

Food Insecurity in Chatham-Kent Report

NOV 24



LAND ACKNOWLEDGEMENT

The land that is known as Chatham-Kent today was established as part of Treaty #2, the McKee Purchase Treaty of 1790. At that time, the land was also inhabited by the Three Fires Confederacy: the Odawa, Potawatomi and Ojibwe. These Indigenous Nations, known as the Anishinaabeg and Lunaapeew, agreed to the mutual sharing of the land, with obligations and responsibilities to the environment. Today, Chatham-Kent neighbours the Lunaapeew at Delaware Nation, which is part of the McKee Purchase Treaty, as well as the unceded territory of the Bkejwanong Walpole Island First Nation.

Chatham-Kent continues to be home to diverse First Nations Peoples and Métis Peoples. As beneficiaries of the treaty, we recognize all Peoples have responsibilities including collective responsibilities to the land and water.

We invite you to reflect upon how you are upholding treaty responsibilities, and to learn more about the Truth and Reconciliation Commission's Calls to Action.

REPORT DISCLAIMER

This report may not reflect the experiences of everyone in our community. It's important to recognize other ways of knowing, such as Indigenous ways of knowing. Indigenous knowledge emphasizes the interconnectedness of all things and views the land itself as a source of healing and health.¹⁻⁵ Furthering our knowledge of these ways of knowing may help us to better understand food insecurity from a more wholistic perspective.⁵

The definition of food insecurity in this report may not fully explain the experience of food insecurity faced by Black, Indigenous, and other racialized communities. It's important to continue to work with these communities to uplift their voices and better understand their experiences.

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PURPOSE

The purpose of this report is to inform the public about food insecurity in Chatham-Kent and advocate for solutions to this serious public health problem. Community members and organizations are encouraged to share this report widely.

WHAT IS FOOD INSECURITY?

Household Food Insecurity (HFI) is the inadequate or insecure access to food due to financial constraints.⁶

It is rooted in poverty: inadequate and insecure income, and material deprivation. Material deprivation is when people cannot access and meet their basic needs for living.⁶

*Household Food Insecurity is used interchangeably with Food Insecurity throughout this report.

When people experience food insecurity they either:

WORRY about running out of food or have limited food selection;
COMPROMISE the nutritious quality and/or amount of food;
MISS meals, eat less food, or go days without food

WHY?

Because they lack money to purchase appropriate food.⁶

HFI is a serious public health issue nationally, provincially, and specifically in the Chatham-Kent (CK) region. HFI was a problem before the COVID-19 pandemic but has continued to worsen.

HOUSEHOLDS IN ONTARIO ARE FOOD INSECURE⁶

**1 IN
5**



HOUSEHOLDS IN CK ARE FOOD INSECURE⁷

Who Experiences Food Insecurity?

Food insecurity affects individuals with lower incomes, including those earning minimum wage, and people receiving social assistance or employment insurance.⁶

In Ontario, ~59% of food insecure households relied on employment as their main source of income.⁸

So, while individuals may be employed, **simply having a job is not enough to ensure an adequate and secure income** to meet their basic needs. This highlights an issue with the type of employment, including jobs that are precarious, part time, and/or low-paying.⁶

In Canada, 70% of households relying on social assistance are food insecure.⁶

This shows that **current social assistance programs are inadequate to address food insecurity.** Additionally, the risk of food insecurity increases for households with a female-lone parent compared to a male lone-parent, and for those who rent their home versus those who own.⁶

Aside from income, racism and colonialism are other factors that affect our population's health.⁹ **Racism and colonialism make food insecurity worse.**^{10,11}

The highest amount of individuals living in food-insecure households was found among racialized groups:^{6,8,12}

- ~1 in 3 Black people (40.4%)
- ~1 in 3 Indigenous Peoples (36.8%)
- ~1 in 4 Filipino people (27.0%)

In comparison, ~1 in 5 white individuals (20.3%) live in a food-insecure household.⁸

This difference reflects a deeper connection to systemic racism and colonialism.^{10,11}

Disclaimer:

This data does not include people living in government-created reservations and other Indigenous communities, institutions, those living in extremely remote areas with a very low population density, and under-housed people. As such, the prevalence may be much higher than reported.⁶



MONITORING FOOD AFFORDABILITY

Since 1998, Public Health Units in Ontario have monitored the affordability of food using the Nutritious Food Basket (NFB). The NFB is a survey of grocery stores and has 61 items that together form a nutritious diet based on the 2019 Canada's Food Guide (CFG).¹³ The NFB results generate the cost of eating a nutritious diet with 5% added to account for miscellaneous foods used in meal preparation, such as spices, condiments, and tea. Given the 61 items of the NFB are based on the CFG, cultural foods and other dietary needs, such as infant foods and gluten-free items are not considered. Therefore, this data can underestimate the actual cost of food for all population groups.

The Nutritious Food Basket assumes that people:

- ▶ Have time, ability, food skills, and equipment to prepare meals from scratch;
- ▶ Have access to stores, literacy, and language skills to shop for the lowest priced items; and
- ▶ Shop every one to two weeks (which impacts package sizes purchased).

The goal of the NFB is not to make food cost comparisons to past years results but to show that people living on low incomes do not have enough money to buy food, and the increasing cost of food is only making this problem worse.^{14,15} The results are used at all levels of government to help advocate for changes to public policy that will work to ensure that all community members have access to an adequate and secure income to support their basic needs, including nutritious food.

HOUSEHOLD INCOME SCENARIOS

In Chatham-Kent

After calculating the cost of the 61 items from 6 grocery stores in the Chatham-Kent (CK) region, the average monthly cost of food for CK was generated. The following are 12 income scenarios based on different types of households in Chatham-Kent.

Household Scenario	Total Income (Monthly) ^a	Average Monthly Rent ^b	Cost of Food ^c	Percentage of Income Spent on Food
 Family of Four (Ontario Works) ⁱ	\$2,916	\$1,062	\$1,147	39%
 Family of 4 (Full-Time Minimum Wage Earner) ⁱⁱ	\$4,515	\$1,062	\$1,147	25%
 Family of 4 (Median Income After Tax) ⁱⁱⁱ	\$9,685	\$1,602	\$1,147	12%
 Single Parent, 2 Children Over 6 (Ontario Works)	\$2,677	\$1,186	\$853	32%
 One Person (Ontario Works)	\$885	\$784	\$402	45%
 One Person (Ontario Disability Support Program)	\$1,469	\$1,097	\$402	27%
 One Person (Old Age Security/Guarenteed Income Supplement)	\$2,073	\$1,097	\$283	14%
 Married Couple (Ontario Disability Support Program) ^{iv}	\$2,609	\$1,097	\$665	25%
 Single Pregnant Person (Ontario Disability Support Program)	\$1,509	\$1,097	\$425	28%
 Single Parent, 2 Children (Full-Time Minimum Wage Earner)	\$4,663	\$1,186	\$668	14%
 Single Parent, 2 Children Under 6 (Ontario Works)	\$2,870	\$1,186	\$668	23%
 Family of 4 Refugee Claimants (Full-Time Minimum Wage Earner) ^v	\$3,246	\$1,062	\$1,147	35%

NOTES:

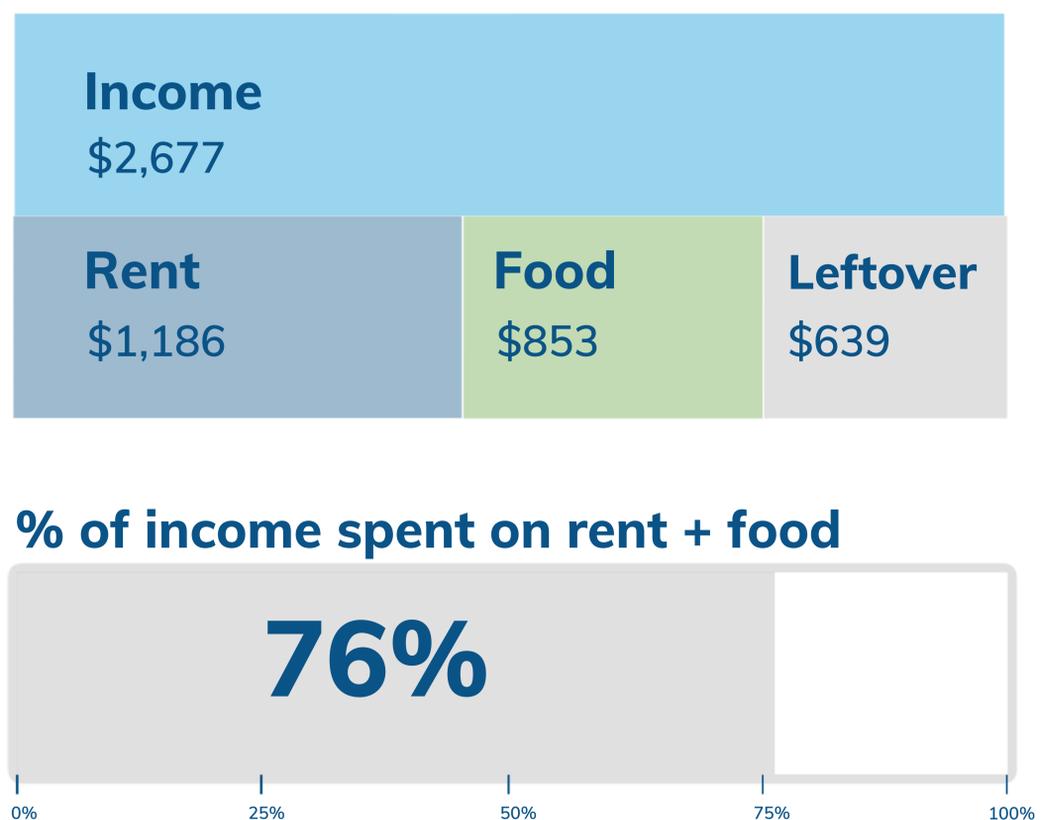
- a) Calculated for May 2024. Income tax information is based on 2022 and includes all tax benefits and credits one may apply for.
- b) Rental data obtained from Canada Mortgage and Housing Corporation (CMHC) (October, 2023), adjusted according to Consumer Price Index (CPI) for May 2024
- c) 2024 Chatham-Kent Nutritious Food Basket
- i) 2 Adults on Ontario Works
- ii) 1 earner, 40 hours/week, \$16.55/hour for 39 weeks and \$17.20/hour for 13 weeks (minimum wage increase as of Oct 1, 2024).
- iii) Income from employment is based on median after-tax income - couples with children; however, EI and CPP contributions are calculated using median total income - couples with children. Assumption of a dual income family with a split of 65% / 35% between partners.
- iv) 2 Adults on Ontario Disability Support Program.
- v) 1 earner, 40 hours/week, \$16.55/hour for 39 weeks and \$17.20/hour for 13 weeks (minimum wage increase as of Oct 1, 2024).

CASE STUDY 1

Single Parent, 2 Children over 6 years old (Ontario Works)

SCENARIO:

Brianna is a 32-year-old single parent of two children, ages 8 and 14. They live in a small 2-bedroom apartment in Chatham-Kent. After losing their job due to downsizing, they have been unable to find work. For the past 2 years, they have been relying on Ontario Works (OW) for financial assistance. After paying for rent and food costs, Brianna worries about having enough money to pay for other necessities, such as the children's school supplies, clothing, and transportation.

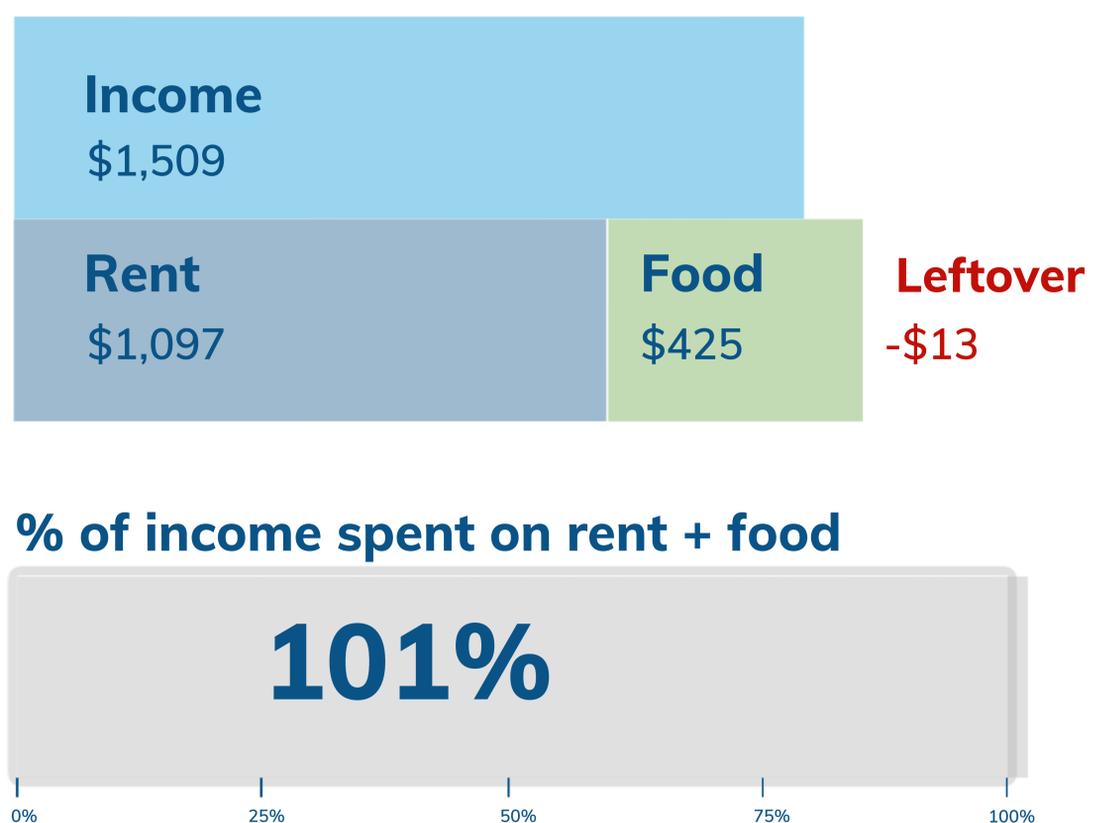


CASE STUDY 2

Single Pregnant Person (Ontario Disability Support Program)

SCENARIO:

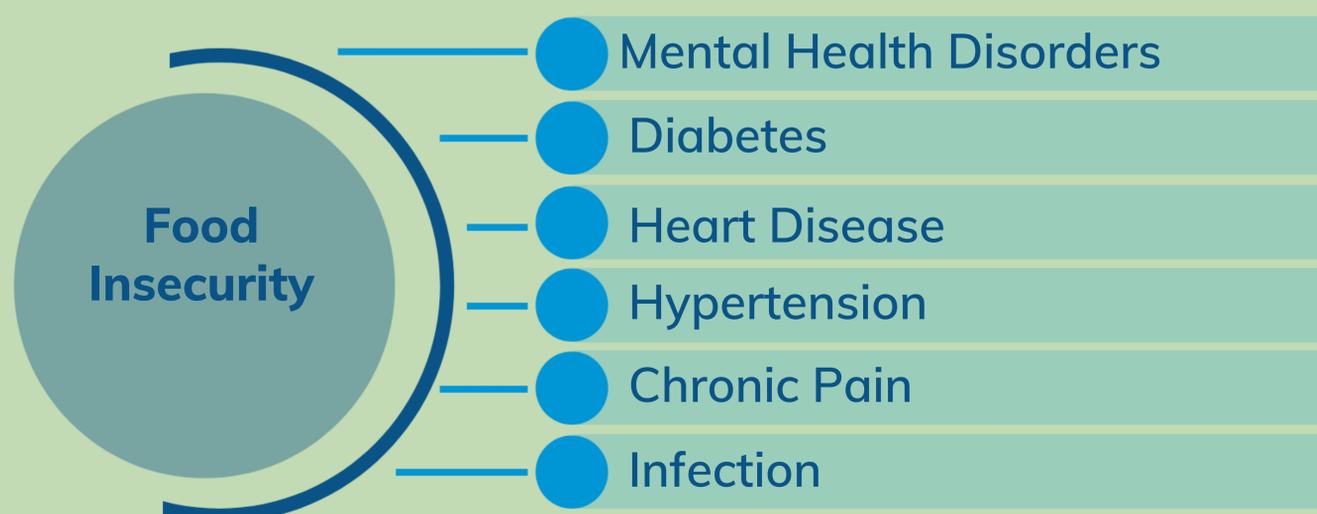
Cassie is a 27-year-old single pregnant person living on her own in Chatham-Kent. She has been on ODSP for 5 years due to a long-term physical disability. Cassie has been making a conscious effort to eat nutritious foods to support her pregnancy. However, she finds this challenging as she has no funds leftover after paying for her rent and food. She has been unable to afford other necessities, such as her phone bill, and transportation costs. She constantly faces stress and anxiety about her ability to prepare for the baby's arrival.



FOOD INSECURITY IS A PUBLIC HEALTH ISSUE

Food insecurity significantly impacts mental and physical health.⁶

Adults living in food insecure households are more likely to experience:¹⁶⁻²²



For adults that are food insecure, the risk of premature death is much greater than those who are food secure.²² Children and adolescents are also more likely to develop chronic conditions such as asthma, and mental health conditions such as depression, and suicidal thoughts.²³⁻²⁵



Given the negative impacts on health, food insecurity contributes to increased public healthcare costs.^{25,27} Conversely, **addressing the root causes of food insecurity can help reduce healthcare costs and support everyone in our community to reach their full potential for health and well-being.**



People who identify as being a part of an equity-deserving group (e.g. racialized, 2SLGBTQ+, and those with a disability) are more likely to experience food insecurity than others. **The higher prevalence is not because of any individual fault, but is more strongly linked to societal factors outside of their control.**²⁸

Indigenous Food Insecurity

- ~1 in 3 Indigenous individuals live in food-insecure households.⁸ Aside from income, systemic racism and colonialism are contributing to the problem.^{10,11}
- This does not include those living on government-created reserves and in other Indigenous communities.⁶
- Historical and ongoing effects of colonization have restricted access to traditional lands, water, and food.^{8,29} **This contributes to the current rate of food insecurity among Indigenous Peoples.**
- Colonization and governmental policies continue to limit Indigenous practices, such as hunting, gathering, and land use.³⁰⁻³²
- The lasting effects of colonization continue to disrupt the transfer of traditional knowledge between generations.³⁰

To move towards truth and reconciliation while addressing food insecurity we need to work alongside Indigenous Peoples, and listen to and amplify their voices.³²



Food Insecurity is a health equity issue.

Health equity means all people can reach their full health potential and should not be disadvantaged because of their race, ethnicity, religion, gender, age, social class, socioeconomic status, or other socially determined circumstance.²⁸

ADDRESSING FOOD INSECURITY

Food-Based Programs...DO NOT Address Food Insecurity

- Food waste strategies **do not** solve food insecurity
- Food charity programs **do not** solve food insecurity

▶ **BECAUSE...FOOD INSECURITY IS NOT A FOOD PROBLEM.**

- Community food programs **do not** solve food insecurity
- Nutrition education programs **do not** solve food insecurity

▶ **BECAUSE...FOOD INSECURITY IS NOT A FOOD LITERACY PROBLEM.**

Food insecurity is a problem of inadequate or insecure income. This is directly connected to poverty.

Food Waste Strategies: such as gleaning and redirecting excess food from grocery stores to food charities, do not address the root cause of food insecurity.³³ They provide immediate relief for people who experience food insecurity and access food charity organizations. These programs also do not address the root cause of food waste, which is an operation and production issue.

Food Charity Programs: such as food banks, soup kitchens, and food pantries, provide food to those who cannot afford it, but they are not long-term solutions to food insecurity.⁶ They can provide immediate food relief, and direct people to other community and social services.^{34,35} However, research from Canada shows that most food insecure households are not using food banks.⁶ This is because food banks fail to meet an individual's personal and cultural needs, can increase the stigma associated with food insecurity, and are often seen as a last resort.^{34,35}

Community Food Programs: such as community kitchens, community and school gardens, and student nutrition programs provide people with opportunities to build food literacy (knowledge, skills, confidence, and decision-making related to food and nutrition), and improve social connections.³⁶ They were not created to address food insecurity.

Nutrition Education Programs: on budgeting and food literacy do not solve food insecurity.^{36,37} Research shows that food insecure families are more likely to shop on a budget compared to food secure families because they have limited funds.³⁷ Food-secure families are also more likely to read nutrition labels, as they can afford to choose the more nutritious product. There is no difference between those who are food secure and food insecure when it comes to food skills.³⁷

ADDRESSING FOOD INSECURITY

Income-Based Solutions...DO Address Food Insecurity

Providing a Basic Income Guarantee: The income scenarios in this report show that people need an adequate and secure income. A Basic Income Guarantee (BIG) is an unconditional income transfer from the government to people with low incomes.^{6,38} Providing a basic income can reduce poverty and allow everyone to meet their basic needs. The cost of implementing a BIG are minimal compared to the immense benefits it provides for individuals and families and can be balanced by reduced healthcare expenses that arise from food insecurity.^{38,39}

An example of providing a BIG, are the federal income supports for older adults such as the Old Age Security and Guaranteed Income Supplement. These supports have decreased food insecurity rates by 50% for those over 65 years of age.⁴⁰ Although this program was not created to target food insecurity, it shows that guaranteed income solutions are effective. Providing a BIG has the potential to allow those of the lowest incomes access to safe, culturally appropriate, and nutritious food.⁴¹

Increasing Social Assistance: The income scenarios in this report show that current social assistance rates for Ontario Works (OW) and the Ontario Disability Support Program (ODSP) are not enough. As of July 2023, the provincial government has tied rates of ODSP to inflation.^{36,42} This resulted in an ODSP increase of 4.5% in 2024, which translates into only \$59 more per month for ODSP recipients.^{42,43} Even though there has been an increase related to inflation, ODSP incomes are still far too low to afford food, housing, transportation, medications and other necessities of life. There continues to be no increases made for OW recipients.⁴⁴

Given major reforms have not been made to social assistance for the past twenty years, supportive policy options would include increasing social assistance rates by indexing them to inflation and matching them to the costs of living.⁴⁵

Increasing Minimum Wage to Align with Living Wage: The income scenarios in this report show that the current minimum wage rate of \$17.20/hr is not enough to cover the basic costs of living.⁴⁶ People who earn a lower wage are also more likely to be in precarious jobs.⁴⁷ These jobs are temporary, part-time, contract, or on-call without adequate benefits.⁶ The current 2023 living wage for Chatham-Kent based on the Southwest region is \$18.65 per hour.⁴⁸ As such, supportive policy options would include increasing minimum wage to reflect the living wage to reduce food insecurity.

Additional Income-Based Solutions Include:

- Lowering income tax for low-income households⁴⁹
- Increasing childcare benefits for eligible families⁴⁹
- Providing affordable and accessible housing, transportation, and childcare⁴⁹



WHAT CAN YOU DO?

1. LEARN more about food insecurity.

2. TALK to friends, family, and colleagues about the true cause of food insecurity.

3. ADVOCATE for income solutions to food insecurity:

- Basic income guarantee.
- Increasing social assistance.
- Jobs that pay a living wage.

LEARN MORE:

- Feed Ontario: Fork in the Road
- Li T, Fafard St-Germain AA, Tarasuk, V. (2023) Household Food Insecurity in Canada, 2022. PROOF Food Insecurity Policy Research.
- Tarasuk, V. (2017). Implications of a Basic Income Guarantee for Household Food Insecurity. PROOF: Food Insecurity Policy Research.
- PROOF. Indigenous Food Insecurity.
- No Money for Food is Cent\$less. Ontario Dietitians in Public Health
- Food Banks Canada. (2024). Hope Beyond Hunger.
- The Basic Income Canada Network (BICN)
- Ontario Living Wage Network. (2024). Living Wage Rates.
- Canadian Human Rights Commission - Discussion paper on systemic racism
- University of British Columbia, Anti-Racism Awareness

REFERENCES

1. Canadian Research Institute for the Advancement of Women. Fact Sheet 2: What are Indigenous and Western Ways of Knowing?. Accessed October 14, 2024. Available from: <https://www.criaw-icref.ca/images/userfiles/files/Fact%20Sheet%202%20EN%20FINAL.pdf>.
2. Greenwood M, Lindsay NM. A commentary on land, health, and Indigenous knowledge(s). *Global Health Promotion*. 2019;26(3_suppl):82-86. doi:10.1177/1757975919831262.
3. Redvers J. “The land is a healer”: Perspectives on land-based healing from Indigenous practitioners in northern Canada. *International Journal of Indigenous Health*. 2020;15(1):90-107. doi:10.32799/ijih.v15i1.34046.
4. British Columbia Ministry of Environment and Climate Change Strategy. Indigenous Ways of Knowing. Published September 28, 2023. Accessed October 14, 2024. Available from: <https://www2.gov.bc.ca/gov/content/environment/research-monitoring-reporting/reporting/indigenous-ways-of-knowing>.
5. McGregor D, O'Flaherty M, D'Arcy A. The land is a healer: Perspectives on land-based healing from Indigenous practitioners in northern Canada. *The Land is a Healer*. Published December 15, 2020. Available from: https://www.researchgate.net/publication/346800181_The_land_is_a_healer_Perspectives_on_land-based_healing_from_Indigenous_practitioners_in_northern_Canada.
6. Li T, Fafard St-Germain AA, Tarasuk V. Household food insecurity in Canada, 2022. Toronto: Research to identify policy options to reduce food insecurity. Available from: <https://proof.utoronto.ca/>.
7. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Household food insecurity estimates from the Canadian Income Survey: Ontario 2021-2023. Toronto, ON: King's Printer for Ontario; 2024.
8. PROOF. New data on household food insecurity in 2023. Available from: <https://proof.utoronto.ca/2024/new-data-on-household-food-insecurity-in-2023/>.
9. National Collaborating Centre for Determinants of Health, “Let’s talk: Racism and health equity (Rev. ed.),” National Collaborating Centre for Determinants of Health, Antigonish (NS): NCCDH, St. Francis Xavier University, 2018.
10. Community Food Centres Canada. Sounding the alarm: The need to invest in working-age single adults. Published June 2023. Available from: <https://cfccanada.ca/CMSPages/GetFile.aspx?guid=c5dc39cf-fd3f-4de0-8ced-16ba5b26060e>
11. Odoms-Young, A, Marino AB. Examining the impact of structural racism on food insecurity: implications for addressing racial/ethnic disparities. *Family & community health*. 2018;41:S3-S6. doi: 10.1097/FCH.0000000000000183
12. Statistics Canada. Food insecurity by selected demographic characteristics. Published April 26, 2024. Accessed September 29, 2024. Available from: <https://doi.org/10.25318/1310083501-eng>.
13. Government of Canada. 2019 National Nutritious Food Basket reference guide. Available from: <https://www.canada.ca/en/health-canada/services/food-nutrition/food-nutrition-surveillance/national-nutritious-food-basket/contents.html>.
14. Power E, Belyea S, Collins P. “It's not a food issue; it's an income issue”: Using Nutritious Food Basket costing for health equity advocacy. *Canadian Journal of Public Health*. 2019;110:294-302. doi:10.17269/s41997-019-00185-5.
15. Statistics Canada. Consumer price index, annual review, 2023. Accessed September 26, 2024. Available from: <https://www150.statcan.gc.ca/n1/daily-quotidien/240116/dq240116b-eng.htm#>.
16. Jessiman-Perreault G, McIntyre L. The household food insecurity gradient and potential reductions in adverse population mental health outcomes in Canadian adults. *SSM - Population Health*. 2017;3:464-472. doi:10.1016/j.ssmph.2017.05.013.
17. Tarasuk V, Gundersen C, Wang X, et al. Maternal food insecurity is positively associated with postpartum mental disorders in Ontario, Canada. *The Journal of Nutrition*. 2020;150(11):3033-3040. doi:10.1093/jn/nxaa240.

18. Tarasuk V, Mitchell A, McLaren L, et al. Chronic physical and mental health conditions among adults may increase vulnerability to household food insecurity. *The Journal of Nutrition*. 2013;143(11):1785-1793. doi:10.3945/jn.113.178483.
19. Tait C, L'Abbé M, Smith P, et al. The association between food insecurity and incident type 2 diabetes in Canada: A population-based cohort study. *PLoS One*. 2018;13(5). doi:10.1371/journal.pone.0195962.
20. Bekele T, Globerman J, Watson J, et al. Prevalence and predictors of food insecurity among people living with HIV affiliated with AIDS service organizations in Ontario, Canada. *AIDS Care*. 2018;30(5):663-671. doi:10.1080/09540121.2017.1394435.
21. Cox J, Hamelin A-M, McLinden T, et al. Food insecurity in HIV-hepatitis C virus co-infected individuals in Canada: The importance of co-morbidities. *AIDS and Behavior*. 2016;21(3):792-802. doi:10.1007/s10461-016-1326-9.
22. Men F, Gundersen C, Urquia M-L, et al. Association between household food insecurity and mortality in Canada: A population-based retrospective cohort study. *CMAJ*. 2020;192(3). doi:10.1503/cmaj.190385.
23. McIntyre L, Williams JV, Lavorato DH, Patten S. Depression and suicide ideation in late adolescence and early adulthood are an outcome of child hunger. *Journal of Affective Disorders*. 2013;150(1):123-129. doi:10.1016/j.jad.2013.04.003.
24. Kirkpatrick SI, McIntyre L, Potestio ML. Child hunger and long-term adverse consequences for health. *Archives of Pediatrics & Adolescent Medicine*. 2010;164(8):754-762. doi:10.1001/archpediatrics.2010.117.
25. Melchior M, Chastang J-F, Falissard B, et al. Food insecurity and children's mental health: A prospective birth cohort study. *PLOS ONE*. 2012;7(12). doi:10.1371/journal.pone.0052615.
26. Fafard St-Germain AA, Tarasuk V. Prioritization of the essentials in the spending patterns of Canadian households experiencing food insecurity. *Public Health Nutrition*. 2018;21(11):2065-2078. doi:10.1017/S1368980018000472.
27. Men F, Gundersen C, Urquia M-L, et al. Prescription medication nonadherence associated with food insecurity: A population-based cross-sectional study. *CMAJ Open*. 2019;7(3). doi:10.9778/cmajo.20190075.
28. National Collaborating Centre for Determinants of Health. Let's talk: Health equity. Antigonish, NS: National Collaborating Centre for Determinants of Health, St. Francis Xavier University; 2013.
29. Richmond C, Steckley M, Neufeld H, Kerr RB, Wilson K, Dokis B. First Nations Food Environments: Exploring the role of place, income, and social connection. *Current Developments in Nutrition*. 2020;4(8). doi:10.1093/cdn/nzaa108.
30. Indigenous Food Systems Network. Food sovereignty. Available from: <https://www.indigenousfoodsystems.org/food-sovereignty>.
31. Shafiee M, Keshavarz P, Lane G, Pahwa P, Szafron M, Jennings D, et al. Food security status of Indigenous peoples in Canada according to the 4 pillars of food security: A scoping review. *Advances in Nutrition*. 2022;13(6):2537-2558. doi:10.1093/advances/nmac071.
32. Dietitians of Canada. Household food insecurity position statement. Available from: https://www.dietitians.ca/DietitiansOfCanada/media/Images/DC-Household-Food-Insecurity-Position-Statement_2024_ENG.pdf.
33. Dachner N, Tarasuk V. Food waste and food insecurity in Canada, 2022. PROOF: Food Insecurity Policy Research. Available from: <https://proof.utoronto.ca/2017/food-waste-and-food-insecurity-in-canada/>.
34. Tarasuk V, St-Germain AF, Loopstra R. The relationship between food banks and food insecurity: Insights from Canada. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*. 2019;31:841-852. doi:10.1007/s11266-019-00092-w.
35. Loopstra R, Tarasuk V. The relationship between food banks and household food insecurity among low-income Toronto families. *Canadian Public Policy*. 2012;38(4):497-514. Available from: <http://www.jstor.org/stable/41756766>.
36. Loopstra R. Interventions to address household food insecurity in high-income countries. *Proceedings of the Nutrition Society*. 2018;77(3):270-281. doi:10.1017/S002966511800006X.

37. Huisken A, Orr SK, Tarasuk V. Adults' food skills and use of gardens are not associated with household food insecurity in Canada. *Canadian Journal of Public Health*. 2016;107(6):526-32. doi:10.17269/CJPH.107.5692.
38. Basic Income Canada Network. Basic Income Canada Network. Available from: <https://basicincomecanada.org/>.
39. Tarasuk V, Cheng J, de Oliveira C, Dachner N, Gundersen C, Kurdyak P. Association between household food insecurity and annual health care costs. *CMAJ*. 2015;187(14). doi:10.1503/cmaj.150234.
40. McIntyre L, Dutton DJ, Kwok C, Emery JH. Reduction of food insecurity among low-income Canadian seniors as a likely impact of a guaranteed annual income. *Canadian Public Policy*. 2016;42(3):274-286. doi:10.3138/cpp.2015-069.
41. Tarasuk V. The impact of basic income on food insecurity in Canada. Northern Policy Institute. Available from: https://www.northernpolicy.ca/upload/documents/publications/reports-new/tarasuk_big-and-food-insecurity-en.pdf.
42. Income Security Advocacy Centre. July 2023 ODSP and OW rates and OCB. Available from: <https://incomesecurity.org/wp-content/uploads/2023/07/July-2023-ODSP-and-OW-rates-and-OCB.pdf>.
43. Government of Ontario. Ontario Disability Support Program. Available from: <https://www.ontario.ca/page/ontario-disability-support-program#section-0>.
44. Government of Ontario. Ontario Works. Available from: <https://www.ontario.ca/page/ontario-works#section-0>.
45. Ontario Living Wage Network. What is a living wage. Available from: <https://www.ontariolivingwage.ca/about>.
46. Government of Ontario. Minimum wage. Your Guide to the Employment Standards Act. Available from: <https://www.ontario.ca/document/your-guide-employment-standards-act-0/minimum-wage#section-0>.
47. National Collaborating Centre for Determinants of Health. Determining health: Decent work issue brief. Antigonish, NS: NCCDH, St. Francis Xavier University; 2022.
48. Ontario Living Wage Network. Living wage rates. Available from: <https://www.ontariolivingwage.ca/rates>.
49. PROOF. What can be done to reduce food insecurity in Canada? PROOF: Food Insecurity Policy Research. Available from: <https://proof.utoronto.ca/food-insecurity/what-can-be-done-to-reduce-food-insecurity-in-canada/>.



This report highlights income-based solutions to food insecurity. We acknowledge that responses must go beyond income to changing our systems, to ensure no one is left behind in our community.

Contact a CK Public Health Nutritionist

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