pressure, type II diabetes, and chronic pain. (1,2)

Across the lifespan, food insecurity leads to a higher risk of poor mental health in households that have experienced food insecurity.

- Children are more likely to experience persistent anxiety, depression, hyperactivity, and inattention. They are also more likely to have low self-esteem and lack the self-efficacy to make healthy lifestyle choices. (1,2)
- Adolescents and young adults are at greater risk for depression and related suicidal ideation (1,2)
- Adults report poorer mental health including depression, anxiety, and postpartum mental health disorders (1,2)

Food insecurity can act as a source of toxic stress and Adverse Childhood experiences (ACEs) which can affect brain development in the early years. ACEs are associated with long-term consequences for both physical and mental health.

Healthcare use and costs are influenced by food insecurity. Adults living in food insecure households account for more than 1 in 3 hospitalizations due to mental health problems (1). Ineffective policy responses to food insecurity result in considerable public spending on health care.



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Public Health Unit Role in Monitoring Food Affordability:

The **Ontario Nutritious Food Basket (NFB)** is a survey tool used by public health to monitor food affordability. Surveyors collect data on 61 food items in grocery stores across their region to estimate food costs. In 2024, twelve grocery stores in Grey Bruce were surveyed.

The NFB assumes people have the equipment, time, knowledge, and skills to access, prepare, and store the foods on the list. Transportation is a common barrier in rural areas and is not accounted for in the NFB. The foods costed are simple, unprocessed, or minimally processed options that result in a modest estimate of food costs.

The NFB does **not** include:

- Highly processed, ready-to-eat foods
- Convenience snack foods
- Foods for religious, cultural, celebratory, or special dietary requirements or preferences (including costs associated with traditional food procurement practices)
- Infant food or formula
- Takeout or restaurant food

This data helps public health demonstrate systemic inequities related to food insecurity.



61 food items monitored.



12 grocery stores surveyed.

Food affordability is influenced by household income and expenses.

These scenarios show how **not all households experience the rising cost of food in the same way**. Low-income households do not have enough money to meet basic needs.

RENTAL MARKET HOUSING RATES

The NFB Scenarios use housing data collected by the Canadian Mortgage and Housing Corporation (CMHC) Rental Market Survey in the fall of 2023 and are estimates only. This data is collected from communities with populations of at least 10 000 and buildings with at least 3 rental units. Utility costs (e.g., heat, electricity, water) may or may not be included in the rental amounts.

In Grey Bruce data is collected for Kincardine, Meaford, Owen Sound, and Saugeen Shores. The CMHC does not publish a statistic if its reliability is too low or if publication of a statistic would violate confidentiality rules. Due to data suppression across most Grey Bruce communities, rental rates for bachelor were omitted and replaced with the one-bedroom average in two scenarios below.

New tenants are likely paying higher rents than the CMHC survey reflects. Ontario's residential rent increase guideline does not apply to new units or new lease agreements, without this protection rental rates for these units can be significantly higher. (3,4)

The *Rural Ontario Institute* has recently published a series of housing dashboards to improve understanding of the realities of rural housing. Housing affordability varies across Grey Bruce municipalities, with 11 -24% of shelter costs exceeding 30% of a household's income. (5)

Social Assistance is Not Meeting Basic Needs.



52% of households in Ontario requiring any social assistance are food insecure (1).

Despite this, social assistance remains an important policy lever to counter food insecurity. For example, evidence demonstrates a 5% reduction in severe food insecurity by increasing the annual social assistance or welfare income by \$1,000. (6)

The following scenarios compare monthly incomes for a variety of households to the NFB results for the monthly cost of food and rental market housing rates.



Single person households

- Working aged adults qualify for few supports. The poverty that results is a policy choice.
- The basic allowance and maximum shelter allowance for a person on Ontario Works is not enough to pay for housing let alone other basic needs.
- People receiving Ontario Disability Support (ODSP) can get more money per month than those receiving Ontario Works, but ODSP income is still not enough to meet basic needs, including foods that help manage their disability.
- Rates of food insecurity drop by nearly one half for adults over 65 years old (7). This is because the Old Age Security Pension (OAS) and Guaranteed Income Supplement (GIS) provide a higher income floor than those available to working age adults. With the rising cost of living, older adults on fixed incomes are finding it more and more challenging to make ends meet.

	Single Person Household				
Program/circumstance	Ontario Works	ODSP	Pregnant Person, ODSP	Part Time Worker in the Gig Economy	OAS/GIS
Income	\$885	\$1469	\$1509	\$1699	\$2073
Rent (One Bedroom)	\$947				
Food	\$433.77	\$433.77	\$460.38	\$433.77	\$310.16
Remaining Funds	-\$495.77	\$88.23	\$101.62	\$318.23	\$815.84



Small households (two to three persons)

- Basic needs are unaffordable for minimum wage earners or those receiving social assistance, even with the maximum tax credits and entitlements. This can be changed through policy. Until changes are made, income tax filing remains critical for households to receive available tax credits and entitlements.
- Female-led single parent and lower income households are vulnerable to food insecurity. In 2022, 41.2% of households with children led by female lone parents were food-insecure. (1)

		Small Households		
Program/circumstance	Couple, ODSP	Single Parent with Two Children, Ontario Works	Single Parent with Two Children, Full-Time Minimum Wage Earner	Single Parent Household, Two Children Under 6, Ontario Works
Income	\$2609	\$2677	\$4663	\$2870
Rent (One Bedroom)	\$947	\$1285		
Food	\$721.37	\$932.46	\$731.51	\$731.51
Remaining Funds	\$940.63	\$459.54	\$2646.49	\$853.49



Family of Four households

- A little more than half of food-insecure households in Ontario (58.6%) earned their main source of income from wages, salaries, or self-employment incomes. (1).
- Employers offering living wages are contributing to the wellbeing of their employees and community by taking steps to ensure basic needs can be met through employment. Research conducted by PROOF showed a 5% reduction in household food insecurity was achieved by increasing minimum wage by one dollar. (6)
- Refugee claimants are not eligible for the same benefits as other households in Canada. This means additional financial strain and uncertainty as they navigate the refugee claimant process and adjust to life in Canada.

Family of Four Household				
Program/circumstance	Ontario Works	Full-Time Minimum Wage Earner	Median Income (after tax)	Family of Four Refugee Claimants, Full-Time Minimum Wage Earner OAS/GIS
Income	\$2916	\$4515	\$9685	\$3246
Rent (Three Bedroom)	\$1352			
Food	\$1249.54			
Remaining funds	\$313.96	\$1912.96	\$7082.96	\$643.96



Recommendations

We all have a role in addressing poverty as an underlying cause of household food insecurity. Federally and provincially, governments must strengthen income supports to ensure we can all meet our basic needs and live with dignity.

We urge the federal government to:

- **Implement income-related policy interventions** that have the potential to reduce food insecurity.
- **Establish targets for the reduction of household food insecurity** and regularly report progress.
- **Conduct timely and regular measurement, analysis, and reporting on the prevalence and severity of food insecurity in all provinces and territories** in a manner that reflects anti-racist and anti-colonial principles.
- **Work towards food self-determination and food security in Indigenous communities** by recognizing Indigenous Food Sovereignty and emphasizing local solutions led by Indigenous Peoples.
- **Expand access to and automate income-tax returns** for low-income Canadians.

Across Ontario, food insecurity is rising from 17% of households in 2019 to 24.5% in 2023 (PROOF Food Insecurity Policy Research, 2024), and children and youth are being disproportionately affected. **In 2023, 30.7% of Ontario children under 18 years of age in Ontario lived in households affected by some level of food insecurity** (13). Immediate action is needed to reverse this trend.

We urge the province to:

- **Establish a Social Assistance Research Commission** to determine evidence-based social assistance rates based on local/regional costs of living, including the cost of food informed by ONFB data collected by public health units.
- **Set minimum wage and social assistance (OW and ODSP) rates** to reflect the real costs of living
- **Support those working toward leaving the OW program by reducing claw backs** of income earnings and indexing OW rates to inflation.
- **Lower the income tax rate** for the lowest-income households.
- **Develop a poverty reduction strategy that includes targets for reduction of food insecurity**, as well as policy interventions that improve the financial circumstances of very low income households.

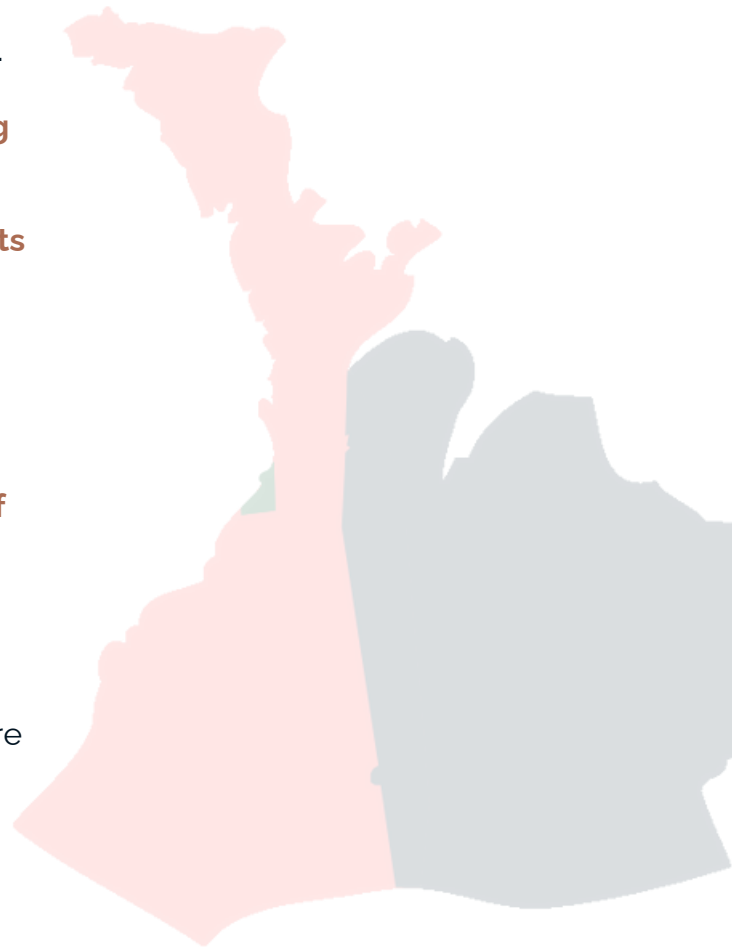


Municipal & Community Partner Action:

Municipalities and community partners can demonstrate leadership through policies and interventions aimed at improving the financial circumstances of low-income households by directly, or indirectly, increasing the amount of money people have available for food and other necessities.

We urge the municipalities and community partners to:

- **Work with local partnerships and coalitions to help advance policies** aimed at increasing the income of low-income households.
- Create a municipal/local poverty reduction strategy.
- **Improve community awareness and understanding of food insecurity** and build support for action.
- **Reduce barriers to access and increase investments in local public programs and services** to make life more affordable for community members.
- **Support free income-tax filing programs** for low-income households.
- Contribute to the calculation and **implementation of the region's living wage**.
- **Advocate for federal and provincial government policies (e.g., increases to income tax credits for low-income households) and programs** (e.g., basic income guarantee) to ensure an adequate and secure income for all in Canada.
- **Engage meaningfully with local Indigenous communities and organizations to understand health inequities experienced by Indigenous Peoples.** This includes understanding what food security and food sovereignty mean to them, learning about diverse local assets and needs, and prioritizing support for and collaboration around Indigenous-led food related activities. (10).



We need to **change** how we speak about food insecurity



Food insecurity conversations and media coverage are often framed within a food charity model. There is a widespread misunderstanding of what it means to be food insecure and how we can prevent and respond to food insecurity.

Presenting food charity as a solution to food insecurity is harmful misinformation that reduces support for real solutions. Food charity cannot be expected to fix an income problem.

Grey Bruce Public Health recognizes the challenges of clear messaging on complex issues. We encourage community partners, including the Media, to consider the following when participating in conversations on food insecurity:

- **Household food insecurity is a sensitive marker of material deprivation** and is exacerbated by compounding systemic inequalities like racism, colonization, and gender-based discrimination.
- **The term food insecurity should not be used interchangeably with hunger.** Doing so is harmful because although hunger may be resolved with food, food insecurity cannot be. Hunger is a normal physiological response. Food insecurity is the result of systemic inequities. When the term is used in place of food insecurity, we encourage the idea of a food-based solution which has been demonstrated to be ineffective.
- Food security is a key social determinant of health that **requires collaborative responses from public and private sectors.**
- **Households who struggle to pay for food also struggle to pay for the other costs of living**, like housing, medications, clothing, utilities, and transportation.
- **Income responses can involve a variety of strategies** including: economic, social and equity solutions and supports.



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Parts of this report are adapted from The 2022 Cost of Eating Well by North Bay Parry Sound District Health Unit.

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