

## Executive Summary

# Addressing Household Food Insecurity in Canada: Position Statement and Recommendations

**DIETITIANS OF CANADA**

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## Position Statement

It is the position of Dietitians of Canada that household food insecurity is a serious public health issue with profound effects on physical and mental health and social well-being. All households in Canada must have sufficient income for secure access to nutritious food after paying for other basic necessities.

Given the alarming prevalence, severity and impact of household food insecurity in Canada, Dietitians of Canada calls for a pan-Canadian, government-led strategy to specifically reduce food insecurity at the household level, including policies that address the unique challenges of household food insecurity among Indigenous Peoples. Regular monitoring of the prevalence and severity of household food insecurity across all of Canada is required. Research must continue to address gaps in knowledge about household vulnerability to food insecurity and to evaluate the impact of policies developed to eliminate household food insecurity in Canada.

[pour la déclaration et les recommandations position en français, voir page 8]

## **What is household food insecurity?**

Household food insecurity is a condition in which a household's access to food is inadequate or precarious because of inconsistent income or insufficient financial resources. Household food insecurity exists at a *marginal* level when a household (including adult(s), with or without children) worries about running out of food and/or experiences income-related barrier(s) to accessing adequate food; *moderate* food insecurity occurs when a household must compromise the quality and/or quantity of food consumed due to a lack of money; and *severe* food insecurity describes a household situation in which eating patterns are disrupted (including missed meals) and food intake is reduced.

## **Many people in Canada experience household food insecurity.**

One in eight (12.6%) Canadian households, a total of almost 4 million adults and children, experienced household food insecurity in 2012<sup>1</sup>. The prevalence and severity of household food insecurity is very high in northern Canada, particularly in Nunavut, where 45.2% of households were food insecure, including 18.5% with severe food insecurity. The prevalence of household food insecurity is also higher than the national average in the other two Territories and in the Maritime provinces.

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

Households experience food insecurity when there is not enough money for adequate, secure access to food, after paying for rent, utilities and other basic living expenses. Among Canadian households reliant on wages and salaries as their main income, the prevalence of household food insecurity was 11.2% on average in 2012. The largest proportion of households with food insecurity in Canada (almost two thirds, 62.2%) are “working poor” households with low wages/salaries or self-employed, including part-time work and precarious employment.

The prevalence of household food insecurity is also high among households reliant on income from government sources, such as Employment Insurance, Workers' Compensation and social assistance – about four to six times higher than that of the average waged/salaried households – since these incomes are also low. Unexpected financial or budget shocks, resulting from job loss, salary reduction, reduced work hours, inability to work due to a health condition, unexpected household expenses for medication or legal fees and/or increased housing costs, can cause household food insecurity for short periods of time and/or lead to persistent household food insecurity.

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<sup>1</sup> Data collected through the Canadian Community Health Survey, using the Household Food Security Survey Module, from all provinces and territories – see [Household Food Insecurity in Canada 2012](#). Total household food insecurity includes marginal, moderate and severe food insecurity.

The experience of food insecurity within one's household at some time in the past year is likely a more accurate and sensitive indication of inadequate financial resources than typical indicators of poverty based on average annual income. Measured decreases in the prevalence of household food insecurity are an indication of successful policies that support adequate income on a consistent basis. While rising food prices and the much higher cost of food in some northern and remote regions of Canada can contribute to a household's risk of experiencing food insecurity, all income and expense factors must be considered in the development and implementation of public policy to ensure all households will consistently have enough money to buy and/or obtain traditional/country food through hunting, fishing, gathering/growing.

### **In Canada, some households are at greater risk for having inadequate incomes and experiencing household food insecurity.**

The prevalence of household food insecurity was reported to be two to six times higher, compared to the general population (12.6%), for some households. Higher prevalence (greater risk) of food insecurity was reported among:

- households with low incomes – whether from government sources, like Employment Insurance or Workers' Compensation (38.4% prevalence of household food insecurity) or social assistance/ disability pension (69.5%), or low/ precarious wages (the lower the income, the greater the risk for household food insecurity)
- households with children under 18 years, especially those headed by a lone female (34.3%)
- unattached adults, living alone or with others (17.3%)
- adults between 60-64 years, especially if living alone – the risk for household food insecurity is at least double, compared to seniors over age 65 years (couples 65 years and older – 5.8% household food insecurity, those living alone – 7%)
- Indigenous Peoples – living off reserve (28.2%) or living on reserve and/or in more remote or northern communities (up to 70%)
- people who identified cultural or racial background as Black, Latin American or Arab/West Asian (21.7-28%)
- some newcomers to Canada (immigrants and refugees) experienced greater risk for household food insecurity, but this varied depending on length of time in Canada and household financial resources
- households living in market rental accommodation (up to double the risk of household food insecurity, compared to subsidized rental housing); household food insecurity among renters was four times greater than among homeowners (26.1% versus 6.4%)
- households in which individuals had one or more chronic physical and/or mental health conditions (as much as 1.43 greater risk with one chronic condition, 3.44 times greater risk with 3 or more chronic conditions).

The greater prevalence and severity of household food insecurity among Indigenous Peoples has been associated with lower incomes, inequities in education and housing, as well as unique challenges of accessing traditional/country foods, lands and resources, and store-bought foods (often higher cost in many Indigenous communities, in spite of programs such as Nutrition North Canada), and safe drinking water. Recent visits from two UN Special Rapporteurs noted the unique challenges and high prevalence of household food insecurity among Indigenous Peoples in Canada.

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

Much of the disparity in prevalence, severity and impacts of household food insecurity is related to social determinants of health, i.e., social and economic factors and living and working conditions that influence people's health. Extreme differences or inequities in income and wealth have negative health consequences for people living in poverty. The experience of household food insecurity is associated with a greater likelihood of having one or more chronic physical and/or mental health conditions (about 1.5 to 3.5 times more likely) and of becoming a 'high cost user' of health care services within the next five years (about 1.5 times more likely). The presence of chronic physical and/or mental health conditions makes it more difficult to cope, work and care for oneself, increasing the risk of experiencing household food insecurity. Conversely, among individuals who are already experiencing household food insecurity, the risk of a decline in health and developing chronic physical and/or mental health conditions increases, along with additional costs related to the management of these conditions. It has been estimated that an increase of \$1,000 annually to the income of the poorest 20% of Canadians would lead to 10,000 fewer chronic conditions and 6,600 fewer disability days every two weeks.

Among adults in food insecure households, there is a higher prevalence of mental health conditions including depression. Children who repeatedly experience severe household food insecurity are two to four times more likely to have poorer health or a diagnosed chronic condition. Greater risks of developing depression and suicidal ideation in adolescence and early adulthood have been associated with childhood experiences of household food insecurity.

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

The prevalence of poverty is a serious public health issue and the costs affect all Canadians. The additional cost of poverty in the Canadian health care system was estimated to be \$7.6 billion per year, using data from 2007. Compared to adults living in food secure households, adults in food insecure households are more likely to have one or more chronic physical and/or mental health conditions, with the likelihood of multiple conditions rising with increasing severity of food insecurity. Total health care costs of working age adults have been shown to be greater with greater severity of food insecurity – 23%, 49% and 121% higher health care costs for adults living in households with marginal, moderate and severe food insecurity respectively, compared to adults in food secure households. The odds of becoming a "high-cost user" of the health system within the next 5 years have been reported to be 46% greater for adults 18 years and older living with moderate or severe food insecurity compared to those living with marginal or no food insecurity.

In 2007, it was estimated that it would have cost approximately \$12.3 billion to bring the incomes of all Canadians to just over the poverty line, while the total cost to society and the economy, due to poverty, using cautious estimates, was approximately \$25 billion – fully twice the cost of poverty elimination in that same year.

Food-based programs can provide many benefits to communities, but they are not a solution for food insecurity experienced within a household. Only about one in every four or five food insecure households may access and receive some food from food banks, soup kitchens or other food-based relief programs. These charitable food relief programs do not have the capacity to provide sufficient quantities of food to fill the gaps, nor were they intended to provide the solution for household food insecurity. While community-based food initiatives, such as community gardens, cooking programs and good food boxes, provide a variety of benefits to individual participants and local food systems, current evidence shows that relatively few individuals from food insecure households participate. Inadequate or insecure access to food is very stressful for households and the management of household expenses becomes a daily challenge. When there is not enough money in a household to buy adequate food, no amount of skill in food budgeting or food preparation can put food on the table. Different households will choose different strategies to cope, including postponing bill payments, borrowing money, eating with family or friends, choosing lower quality foods and skipping meals.

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

Elimination of household food insecurity requires secure, adequate income for all households to be able to pay for housing, food and other basic living expenses. Government policies can promote income security through basic income guarantees, employment policies, income transfers and tax subsidies, exemptions and credits. Social assistance and disability pension rates must provide sufficient income to pay for basic needs, including food and the extra costs of prescribed special diets. Between 2007 to 2011, there was a measured decrease in household food insecurity rates in Newfoundland, from 15.7% to 10.6% - this substantial decrease occurred when comprehensive poverty reduction measures were introduced in that province, indicative of the impact that can be achieved through systemic policy initiatives. Extending a basic income guarantee to all citizens, similar to what Canadian seniors receive through Old Age Security (OAS) and the Guaranteed Income Supplement (GIS), could help to successfully address the cause and reduce the prevalence and severity of household food insecurity in Canada. Overall, the rate of household food insecurity among older adults between the ages of 60-64 years drops after turning 65 years and becoming eligible to receive OAS and GIS. Earlier pilot projects in Canada with basic income guarantee have indicated positive outcomes in health and education, without compromise to workforce participation.

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

## Dietitians of Canada recommends:

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

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

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

- commitment to reconciliation (as recommended by the Truth and Reconciliation Commission and the United Nations Declaration on the Rights of Indigenous Peoples), including assurance of household food security and food sovereignty
- fair resolution of disputes over access to lands and resources recognized by Indigenous and Treaty rights, to ensure food sovereignty and access to traditional/country foods by Indigenous Peoples
- sufficient supports to remove barriers for Indigenous Peoples who are hunting, fishing or gathering/cultivating traditional/country foods
- improved access to and ability to afford healthy store-bought or market foods in all First Nation reserves and northern and remote communities where food prices are substantially higher than elsewhere in Canada, with equitable community eligibility for Nutrition North Canada subsidies and/or other programs to address household food insecurity among Indigenous Peoples
- sufficient supports to improve opportunities in education and employment, for equitable income adequacy and security among Indigenous Peoples compared to other groups within Canada.

**3. Commitment to mandatory, annual monitoring and reporting of the prevalence and severity of household food insecurity in each province and territory across Canada, including among vulnerable populations. Measurement of household food insecurity must be included in impact/outcome evaluation of strategies to reduce poverty and household food insecurity. Features of data collection and reporting should include:**

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

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

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

## **ÉNONCÉ DE POSITION - L'Insécurité Alimentaire des Ménages au Canada**

Les diététistes du Canada sont d'avis que l'insécurité alimentaire des ménages est un enjeu de santé publique sérieux ayant d'importants effets sur la santé physique et mentale de même que sur le bien-être social. Tous les ménages au Canada doivent disposer d'un revenu suffisant pour avoir un accès adéquat à des aliments nutritifs après avoir payé les autres nécessités de base. En raison de la prévalence, de la gravité et de l'impact alarmants de l'insécurité alimentaire des ménages au Canada, Les diététistes du Canada demandent qu'une stratégie pancanadienne chapeautée par le gouvernement soit mise en place pour réduire directement l'insécurité alimentaire au niveau des ménages, y compris des politiques qui s'attaquent aux défis uniques propres à l'insécurité alimentaire dans les ménages des peuples indigènes. Une surveillance régulière de la prévalence et de la gravité de l'insécurité alimentaire des ménages est requise à l'échelle du Canada. Par ailleurs, la recherche doit continuer d'aborder les lacunes en matière de connaissances au sujet de la vulnérabilité des ménages à l'insécurité alimentaire et d'évaluer l'impact des politiques mises au point pour éliminer l'insécurité alimentaire des ménages au Canada.

Les diététistes du Canada recommandent ce qui suit : 1. L'élaboration et la mise en œuvre d'une stratégie pancanadienne chapeautée par le gouvernement comprenant des politiques et des programmes coordonnés afin de veiller à ce que tous les ménages disposent d'un revenu suffisant et régulier leur permettant de payer les nécessités de base, entre autres la nourriture. 2. La mise en œuvre d'une stratégie soutenue par le gouvernement fédéral visant à aborder de manière complète les défis supplémentaires et uniques propres à l'insécurité alimentaire dans les ménages des peuples indigènes, y compris une garantie de souveraineté alimentaire, avec un accès à des terres et des ressources, pour l'acquisition d'aliments régionaux/traditionnels, de même qu'un accès amélioré à des aliments plus abordables et sains dans les épiceries situées dans les réserves des Premières Nations et les communautés nordiques/éloignées. 3. Un engagement envers la communication et la surveillance obligatoires et annuelles de la prévalence marginale, modérée et grave de l'insécurité alimentaire des ménages dans chaque province et territoire du Canada, y compris au sein des populations vulnérables, de même qu'une évaluation régulière de l'impact de la réduction de la pauvreté et des protocoles de dépistage dans le système de soins de santé. 4. Du soutien pour mener davantage de recherche en vue d'aborder les lacunes en matière de connaissances au sujet des populations où la prévalence et la gravité de l'insécurité alimentaire des ménages sont les plus élevées, et pour orienter la mise en œuvre et l'évaluation de stratégies et de politiques qui élimineront l'insécurité alimentaire des ménages au Canada. [Rev can prat rech diétét. 2016;77:159]



**For Full Reports and References, see:**

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

Available at: [www.dietitians.ca/foodinsecurity](http://www.dietitians.ca/foodinsecurity).

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