GIVE US A CHANCE TO SUCCEED:
VOICES FROM THE MARGINS

The report of the April 2016 Hamilton Social Audit

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1. Introduction

Twenty nine Hamiltonians living in poverty agreed to talk in April 2016 about what they experience on a daily basis. Their stories were heard by senior faith, education and health leaders. And they were recorded for use in the report you are reading. They spoke because they hoped their stories might spur improvements in their lives. A $30 grocery card given to each speaker was an added inducement.

“That people will sell their privacy for a $30 grocery card speaks to a big problem,” one of the speakers told us.

She is right. There is a big problem. Poverty remains persistently high in this city, more than nine years after the Ontario government committed to create a strategy to achieve measured reductions in poverty. About 19 per cent of the people in this city have lived in poverty for most of the 21st century. Twenty-two per cent of Hamilton children are poor and thus are starting life at a serious disadvantage.

There is indeed a big problem.

The 29 speakers painted a vivid picture of the reality of poverty in Hamilton. It is a picture of hard work just to survive and daily indignities; of being isolated and alone; and of having efforts to get ahead frustrated. It is a picture of untapped potential.

It is also a picture that has not changed much in decades.

Yet most of the speakers were hopeful. They hope sharing their stories might help create public support for change that would benefit them and all of us, by creating a fairer society.

The process and the participants

The interviews were organized by Hamilton Faith Communities in Action, a group formed in 2013 through Hamilton Organizing for Poverty Elimination (HOPE) to bring faith groups together to advance social justice in the city. Social agencies were contacted to suggest names of people who might be willing to talk about what they face living in poverty. The goal was to find people with a range of characteristics.
Over three days, April 6-8, 2016, there were 27 interviews with 29 participants. There were 17 women, eight men and two male-female couples. Ages ranged from late teens to 72. The large majority were single; only three were married. Seven were divorced. The participants didn’t all share full details of their lives but

- two were Black;
- three identified as lesbian or gay;
- three were refugees; and at least
- five had some university education and several were graduates;
- 10 had children;
- 10 had some form of mental illness;
- five were Indigenous.

In terms of income, at least

- six were receiving Ontario Works benefits;
- eight were receiving some form of disability benefit (usually from the Ontario Disability Support Program);
- one was receiving employment insurance payments;
- two were employed (one part-time);
- one received only child support;
- two were retired and living on Old Age Security and Canada Pension Plan benefits.

In this report, the participants’ stories are organized by themes. Their real names have been replaced by pseudonyms to protect their privacy.

A number of leaders in the community were invited to participate as interviewers and auditors, and were encouraged to share the insights gained in April with their organizations and thus help make improvements for people living in poverty. These special auditors were: Douglas Crosby, Bishop of the Roman Catholic Diocese of Hamilton; Father Con O’Mahoney, Vicar for Education of the diocese; Sue Prestedge, Academic Co-ordinator for Journalism at Mohawk College; Winnie Doyle, Vice-president, Clinical Programs and Chief Nursing Executive, St. Joseph’s Healthcare, Hamilton; Carolyn Gosse, Director of Clinical Programs, ED, Urgent Care and Medicine at St. Joseph’s; Hosam Helal, Imam at the Muslim Association of Hamilton; Uzma Qureshi, Co-ordinator of Marketing and Communications for the YWCA Hamilton and Board Secretary of the Muslim Association of Hamilton; and Ward 1 Councillor Aidan Johnson.

Four reporters took notes on the interviews: Elske de Visch Eybergen, Director of WrapAround Services, Shalem Mental Health Network; Bill Johnston of the First Unitarian Church of Hamilton; Katherine Kalinowksi, Assistant Executive Director, Programs, Good Shepherd; and Susan Muma of Hamilton Organizing for Poverty Elimination. Bill wrote the first four sections and Katherine wrote the last two, including the recommendations.

Sarah Guinta, Co-ordinator, Office of Justice and Peace, Roman Catholic Diocese of Hamilton, and Deirdre Pike, Senior Social Planner at the Social Planning and Research Council of Hamilton, co-chaired the project. The Hamilton effort was part of a province-
wide “social audit” of progress in reducing poverty in Ontario led by ISARC, the Interfaith Social Assistance Reform Coalition. The last social audit in 2010 resulted in a local report, “Trying for Normal When the Wheel Comes Off” (http://www.sprc.hamilton.on.ca/report/page/14/), and a provincial collection through ISARC called, Persistent Poverty: Dispatches From the Margins. (http://isarc.ca/isarc-puts-human-face-to-poverty/).

2. The Big Theme: Give us a chance to succeed

Behind the stories was a common theme: Give us a chance. Make it possible for us to succeed. Stop putting so many barriers in the way of our escape from poverty.

“Let people become consumers and participants in their own lives,” one speaker said, and “you can’t put a dollar figure” on the positive ripples that will flow from that.

As this report will outline, those living in poverty face a constant struggle just to survive and the system that is supposed to lift them up often holds them down.

“Sometimes you feel like you are getting ahead but you get dragged back,” said one.

“I’ve tried to kill myself numerous times because I was never going to get anywhere,” said another.

One person noted that if the system had allowed her to be trained properly, she might be a decade into a career by now, rather than still receiving social assistance.

Participants feel distrusted and demeaned. It is as if they are expected to fail and the system fulfills that premise.

In contrast was the experience of a recent refugee couple—the officials they dealt with seemed to assume they will succeed. “Don’t worry, you are not alone,” they were told. As a result, “You don’t feel like a stranger here so you’re motivated to be a productive part of the society.”

Which is all the 27 others want—to be treated as “a productive part of society.”

“We need to focus more on poverty than wealth and really help people,” one speaker said.

Another said our continued high levels of poverty comes down to policy choices, choices made by governments that we elect.

“Poverty is ridiculous in this society,” he said. “We’ve got tons of money. There’s $600 billion offshore” in tax havens.
“Governments have gone from the heyday of the 1960s and 70s, when there were some social justice aspects, to catering to the business community,” he said. What is needed is a shift in our values.

“Money isn’t the bottom line for everything, people are the bottom line for everything,” he said. What we need, he said, was to aim to make it possible for everybody to be all that they can be. He hopes that younger generations will be better at recognizing that “we are all in this together.”

“The thing being missed is we are all in this together. We exist in society to help each other, not to get more than the neighbour across the street.”

“Poverty divides us. We would all be better off if we didn’t leave so many people behind.”

Bishop Douglas Crosby, OMI
Roman Catholic Diocese of Hamilton

3. The experience of poverty

It can happen to anyone...

Poverty isn’t something that happens to “other people.” Many of our participants were surprised to find themselves struggling. But when a relationship collapsed or a business failed, there was a car accident or a health crisis, suddenly people who had been living a comfortable life found themselves in poverty.

Tom had a 30-year career in information technology, making lots of money. He took two vacations a year, had a second place on a lake, threw big parties. Then in 2005, he lost his job, went through a divorce and within two years was broke. He realized later he had a mental health crisis. By the time he got himself sorted out in 2010, he was in his 60s and too old to find work. He’s now on the meagre income provided by Ontario Works.

Valerie managed a restaurant in Simcoe and had dreams of a career in journalism or architecture. Then she was a passenger in a friend’s car that was involved in an accident and, several surgeries later, she remains in constant, serious pain and is unable to work. “I get up in pain. My daily life sucks.” She now lives on disability benefits in temporary housing.

Wade was a semester away from becoming a chartered accountant but he struggled with time pressures and developed unhealthy coping mechanisms, mainly drinking and drugs. “Before I knew it, I was out on the street for 10 years. I lost everything.”

Anne is divorced and her ex-husband doesn’t pay child support anymore, so she and her son struggle to get by with income from whatever work she can find.
Cynthia was pregnant when a former spouse beat her badly enough to permanently injure the child she was carrying. Her son is severely disabled. When respite care for parents of disabled children was cut back, the stress of caring for her son and another disabled family member undermined Cynthia’s own health and ability to work and she now receives Ontario Disability Support Program benefits.

Violence was a common theme for the women. Diane fled a stalker in another city, had a job here but lost it when her company closed and now she struggles with depression and anxiety from not being able to find another job. She lives on Ontario Works.

Erica had a good education and good jobs but a relationship turned abusive. Fearing for her safety, she didn’t pursue child support in return for her child’s father not pursuing access, but she and her young son were left living on Ontario Works.

Nigel came from a middle class family, graduated from university and married but schizophrenia undermined his relationship and his ability to hold a job. Now in his 40s, he’s been on Ontario Disability Support Program benefits for six years.

**But poverty isn’t just bad luck**

As these stories illustrate, almost any of us could end up poor. But poverty isn’t random. There are groups that are more likely than others to be poor—women, especially women who are single parents; Indigenous people; people of colour; recent immigrants; gay, lesbian, bisexual, trans, queer and two-spirit persons; seniors; and people who are disabled. This will be discussed in greater detail in the section titled “Other forms of exclusion: Ethnic identity, skin colour, gender and sexual orientation.”

Surprisingly, Canadians generally are also a high risk group. Canadians have a higher rate of poverty than citizens of 18 of the world’s 30 developed or rich countries that belong to the Organization for Economic Cooperation and Development. On child poverty, we rank even lower—21 of the 30 countries have a lower percentage of their children living in poverty than Canada does.

The differences can be large. In 2013, 12.6 per cent of Canadians were poor, compared to just 5.4 per cent of Danes. That year, 16.5 per cent of our children were poor, *six times* the rate of 2.7 per cent in Denmark. If our rate matched Denmark’s, one million Canadian children would be not be living in poverty and would have a much better start at life. (The source of these statistics and all other information that came from sources other than our speakers are found in the Appendix at the end of this report.)

How do we account for such large differences? Dennis Raphael is professor of health policy and management at York University and studies social factors that affect health. He argues that these differences “are a result of public policy decisions that directly influence the lived experience of those living in situations associated with poverty. These public
policy decisions affect the availability of supports to children and families, benefits for those experiencing disability and unemployment, the amount of taxation and revenue available for programs, wages and employment security and benefits, and the distribution of economic and social resources with the population.”

If he is right, then different policies, as explored below, could significantly reduce poverty.

“I thought as a journalist I knew what poverty looked like. I was wrong. As part of the Social Audit on poverty, I saw some of those suffering in poverty but hidden from public view.”

Sue Prestedge, Academic Co-ordinator for Journalism, Mohawk College

**Living with too little money**

Poverty is often defined by lack of income or a lack of control over the resources we need to live well, so it is no surprise that those we heard from struggle with limited finances. Their stories tell of going way beyond penny pinching—the speakers live with the constant stress of never having enough.

“I always feel like I’m juggling bills back and forth,” said Anne. “Rent is paid first because if you don’t have a roof over your head, hydro doesn’t matter.

“I’m grateful for everything I receive but it does take a toll,” she added. And “the amount of money you get is pathetic,”

“We are always in debt, always thinking of ways to earn extra money,” said Cynthia, who was at the social audit with her husband. “There’s always stuff at school, we need $5 for bowling… We had to go and be humiliated and ask for the cost of a trip.”

“You wonder if there’s anything else you can sell for some money,” said Irene, who is in her 20s and living on Ontario Disability Support Program payments. “I have thought of prostituting myself.”

The impact on the big items like housing and food are discussed below. But consider something as simple as keeping up appearances, which is vital when you are seeking work and important for self-confidence.
Cynthia said she hasn’t bought any clothes for 10 years, has no socks and hasn’t had her hair done in a year. “We’re stressed,” finding transportation for medical appointments and food.

Irene said she gets her hair cut by students at a hair design school on days when the cost is $5. She lost a lot of her clothes when she was thrown out of a place she lived. Keeping her few remaining clothes clean is a challenge, since doing laundry is expensive. She feels lucky if she can do it once a month—and “you don’t feel very confident to do things when you know your clothes aren’t clean.”

Lee, a young student, paid $425 for rent, so she had $256 a month left from her Ontario Works cheque for food and for the transportation and clothes you need to apply for a job. “If you get sick, you have to choose between medicine and food. Or I don’t buy any clothes.”

Olivia is 72 and living on $16,000 from Old Age Security and Canada Pension Plan. She says she has trouble affording her medications. She worked all of her life but she never had a lot of money. However, she always made sure her daughter and now her granddaughter had the same as other children, even if she had to scrimp.

“It’s good to get food for nothing, or shoes for nothing,” she said.

Transportation can be expensive. A monthly HSR bus pass for fulltime students 19 or under cost $83.60 in 2016 and an adult pass was $101.20. Half-price “affordable” bus passes are available but there is a limited number, given out first come, first served. If you lose your bus pass, Lee said, you are screwed. If you don’t look young enough, she said, a driver might refuse to accept a student pass.

“Poverty is pure and simple a lack of money,” said Tom. “All the things I face could be alleviated if I had money in my pocket.”

There is no official poverty line or income figure below which a person is considered poor, but Statistics Canada calculates a widely-used “low income measure.” Its most recent low income measure was $22,160 before taxes for an individual in 2010. The cost of living has risen 9.2 per cent in Canada since then, so the appropriate figure adjusted for the 2016 cost of living would be $24,216.

No one working at minimum wage or living on social assistance makes that much.

Let’s make some quick comparisons:

**Ontario’s minimum wage:** $11.40 an hour or $22,800 a year if you worked 2,000 hours. That’s about $1,400 below the low income cut off. In other words, even fulltime work at the minimum wage leaves a single person in poverty. They would be deeper in poverty if they had dependents.
**Ontario Disability Support Program:** ODSP is provided to people in financial need who have a “substantial mental or physical impairment” that is expected to last more than a year and that would result in a “substantial restriction” on their ability to work.

The basic amount for a single person in late 2016: $1,128 a month or $13,536 a year (which isn’t taxable). That payment is almost $10,700 below the low income measure.

**Ontario Works:** OW is provided to people who are in financial need but are “willing to make reasonable efforts to find, prepare for and keep a job.”

Ontario Works pays just $706 a month for a single person or $8,472 a year (tax free). That’s more than $15,700 below the low income measure.

Not only is social assistance low but “we get incremental increases that don’t keep up with inflation,” said Frank, who received both ODSP and Canada Pension Plan disability benefits. Danielle, who receives Ontario Works, said the payments “are less than you need to survive... The rising cost of rent trumps any increase in OW.” They are both right.

Social assistance for a single person peaked at $663 a month in 1993 and was cut a dramatic 21.6 per cent to $520 in 1995 shortly after the election of the Mike Harris Conservatives—“an unprecedented cut in the history of welfare,” according to one researcher. That low amount would have grown to about $777 if governments had increased payments since then just enough to keep up with inflation in Ontario. In fact, they haven’t. The basic social assistance (Ontario Works) rate for a single person—$706 as of October 2016—is still, in terms of buying power, $70 less than it was almost 22 years ago.

“That 20 per cent cut in the 1990s...has never been brought back,” Cynthia said. “We need an everyday living amount that’s survivable... And when rent increases 4 per cent, we should get a 4 per cent increase.”

Not only are Ontario Works and Ontario Disability Support Program payments low but anyone who qualifies for benefits is allowed to have only very limited other resources to supplement the monthly payments. To qualify for ODSP, you cannot have more than $5,000 in assets. To qualify for Ontario Works, the asset limit is half that, $2,500.

Low income Ontarians are eligible for HST and Trillium tax credits that would add about $75 a month to these low incomes. However, to receive them, a person needs to file an income tax form each year and many may not.
“This is about how we live, how our neighbourhoods are set up... and who we have relationships with...

[We are] going to be more invested in making change when we personally know someone who is impacted.”

Sue Prestedge, Academic Co-ordinator for Journalism, Mohawk College

Housing

Housing was a serious challenge for at least half of our speakers. One had no place to live when he spoke to us. Several said they were paying way more than they could afford for housing. A few shared spaces and others had temporary locations or temporary subsidies that would soon run out—all precarious situations.

Tom, who receives Ontario Works, noted, “On OW, I get $376 for shelter. You can’t even get a room for that, you have to share.” And sharing a room has its own challenges, he noted. You may think you know someone, he said, but they can change entirely when you are sharing a small space with them, day in and day out.

Tom said he moved eight times in four years, trying to find an adequate place to live.

Irene shares housing. She lives with her boyfriend and four other friends. Because her housing situation is considered to be unstable, she doesn’t receive the shelter portion of her Ontario Disability Support Program payments. It’s a kind of Catch-22 situation—she has no shelter allowance because she doesn’t have stable housing, yet it would be easier to find such housing if she had the allowance.

Danielle also shares housing—she stays with her mother in a seniors’ residence. But by doing that, she is skirting around rules that allow visitors to stay for only two weeks at a time, potentially putting both her housing and her mother’s at risk.

Danielle said it can be hard for a single woman to find safe housing. And she worries about going into subsidized social housing out of concern for bedbugs. She reacted badly to the bedbug spray in one place she lived. The possibility of facing bed bugs is a challenge for all renters, although the extent of bed bug infestations in Hamilton isn’t clear. Complaints to Hamilton public health rose from 38 in 2006 to 426 in 2014. In late 2015, the city approved $1 million over three years to fund a strategy, including two staff, to tackle the problem.

After his frequent moves, Tom found stable housing when a four-year wait ended with his being accepted into a subsidized CityHousing unit. But there are often time limits and conditions for subsidized housing.
Anne, for instance, has subsidized housing for herself and her son but her son is now trying out living with his dad. “If my son is not back with me, I’m terrified to have nowhere to go.” Her subsidized unit is for both a mother and a child.

Brenda, who receives Ontario Works, gets a $200 a month supplement that helps pay for her rent which costs more than $700 a month. The supplement was paid to her, not attached to a housing unit, and that allowed her to find the housing she wanted. That delighted her. However, the supplement is supposed to be for only two years. “I’ll be homeless if the $200 goes away... so it’s precarious.”

Emma faced a different challenge. She’s a senior who had a stroke two years ago that has left her unable to cook or do laundry or dusting. When her son tried to rent a place for her, landlords turned him away when they learned of the disability. Under Ontario’s Human Rights Code, landlords cannot refuse to rent to a person because of their disability. However, they might be reluctant to rent to a tenant with a disability because the Code also requires them to accommodate the disabilities, including making physical changes to a building or changes to policies.

Patty faces a common problem—rent she can’t afford. Her rent has gone up to $650, which eats up 58 per cent of her monthly income from the Ontario Disability Support Program. She was left with about $460 each month for everything beyond rent.

Lee said it isn’t possible to hide the fact that she is on Ontario Works when she tries to rent—she said she needs the landlord’s signature on a form to submit to OW. “When you submit the form, their body language changes.” She overheard two people talking about her when they heard she was on Ontario Works, saying she would party or be dirty like all of the others. “With OW, they literally treat you like trash.” There are places where your welfare cheque is welcome, she said, but they are often less safe buildings or areas.

The most serious housing challenge, of course, is to have no home at all. That’s what Nigel faced. He had shared housing with post-secondary students but gave that up to move in with his partner. “She canned me, so I don’t know where I’ll sleep tonight,” he said. “I think I’ll be in a homeless shelter tonight.” Several other speakers had experienced periods of homelessness in the past.

“Housing is a fundamental human need,” says the City of Hamilton’s Housing and Homelessness Action Plan. “It is the foundation for the economic, social and physical well-being of Hamilton residents. It is the central place from which we build our lives, nurture our families and ourselves and engage our communities.”

Yet as these stories illustrate, for many in Hamilton, that solid foundation is not there because they are unable to find safe, adequate housing they can afford.

Housing is defined as affordable—by Canada Mortgage and Housing Corporation—if it costs less than 30 per cent of gross family income. Paying more than that for rent and
utilities or a mortgage, utilities and condo fees cuts into a person or family’s ability to afford adequate food and other necessities.

A broader measure is called “core housing need.” A household is in “core housing need” if its housing is (a) not affordable or (b) is not adequate (it needs major repairs) or (c) it is not suitable (it does not have enough bedrooms for the household to meet national standards) and (d) if the median rent for alternative local housing is not affordable.

Housing for anyone whose income was below the poverty line in Hamilton would have to cost less than $605 a month to be considered affordable. Yet the average rent for even a small bachelor unit in Hamilton was $656 in October 2016.

Nineteen per cent of Hamilton home owners and 43 per cent of renters paid more than 30 per cent of their gross income for their housing in 2010. That’s almost 54,000 households.

The situation is especially dire for people on the very low incomes provided by Ontario Works or Ontario Disability Support Program.

And both rent and home ownership are getting more expensive. In eight years to 2015, average rents in Hamilton rose by 22 per cent. And rents in Hamilton (excluding Ancaster, Dundas, Flamborough, Glenbrook and Stoney Creek) rose another 8.7 per cent in the year ending October 2016. The largest increases, 11.3 per cent, were for bachelor units.

Between 2004 and 2015, there was a net loss of 1,070 rental units in Hamilton, making the search for rental housing more challenging.

The costs of owning a home have risen even faster. There was a 20 per cent increase in the average cost of housing in Hamilton in the year ending in January 2017. And some of the largest increases have been in the lowest priced neighbourhoods.

Many living in poverty are forced out of the private market by the high costs and seek shelter in subsidized housing—with CityHousing or non-profit housing providers—which generally bases rent on a person or family’s income (rent geared to income). There are roughly 15,000 units in this sector. But there are long and growing waiting lists for subsidized housing. More than 6,000 households were on the city’s social housing wait list in September 2016.

There are also programs, called rent supplements, that provide a fixed amount of money per month—like the $200 Brenda received—to help pay the costs of rent in the private market. Rent supplements are linked to the person or family rather than to a unit, leaving the person or family with some choice in where they live.

Two final stories. Karen, who has struggled with addictions but was stable with methadone treatment, has had stable housing with Hamilton Urban Native Housing since 2006. That has allowed her to focus on helping her children and she is working on getting
credits for high school which she didn't finish. The foundation has been the stability provided by knowing she has housing.

"Lose your housing and everything is all up in the air and everything hits rock bottom," she said.

That's what happened to Brittany and she did hit rock bottom.

Brittany is 37 and for eight years, “I had my own place. I gave it up to help a friend save theirs (presumably by moving into a shared space and sharing rent). Ironically, it cost me my own. Two years ago, I had a home and security. I deal with chronic pain, depression, PTSD, borderline personality syndrome. A communications breakdown led to my being kicked out."

She couch surfed, then was at the Barrett Centre (a mental health crisis centre), then the YW. She contacted SOS (Supporting Our Sisters, a housing first program for women who are episodically or chronically homeless) but she did not qualify because she had not been homeless for the required six months. Being turned down for that help triggered a mental health crisis and a suicide attempt. And that crisis put her housing at the YW in jeopardy. The YW couldn't meet her mental health needs because, she said, it is understaffed and underfunded. It's not set up for that level of care.

Brittany also couldn't get a case manager, to advocate for her, because she didn't have permanent housing. Meanwhile, she had most of her things in storage with a mounting bill she can't afford.

The YW provides transitional housing and it is supposed to last for only 11 months. Brittany worries about being on the street.

“I’m very embarrassed to be in this situation. There is a lot of stigma,” Brittany said. “I'm not a drug user, I paid my rent. All I've been trying to do is get help. I don't want to be in this situation.” She was not sure what would happen next.

**Food**

A direct consequence of the high cost of housing for many living in poverty is difficulty eating well, which in turn creates health challenges. When housing costs eat up more than 30 per cent of a small income, the food budget tends to suffer.

The city regularly estimates the minimum cost of a nutritious diet. In May 2015, an adequate diet cost $232.65 a month for a 31-50 year old single man and $196.32 for a woman of the same age.

On a poverty level income, that’s a lot of money and people are often hungry.
“The first thing when I wake up each morning, I think of what I’m going to eat,” says Irene. She’s hungry all the time and drinks coffee to help her go without food. “I can’t afford to eat healthily.” Her medical problems require her to eat a healthy diet but the Special Diet Allowance that supplements the Ontario Disability Support Program “gives me about a quarter of what I need.” She gets $15 a month; one bag of lactose-free milks costs $10.

“The food budget is always the first to go,” says Frank. “You have to buy the worst food... fresh produce is almost a treat now.”

When Lee was a student, she found she couldn’t concentrate if she hadn’t been able to afford to eat. “I’m defeated, I’m so tired, why, why is this so difficult?”

Carol, who is part of a self-help group called Campaign for Adequate Welfare and Disability Benefits, said poor people tend to be weak from long-term malnutrition. That makes it difficult for them to fight for what they need.

Danielle noted that mood swings were related to the adequacy of her diet.

Diane has a condition that causes her to gain weight easily, so not being able to afford fresh food and vegetables is a big problem.

Charity can help people stretch their food dollars. Nigel, who is on ODSP, said Out of the Cold, which provides hot meals six evenings a week at city churches, “is wonderful” but it runs only from November to March. The Salvation Army also provides meals but he found it depressing.

Almost 20,000 Hamiltonians—including 7,400 children—visited a food bank in Hamilton in March 2016. Food banks can help stretch the budget but there were mixed views of the experience as well as the quality of the food.

“I try not to use food banks,” Brenda said. “It’s a soul sucking experience sitting in the waiting room waiting for a bag of food.” And she often couldn’t eat the foods provided. Patty said, “I won’t go to a food bank ... canned food and expired meat.”

Tom compared the lineup as you wait to get food to “a cattle call” and said it was demeaning. And the food is mostly carbohydrates. “It’s a last resort.” However, if he doesn’t have to buy the items he gets from the food bank, he can afford to buy better food items with his Ontario Works money.

Diane lamented that people are only allowed to go to a food bank once a month.

Frank, on the other hand, had good experiences with food banks—“the food is always good, the people behind the counter are always friendly.” Adele, 70, receives Old Age Security, Guaranteed Income Supplement and Canada Pension Plan but still needs to stretch her limited income. She praised the Good Shepherd food bank for allowing people choice, instead of just handing out a box of pre-selected food. Neighbour to Neighbour on
the Mountain also allows people to choose their own food. The Salvation Army has started putting out bins of fresh fruit, Adele noted.

Most of the visitors to Hamilton’s food banks—69 percent—were Ontario Works or Ontario Disability Support Program recipients, which underlines how inadequate those payments are.

“It is not just that we need to respond to people in need. It is how we do so...

To preserve dignity is essential.”

Imam Hosam Helal, Imam,
Muslim Association of Hamilton

Isolation and stigma

“The biggest thing Ontario Works and poverty have done to me is social isolation,” said Tom. “You can't go anywhere, you can't meet a person for drinks or coffee” because you can't afford to pay and don't want to always accept charity. “Social isolation sets in pretty quickly and that leads to depression.”

“The only people you are able to relate to our other people in poverty,” Tom said. “You don’t have the social mobility to talk to middle-class people or business people. So everyone is bringing you down. This is exactly what mental health people say you shouldn’t do, you’re supposed to ditch negative people.”

Even when there are pay-if-you-can events, as an attempt to include everyone, “the spotlight is on you. There is a stigma even when an attempt is made to include.” It's hard to overcome being embarrassed by the clothes you are wearing or by bad teeth, he said.

Many others told similar stories.

“Too often I feel alone,” Anne said.

“It's hard to make connections when you are in a hard place,” said Brenda.

“It's hard to get out because I don't have any money,” said Frank.

Martin summed up the loneliness he felt: “I need to believe in me and I need someone to believe in me.” He knew he needed human connection to recover from addictions. Karen, too, said she needs to not let herself become isolated to ensure she isn’t pulled back into addictions.

Jose found “it is difficult to integrate when there are all these barriers.”
His use of the word “barriers” is astute. Jose is a refugee with his wife and a child from Central America and receives Ontario Works payments. He was specifically referring to challenges he and his wife faced with transportation and communication because of their lack of money. But poverty creates many barriers to inclusion and participation. As noted in this report, limited income makes it difficult to afford a phone or internet access, bus fare, clean clothes, a few dollars for a social outing or sufficient food to feel well enough to engage with others.

But another crucial barrier is the stigma against people who are poor, and even more, against people receiving social assistance—a whole wall of negative assumptions.

“One of the biggest things with poverty is the embarrassment, learning to live with the embarrassment,” said Irene. She got through high school with a lot of help from her teachers at Delta. “My math teacher used to help out. It was embarrassing. He’d say, hey, do you need grocery money? Here’s $20.”

Frank has also had lots of help but “it’s demeaning to always seek charity.”

Erica talked about avoiding phone calls from her sister. “My sister tells me of new things she’s doing. I feel ashamed... but there is nothing positive to tell them.”

Cynthia said people donate things to charity that they would never give to their own child. “There are donations that are obviously used. I saw a colouring book that was coloured in. It’s humiliating” that people expect her to give that to her child.

“At shelters, I feel I am treated as if I was a lesser person,” said Lee. She preferred couch surfing or sleeping outside.

“I face stigma all the time,” said Cynthia, a view echoed by Lee. “Even though I am on social assistance, I’m just as good as anyone else—I need help.”

“Take away someone’s dignity and take it away long enough, it starts to wear you down,” said Brenda. “No one wants to be looked down on,” to be treated as poor so-and-so, Anne said.

People living on low incomes deal frequently with institutions created to help them and those interactions can either help overcome the barriers they face or add to them. About half of our 29 participants received either OW or ODSP and dealt with case workers. With ODSP, they also dealt with people who assessed whether they were disabled enough to qualify.

Emma said applying for the Ontario Disability Support Program and proving you have a disability was “like sitting in front of a judge. They pretty much tell you you are a liar.” At that time, she was suffering from debilitating headaches that made it difficult to walk any distance. She was turned down. When she later suffered a stroke, she was approved to receive ODSP benefits.
Cynthia, who is on ODSP, described her caseworker as “punitive.”

Frank, who received both ODSP and Canada Pension Plan disability benefits, said his worker gets frustrated from overwork and stress. “I can tell—her tone has changed.” There simply are not enough people to sit and listen, he said. His caseworker used to have a couple of others who could help her “but she’s my whole team now. It’s just lack of staff. Lately my worker sounds frantic.”

Scott, who is on ODSP, took a broad perspective. “I respect my caseworkers. I give them my garbage,” the stories of his pain and challenges, and he wonders how they cope with hearing sad, difficult stories all day, every working day.

Erica, who received Ontario Works, said, “The OW office has the feel of a prison,” in contrast to the open and bright employment office she’d also visited. The desk at which the OW caseworker sat was elevated and “I feel like a criminal when I walk into the OW office ... and by the treatment of the caseworker.”

“Two or three years ago, I fought to have a worker help me with why I wasn’t able to sustain employment, to get at the underlying issues,” Diane, who receives OW, said. “She found I was struggling with mental health problems and helped me get help in the community. Why is she the only one who took the time? If [a caseworker can] ask appropriate questions, you can identify the issues and refer people to the resources of the community. I know they are overworked, but you won’t find the solutions if you don’t dig in.”

Greg dealt with a different system as a Crown ward in the Children’s Aid system. Because he would soon turn 21, he was about to leave the system. At 21, he would “age out” of the child welfare system and lose his residence. However, there are supports for living expenses if a person is in post-secondary education and also medical benefits. He praised his caseworker for helping him create a plan for his future and to take advantage of benefits that are there. But he said most case workers don’t do that for their clients. The result, he said, is that a lot of kids go straight from Children’s Aid to Ontario Works.

Social exclusion has huge costs. Globe and Mail health reporter Andre Picard has written that “If you’re poor, you’re six times more likely to be socially isolated than your peers.” And being socially isolated has real and serious health consequences. As Picard explained in the United Church Observer:

“Study after study deliver similarly grim prognoses: loneliness is as harmful to health as smoking 15 cigarettes a day; having no friends may increase the risk of premature death by about 30 percent; social isolation can be twice as deadly as obesity; it’s as big a killer as diabetes and it hikes the risk of dementia by 64 percent. Loneliness is a quantifiable health hazard.”

Picard explained, “Biologically, what’s happening is that the fear lonely people experience stimulates stress hormones (a reaction sometimes known as the fight-or-flight
response), which in turn triggers inflammation, a major risk factor for heart disease. When that stress is constant, it also greatly increases the risk of depression and suicide. Being isolated often translates into being inactive, and that’s what increases the risk of obesity and diabetes. Loneliness is bad for your heart and bad for your soul…”

Danielle described a study she’d recently read about that related isolation to addiction. Lab rats were put in an environment where they had access to water laced with heroin or cocaine and also plain water. Rats that were alone returned again and again to the drugs and became heavy users. Rats that had other rats with them used the drugs much less and none of them died.

“We need to acknowledge poverty and the impact on Indigenous people. We need to act.”
Ward 1 Councillor Aidan Johnson

Other forms of exclusion: Ethnic identity, skin colour, gender and sexual orientation

As noted earlier, poverty affects some groups more than others. You are more likely to be poor if you are an Indigenous person, a person of colour, a recent immigrant, a woman, a single parent, a lesbian, gay, bisexual, trans, queer, two spirited person, or someone with a physical or mental illness or addiction. Many in those groups face barriers including discrimination that increase the likelihood that they will be poor and make it harder to get out of poverty.

Often there are intersecting barriers for those who fit into more than one of those categories—women of colour with disabilities, for instance. Many of our 29 participants faced more than one challenge.

“Stigma is compounded because I’m Black and a youth,” Lee said. She has felt it from landlords and from police. If she is walking down the street and is passed by a police car, it slows down. She recalled being stopped and questioned by police looking to see if she stole something—while she watched the likely thief, a white man, sneak away.

She said she was taught as a child that there are only seven words a Black person should say to authorities: Yes sir, no sir, thank you sir.

“Your only protection is if you have a white person with you. If you have a white person, they’ll ask the same question of the white person and the Black person but they treat me as if I’m stupid.”
"My words don’t mean anything to a cop... I see my cousins, my sister, my brother, this is something you have to deal with every day... I wouldn’t call police if I was mugged."

Some statistics are revealing. For five years in a row, Hamilton’s Black community has been the most common target of hate crimes and hate-motivated incidents. Hamilton police statistics on street checks or carding show that visible minority people were disproportionately stopped. And Black and Indigenous people are over-represented at the Hamilton-Wentworth Detention Centre on Barton Street, compared to their numbers in the total population.

The 2006 Census showed that 25 per cent of “racialized people” in Hamilton-Burlington-Grimsby were living in poverty, compared to 10 per cent of non-racialized city residents. “Racialized” persons refers to people who self-described as a visible minority for the 2006 Census but does not include Indigenous people.

The poverty rate for Indigenous people was 29 per cent in 2011 (based on the low income measure), well above the rate for the general population in Hamilton. Indigenous residents face higher levels of homelessness and precarious housing than the general population.

Cynthia, who is Indigenous, said, “I face a lot of discrimination—at the hospital, at social service agencies.” She said healthcare is always discriminatory and she pointed to the report Our Health Counts, which she said shows that Indigenous children are three times less likely to get treatment.

Half of the Hamilton Indigenous persons surveyed for Our Health Counts reported unfair treatment because they were Indigenous. Almost 35 per cent reported being the victim of a racially motivated verbal attack and 15 per cent had been victims of a racially motivated physical attack.

Two of the Indigenous speakers mentioned the intergenerational trauma that government policies have inflicted on Indigenous families. Members of Cynthia’s family were survivors of the residential school system that took Indigenous children from their families and tried to force them to assimilate into the dominant culture. Irene’s mother was part of the “Sixties Scoop,” the mass removal of Indigenous children from their families into the child welfare system that saw a large majority of the children placed in non-Indigenous homes. Irene and her siblings were seized by the Catholic Children’s Aid Society when Irene was nine.

Both the residential schools and the Sixties Scoop undermined all aspects of Indigenous peoples’ wellbeing, disrupted family life, diminished parenting skills and created a crisis of identity and low self-esteem. And these traumatic impacts have been transmitted to subsequent generations. The schools, said one report, “left an historical and emotional legacy of shame, loss, and self-hatred that is the root cause of addiction and many of the associated social problems facing Aboriginal communities today,” and so did the Sixties Scoop.
"We need to stop the cycle," Cynthia said.

Many of the female speakers experienced violence, which sometimes contributed to their living in poverty.

Cynthia, as mentioned earlier, was abused by her first husband when she was pregnant, causing severe disability for her son. Diane came to Hamilton in 2005, fleeing a stalker in another city, and lived for a time in Martha House, a shelter for women fleeing domestic violence. Irene has experienced sexual abuse.

Brenda was physically abused by her former husband who then fought her in the courts for five years for joint custody of their children and for child support, since he wasn’t working. She had to pay half her wages to him. “I felt I was being victimized again, by the system.” She didn’t qualify for legal aid because she wasn’t on social assistance.

“There should be Legal Aid for everyone who is in poverty.”

Uzma Qureshi, Co-ordinator of Marketing and Communications, YWCA Hamilton

Erica, who receives Ontario Works, was sufficiently afraid of an abusive former partner—“I feared being murdered,” she said—that she accepted not receiving child support payments that she badly needed in return for her former partner not having access to their child.

Brittany, who faces a range of mental health challenges, “was brought up in an abusive home, so I didn’t feel I had someone taking care of me.” Today, she is in her 30s but still feels that “I’m being lost in the cracks.”

Adele, who has had good jobs but also periods of homelessness, has faced sexual abuse as a woman and as a lesbian that compounded other troubles including mental illness. Her sexual orientation has sometimes been a barrier to employment, she said. She has had to dress in ways that she wouldn’t have chosen, in order to fit in.

Yvette is a refugee who fled her African country after being beaten by her parents and beaten and raped by the man her parents forced her to marry. The reason? She is a lesbian, which was neither tolerated nor legal in her country. She was jailed and might well have been killed. She was fortunate that her lover was able to use her connections to help her to escape to Canada. Even here she has faced discrimination. She shared a room in Hamilton with another African woman who kicked her out when she learned she was a lesbian. She spent two months living outside before someone took her to a shelter.
“There is an expectation of discrimination for people, even children, who are [racialized], who are Muslim, who are different.”

Imam Hosam Helal, Imam, Muslim Association of Hamilton

Children and youth

Hamilton says it wants to be the best place to raise a child, but poverty is a severe challenge for many of our children. Twenty two per cent of Hamilton children live in poverty, the fourth worst rate among Canada’s major cities. Growing up poor affects physical, intellectual and emotional development, with the impact varying with the length of time a child is poor and the depth of poverty experienced.

And it’s hard on parents who haven’t the resources to do all they want for their children.

“I don’t deny him, then I go, crap, I can’t pay hydro,” says Anne, referring to her son. “I bought him things at the cost of something else. I also trade things. Maybe he sees through the façade a little but I don’t think he can see the clear struggle I go through. I don’t want him downtrodden and without hope. My son is my life.”

“A lot of people lose their rent money to have a Christmas,” said Cynthia. “I did that when I was young.” She’d dip into the rent money to buy a few Christmas presents for her children, then warn her children that they might have to move in January. She would love to have a special Christmas allowance for poor parents.

Cynthia said the city recently reduced assistance for poor families paying recreation fees. The city will now provide up to $150 a year of fee assistance per child, which she said provided for only three to five months of programs.

The stigma of being poor affects children as well as adults.

“My concern is child hunger and child bullying,” said Erica of her six-year-old son. “My son has homemade haircuts and hand-me-down clothing. He was being bullied by his teachers—“I wouldn’t have believed it” but it happened at two different schools. She said she and her son have never felt as if they were part of their neighbourhood—“He isn’t invited to any birthday parties.”

Ontario Works and Ontario Disability Support Program provide additional money to parents, based on the number of children they have, as indicated in the table below. As well, Ontario provides the Ontario Child Benefit which pays a maximum of $113 a month per child for those with low or middle incomes.
### OW and ODSP payments for single adults and parents with children under 18.

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<tr>
<th></th>
<th>Ontario Works</th>
<th>Ont. Child Benefit</th>
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<th>ODSP</th>
<th>Ontario Child Benefit</th>
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<td>$706</td>
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<td>$226</td>
<td>$1,431</td>
<td>$1,821</td>
<td>$226</td>
<td>$2,047</td>
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</table>

The amounts paid per child, including the Ontario Child Benefit, are not consistent:

- A single parent on OW receives $373 for one child and an additional $166 for a second child.
- A couple on OW receives just $166 for one child and an additional $170 for a second child.
- A single parent on ODSP receives $530 for one child and an additional $176 for a second child.
- A couple on ODSP receives $176 for one child and an additional $183 for a second child.

A person earning minimum wage or more would be eligible only for the $113 per child per month Ontario Child Benefit. The benefit is reduced as income rises.

In addition to the payments noted in the table above, parents are eligible to receive additional money through a federal-provincial-territorial-First Nations national child benefit that dates back to 1998. The program was reorganized as of July 2016 as the Canada Child Benefit that replaced the Canada Child Tax Benefit, the National Child Benefit Supplement and the Universal Child Care Benefit.

The new tax-free benefit for a low income family with a child under 6 is $533 a month; for a child 6-17, the benefit is $450. The Canada Child Benefit is made regardless of the source of a parents’ income, so those on social assistance do not lose it if they begin to work. The new benefit pays $57 to $74 more per child per month than the old.

But like the GST credit and Trillium tax credits mentioned earlier, the benefit is paid only if a person files an income tax form each year. The Hamilton Roundtable for Poverty Reduction estimates several thousand Hamilton families do not file and thus do not receive this payment.
**OW and ODSP payments, including Ontario Child Benefit, and adding the Canada Child Benefit, for single adults and parents with children under 6.**

<table>
<thead>
<tr>
<th></th>
<th>Ontario Works and Ontario Child Benefit</th>
<th>Canada Child Benefit</th>
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<th>ODSP and Ontario Child Benefit</th>
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The Ontario and national child benefits have been hailed by our governments as important steps to reducing child poverty and they have moved many poor families that were just below the poverty line to being just above it. But although 10 of our speakers have children, none mentioned the Ontario child benefit or the old national benefits that existed at the time of the social audit.

It is important to note that even with the highest income figures shown in the chart above, parents on social assistance who have one or two children remain at least $9,000 below the low income measure, updated for inflation, for households of two, three, or four people.

Of course, all costs rise when there are children. Consider only the need for a larger housing with children. Whereas average rent for a bachelor apartment was $656 in Hamilton in October 2016, the average for a one-bedroom was $154 higher at $810 and $306 higher for a two-bedroom. (These figures do not include Ancaster, Dundas, Flamborough, Glanbrook or Stoney Creek.) Those higher amounts alone would eat up much or all of the amount that Ontario Works, Ontario Disability Support Program and the Ontario Child Benefit pay to parents, and there are of course additional food, clothing and all the other expenses for children.

The financial situation of the families of some of our speakers would be improved if child support that was due was actually paid.

Helen, at stay-at-home with five children, said she is entitled to $1,000 every two weeks in child support for her five children but their father arbitrarily reduced that to $600. “He
pays what he wants to, even though there’s a legal agreement,” Helen said. “He was always financially responsible, so I never thought he would do that.”

Ontario has the Family Responsibility Office that, according to its website, “collects, distributes and enforces court-ordered child and spousal support payments.” But Helen has found the office hard to deal with.

“I go through the system but the Family Responsibility Office is not helpful,” she said. “Trying to get information from FRO is like talking to the wall... "I call FRO every week ... nobody tells you nothing. I don’t have a case manager yet.” Her ex owes her $20,000 and she is confident she will get it someday, “but you can’t put your stomach on hold.”

There are limited resources for youth in the city. Notre Dame House is the only homeless shelter aimed specifically at youths 16-21 but its future was put in doubt when the city of Hamilton decided in late 2015 to cut $230,000 in annual funding it had provided for the program.

Brennan House provides a home for youths 16-20 with mental health challenges. Angela’s Place and Grace Haven provide homes for mothers under 21 and their children.

Robert, 20, deals with Asperger’s syndrome and borderline personality disorder. When he could no longer live with his mother, his family arranged for him to go first to Notre Dame House and then Brennan House. He has learned to think about situations more rationally, has learned some life skills and is in an anger support group. He hoped this would allow him to move back with his mom and try to get a job.

Robert felt there should be more funding for Notre Dame House because it was the only youth shelter in the city. Donations from private citizens have made up for some of the $230,000 lost when the city cut its funding but Good Shepherd, which operates Notre Dame House, is still looking for a permanent funding source to keep the shelter open.

“Research shows that a third of homeless adults were homeless as teens,” Good Shepherd’s newsletter notes. “We need to interrupt this cycle of poverty and homelessness and empower Hamilton’s youth to become independent members of society.”

“The connections between poverty and mental health are clear.”

Winnie Doyle, Vice-president, Clinical Programs and Chief Nursing Executive, St. Joseph’s Healthcare
Mental health

There’s a complex interrelationship between poverty and mental health. Clearly, mental health problems made it difficult for many of the speakers to hold a job, temporarily or longer, leaving them in poverty. But struggling to survive in poverty also takes a toll on mental health.

Tom, who is active in the Mood Menders mood disorders program, put it this way: “If you are in poverty, you’ll have mental health challenges and if you’ve mental health issues the odds are you’ll end up in poverty.”

Erica said she had never been depressed until she found herself struggling to cope with living on Ontario Works with her young son. “Poverty causes mental health problems,” she said. She also believes she has developed rheumatoid arthritis because of stress of living in poverty.

Diane said she suffered from depression and anxiety because she hasn’t been able to find work since losing the last job she had when her company was sold. “I feel like a hamster spinning wheels. And that brings down your mental health. If other things don’t align, your mental health goes down. It’s a vicious circle.”

Irene said she said has tried to kill herself because “I was never going to get anywhere.”

For others, mental illness contributed to their ending up in poverty. Scott came from a wealthy family but was abused as a child and coped by taking drugs. He’d get things under control and be financially fine, then return to drugs and lose it all, then repeat the cycle. He eventually learned he had post-traumatic stress disorder. The diagnosis was a great relief: “Maybe this wasn’t my fault,” he said of his problems. He could stop blaming himself. “There is a reason I was doing what I was doing.”

Wade spent a decade on the streets before seeking help with his addictions. He had lost everything he had. He was diagnosed with schizophrenia and spent time in mental health institutions.

Martin also lost everything. He was married, had a carpet company, two houses, two cars. But the marriage fell apart, he had to liquidate everything and moved in with his grandparents. His work ruined his knees and his back. He struggles with alcohol and drug use and his ability to deal with both is hampered by fetal alcohol syndrome. He cycles up and down, has spent time in jail, has had a number of short-term relationships, can’t manage money or his time well. Drugs and alcohol are “the only way I knew how to deal with stress. You don’t care for a while—and then you wake up.”

Patty works in the sex trade and ran an escort business for a while. But she struggles with borderline personality disorder and has spent time in jail. “I’ll be good for a while and then everything falls apart,” she said.
Frank, who has struggled with mental health problems since his 20s, noted that there is a lot of shame involved with mental illness, so “you don’t want to ask people for help.” As a result, he delayed getting help. Scott, too, talked of the stigma around getting help for a mental health problem.

And when you are ready to seek help, some of the speakers found getting the help they needed wasn’t easy.

Getting an appointment with a psychologist is hard and with psychiatrists “almost impossible,” Frank said. Scott said it took him two years to get an appointment with a psychiatrist. And when he did, the psychiatrist said his case was severe and asked why did he had delayed getting treatment for so long!

Wade said he got nowhere in the mental health system 30 years ago. “I never felt any compassion or connection, I never felt wanted. I felt like a number.” “When I crashed, they treated me like a buffoon—I was crying my eyes out and the social worker laughed in my face, a psychiatrist criticized my emotional maturity. I swore I would never treat anyone the way I was treated. ... I felt judged.”

Nigel, who has been diagnosed with schizophrenia, faced a six month wait to see a psychiatrist when he was a teen and his family had trouble paying for him, so he was treated by a student psychologist who wasn’t much help.

He said family doctors don’t tend to ask about mental health, “so we discover there is a mental illness when we have a crisis. We have no way to catch mental illness with this hit-and-miss system. The problem with mental illness is that you think you are normal. We need mental health checkups.”

**Dental health**

Tom began his presentation by apologizing for the fact that he might be lisping. He said a problem with living in poverty on Ontario Works is the complexity of getting dental care and “rather than going in and getting teeth removed so I can get dentures, it turns into a six-stage process.”

Others also talked of dental challenges. Anne, a single mom who was on OW and now works as much as she can, said she hadn’t had dental care since she lived with her parents. She didn’t qualify for coverage and “a trip to the dentist is so expensive.”

Irene grew up in poverty sufficiently deep that her family could not afford tooth brushes or toothpaste. Today, at 27, half her teeth are useless. Her dentist has said it would cost $10,000 to $15,000 to try to save her teeth, although it wasn’t clear it that was even possible. She needed nine crowns.
For Erica, cavities were a new thing since she’d had to go on Ontario Works. She found there was a change in her dentist’s conduct with her after she was on OW—he smiled less and got angry with her—and she only understood why when she learned he received only a fraction of his usual fees for her care.

There are dental benefits for family members under 17 of both Ontario Works and ODSP recipients. There is basic dental care for adults under ODSP but no mandatory dental benefits for adult Ontario Works recipients. Benefits can be provided at the discretion of local municipalities and Hamilton does provide discretionary benefits. To get care, patients must present the dentist with their OW or ODSP dental card first. The dentist must be a participant in the Ministry of Community and Social Services Dental Plan. With Ontario Works in Hamilton, before any treatment, the dentist must submit to Public Health an entire treatment plan, which can be carried out only when Public Health has stamped the plan “approved.” An exception is made for emergencies, defined as pain, bleeding, swelling or trauma. There are fixed fees for procedures and extra billing by the dentist is not permitted. What is and is not covered is quite specific.

“The lack of coordination, the amount of time you spend just navigating and advocating... it is a full-time job being poor.”

Father Con O’Mahoney, Vicar for Education, Roman Catholic Diocese of Hamilton

**Complex systems and lack of co-ordination**

Brittany’s story about her struggle to find housing, told above, illustrates something noted by many of the speakers—it is difficult to understand and to navigate the systems and institutions that might be able to help them.

There are many agencies and programs that might be helpful but there is no one to guide a person or family to them. Case workers have limited time and mandates. Different agencies have different eligibility and other rules, are scattered across the city and open at different times.

Often it is by accident that someone learns of a program or charity that could help them with a specific need.

Just scrambling to get by means “it’s a fulltime job being on OW,” Anne said.

Frank, who wound up in hospital after a mental health crisis, said he didn’t know about a whole series of services—Good Shepherd, Indwell and the Housing Help Centre—that
could have helped him when he was discharged from hospital. He feels fortunate to be living in an Indwell unit.

Lee said she didn’t know about St. Charles Adult and Continuing Education and would have finished her high school education much faster if she had.

Many rules are simply frustrating. Anne knew a friend who went to St. Joseph’s Hospital for suicidal thoughts and, because he no longer had an address, his benefits cheque were going to be either reduced or cut off entirely. “No wonder people have problems with mental health,” she said.

Eligibility for dental coverage is complex, as are rules around assistance for education.

As noted earlier, caseworkers can be very helpful but not all are willing or have the time to really work with clients. Just getting to services can be costly and time consuming.

Different government ministries do not always co-ordinate their programs even though there is lots of overlap between, say, health and social welfare issues. Separate programs often exist for Indigenous peoples and there are also separate programs for immigrants.

Lack of awareness by service providers about the impact of mental health problems can be a real barrier to getting needed help. People can be judged as being difficult because of behaviours they cannot control.

Diane said there needed to be more funding for the social assistance system, so that staff have more time to help their clients.

Brittany said there needed to be better co-ordination among different programs and better management of information. She said she had to fill out one detailed, comprehensive form three times. Once should have been enough. The questions asked were intrusive and it was traumatizing, to, for instance, have to repeat stories of past abuse.

“The incoherence of the system” is frustrating, Brenda said. There should be some agency or directory to oversee all of the things poor people face.

Cynthia echoed that view. “There is no one agency managing all of your stuff.” For herself and her disabled children, she deals with Ontario Disability Support Program and the specialized Assistance for Children with Severe Disabilities program plus other government programs, plus Indigenous programs, plus charities for special needs equipment.

Cynthia is fortunate that she has a full post-secondary education that helped her find the resources she needed. And her husband has a college education. And still, her family struggles.

“If two people with university and college education can't do it, how do others cope?” Cynthia wondered. “My sister has a learning disability. How can she cope?”
“We need to acknowledge that systems that are supposed to help vulnerable people often fail them.”

Carolyn Gosse, President of St. Joseph’s Home Care and Vice-President, Integrated Care, for St. Joseph’s Healthcare

**Transitioning from social assistance to employment**

Getting out of poverty is hard. Just surviving day to day can take all your time and energy. Poor housing and an inadequate diet can take a toll on one’s health and energy level. It can be hard to find the money for a phone, for appropriate clothing and for transportation to get to interviews or work.

If a person receives Ontario Works or Ontario Disability Support Program payments, those payments are reduced if they earn income. There is no impact for the first $200 a month of earnings. Earn more, and there is a 50 cent reduction in OW or ODSP payments for every dollar of net income earned. Those on ODSP do receive a $100 Work-Related Benefit that is paid for every month a recipient works.

If a person lives in subsidized housing, the amount of subsidy will be reduced as they earn income. If they are receiving rent geared to income that is set at 30 per cent of your income, then the reduction is 30 cents for every dollar earned. However, there are oddities in the calculation of subsidized rent for people receiving ODSP that can make the impact much greater if there is a shift from a fixed and small rent payment to rent geared to income.

These reductions in OW or ODSP benefits or in rent subsidy can act as a disincentive to work, especially given the likelihood that there will be additional costs for transportation and possibly clothing and food when a person is working that they would not otherwise face.

A further disincentive may be the loss of medical benefits that are provided to OW or ODSP recipients but that might well not be provided by a new employer. Extended Health Benefits or Extended Employment Health Benefits might be paid after a person leaves Ontario Works. The Extended Health Benefit applies as long as the excess of earned income over OW entitlement is less than the health-related costs. Extended Employment Health Benefit can be paid for up to six months if a person leaves OW for a job, if they don’t qualify for the EHB and if the job doesn’t provide health benefits.

Cynthia’s husband was about to be employed, at a good job, but it wasn’t obvious how much economic benefit there would be. The family, with two disabled dependents, had high
medical costs. “We’ll lose the disability benefit, so medication will not be covered and that’s $25,000.

“I’ll lose the child tax benefit as well,” Cynthia said. “So ... it does not really benefit us much to work.

“There should be a year or two of get-on-your-feet allowance,” she suggested.

Child care costs and arrangements can also discourage seeking work, although child care costs can be deducted in determining net income before deductions are made to Ontario Works or Ontario Disability Support payments. But there are also challenges just finding childcare. Olivia said more child care spaces are needed so parents can work.

Several speakers said there needed to be more employment resources. Cynthia said there needed to be assistance to help people become self-employed. She noted that you can come in as a new Canadian and get funding for entrepreneurship training but not on social assistance.

There are opportunities for work-related training but some of our speakers ran into problems.

In 2006, Ontario Works paid for Diane to get seven months training in a private college and the financial administration diploma she earned was enough to land her a job. But two years later, the company was sold and she hasn’t been able to find work since 2009. She said Ontario Works had a rule that it would only pay for courses that took a year or less and there was a lifetime maximum of $10,000 that could be spent. That first course used up all but a few hundred dollars of her lifetime total, so there isn’t enough money available for her to upgrade her bookkeeping skills to help her find employment. And the one-year time limit sent her to a private college whose diploma is not recognized by many employers.

“Had I been trained properly, I’d probably be eight to 10 years into a career and you could have gotten me off your system,” Diane said. Instead, she is still on Ontario Works, as she has been for most of 11 years.

Irene also got a diploma from a private college—she took out a loan to go—but found employers would not accept it, requiring instead accreditation from a community college.

Tom said Ontario Works and Ontario Disability Support Program should provide money so people can afford the internet. “You can’t apply for a job without the internet,” he said.

Wade was fortunate when he first got work while still receiving ODSP payments. He was able to start part-time and increase his hours until he was employed full-time and no longer received ODSP cheques. “I think I would have failed if I’d done it all at once. The transition is very important.”
And it helped a great deal that his employer provided benefits. “It would’ve been a lot harder without benefits,” he said. “Benefits are very important because my medication is very expensive.”

One of the biggest disincentives for work is the changed nature of work itself. A report from TD Economics, hardly a radical source, summarized the challenge:

“Shifts in the structure of the labour market and in the composition of the labour force have resulted in a shrinking portion of the unemployed population being eligible for federal Employment Insurance benefits, leaving working adults with fewer resources to fall back on when they lose their jobs. At the same time, the poor quality and non-standard nature of many of the jobs that are being created today—which pay low wages and offer no health or pension benefits [and often offer only contract work with limited and unpredictable hours]—have increased the economic insecurity of Canadians who do work, while lack of affordable child care has restricted others’ ability to find work in the first place—particularly the heads of lone-parent households, who account for an ever larger share of the population. And, in today’s knowledge-based economy, being out of the workforce for even a short time requires more upgrading of skills and training than ever to make a successful re-entry.”

“It’s a problem. People are not being asked what they need but told what they need.”

Sue Prestedge, Academic Co-ordinator for Journalism, Mohawk College

4. What helps

It was clearly hard for some of those interviewed to tell their stories. Several were in tears. Each of them was accompanied by a volunteer, who both prepared them and talked with them after they had spoken. One person spent a half hour in a nearby chapel with a volunteer.

Yet a surprising number still had hope. This section explores some of the things that are working or have worked to make things better.

Good programs

Danielle praised a pilot program that the city ran called Beginning Today that provided Ontario Works recipients who had addictions with the kind of “intensive” case
management many of the speakers wished they could have. Danielle found it much more compassionate and useful than regular Ontario Works administration.

Beginning Today was a pilot program that involved using “a solution-focused, participant centred approach to assessing and meeting participants needs. This means working with participants to build on their strengths and skills.” Six case facilitators provided “wraparound supports for participants using an intensive case management approach. This method ensures that participants receive the right services, in proper sequence and in a timely manner. These specialized staff are highly trained and skilled and have lower than average caseloads to enable the provision of this type of case management.”

The evaluation done for the city in 2013 concluded that this intensive case management did succeed in increasing employment and in increasing abstinence or at least low-risk drinking.

Robert, as noted in the section on children, benefitted from life skills training. “You learn life skills so you can live on your own... It’s a great program and people definitely need it.” Lee said there needs to be more life skills training in regular schools.

Brenda and Adele have been helped by Steps for Health, a program of Good Shepherd that offers exercise, cooking, nutrition and weight and smoking management assistance as part of a program to prevent chronic disease and enhance quality of life.

Danielle and Adele use the Good Food Box, a program that provides a box of healthy food each month, 10 produce items for $15 or seven for $10. The program uses volunteers to pack and distribute the boxes, reducing costs. Others liked the sit-down dinners prepared and served by volunteers at Out of the Cold locations, six days a week from November through March. Several praised food banks that gave people a choice of which foods they took.

The Campaign for Adequate Welfare and Disability Benefits is an organization of Ontario Works and Ontario Disability Support Program members who support each other and advocate for issues that affect them. Carol, a member, said the organization also has contact with people working inside the system who can quickly fix some problems such as people being wrongly removed from OW or ODSP.

**Flexibility**

Irene, now 27, looked back fondly to the support she had to get her through high school.

“Delta was phenomenal,” she said. The school accommodated people with mental health problems and absences from school or the desire for a smoke break. She was 21 when she graduated and her teachers backed her up to allow her to stay until she was finished. And
teachers also gave her financial help, handing her cash when they suspected she needed food.

**A catalogue of resources**

A good information resource about financial help and services is the Basic Needs Financial Support Catalogue produced by Hamilton's Best Start, the community collaborative network that supports Hamilton families. The catalogue, which is printed and online, identifies many resources available for low-income families. There is also a chart of services for young children. [http://hamiltonbeststart.ca/community-initiatives/](http://hamiltonbeststart.ca/community-initiatives/) 905 546-2424, ext. 3010.

**Really listening**

For many of our speakers, their lives improved when someone took the time to really listen to them. They felt, sometimes for the first time, that they mattered. And by really listening, a person was able to better help them.

“It helps when I have someone to talk to,” someone who understands that your feelings matter, said Robert. “Trust is the biggest thing between someone with mental health challenges and someone trying to help them.”

Diane, as noted in the section on isolation and stigma, finally got help with mental health challenges that had been holding her back, after she fought to get a caseworker to take the time help her find out why she wasn’t getting ahead.

Emma, who had a stroke, had two quite different experiences—and results—with two people from the Community Care Access Centre which arranges for needed care. One person made a decision about what care she needed over the phone. Another actually met with her and determined that she needed help every day of the week, not just the three days that she had been getting. She also praised the woman at Mary’s Place, an emergency shelter, who helps find permanent housing for those in the shelter. She “is awesome. She listens, she tries to do something.”

Scott coped with childhood abuse by using drugs and had years of treatment, without success. Part of the problem was that he was never honest about the abuse he’d suffered. Then he got a case worker at Good Shepherd who just said to him, “How can I help you? Tell me why you have so much pain.” And then she listened. “I cried for six hours over three sessions. She never said a word.” “From the first words, you can tell” if they care. At one point, Scott said, he was hospitalized and “Brother Nick called three times a day to see how I was. When people care, why would I want to go back [to drugs]? Isn’t that love?” One of the brothers told him “we love you. My parents never said that to me. They see something in me that maybe I don’t see but I will.”
Support

“I feel very privileged,” Brenda said. “I have a support system.”

Having people and/or institutions in their lives to help them—helping overcoming isolation, helping them find resources—is really important and was common to the experience of the most hopeful speakers.

For Brenda, it was her involvement in the Hamilton Roundtable for Poverty Reduction that meant the most to her. The roundtable has an almost 50-50 split between people with and without lived experience of poverty and the work feels meaningful. As noted above, she also participates in Steps for Health.

“It’s participating in the community that helps me,” Brenda said.

“As I’ve helped myself, I’ve helped my children,” she said, spreading what she’s gained. Her son was 30 and a hard-core drug addict. “I got my son clean and sober and now he has a partner and I have grandkids.”

Irene is supported by WrapAround, a program for life-planning that links individuals or families with a trained facilitator and a support team chosen by the client to help them identify and work towards their dreams.

Irene also goes to the Hamilton Regional Indian Centre. “I prefer accessing Aboriginal services. You can have four years if that’s what it takes you to trust.”

St. Joseph’s mental health services helped her get a diagnosis and the Bridge to Recovery program there helped her change her thought patterns.

Volunteering

Despite—or perhaps because—of their challenges, many of the speakers volunteer in some capacity. Like having a support system, volunteering prevents social isolation, it can be fun, and it provides a reason to get out of the house. Often volunteers learn new skills and make important contacts. They may hear of opportunities or of resources they didn’t know about. Sometimes they get fed. Not least important, several speakers valued the opportunity to give something back to the community.

“I had to start volunteering just to get out” and overcome the isolation he felt living on Ontario Works, Tom said. He became active in Mood Menders locally and eventually became president. Diane volunteers for the same reason, to get out.

Adele is a support person with a circle of accountability that works to reintegrate sex offenders into society, volunteers in her church and has been active in a number of other organizations.
Anne has volunteered as a speaker in the community, talking about the experience of poverty. “You're always hopeful it will go somewhere, that maybe someone with influence hear something.” Through volunteering, she has met people like social planners who are able to help her solve some challenges. She tries to help others who she sees are struggling.

Scott volunteers at Good Shepherd, whose programs and people were key to his recovery from addictions. “I really want to learn more about mental diseases so I can help.”

Olivia, who has struggled financially for much of her life, tries to help people who need help. But she says there is a payoff to volunteering. “Volunteer so you have a circle that helps you. Use the table around you. Without the trust of that group, you'll stay still.”

**Spirituality and being part of a faith community**

Being part of a faith community or having some spiritual practice was a source of strength for a number of the speakers.

“For spiritual health, I connect with nature, where I witness God,” said Danielle. She paints, too, at waterfalls. “At a waterfall, I feel like one of the most abundant people in the city.”

“I also see God in the people who helped me.”

“My spirituality is being in touch with who I am,” said Karen, an Indigenous woman. “I know who my Creator is. I have my own way, and I only answer to myself and in the end, I'll have to answer to whoever it is up there.”

After feeling both cared for and loved at Good Shepherd as he recovered from trauma and addictions, Scott said, “I am starting to go to church and I believe in God. It’s a wonderful life.”

“I am part of a church community and that’s been very helpful,” Wade said. “It’s because of my wife’s support, 12 Steps and my church” that he has been sober for 18 years, has found a job, married and has a home.

Wade said he used to be a militant atheist. When he was addicted, his addiction was more important than anything. “God was my way out... God and the people God gave me.”

Adele, who has struggled with depression but is doing well now, said what keeps her going is “faith in God.” She attends New Vision United Church where she sings in the choir and is a member of the affirming committee that supports gay, lesbian, bisexual, trans, queer and two-spirited people.

“The emptiest times have been when I’m not at church, when I don’t feel God in my life.”

“I’ve always been grateful. I don’t complain. I try and be there for others. I always say, whatever happens to me, someone has had it worse and I just keep on going.”
“A doctor once told me that the best antidote for mental health issues is a home, a job, and a friend. The people who shared so honestly and openly about the challenges of their lives convinced me that it is true. They also helped me understand the importance of spirituality in life – knowing that you are loved, and that God has your well-being in mind. Those who did seemed better able to cope with the challenges they faced. They had hope – no matter how meagre.

I also became acutely aware of the importance of community support when people find themselves in distress. The Good Shepherd ministries… and their many centres in Hamilton help when people need to put fractured lives back together again and there is nowhere else to turn… Such groups deserve to be supported with sufficient government and community funding.”

Bishop Douglas Crosby, OMI
Roman Catholic Diocese of Hamilton

5. What the auditors heard

A consistent theme presented by the participants who recounted their experiences and perspectives at the Hamilton Social Audit was that of being unheard. Many said that even when they told their truth about the deprivation they faced and the obstacles they encountered to living with a semblance of comfort and dignity, they felt ignored, disbelieved or blamed.

It is for this reason that the auditors play such a significant role in the audit process. Their presence and commitment to listening deeply to the lived experiences of people affected by poverty offered assurance to the participants that their unique struggles were truly being heard. Further, the auditors’ attention signaled that there is a strong current of concern and a genuine interest in understanding the real human costs of poverty.

The auditors selected for the 2016 social audit brought impressive credentials with them. (They are named on page 3.) They are leaders in our community whose opinions and perspectives carry weight and have the potential to influence those around them. The audit organizers sought out auditors who represent a cross section of the institutions that are the foundation of our community—faith groups, education, healthcare, media and local government. They were chosen because when they speak, people listen.

Poverty was certainly not a new issue to this panel of auditors but in the unique details of individual stories, they found a much deeper understanding of the factors that trap people in untenable circumstances. Every story shared by the 29 participants reinforced the fact that being poor chips away at a person’s sense of self-worth, their dignity and their
hope. As one auditor observed, poverty should be viewed less as an economic problem than as a moral crisis.

**Key issues identified by the auditors**

- The social assistance system is fundamentally flawed and does not reflect a commitment to human dignity. Inadequate assistance rates consign individuals to living in deep poverty and limit opportunities to forge an improved quality of life. There are simply too many obstacles to moving out of the system. Recipients must continually weigh the relative benefits and costs of transitioning into paid employment when and if this is an option for them.

- Our failed response to poverty reflects a deeply entrenched cultural belief that people choose to be poor. The reality is that being poor is hard work. Creating a deeper understanding of the skill and resilience it takes to navigate the complex and costly systems that allow poor people to live at a subsistence level in our communities might be a starting point for shifting the victim blaming mentality that dominates mainstream thinking about social welfare. We need to calculate the lost productivity, creativity and human potential that is the result of poverty.

- It is essential to understand the factors that put people at greater risk for becoming trapped in poverty. Statistics demonstrating the disproportionate rate of poverty amongst women, Indigenous people, members of the LGBTQ2 communities, racialized and disabled people, and newcomers were brought to life in the accounts of many audit witnesses. Dismantling cultural and systemic discrimination is essential to reducing and ultimately eradicating poverty.

- The pervasive presence of violence in the stories shared with the auditors was deeply disturbing. Numerous witnesses identified clear links between being poor and historical experiences of child abuse and woman abuse. Others spoke to both their own and their children’s experiences of being bullied and harassed in relation to their economic circumstances. It is imperative that we strengthen our social safety net to ensure that living a life free of violence and abuse does not come at the cost of living in poverty. Furthermore, we must ensure that people living in poverty have access to the same remedies and protections as other citizens for personal safety and security.

- The auditors identified the need to disrupt the cycle of poverty. Investment in early intervention and robust supports for children born into poverty, youth aging out of the child welfare system and for people impacted by mental illness present opportunities for lasting change.

The auditors clearly identified that our social safety net cannot be effective unless it is based on the premise that poverty is unacceptable. A social assistance system that maintains people in poverty is fundamentally flawed. Our persistent failure to acknowledge and respond to the intersecting oppressions experienced by people in poverty severely
limits our ability to create effective interventions. Poor people are not the problem. A broad lack of commitment to ensuring that vulnerable people are afforded the opportunity to live with dignity as fully engaged citizens is the problem.

Despite the dire condition of our social safety net, the auditors identified signs of hope in all they heard. Without exception, the people who shared their stories demonstrated tremendous resilience and strength. Each speaker was able to point to resources and strategies that allowed them to manage incredibly difficult circumstances. The support of a committed worker, family or friends, particular community agencies and faith communities were often identified as key to survival. Many of those who spoke to the panel also identified that volunteering in their community, participating in advocacy work and assisting others who were struggling as important to restoring their sense of self-worth and keeping the hope for a better future alive.

That sense of shared responsibility is a powerful driver for change. Auditors reflected on the importance of building more inclusive communities. Sincerely welcoming people affected by poverty into our neighbourhoods and into our lives was viewed as an essential step in breaking down isolation and stigma. Actively seeking opportunities to be effective allies in the fight to end poverty is essential. Working in solidarity to ensure that every member of our community can live with dignity, self-determination and respect is a moral imperative.

“We have to ask what the real cost of poverty is.”
Winnie Doyle, Vice-president, Clinical Programs and Chief Nursing Executive, St. Joseph’s Healthcare

6. Conclusions and Recommendations

The purpose of the 2016 Hamilton Social Audit was to listen deeply to the experiences of people who are living in poverty in our community and from that testimony to draw conclusions and recommendations that could inform efforts to fulfill the Ontario government’s stated commitment to reducing and ultimately, eradicating poverty.

The urgency of this task was certainly clear to all participants from the beginning of the audit process. Poverty costs Canadians between $72 billion and $84 billion each year. In Ontario, 10 per cent of the population lives in poverty. Locally, one in five Hamiltonians is poor and there are approximately 6,000 names on the wait list for affordable housing. Food insecurity is a daily specter in the lives of both the working poor and social assistance recipients, with nearly 20,000 people accessing food banks in this community each month.

There is clear evidence to demonstrate the loss of productivity and the massive costs to healthcare, criminal justice and social service systems associated with maintaining individuals and families in poverty. The often harrowing accounts of the 29 people who participated in the Hamilton Social Audit brought into stark relief the incredible erosion of
dignity and hope that results from subsisting on the margins of our community. Again and again, the panel of auditors heard about the isolation, stigma and squandered human potential that all too often defines the lives of poor people.

The unique barriers and vulnerabilities faced by women, Indigenous people, youth and seniors, racialized individuals and lesbian, gay, bisexual, trans, queer and two spirited identified people reinforced the need for an intersectional analysis of poverty and the use of an equity lens in developing policy responses. It was both humbling and alarming to hear such a diversity of personal stories that illustrated how easy it is to slip into the abyss of poverty and how very difficult or even impossible it is to find a way out.

Despite years of consultation and policy work by successive provincial governments, the landscape does not seem to have significantly changed for those directly impacted by poverty. While there have been some wins, the lived experiences of people dependent on social assistance benefits and/or those struggling to survive through precarious employment remain grim.

The recommendations drawn from the 2017 Hamilton Social Audit correspond to the particular experiences and perspectives of the 29 people who presented over three days in April 2016. They are not intended to offer a comprehensive response to poverty in Ontario, but rather to address the core concerns identified by these participants.

The Hamilton Social Audit panel recommendations do not touch on the Ontario government’s proposed Basic Income pilot project, since the idea had just been announced and there were no details available when the Hamilton audit was conducted last April. However, the panel feels that the fact that the minimum payment is proposed to be $1,320 per month, and the minimum for people with disabilities is proposed to be at least $1,820, underlines the panel’s contention that Ontario Works and Ontario Disability Support Program benefits are far too low.

The themes that emerged through this audit and the subsequent recommendations are quite consistent with those made by this community in its 2010 Social Audit and with those identified by advocates across Ontario for years. There is really little new to recommend. The complex cultural and systemic transformation that must occur to reduce and ultimately end poverty in this province will require significant investment and an unwavering commitment to an urgent moral imperative.

“Faith organizations need to partner with community organizations to make real change.”

Father Con O’Mahoney, Vicar for Education, Roman Catholic Diocese of Hamilton
Recommendations

1. Social Assistance Reform

There is substantial evidence pointing to the significant social and economic benefits to be derived from creating a social assistance benefit structure that provides adequate income for individuals and families.

It is essential that the Government of Ontario undertake major reform of Ontario Works and the Ontario Disability Support Program. Today’s social assistance rates are not evidence-based and do not reflect the real cost of living in this province. In fact, there is a 25 per cent gap between increases to social assistance rates and the rising cost of living since 1986.

Lack of safe shelter, inadequate nutrition and social isolation are a fact of life for most recipients, as are the mental health issues and chronic diseases that are disproportionately identified in people who are poor. In fact, for people living in Hamilton, being poor means facing a shorter life expectancy than individuals living above the poverty line. People living in the poorest census tract in Hamilton have a life expectancy that is 21 years less than people in the wealthiest census tract.

It is therefore imperative that this system be radically transformed to offer recipients the opportunity to live with dignity and to thrive, to achieve educational and vocational success and to participate as fully-engaged citizens in their communities. Without radical transformation, Ontario’s social assistance system will continue to perpetuate poverty rather than alleviate it.

The Hamilton Social Audit panel recommends the implementation of evidence-based social assistance rates based on the actual cost to maintain an adequate and equitable standard of living for all recipients. It is recommended that these social assistance rates be indexed to the cost of living.

Further, the panel endorses the creation of a Social Assistance Research Commission as proposed in Bill 6, a private member’s bill presented by Hamilton East–Stoney Creek MPP Paul Miller. In September 2016, this bill unanimously passed second reading. Should it become law, the Commission would be responsible for defining regions in Ontario based on economic geography to determine cost of living in each region and recommend social assistance rates based on this data. The work of the Social Assistance Research Commission would be an essential first step in building a rational, evidence-based social assistance system.

Further, the panel encourages the public to join the Fix the Gap campaign that is pushing for approval of Bill 6 as well as for a broad dialogue about social assistance. http://fixthegap.hamiltonpoverty.ca/

Until that Commission exists, the panel recommends the following:
• Single adult recipients of Ontario Works experience the deepest poverty. While the Ontario Government has increased the Ontario Works rate for singles more quickly than other social assistance rates, it has yet to fully undo the unprecedented cuts made by the Mike Harris government in 1995, when the rate for a single person was cut 21.6 per cent to $520 a month. Adjusted only for inflation, without any real increase, that amount would be $777 today, $70 more than the actual rate in October 2016. We recommend an immediate increase in Ontario Works rates for singles of $100/month to provide the first real (that is, inflation adjusted) increase in the basic Ontario Works since the 1995 cuts.

• In 2008 the Government of Ontario set a target of reducing child poverty by 25 per cent. While it did not achieve that goal, the rate of child poverty was reduced by 9.2 per cent between 2008 and 2011. We recommend an immediate increase to the Ontario Child Benefit and that all future increases be indexed to the Consumer Price Index.

• Dental care is a contributing factor to overall health and well-being. Poor dental health is linked to a range of chronic diseases that can result in substantial costs to the health care system. Furthermore, untreated dental problems can negatively impact self-esteem and exacerbate the social isolation reported by many people living on fixed incomes. We recommend accelerated implementation of comprehensive public dental care for all low-income adults. We further recommend that access to dental services be facilitated in a manner that does not promote further stigmatization of social assistance recipients.

• Inadequate nutrition and severely restricted access to fresh food was a concern raised by the majority of participants in the Social Audit process. Many identified inadequate diet as a major contributor to low energy and poor health. Food banks were identified as a necessary resource—especially as high rents force recipients to choose between paying rent and buying food. Participants stated that using food banks is time consuming, degrading and often provides them with food that is of poor nutritional value. The implementation of a healthy food supplement for all social assistance recipients should be an immediate priority for the provincial government.

• Many participants indicated they felt little hope that they would ever be able to achieve financial independence. Employment support services for those in receipt of social assistance were cited as inadequate and geared toward low-paying, precarious work. Participants in the social audit also identified the lack of affordable childcare and gaps in benefits to support re-entry into the workforce as significant barriers to employment. The need for deeper investment in employment services, affordable childcare and extended benefits to support sustainable transition back into the labour force were identified as essential.

• Parents receive the Canada Child Benefit only if they file income tax forms each year. The same is true of the federal GST tax credit and Ontario’s Trillium tax benefits. Both levels of government should encourage tax filing by low income
Canadians, and the Ontario and municipal governments should require their social assistance caseworkers to promote tax filing to receive these benefits. Community efforts should be encouraged to both promote and assist with tax filing.

2. Wages and Precarious Employment

Poverty is not the exclusive domain of those living on fixed incomes. Currently, about 30,000 people in Hamilton work and live in poverty. Audit participants who had jobs cited low wages, insufficient hours and lack of benefits as barriers to sustaining employment.

Precarious employment, defined as temporary, casual, short-term, or self-employed without employees, has increased by nearly 50 per cent in the last two decades. In Hamilton 57 per cent of workers fall into the category of insecurely employed. Only 21 per cent of these workers have access to health benefits.

More than 58 per cent of minimum wage earners are women and 35 per cent are racialized. Workers struggling with part-time employment, minimum wage pay, insufficient childcare options, and lack of health and retirement benefits often experience housing instability, health issues and erosion of family life and limits to community participation—experiences that mirror those of many people on social assistance.

In many Canadian municipalities, including Hamilton, there have been efforts to encourage public and private employers to pay not a minimum but a living wage. A living wage is the hourly wage required to cover basic expenses and to permit employees to not just subsist but to have access to the things that make for a decent qualify of life. Costs for housing, utilities, food, child care, transportation, internet access and social inclusions costs such as recreation programs are included in the calculations. Hamilton’s living wage is now $15.85 an hour.

Paid employment should be a pathway out of poverty. To address the issue of precarious employment the panel recommends:

- The Government of Ontario increase the minimum wage to $15/hour and then maintain its commitment to maintain yearly increases in line with the rate of inflation.
- The Government of Ontario implement a provincial universal health benefits program to ensure all low income individuals have the ability to manage health issues and maintain optimal health
- The Government of Ontario support efforts to promote a Living Wage to Ontario employers.
• The Government of Ontario increase investment in education and skills development that will support vulnerable workers in achieving greater employment stability and increased earning potential.
• The City of Hamilton approve raising the pay of all of its employees to a living wage as part of the 2017 city budget.
• Hamilton employers are encouraged to join the growing list of living wage employers, to adopt practices of fair scheduling for part-time workers and to shift as much as possible to full-time employment.

3. Housing

The vision for Hamilton’s 10 year Housing and Homelessness Action plan is “Everyone has a home...home is the foundation.” It is a foundation that many audit participants struggle to achieve and maintain. Rapidly escalating rents, discriminating landlords, poor building conditions, time limited housing allowances and long waits for subsidized housing make housing instability a major concern for people living in poverty.

Investment in affordable housing is an economic stimulus. Affordable housing, housing with supports and homelessness prevention services are essential resources for some of our community’s most vulnerable citizens. They are also investments that will pay dividends far into the future for the entire community.

The panel asserts that housing is a human right and recommends:

• The development of new a housing benefit for low income Ontarians that would reduce high shelter burdens, extend housing assistance to working poor people, and reduce barriers to move off and remain off social assistance.
• Increased investment in affordable housing and continued collaboration between all levels of government to address the affordable housing crisis provincially and nationally.
• The expansion of portable housing allowance programs to support individuals and families in core housing need to find and maintain adequate housing.
• Significantly increase investment in affordable housing with supports for people living with mental illness, intellectual disabilities, addiction, concurrent disorders (mental illness and addictions) and dual diagnosis (co-existing intellectual/developmental disability and a mental health diagnosis).
• Increased investment in homelessness prevention strategies/programs (e.g. alternatives to shelters, utilities assistance etc.)

4. Culture Shift - Building Equity and Inclusion

Nobody wants to be poor and yet we live in a culture that both overtly and covertly blames those living in poverty for their plight. There is a pervasive belief that being poor is the result of laziness, ignorance and bad choices. This prejudice feeds the discrimination people living in poverty face and is perhaps used to excuse our failure to take aggressive action to end poverty.

It is essential that we collectively unpack the complex social, political and cultural factors that trap people in poverty. It is also essential that we embrace an intersectional analysis of poverty that acknowledges the disproportionate representation of Indigenous and racialized people, women, people with disabilities, members of LGBTQ2 communities and newcomers. It is only in so doing that we can begin the process of building inclusive, resilient community for all members.

In order to facilitate an essential shift in attitudes and foster a more inclusive community for people affected by poverty, it is recommended:

• Anti-oppression education and poverty awareness be integrated into the Ontario curriculum from the earliest grades.
• That adherence to anti-oppressive practice be a standard requirement for all government-funded services and agencies.
• That the Government of Ontario utilize an equity lens in the development of social policy and in setting funding priorities.

The recommendations contained in this report are far from exhaustive but rather represent an effort to capture and respond to the major themes and concerns that emerged over the three days of the Hamilton Social Audit. There were many voices and perspectives that were not captured over those three days. For example, the auditors did not hear about poverty from a rural perspective. Nor were the concerns of seniors affected by poverty discussed in any detail.
Appendix:

Sources of information from sources outside the social audit event

Introduction


But poverty isn’t just bad luck


Living with too little money


The calculation of the current value of $520 for Ontario Works was based on Consumer Price Index, historical summary, by province, Statistics Canada, accessed February 5, 2017, http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/econ150a-eng.htm The consumer price index in 1995 was 86.8 and in 2016, 129.7. That’s an increase of 49.42 per cent, which would bring $520 to $777 in 2016 dollars.


Housing


Food


Isolation and stigma


Other forms of exclusion: Ethnic identity, skin colour, gender and sexual orientation

On groups with higher rates of poverty: Dennis Raphael, Poverty and Public Policy in Canada (Toronto: Canadian Scholars Press Inc., 2007), 59.


**Children and youth**


That many thousands of Hamilton families don’t receive the Canada Child Benefit: Tom Cooper, personal communication to Bill Johnston, February 7, 2017.

Family Responsibility Office:

**Dental health**


**Transitioning from social assistance to employment**


What helps


Recommendations


