

Addressing Household Food Insecurity within Canada's Poverty Reduction Strategy

Submission to HUMA
by Dietitians of Canada

March 3, 2017

Dietitians of Canada (DC) is the national professional association for dietitians, representing almost 6000 members at the local, provincial and national levels. Our mission is to support evidence-based best practice in dietetics and to advance the profession's unique body of knowledge of food and nutrition. DC provides leadership in shaping nutrition policy that supports healthy eating and promotes the health of Canadians at the national, provincial and local levels.

All households in Canada must have sufficient income for secure access to nutritious food after paying for other basic necessities. Since the root cause of household food insecurity is inadequate and/or insecure income, solutions must be income-based. Only with sufficient income can a household have consistent access to food. **It is the position of Dietitians of Canada that household food insecurity is a serious public health issue with profound effects on physical and mental health and social well-being. It is likely that the presence of food insecurity within a household is a more sensitive marker for health risks than poverty or an annual income that is considered low. For these reasons, any strategies to reduce poverty and improve incomes must include measurement of household food insecurity as part of the evaluation of impact and outcomes.**

Dietitians of Canada recommends:

1. Development and implementation of a pan-Canadian government-led strategy that includes coordinated policies and programs, to ensure all households have consistent and sufficient income to be able to pay for basic needs, including food. The strategy should consider:

- sufficient income protection for low income households relying on precarious employment and low wages
- improved benefits for households with children under 18 years, especially households led by a lone parent
- improved benefits for low income, unattached individuals
- increased social assistance and disability pension rates to ensure individuals and their households have enough income to pay for basic needs, including food
- investigation of the feasibility of a guaranteed annual income that ensures all vulnerable households can have access to sufficient income assistance to meet basic needs
- more investment in subsidized, affordable and stable housing options, including the provision of housing for individuals/households who are homeless
- financial assistance that equitably addresses the higher cost of food in remote and northern regions of Canada, whether through Nutrition North Canada or other programs.

2. Implementation of a federally-supported strategy to comprehensively address the additional and unique challenges related to household food insecurity among Indigenous Peoples, including:

- commitment to reconciliation (as recommended by the Truth and Reconciliation Commission and the United Nations Declaration on the Rights of Indigenous Peoples), including assurance of household food security and food sovereignty
- fair resolution of disputes over access to lands and resources recognized by Indigenous and Treaty rights, to ensure food sovereignty and access to traditional/country foods by Indigenous Peoples

- sufficient supports to remove barriers for Indigenous Peoples who are hunting, fishing or gathering/cultivating traditional/country foods
- improved access to and ability to afford healthy store-bought or market foods in all First Nation reserves and northern and remote communities where food prices are substantially higher than elsewhere in Canada, with equitable community eligibility for Nutrition North Canada subsidies and/or other programs to address household food insecurity among Indigenous Peoples
- sufficient supports to improve opportunities in education and employment, for equitable income adequacy and security among Indigenous Peoples compared to other groups within Canada.

3. Commitment to mandatory, annual monitoring and reporting of the prevalence and severity of household food insecurity in each province and territory across Canada, including among vulnerable populations.

Measurement of household food insecurity must be included in impact/outcome evaluation of strategies to reduce poverty and household food insecurity. Features of data collection and reporting should include:

- mandatory annual data collection using a standardized tool such as the HFSSM, with sufficient sampling to measure the prevalence and severity of household food insecurity in vulnerable populations across all regions of Canada; some longitudinal studies would provide valuable information, in addition to cross-sectional surveillance.
- regular analysis and public reporting of household food insecurity in Canada, with comprehensive detail by geographic regions and vulnerable populations, using a framework for household food insecurity categories that includes marginal food insecurity as part of the total of food insecurity and identifies severity of household food insecurity at the levels of marginal, moderate and severe food insecurity. Data analysis and reporting should be coordinated to maximize capacity to compare data from all studies.
- regular evaluation of the impact of poverty reduction and other strategies to reduce household food insecurity (measured by the HFSSM) and improve selected population health indicators, with adjustments in policy to maximize reach and impact. For example, the effectiveness of government subsidy of food prices in Nutrition North Canada communities should be monitored and adjusted to ensure reduction of the alarmingly high rates of household food insecurity in these regions.
- protocols for screening within in the health care system to identify household food insecurity and poverty (as well as malnutrition) among individual health system users.

4. Support for continued research to address gaps in knowledge about populations experiencing greater prevalence and severity of household food insecurity and to inform the implementation and evaluation of strategies and policies that will eliminate household food insecurity in Canada. Research is needed on topics such as:

- factors contributing to increased vulnerability amongst populations experiencing disproportionately more food insecurity within their households
- the costs and benefits of different policy responses such as basic income guarantee and other income-based strategies, including social, political and healthcare costs
- outcome evaluation following implementation of public policy and poverty reduction strategies in Canada, especially the measured impacts on household food insecurity and health of individuals within the population.

Background

What is household food insecurity?

Household food insecurity is a condition in which a household's access to food is inadequate or precarious because of inconsistent income or insufficient financial resources. Degrees of household food insecurity vary from *marginal* (worried about running out of food and/or experiencing income-related barrier(s) to accessing adequate food, to *moderate* (compromising the quality and/or quantity of food consumed due to a lack of money) to *severe* (missed meals and reduced food intake) – but any level of food insecurity can adversely impact health.

Many people in Canada experience household food insecurity.

One in eight (12.6%) Canadian households, a total of almost 4 million adults and children, experienced household food insecurity in 2012. The prevalence and severity of household food insecurity is very high in northern Canada, particularly in Nunavut, where 45.2% of households were food insecure, including 18.5% with severe food insecurity. The greater prevalence and severity of household food insecurity among Indigenous Peoples has been associated with lower incomes, inequities in education and housing, as well as unique challenges of accessing traditional/country foods, lands and resources, and store-bought foods (often higher cost in many Indigenous communities, in spite of programs such as Nutrition North Canada), and safe drinking water.

The underlying cause of household food insecurity is financial constraints – not having enough money to pay for food.

Almost two-thirds of food insecure households in Canada are “working poor” households with low wages/salaries or self-employed, including part-time work and precarious employment. Among households reliant on income from government sources, such as Employment Insurance, Workers' Compensation and social assistance, the rate of food insecurity is 4 to 6 times higher than that of the average waged/salaried households – since these incomes are also low. Unexpected financial or budget shocks, resulting from job loss, salary reduction, reduced work hours, inability to work due to a health condition, unexpected household expenses for medication or legal fees and/or increased housing costs, can cause household food insecurity for short periods of time and/or lead to persistent household food insecurity.

The experience of food insecurity within one's household at some time in the past year is likely a more accurate and sensitive indication of inadequate financial resources than typical indicators of poverty based on average annual income. Measured decreases in the prevalence of household food insecurity are an indication of successful policies that support adequate income on a consistent basis.

Individuals living in food insecure households have more health problems and use more health care services.

Extreme differences or inequities in income and wealth have negative health consequences for people living in poverty. The experience of household food insecurity is associated with a greater likelihood of having one or more chronic physical and/or mental health conditions (about 1.5 to 3.5 times more likely) and of becoming a ‘high cost user’ of health care services within the next five years (about 1.5 times more likely). It has been estimated that an increase of \$1,000 annually to the income of the poorest 20% of Canadians would lead to 10,000 fewer chronic conditions and 6,600 fewer disability days every two weeks.

The cost of *not* successfully addressing household food insecurity is high.

The prevalence of poverty is a serious public health issue and the costs affect all Canadians. The additional cost of poverty in the Canadian health care system was estimated to be \$7.6 billion per year, using data from 2007. At that time, it was estimated that it would have cost approximately \$12.3 billion to bring the incomes of all Canadians to just over the poverty line, while the total cost to society and the economy, due to poverty, using cautious estimates, was approximately \$25 billion – fully twice the cost of poverty elimination in that same year.

Adults in food insecure households are more likely to have one or more chronic physical and/or mental health conditions; the likelihood of multiple conditions rises with increasing severity of food insecurity. Total health care costs of working age adults have been shown to be greater with greater severity of food insecurity – 23%, 49% and 121% higher health care costs for adults living in households with marginal, moderate and severe food insecurity respectively, compared to adults in food secure households. The odds of becoming a “high-cost user” of the health system within the next 5 years have been reported to be 46% greater for adults 18 years and older living with moderate or severe food insecurity compared to those living with marginal or no food insecurity.

Systemic policy responses that ensure sufficient and consistent income for all households are the best way to effectively address household food insecurity in Canada.

Elimination of household food insecurity requires secure, adequate income for all households to be able to pay for housing, food and other basic living expenses. Government policies can promote income security through basic income guarantees, employment policies, income transfers and tax subsidies, exemptions and credits. Social assistance and disability pension rates must provide sufficient income to pay for basic needs, including food and the extra costs of prescribed special diets. Between 2007 to 2011, there was a measured decrease in household food insecurity rates in Newfoundland, from 15.7% to 10.6% - this substantial decrease occurred when **comprehensive poverty reduction measures** were introduced in that province, indicative of the impact that can be achieved through systemic policy initiatives. Extending a basic income guarantee to all citizens, similar to what Canadian seniors receive through Old Age Security (OAS) and the Guaranteed Income Supplement (GIS), could help to successfully address the cause and reduce the prevalence and severity of household food insecurity in Canada.

Public policy approaches that measurably reduce household food insecurity should be a part of a Canadian strategy to reduce poverty. Policy measures focusing on long-term solutions must be multi-pronged to address poverty, health equity and positive social outcomes (including affordable housing and education, access to secure employment) and sufficiently comprehensive to ensure adequate household income for basic living costs.

Full Reports and References available at: www.dietitians.ca/foodinsecurity

- *Prevalence, Severity and Impact of Household Food Insecurity: A Serious Public Health Issue.* Background Paper – Dietitians of Canada
- *Addressing Household Food Insecurity in Canada:* Position and Recommendations from Dietitians of Canada

For further information:

Pat Vanderkooy, MSc, RD
Manager, Public Affairs
Dietitians of Canada
Tel: 226-203-7725
pat.vanderkooy@dietitians.ca
www.dietitians.ca