



CITY OF HAMILTON
PUBLIC HEALTH SERVICES
Healthy Environments Division

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	November 13, 2017
SUBJECT/REPORT NO:	Nutritious Food Basket 2017 (BOH17041) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Mary Ellen Prange (905) 546-2424, Ext. 3484
SUBMITTED BY & SIGNATURE:	Kevin McDonald Acting Director, Healthy Environments Division Public Health Services Department

RECOMMENDATIONS

- (a) That the Board of Health direct Public Health Services, to continue monitoring the cost of healthy eating in Hamilton to support efforts to reduce health inequities associated with food insecurity; and,
- (b) That the Board of Health correspond with the Ministers of Health and Long-Term Care, Community and Social Services, and Poverty Reduction Strategy to recommend collaboration among ministries to ensure consistent, systematic monitoring of the cost of healthy eating in Ontario that will inform government priorities and policies such as Ontario’s Food Security Strategy, the Ontario Basic Income Pilot, and Bill 6: Ministry of Community and Social Services Amendment Act, 2016.

EXECUTIVE SUMMARY

Public Health Services (PHS) annually conducts the Nutritious Food Basket (NFB) survey as mandated by the 2008 Ontario Public Health Standards (OPHS). The results are a measure of the cost of healthy eating. In 2017, the weekly cost of the NFB for the reference family of four in Hamilton is \$187. Information about the NFB is posted on the City of Hamilton website at <https://www.hamilton.ca/public-health/health-topics/how-much-does-healthy-eating-cost>.

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The cost of the NFB is applied to various family and individual income scenarios to analyze the likelihood of being able to purchase nutritious food when the cost of housing is considered. Year after year, the results of these analyses show households with low incomes and, in particular, single people participating in Ontario Works (OW), do not have enough money to purchase basic nutritious food and are likely experiencing food insecurity – inadequate or insecure access to food because of financial constraints. In 2013/2014, 14.5% of Hamilton households, approximately 1 in 7, experienced food insecurity.

With the initiation of the Ontario Basic Income Pilot (OBIP), for which Hamilton is one of three locations in the three-year study, additional scenarios were incorporated into the 2017 NFB income analysis. The financial situation of a single person moving from OW to OBIP shows substantial improvement and low-income families also see enhanced income through participation in OBIP.

In response to findings from analyses using NFB data, the Board of Health has over the years corresponded with provincial and federal governments to recommend actions such as: increasing social assistance rates, implementing a basic income guarantee program, increasing the minimum wage, and increasing investment in affordable housing – policy actions that could help reduce food insecurity and health inequities in our city, province, and country. Some of these recommended actions are currently being advanced, possibly attributable in part to advocacy efforts by Boards of Health across Ontario in follow-up to annual NFB report recommendations.

The OPHS will be replaced with modernized Standards for Public Health Programs and Services (SPHPS) as of January 2018. The SPHPS Consultation Document released in February 2017 does not include a requirement for costing the Nutritious Food Basket. While food cost monitoring may continue to be included in the Population Health Assessment and Surveillance Protocol, no supports will be provided by the Ministry of Health and Long-Term Care. This means public health units in Ontario will not consistently monitor the cost of healthy eating.

By creating our own protocol and tools, PHS can continue to monitor the cost of healthy eating in Hamilton to determine the degree to which SPHPS equity goals and objectives are being met. Nonetheless, advocating to the provincial government for continued consistent and systematic monitoring of the cost of healthy eating is advised. Provincially mandated NFB tools and practice will reduce duplication of efforts by public health units and will ensure mechanisms for food cost data to inform provincial policies and priorities.

Alternatives for Consideration – See Page 7

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FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: There are no financial implications.

Staffing: There are no staffing implications.

Legal: There are no legal implications.

HISTORICAL BACKGROUND

The Ontario Public Health Standards (2008), Chronic Disease Prevention Standards Requirement #2, states “The board of health shall monitor food affordability in accordance with the Nutritious Food Basket Protocol, 2008 (or as current) and the Population Health Assessment and Surveillance Protocol, 2008 (or as current).”¹

The NFB is an annual survey done in May to measure the cost of basic healthy eating based on current nutrition recommendations and average food purchasing patterns. From May 8 to May 11, 2017, Registered Dietitians with PHS conducted food pricing for the 67 items in the NFB in seven grocery stores across the City of Hamilton in accordance with the NFB Protocol² and NFB Guidance Document.³

Since 2007, the Board of Health has used NFB data to advocate for provincial and federal policies, such as basic income guarantee, increases to social assistance rates, and investment in affordable housing; to ensure people living on lower incomes have a more adequate standard of living, including being able to afford nutritious food.

On November 14, 2016, the Board of Health endorsed the Ontario Society of Nutrition Professionals in Public Health Position Statement on Responses to Food Insecurity⁴ and passed a motion to send a letter to the Premier of Ontario, provincial ministers of Health and Long-Term Care, Community and Social Services and the Poverty Reduction Strategy, and the government’s Standing Committee on Social Policy urging them to move ahead with Bill 6, Ministry of Community and Social Services Amendment Act (Social Assistance Research Commission), 2016.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

No policy implications or legislated requirements.

RELEVANT CONSULTATION

- Housing Services Division, Community and Emergency Services Department provided data on the average market rental housing costs in Hamilton and wait list for affordable housing.
- Ontario Works Division, Community and Emergency Services Department reviewed the report for accuracy.

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- Hamilton Roundtable for Poverty Reduction provided information concerning Bill 6 and OBIP benefits.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Cost of the Nutritious Food Basket and Income Analysis

The results of the 2017 NFB survey indicate the cost of nutritious food for 22 different age and sex groups (see Appendix A). The NFB cost for a reference family of four (male and female age 31-50, boy age 14 and girl age 8) in Hamilton in 2017 is \$187 per week or \$810 per month. NFB costs are applied to various individual and family income scenarios to analyze the feasibility of buying basic nutritious food when the cost of market rate rental housing is considered (see Appendix B).

In spring 2017, the Ontario Basic Income Pilot (OBIP) was announced. Hamilton was selected as one of three jurisdictions where the program is being tested over a three year period. OBIP payments are set at 75% of the Low Income Measure (LIM) and paid in addition to tax credits and benefits (e.g., Canada Child Benefit, Ontario Trillium Benefit, GST/HST credit). Individual and family scenarios reflecting income from OBIP have been added to the 2017 analysis using NFB data.

Appendix B shows a comparison of income to rent and food costs for five single-person and six family households with low incomes. A family with median Ontario income is also included for comparison. Highlights from the income analysis include:

- Households receiving social assistance or living on minimum wage allocate 59% to 120% of their total monthly income on housing and nutritious food.
- The worst situation is the single person with income from OW whose rent and food costs exceed income by \$159 per month. Moving from OW to OBIP significantly improves the financial situation for a single person by nearly doubling monthly income.
- After food and rent, the single person receiving ODSP has only \$137 left per month. Moving from ODSP to OBIP increases monthly income by almost \$800. However, benefits covered by ODSP, other than drugs and dental, are not covered by OBIP. It will be incumbent on each individual receiving ODSP to determine whether participating in OBIP will be beneficial or not.
- With the introduction of the Canada Child Benefit in late 2016, families living on social assistance or minimum wage are somewhat better off than in 2016 but would still be allocating more than 30% of income on housing. Families with minimum wage income or previously receiving OW see significantly better income through OBIP. For example, the family of four moving from OW to OBIP has approximately \$800 more per month and the family of four living on a minimum wage receives an additional \$850 per month through OBIP.

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Greater access to affordable housing could help families and individuals living with low incomes better meet their basic living needs by reducing the amount allocated to housing costs. As of April 2017, there were 5996 households on the wait list for social housing in Hamilton. The recently approved 10-year plan by the City of Hamilton to invest \$50 million in affordable housing will help to ease this housing burden, alongside other initiatives within the 10 Year Housing and Homelessness Action Plan.

Prevalence and Impacts of Food Insecurity

Food insecurity is defined as inadequate or insecure access to food because of financial constraints. It can be classified as marginal (worrying about running out of food), moderate (compromising quantity or quality of food consumed), or severe (reduced food intake and disrupted eating patterns due to lack of food).⁵

In 2013-2014, 14.5% of households in Hamilton (approximately 1 in 7) experienced some degree of food insecurity. For 11.2% of Hamilton households, the situation was moderate or severe. The prevalence and degree of food insecurity in Hamilton has remained relatively constant since 2007 and rates in Hamilton are similar to those of the whole province.⁶

Food insecurity is a serious public health problem. It negatively impacts physical, mental, and social health, and costs the healthcare system considerably. Compared to adults in food secure households and after adjusting for other determinants of health such as education and income levels, total annual health care costs in Ontario were 23% higher for adults in households with marginal food insecurity, 49% higher among those with moderate food insecurity and 121% higher among those with severe food insecurity. These findings suggest that addressing food insecurity through targeted policy interventions to increase incomes would reduce associated health care costs and improve overall health.⁷

Being a recipient of social assistance in Canada poses an extremely high risk of food insecurity. Nearly one third of Canadian households reliant on social assistance as their main source of income are severely food insecure, indicating serious levels of food deprivation. The rate of severe food insecurity among social assistance recipients is 11 times higher than the overall national rate. The high rates of food insecurity among households reliant on social assistance suggest income support programs are failing to enable recipients to meet their basic needs.⁸

Food insecurity is a modifiable risk factor for chronic diseases as well as mental health and social problems. From a social determinants of health perspective, if people have adequate incomes to purchase nutritious foods, overall physical and mental health as well as social well-being would be improved in the long-term.

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Monitoring the Cost of Healthy Eating by Ontario Public Health Units

Each year Hamilton PHS, along with all other public health units in Ontario, monitors the cost of healthy eating by conducting the Nutritious Food Basket Survey, as mandated by the Ontario Public Health Standards, 2008. The Nutritious Food Basket Protocol (2014) and Nutritious Food Basket Guidance Document (2010) have ensured a consistent data collection methodology and implementation across Ontario, led by Registered Dietitians.

PHS uses the NFB data as an education tool to increase awareness among the Board of Health, community partners, and the general public about health issues associated with food insecurity and to support health equity work by generating local evidence of food insecurity and the impacts of limited incomes. In follow-up to annual Nutritious Food Basket reports, the Board of Health has corresponded with federal and provincial governments related to the need for poverty reduction strategies, a basic income guarantee, changes to social assistance rates that reflect true costs of basic living, and the need to increase investments in affordable housing. Some of these recommended actions are currently being advanced, possibly reflecting advocacy efforts by Boards of Health across Ontario in follow-up to annual NFB report recommendations.

The current Ontario Public Health Standards (2008) will be replaced with modernized Standards for Public Health Programs and Services (SPHPS) as of January 2018. The SPHPS Consultation Document⁹ released in February 2017 by the Ministry of Health and Long-Term Care does not include a requirement for costing the Nutritious Food Basket. It is anticipated that monitoring the cost of healthy eating will continue to be included in a revised Population Health Assessment and Surveillance Protocol¹⁰ that will accompany the SPHPS, but with no specific food costing protocol, guidance document, or data collection tools for costing the Nutritious Food Basket provided by the Ministry of Health and Long-Term Care. This means there will no longer be systematic and consistent monitoring of the cost of healthy eating by Ontario public health units. Continued monitoring of food costing data will be essential for planning and evaluation in order to determine the degree to which SPHPS equity goals and objectives are being met in Hamilton. Also, food cost data collected by public health units across Ontario are critical for informing provincial priorities of the Ministry of Community and Social Services and the Poverty Reduction Strategy with respect to Ontario's Food Security Strategy¹¹ and the Ontario Basic Income Pilot.¹²

The importance of determining local food costs through the Nutritious Food Basket is also identified in Bill 6, Ministry of Community and Social Services Amendment Act, 2016.¹³

This Bill, introduced by Hamilton East – Stoney Creek MPP Paul Miller calls for the establishment of a Social Assistance Research Commission that would define the cost of living in different parts of Ontario and annually, for each region, recommend rates of

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provincial social assistance based on an analysis of the cost in that region for the basic necessities, including, a nutritious food basket appropriate to the individual or family. A consistent protocol should be used for gathering food cost data in different regions of the province. Bill 6 passed second reading and was ordered to the Standing Committee on Social Policy on September 29, 2016. One of the recommendations in the 2016 Nutritious Food Basket Report (BOH16050) was to send a letter to the Premier of Ontario, provincial ministers of Health and Long-Term Care, Community and Social Services and the Poverty Reduction Strategy, and the Standing Committee on Social Policy - urging them to move ahead with Bill 6. The letter was sent from the Mayor's Office on December 20, 2016. To date, no hearings on Bill 6 have occurred despite significant advocacy efforts supported by the Hamilton Roundtable for Poverty Reduction¹⁴ and other groups.

Provincial-level collaboration among Ministries requiring food cost data for planning programs and policies is needed to develop protocol, guidance, and food costing tools to support public health units in operationalizing systematic and consistent methodology for food costing. Without these supports, it will be a challenge for public health units to continue monitoring the cost of healthy eating. Furthermore, inconsistencies will result if leadership and standardization is not provided provincially.

ALTERNATIVES FOR CONSIDERATION

The Board of Health can choose not to support continuing annual monitoring of the cost of healthy eating in Hamilton.

Financial: No financial implications.

Staffing: 0.07 FTE of Public Health Dietitian time.

Legal: No legal implications.

Pro: A small proportion of staff time will be freed to work on other priorities.

Con: This would jeopardize achievement of the Hamilton Food Strategy's system-wide goal to strengthening advocacy toward poverty elimination to improve individual and household food security. This alternative also fails to support and advance the Healthy & Safe Community theme of Hamilton's Community Vision 2016–2025.

The Board of Health can choose not to advocate for collaboration among Ministries of Health and Long-Term Care, Community and Social Services, and the Poverty Reduction Strategy to ensure consistent, systematic monitoring of the cost of healthy eating in Ontario.

Financial: No financial implications.

Staffing: No staffing implications.

Legal: No legal implications.

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Pro: No follow-up action is required.

Con: This would not demonstrate support of the Hamilton Food Strategy system-wide goal of strengthening advocacy to eliminate poverty to improve individual and household food security nor the Healthy & Safe Community theme of Hamilton's Community Vision 2016–2025.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Healthy and Safe Communities

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

APPENDICES AND SCHEDULES ATTACHED

Appendix A to Report BOH17041 - How Much Does Healthy Eating Cost in 2017?

Appendix B to Report BOH17041 – 2017 Income Scenarios (incorporating 2017 Nutritious Food Basket data and rental housing rates for the City of Hamilton)

REFERENCES

¹ Ontario Ministry of Health and Long-Term Care. Ontario Public Health Standards 2008, Revised October, 2015.

http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/ophs_2008.pdf

² Ontario Ministry of Health and Long-Term Care. Nutritious Food Basket Protocol, 2014.

http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/nutritious_food_basket.pdf

³ Ontario Ministry of Health Promotion. Nutritious Food Basket Guidance Document, 2010.

http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/guidance/nutritiousfoodbasket_gr.pdf

⁴ Ontario Society of Nutrition Professionals in Public Health. Position Statement on Responses to Food Insecurity, November 2015. <http://www.osnpph.on.ca/upload/membership/document/2016-02/position-statement-2015-final.pdf>

⁵ Tarasuk V, Mitchell A, Dachner N (2016). Household food insecurity in Canada 2014. Toronto: Research to identify policy options to reduce food insecurity (PROOF). <http://proof.utoronto.ca/wp-content/uploads/2016/04/Household-Food-Insecurity-in-Canada-2014.pdf>

⁶ Applied Research and Evaluation, Planning and Business Improvement, Public Health Services, City of Hamilton. Household Food Security Status, City of Hamilton and Ontario, 2007-08, 2009-10, 2011-12 and 2013-14. May 2016.

⁷ PROOF Food Insecurity Policy Research (2016). The Impact of Food Insecurity on Health.

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⁸ PROOF Food Insecurity Policy Research (2017). Food Insecurity and Social Assistance.
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⁹ Standards for Public Health Programs and Services, Consultation Document, February 2017.
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¹⁰ Ministry of Health and Long-Term Care. Population Health Assessment and Surveillance Protocol, 2016.
http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/population_health_assessment.pdf

¹¹ Government of Ontario. Food Security Consultation, September 2017.
<https://www.ontario.ca/page/food-security-consultation>

¹² Government of Ontario. Ontario Basic Income Pilot, October 2017.
<https://www.ontario.ca/page/ontario-basic-income-pilot>

¹³ Legislative Assembly of Ontario. Bill 6, Ministry of Community and Social Services Amendment Act (Social Assistance Research Commission), 2016.
http://www.ontla.on.ca/web/bills/bills_detail.do?locale=en&Intranet=&BillID=4117

¹⁴ Hamilton Roundtable for Poverty Reduction. Fix the Gap, January 2017.
<http://fixthegap.hamiltonpoverty.ca/>