



CITY OF HAMILTON
PUBLIC HEALTH SERVICES
Medical Officer of Health Office

and

COMMUNITY & EMERGENCY SERVICES DEPARTMENT
General Manager's Office

TO:	Mayor and Members General Issues Committee
COMMITTEE DATE:	April 5, 2017
SUBJECT/REPORT NO:	Poverty Reduction Investment Plan (BOH16034/CES16043) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Vanessa Parlette 905-546-2424 ext. 6462 Jennifer Vickers-Manzin 905-546-2424 ext. 4888
SUBMITTED BY & SIGNATURES:	Dr. Elizabeth Richardson Medical Officer of Health Public Health Services Joe-Anne Priel General Manager Community and Emergency Services Department

RECOMMENDATION

- (a) That a Poverty Reduction Investment Reserve be established with \$50 million in planned funding and planned spending from 2017 to 2027;
 - (i) with \$20 million derived by extending the payback term for existing City loans from the Future Fund from 2031 to 2036 for affordable housing;
 - (ii) with \$30 million at \$3 million per year for 10 years derived from the dividend uplift to the City resulting from the merger of Horizon Utilities Corporation and several other local utilities into the new entity provisionally called MergeCo for poverty reduction over 10 years;
- (b) That \$10 million be invested over 2.5 years (2017-19) toward social housing repairs to restore approximately 200 units;

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- (c) That \$10 million be invested over 10 years (\$1 million/year) for income support through housing to approximately 200 families, by increasing Portable Housing Allowances;
- (d) That \$5 million be invested over 10 years (\$500,000/year) toward housing stability to keep people housed or use rapid rehousing strategies to move people into safe and affordable accommodation with appropriate supports;
- (e) That \$5 million be invested over 10 years (\$500,000/year) toward homelessness prevention to help people obtain and retain housing through shelter diversion and housing based case management;
- (f) That \$10 million be invested over 10 years (\$1 million/year) toward Indigenous-led poverty reduction and affordable housing, to be allocated to and directed by Hamilton Executive Directors Aboriginal Coalition, to address disproportionate rates of poverty, housing insecurity, and homelessness;
- (g) That \$7.5 million be invested over ten years (\$750,000/year) toward intensive wraparound for sole support parents and their children to enhance health, employment, childcare, and recreation programs delivered through integrated services;
- (h) That \$2.5 million be invested over ten years (\$250,000/year), toward Nurse-Family Partnership to build pathways out of poverty for young parents and their children;
- (i) That staff be directed to develop an implementation plan including: administrative and staffing requirements, an evaluation plan, and legal implications to be presented to General Issues Committee in June 2017; and,
- (j) That staff be directed to develop a comprehensive Municipal Poverty Reduction Strategy by the end of 2018, and report back to the Community and Emergency Services Committee, which:
 - (i) Aligns existing poverty reduction initiatives into a city-wide collective impact approach to preventing and reducing poverty for all Hamiltonians;
 - (ii) Identifies opportunities for improved cross-sector collaboration and policy change to support poverty reduction goals; and,
 - (iii) Includes an Evaluation Plan with program, progress, and outcome indicators to monitor impact and support continuous improvement.

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EXECUTIVE SUMMARY

On May 11, 2016, City Council approved a Motion directing staff to report to the General Issues Committee, “with a Plan to Increase Affordable Housing and Reduce Poverty by Investing in People, across all Wards in the City of Hamilton, for consideration and approval by Council”.

Since May 2016, staff and community partners (attached as Appendix A to Report BOH16034/CES16043) have completed a situational assessment to identify programs and services where new municipal investment will have the highest impact towards poverty reduction. This situational assessment includes:

- Documenting poverty reduction initiatives and investments at each level of government
- Reviewing research evidence on effective poverty reduction strategies
- Identifying successful poverty reduction programs and strategies in Hamilton and other communities
- Assessing program impact and effectiveness
- Identifying gaps where new municipal investment will have measureable return on investment toward long-term poverty reduction

Hamilton has many existing programs and strategies aimed at reducing poverty through investments in neighbourhoods, education, and employment. Despite these significant and necessary investments, we continue to see gaps in key areas essential to breaking the cycle of poverty.

In Hamilton:

- There are 5947 individuals and families on the waiting list for social housing. The City of Hamilton Housing and Homelessness Action Plan (HHAP) outlines a comprehensive strategy to increase affordable housing and reduce homelessness. The HHAP identifies targets that if achieved will ensure the plan’s goals will be met. To meet all targets, the HHAP requires \$42.7 million per year. Current funding amounts to a shortfall of \$30,244,000 annually.
- More than 44% of lone parents and 24% of children under 6 live in poverty. More than 30% of children in Hamilton start school with vulnerabilities that put them at a disadvantage.
- Indigenous people in Hamilton face disproportionately high rates of poverty and homelessness. Social Planning and Research Council reports, the poverty rate among Aboriginal children in Hamilton is “37%, compared to 28% for Aboriginals in Ontario” and 24% for non-Aboriginal children.”¹

Research shows housing must be the cornerstone of any poverty reduction plan. This includes affordable housing and the social supports needed to build a safe and stable home environment to address other needs. Home is the foundation for success in

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education, employment, health, and wellbeing across the life course.ⁱⁱ Research demonstrates investment in people has the greatest return the earlier we start. Disadvantage grows over the life course and makes it less likely youth in poverty will perform well academically, graduate high school, and secure adequate employment as adults.ⁱⁱⁱ ^{iv}This vicious cycle of poverty is reproduced from one generation to the next, unless critical investments are made to support pathways out of poverty.

Based on research and review of existing initiatives, new municipal investment will target clear gaps with the highest potential impact toward breaking long-term cycles of poverty (attached as Appendix B to Report BOH16034/CES16043).

1. **Safe, stable, and affordable housing:** Investment in safe and secure homes addresses immediate needs and is the foundation for building lifelong health, learning, and achievement. Broader poverty reduction goals cannot be addressed until housing needs are met.
2. **Pathways out of poverty:** Early investment in children and families has the greatest impact on education, employment, and health outcomes for two generations to escape poverty.
3. **Indigenous-led poverty reduction:** Indigenous people in Canada and Hamilton face multiple barriers that lead to higher rates of poverty, illness, and homelessness. Citywide action is needed to repair the devastating effects of colonial policies and relationships. Poverty reduction can contribute to reconciliation if rooted in respectful dialogue and self-determination.

This investment forms a critical cornerstone, and launches development, of a broader comprehensive 10-year Poverty Reduction Strategy. The City of Hamilton will continue building on the success of existing inter-agency partnerships to coordinate and leverage poverty reduction initiatives. Aligning existing strategies will also help leverage advocacy for provincial, federal, and private investment in poverty reduction. Taking collective action to reduce poverty improves the health and wellbeing of our whole community. This will help achieve the goal of making Hamilton the best place to raise a child and age successfully.

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Table 1: Outline of proposed targeted investments and estimated impact over 10 years

Targeted Investment Area	Amount	Estimated Impact Over 10 Years
Social Housing Capital Repairs	\$10 million over 2.5 years, 2017-19	200 social housing units back online
Portable Housing Allowances	\$10 million over 10 years (\$1 million /year)	Approximately 200 households receive support for up to 8 years and build capacity to maintain stable housing
Housing Stability	\$5 million over 10 years (\$500,000/year)	Emergency support for approximately 6000 cases of people faced with housing stability challenges
Homelessness prevention through shelter diversion and housing case management	\$5 million over 10 years (\$500,000/year)	2500-3500 individuals avoid homelessness
Intensive wraparound for lone parent families	\$7.5 million over ten years (\$750,000)	3000 families build capacity to escape poverty through enhanced and integrated health, employment, recreation, and childcare programs
Nurse-Family Partnership	\$2.5 million over ten years (\$250,000/year)	400 individuals (young parents and children) improve employment, education, and health outcomes to rise out of and break the cycle of poverty
Indigenous-led Poverty Reduction	\$10 million over 10 year (\$1 million/year)	Housing stability and wraparound supports for approximately 7000 households

Alternatives for Consideration – See Page 12

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial:

- The City’s Poverty Reduction Investment Plan in the amount of \$50 million will require that a reserve be established called the Poverty Reduction Investment Reserve.

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- Expected cash inflows from 2017 to 2027 consist of:
 - \$20 million derived by extending the payback term for existing City loans from the Future Fund from 2031 to 2036
 - \$30 million at \$3 million per year for 10 years from 2018 to 2027 derived from the dividend uplift to the City resulting from the merger of Horizon Utilities Corporation and several other local utilities into the new entity provisionally called MergeCo
- Expected cash outflows from 2017 to 2027 match the expected cash inflows so that the reserve has a zero balance annually.
- Tax supported operating budget or capital budget funds are not required for this Plan. Staff will provide Council with a mitigation strategy if annual actual outflows/ expenditures exceed planned outflows/expenditures.

Staffing:

- Administrative impacts, which may include FTE, will be included in an implementation plan presented to General Issues Committee in June 2017.

Legal:

- No legal implications in this report.

HISTORICAL BACKGROUND

Over the last 10 years, the City of Hamilton and community partners have created a strong foundation for reducing poverty and building healthy neighbourhoods:

- In 2005, the **Hamilton Roundtable for Poverty Reduction (HRPR)** formed to address the City's unacceptable levels of poverty. The HRPR aims to reduce poverty through advocacy, education, and partnerships at local, provincial, and federal levels.
- In 2005, the Ministry of Children and Youth Services chose Hamilton as the urban demonstration community for the Provincial Best Start Initiative. The City of Hamilton started the **Hamilton Best Start Network**, made up of more than 50 people from early learning, education, health, and social service organizations. Hamilton Best Start Network has evolved into the Early Years Community Plan to understand local needs and improve access to prenatal and early childhood supports.
- In 2010, the Hamilton Spectator started the **Code Red** series, showing powerful links between income inequality and poor health outcomes across Hamilton neighbourhoods. Code Red data continue to inform City program planning and collaboration to reduce the causes and effects of poverty.
- In 2010, the City of Hamilton launched the **Neighbourhood Action Strategy (NAS)** in partnership with Hamilton Community Foundation and the Hamilton Best Start Network. Residents and community partners are building pathways out of poverty

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through neighbourhood improvements, education, employment, and community health initiatives.

- In 2011, the Hamilton Executive Directors Aboriginal Coalition incorporated to build better futures for members of Hamilton's Indigenous community through stronger collaboration and holistic supports.
- In June 2012, the Community and Emergency Services Committee endorsed the **Housing and Homelessness Action Plan**. More than 800 Hamiltonians helped develop this 10-year Action Plan. The Action Plan provides a roadmap to guide decision-making and investment to increase affordable housing and reduce homelessness.
- In 2012, the Basic Needs Work Group of the Hamilton Best Start Network formed to increase equitable access to basic needs and create environments to improve child outcomes. Between 2012 to 2016, the Basic Needs Work Group focused on increasing access to financial and government supports for families.
- In 2015, Hamilton Anchor Institutions Leadership formed as a body of executive leaders collaborating to enable horizontal, cross-sectoral policy learning toward united action on critical issues facing Hamilton.

Through the above initiatives, Hamilton has established conditions and networks needed for successful poverty reduction. Aligning and building on existing initiatives is essential to leverage collective impact and coordinated investment toward long-term poverty reduction.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

There are no policy or legislated requirements associated with this report.

RELEVANT CONSULTATION

- The Poverty Reduction Strategy Steering Committee directed content and contributed to report. Steering Committee membership includes: senior staff from City Manager's Office, Community and Emergency Services, and Public Health Services; external partners from: Hamilton Anchor Institution Leadership, Hamilton Best Start Network, Hamilton Executive Directors' Aboriginal Coalition, Hamilton Roundtable for Poverty Reduction, McMaster University.
- Community and Emergency Services staff informed content of report: General Manager; Director of Housing Services Division; Director of Neighbourhood and Community Initiatives; Director of Children's and Home Management Services; Early Years Senior Research Advisor; Community Services Program Analyst; Program Manager, Early Years; Program Manager, Early Years Operation and LEAP (Learning, Earning, and Parenting); Project Manager, Hamilton Immigration Partnership Council; Senior Project Manager, Urban Indigenous Strategy.

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- Public Health Services staff informed content of report: Medical Officer of Health; Director of Family Health Division; Director of Planning and Business Improvement; Health Strategy Specialist; Communications Officer; Health Analyst; Age-Friendly Plan Lead; PHS Food Security Lead; Program Manager, Applied Research and Evaluation.
- Finance and Corporate Services staff advised development of the financial plan and recommendations. Hamilton Future Fund Board was consulted and approves cash flow as outlined in recommendation report.
- Consultation with key cross-sector partner networks informed report content and demonstrated support for focus of investment: Best Start Network, Hamilton Anchor Institutions Leadership, Hamilton Executive Directors Aboriginal Coalition, Hamilton Roundtable for Poverty Reduction, Housing and Homelessness Action Planning Group, Social Planning and Research Council.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Poverty costs every household in Ontario from \$2,299 to \$2,895 every year^v and exists in all Hamilton postal codes, ranging from 5% to 46%.^{vi} The highest rates of poverty (based on Low Income After Tax) are among children under age six (24%), visible minorities (27.2%), aboriginals (29.4%), adults living alone (30.8%), recent immigrants (41.2%), and lone parents (44.4%).^{vii} Lone parents aged 15-24, and their children, are the two groups most likely to live in poverty (83.4% according to the 2006 census)^{viii} while adults over age 65 have the lowest rates of poverty at 8.3%.^{ix}

Poverty comes with high costs to the health of individuals, communities, and the economy. Individuals living in poverty are at risk of many poor health and social outcomes, including: homelessness, social exclusion, mental illness, and lowered life expectancy. The cycle of poverty is difficult to break. Hamilton has many programs to support people living in poverty but most are limited, by scope or funding, in their ability to tackle root causes. A comprehensive approach to reducing and preventing poverty requires long-term investment, coordinated action, and measurement across all sectors and levels of government.

Investing \$50 million over 10 years demonstrates municipal commitment to poverty reduction. This money will be targeted to areas with the greatest need and demonstrated success at reducing poverty. Hamilton must continue building on successful initiatives to form a comprehensive and measurable poverty reduction strategy. In the next 10 years, the City will maximize and integrate existing services, strategies, and community partnerships. This is essential to break down silos and system barriers, strengthening collective impact to reduce poverty and improve the lives of all Hamiltonians.

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The situational assessment, completed by staff and partners, revealed core gaps in Hamilton where research shows investment will have the highest impact toward poverty reduction. Investing in people early, by supporting healthy and stable homes, builds pathways to escape poverty.

Investing in safe, secure, and stable housing

Safe and stable home environments for all Hamiltonians is the number one priority for reducing poverty. Poor quality housing is the strongest predictor of physical and mental health for both adults and children. Individuals and families without stable housing face chronic stress and limited ability to meet other needs, such as: education, employment, mental health, and wellness.^x

Research has proven that housing with wraparound supports improves: school performance, mental and physical health, substance use, nutrition, and employment potential.^{xi xii} The proposed investments are part of a multi-pronged approach to help people living in poverty obtain and retain housing. Repairing social housing units increases the stock of subsidized housing. Meanwhile, portable housing allowances are one of the quickest and most efficient ways to get and keep people housed while offering flexibility in neighbourhood and unit choice. The Canadian Federation of Apartment Associations describes income assistance to low income renters (through portable housing allowances or rent supplements) as the “single most cost-effective way to reduce housing affordability problems.”^{xiii} Both strategies, increasing social housing units and well-monitored portable housing allowances, are necessary to move people off the housing waitlist and into homes.

Investing in targeted strategies to help people maintain home stability avoids the high individual and system costs of homelessness and poverty. Hamilton’s housing system is currently being examined to ensure investments are targeted to evidence-based programs that are making the greatest impact. The At Home/Chez Soi study estimates, over a two year period, a Housing First approach to homelessness prevention saved an average of \$31,747 in service costs for people with high needs and \$4,274 for those with moderate needs.^{xiv} Hamilton’s successful Housing First programs will be the cornerstone of the system redesign. Shelter diversion, to prevent homelessness and its high costs, is a gap in Hamilton’s system. Investments in housing stability and homelessness prevention combine housing with social supports and health services. This approach builds individuals’ capacity to earn income, maintain housing, build mental health, participate in the community, and rise out of poverty.

Investing in pathways out of poverty for two generations

Investing in early childhood (0-6) generates the greatest return on investment across the life course for children and their parents. More than 44% of lone parents and 24% of children under 6 live in poverty. Thirty-one percent of children in Hamilton start school with vulnerabilities that put them at a disadvantage. Disadvantage grows over

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the life course and makes it less likely youth in poverty will perform well academically, graduate high school, and secure adequate employment as adults.^{xv} These factors reproduce a vicious cycle of poverty from one generation to the next.

The negative effects of child and parental poverty are directly linked to quality of the home environment. Being behind on rent is associated with negative health outcomes, including: food insecurity for parents and children, energy insecurity, poor school performance, health trade-offs.^{xvi} Kids who move three times between grades 1-6 score 20 points lower on standardized reading tests, and are twice as likely to repeat a grade. Children growing up in extremely low cost housing perform worse in school and experience more chronic health issues.^{xvii}

Investing in healthy home environments and programs to enhance early childhood development and parental attachment helps reduce the effects and likelihood of intergenerational poverty. The rate of return on investment (ROI) in human development is higher if started earlier in life. Caredeiro and Heckman demonstrate investments in early childhood programs (0-6) generate a rate of return at \$8 for every \$1 invested. This rate of return declines over the life course, dropping to \$1.75-\$4 for investments for 6-18, stagnating around \$1.5 after age 18.^{xviii}

Nurse-Family Partnership (NFP) is an evidence-based program that offers intensive wraparound support during the critical window where investment in people has the greatest impact. NFP is an intensive nurse-based home visiting program for two populations most likely to live in poverty –young parents and their children. It is widely celebrated as one of few programs shown to break the cycle of poverty by improving birth outcomes, school readiness, parenting skills, and self-sufficiency of families. Investments to expand access to NFP will contribute to: improved child and maternal health, decreased child abuse and neglect, increased maternal employment, improved school readiness and completion.^{xix}

Investments in intensive wraparound for lone parent families using an integrated model will build pathways for families to leave social assistance and exit poverty. Wraparound will be achieved by enhancing: coordination of health and community services; employment supports and streamlined childcare access to increase earning potential; family transit passes; and free children's recreation. This integrated model delivered through Public Health, Community Services, and Ontario Works will improve: family stability, mental and physical health, income, and education outcomes. Public savings have been shown to cover the costs of implementing this type of model in as little as two years through 15% reduction in social service costs and 15% reduction in social assistance use.^{xx}

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Investing in Indigenous-led poverty reduction

Inconsistent and oppressive Indigenous policy and practices in Canada have contributed to systemic barriers, cultural erosion, and intergenerational trauma. The poverty rate of Aboriginal residents in Hamilton is 29.4%, which is higher than average for Aboriginals in Ontario (27.6%) and the general population in Hamilton (15.7%).^{xxi} The Social Planning and Research Council reports that the poverty rate among Aboriginal children in Hamilton is “37%, compared to 28% for Aboriginals in Ontario” and 24% for Hamilton’s non-Aboriginal children.”^{xxii}

It is essential that Indigenous-led poverty reduction be determined and managed by Indigenous communities. Budget allocation of 20% to Indigenous-led organizations is common practice among funding bodies and City programs, including: the Homelessness Partnering Strategy (HPS), Hamilton Early Years Sector, and the Ontario Local Poverty Reduction Fund.

Indigenous-led solutions are needed to support self-determination and reconciliation, addressing root causes of Indigenous poverty. The Hamilton Executive Directors Aboriginal Coalition (HEDAC) will manage and distribute 20% of the poverty investment funds towards Indigenous-led poverty investment. HEDAC is made up of organizational leaders who engage in cross-sector planning to improve the health and well-being of Indigenous Hamiltonians. HEDAC members have first-hand knowledge of Indigenous poverty and plan to distribute the \$1 of annual investment through seven Indigenous organizations. Investments in Indigenous-led affordable housing and wraparound supports build pathways to address disproportionate rates of poverty, housing insecurity, and homelessness.

Building a comprehensive Poverty Reduction Strategy

The Motion, research, and consultation pointed to a need for a comprehensive municipal poverty reduction strategy. Hamilton’s 10-Year Poverty Reduction Strategy will be completed by the end of 2018. It will build on the success of existing inter-agency partnerships to identify needs, priorities, and actions to tackle root cause of poverty. This comprehensive strategy will inform ongoing investments through City of Hamilton, other levels of government, and community partners to coordinate and leverage impact.

Partnership networks outlined in the Background section of this report are already pursuing opportunities to leverage investment through collaboration around shared goals.

For example:

- Partnership networks have identified more than \$42 million annually available through federal and provincial tax benefits not currently accessed by Hamiltonians

with low income. Staff and partners have launched a 2017 campaign to promote access to tax filing so Hamilton residents can access the full range of their entitled benefits. This ongoing work will build more opportunities for financial empowerment in subsequent years.^{xxiii}

- The anchor institutions in Hamilton are exploring the development of an Employment Strategy for people living in poverty. This network offers further potential to leverage additional investment through anchor institutions.
- Leaders across health and social service sectors have launched the Hamilton Community Health work group to better integrate services and link people to the right supports at the right time.
- Working poverty is a reality for 29,335 Hamiltonians. The Hamilton Roundtable for Poverty Reduction is working with community partners to encourage local employers in the private, non-profit, and public sectors to implement living wage policies. More than 30 organizations have committed to a living wage for their employees.
- Social assistance rates are inadequate for almost 50,000 Hamiltonians who rely on either Ontario Works or the Ontario Disability Support Program as their primary income. The Hamilton Roundtable for Poverty Reduction is leading a provincial effort to encourage social assistance rates that reflect real costs of housing, food, hygiene products, and social inclusion.

Measurement

Ongoing monitoring is crucial to support continuous improvement and measure success. Short-term measures include the number of people reached through each intervention as well as evaluation of program satisfaction and effectiveness. Partnerships with McMaster will support monitoring key performance indicators and reporting on household and citywide poverty rates. Each of these targeted investments contributes to existing strategies that address indicators of poverty (e.g. Housing and Homelessness Action Plan, Neighbourhood Action Strategy, Early Years Plan). The 10-year Poverty Reduction Strategy will align existing poverty reduction goals, targets, and reporting for the City of Hamilton. To maximize and measure change at a population level, City of Hamilton's 10-year Poverty Strategy will complement and leverage provincial and federal poverty initiatives.

ALTERNATIVES FOR CONSIDERATION

Committee could prioritize specific programs for greater, reduced, or eliminated investment. This approach is not recommended. Poverty is a complex issue requiring a comprehensive and multi-faceted solution. The recommended investments collectively represent a targeted approach to addressing gaps where we see the

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greatest need and potential impact for poverty reduction in Hamilton. Reduced investment would limit reach and impact of City of Hamilton poverty reduction initiatives. Failure to reduce poverty will continue to increase City costs of managing poverty and negatively impact residents.

Financial: Reduced investment could be reallocated to alleviate other budget pressures; however long-term costs of poverty are likely to exceed costs of preventive poverty reduction investments.

Staffing: Administrative impacts, which may include FTE, will be included in an implementation plan presented to General Issues Committee in June 2017.

Legal: No legal implications in this report.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Engagement & Participation

Hamilton has an open, transparent and accessible approach to City government that engages with and empowers all citizens to be involved in their community.

Economic Prosperity and Growth

Hamilton has a prosperous and diverse local economy where people have opportunities to grow and develop.

Healthy and Safe Communities

Hamilton is a safe and supportive city where people are active, healthy, and have a high quality of life.

Our People and Performance

Hamiltonians have a high level of trust and confidence in their City government.

APPENDICES AND SCHEDULES ATTACHED

Appendix A to Report BOH16034-CES16043: Poverty Reduction Steering Committee Membership

Appendix B to Report BOH16034-CES16043: Impact of Proposed Poverty Reduction Investments

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ⁱ Maracle, M., Mayo, S. and CS Montana-McCormack (2015). Profile of Hamilton's Aboriginal Population. Social Planning and Research Council.

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ⁱⁱ Tunstall, R. Bevan, M., Bradshaw, J., Croucher, K., Duffy, S., Hunter, C., Jones, A., Rugg, J., Wallace, A. and Wilcox, S. (2013). The Links Between Housing and Poverty: An Evidence Review. Joseph Roundtree Foundation.

ⁱⁱⁱ Marmot, M., Friel, S., Bell, R., Houweling, T. A.J., and Taylor, S. (2008). Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health. The Lancet, 372(9650): 1661–1669.

^{iv} McCain, M.N., Mustard, J.F., & McCuaig, K. (2011). Early Years Study 3: Making Decisions, Taking Action. Toronto: Margaret & Wallace McCain Family Foundation.

^v Laurie, N. (2008). The Cost of Poverty. An Analysis of the Economic Cost of Poverty in Ontario. Ontario Association of Food Banks.

^{vi} Mayo, S. (2013). The Rich and the Rest of Us. Social Planning and Research Council Hamilton.

^{vii} Statistics Canada. 2014. National Household Survey (NHS) 2011 –Community Poverty project. Ottawa. Released August 11, 2014. [Note: Indigenous populations are significantly underestimated in census counts. Many Indigenous people choose not to participate in the census or may choose not to self-identify as Aboriginal. Others may not be counted due to homelessness or lack of a stable address. The 2011 NHS also had a low response rate of 68.6% among all populations across Canada, compared to 94% for the 2006 census].

^{viii} The 2011 National Household Survey does not have this level of breakdown. An update on this figure will be available when final results of the 2016 census are compiled.

^{ix} Statistics Canada. 2014. National Household Survey (NHS) 2011 –Community Poverty project. Ottawa. Released August 11, 2014.

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^{xviii} Cunha, Flavio and Heckman, James J. (2006). [Investing in Our Young People](#). University of Chicago, Department of Economics.

^{xix} Coalition for Evidence-based Policy (2010). Top Tier Evidence Initiative: Evidence Summary for Nurse-Family Partnership. <http://coalition4evidence.org/wp-content/uploads/uploads-dupes-safety/NFP-updated-summary-for-release-Jan2010.pdf>

^{xx} Browne, G. et al. (2001). When the Bough Breaks: Provider Initiated Comprehensive Care is More Effective and Less Expensive for Sole-Support Parents on Social Assistance. *Social Science and Medicine*, 53(12): 1697-1710.

Menard, J. (2012). Families First Evaluation Report. Region of Peel. <http://www.peelregion.ca/council/agendas/pdf/rc-20120705/report-hs-a1.pdf>

^{xxi} Statistics Canada. 2014. National Household Survey (NHS) 2011 –Community Poverty project. Ottawa. Released August 11, 2014. [Note: Indigenous populations are significantly underestimated in census counts. Many Indigenous people choose not to participate in the census or may choose not to self-identify as Aboriginal. Others may not be counted due to homelessness or lack of a stable address].

^{xxii} Maracle, M., Mayo, S. and CS Montana-McCormack (2015). Profile of Hamilton's Aboriginal Population. Social Planning and Research Council. <http://www.sprc.hamilton.on.ca/wp-content/uploads/2015/04/Profile-of-Hamiltons-Aboriginal-Residents.pdf>

^{xxiii} In 2011, about 7,345 of eligible families in Hamilton did not file for the Canada Child Tax Benefit (now worth \$5400-6400 per year per child for families with incomes below \$30,000). There are 41 entitlements available to people with low income through federal and provincial governments. Tax filing enables access to these benefits, which can boost incomes of low income residents by 40-50%.

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.