

POVERTY

The biggest Health Care Problem in Canada

Saskatoon Health District

(Dr. Cory Neudorf has done some very important and recent research just released about this gradient in Saskatoon)

- Saskatoon's Poorest Neighborhoods:
 - 13X more likely to have Diabetes
 - 16X more likely to commit suicide
 - 4X more infant mortality
 - Life expectancy 9 years shorter than the most affluent

The Impact of Poverty on Health

In Winnipeg – those in the highest income bracket live, on average, 20 years longer than those in the lowest

Income Disease Gradient

- Infant mortality 58 % higher if you are from a poor neighborhood
- Risk of dying of Cancer within 5 years of diagnosis is 47% higher in low versus high income patients
- Diabetes – 3X the risk if your income is \$15,000 versus \$80,000/year

Child Poverty

- **Adverse physical environments are just the tip of the iceberg**

poor housing

poor nutrition (Fe deficiency)

crowding

infectious disease and low immunization

asthma

dental caries

hospitalization

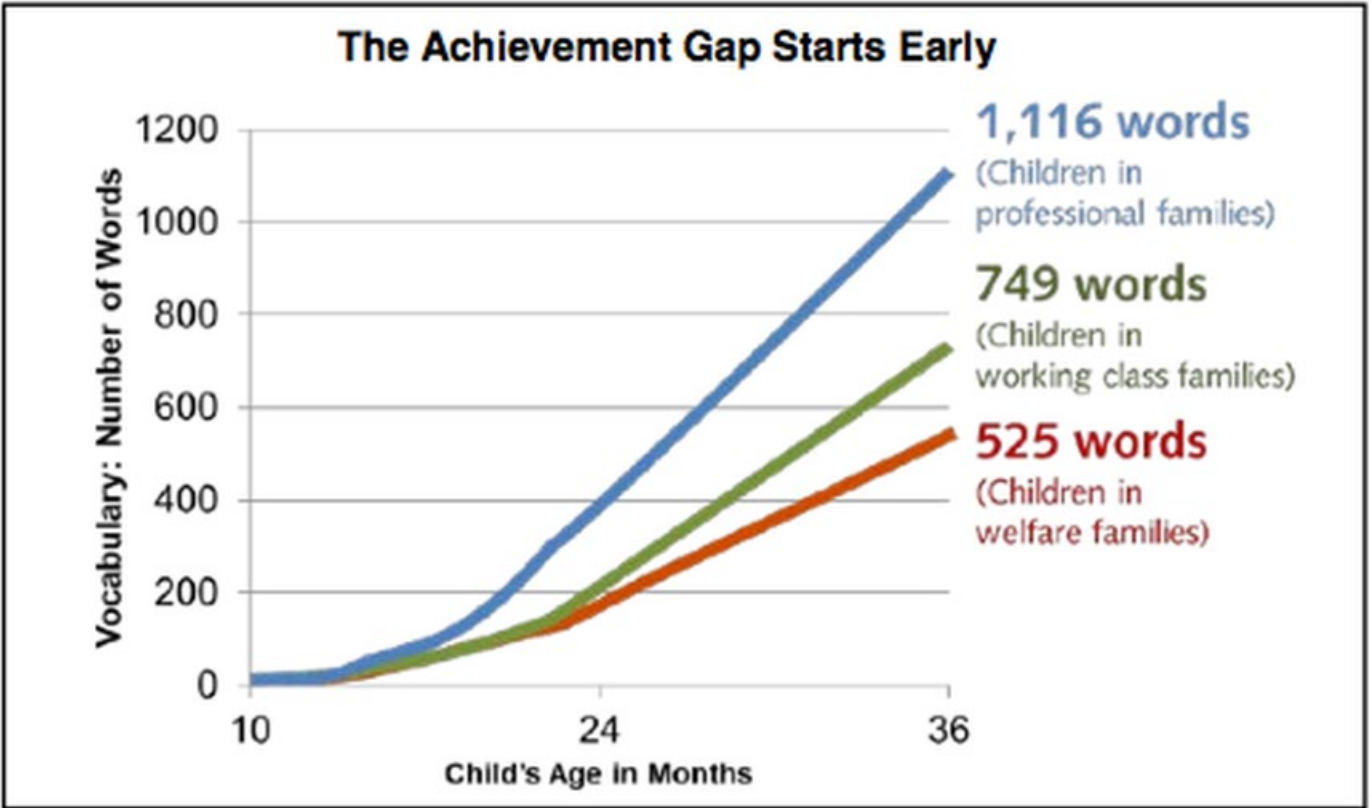
Child Poverty

- Complex environmental, social and neurological mechanisms whereby poverty affects health and development
- Poverty is the greatest obstacle to children's learning
- Most profound for the youngest children

THE 30 MILLION WORD GAP

- The gap in vocabulary between high income and welfare children – measured in daily exchanges between parent and child that shape language and vocabulary development, discrepancies in skills and experiences, that have a **lasting impact**

The 30 Million Word Gap



The 30 Million Word Gap

- Low income impacts school readiness, such that kids from low income are disadvantaged from preschool on
- Reduces the likelihood of success in educational achievement all along the educational trajectory
- Decreased skills, decreased aspirations, and more discouragement

The 30 Million Word Gap

Poverty has a cumulative and enduring negative impact on children's health and development and impedes school readiness and educational success throughout the trajectory

These children are “Born to Fail”

What % of Children in Saskatchewan are poor?

1. 26%

2. 3 %

3. 10%

Food Insecurity

Saskatchewan Food Bank Use*

- Increased 17.5% this year
- 31,000 people in Saskatchewan access a food bank per month
- Children represent 45% of food bank users in SK

*Hungercount 2016

Saskatchewan – 25% Child Poverty

Mexico – 22% child poverty

Turkey – 25 % child poverty

OECD Average – 12% child poverty

Denmark - 3% child poverty

Saskatchewan's Minimum Wage Is \$11.45 /hr
(\$23,81/yr

Is this ABOVE or BELOW the poverty line?

Food Insecurity



The Cost of Healthy Eating in Saskatchewan

Saskatchewan Food Costing Task Group

The Cost of Healthy Eating in Saskatchewan 2018

Food affordability and availability has the potential to influence food choices and impact health.

Food prices were collected in 105 stores across Saskatchewan.



Provincial Average
\$245.68 per week



South Average
\$227.47 per week



Small City
\$217.65



Town
\$241.14

Large City
\$213.08



Rural
\$253.65



Food Insecurity

**Monthly Saskatchewan Income Support Plan Allowance
\$285/person/month**

(Includes food/clothing/transportation and all personal and household items)

- ***no additional allowance for children (rely on federal/provincial child benefit)**

Saskatchewan Income Support Plan
Shelter Rates (Tier A – Regina/Saskatoon)

Single Person - \$575/month

Family with 1-2 kids - \$711/month

Family with >5 kids - \$849/month

(Average rental accommodation in Regina is \$1018)

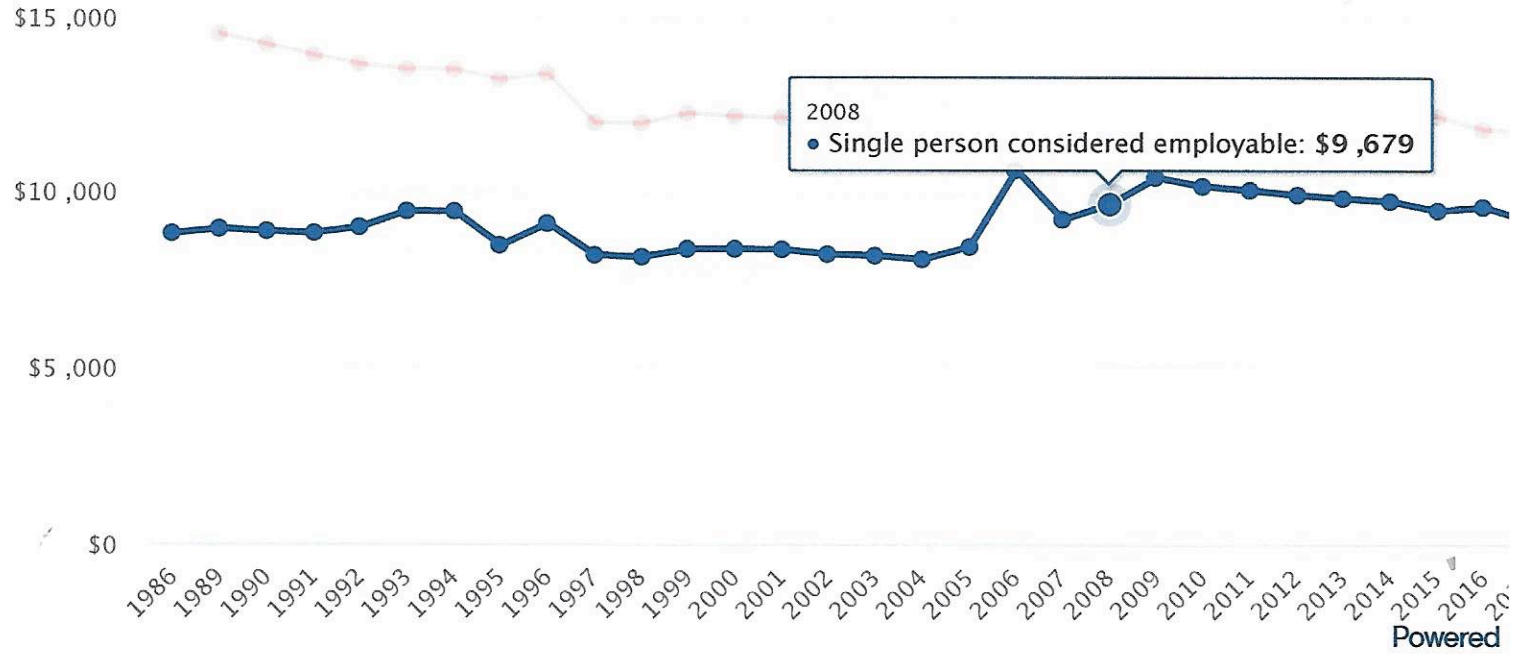
Average Home Purchase Regina \$308,000)

Saskatchewan

- **30, 000 in Regina need core housing**
- **10% Saskatoon's homeless are children**

Welfare incomes for single adults in Saskatchewan, 2019 constant dollars

● Single person considered employable ● Single person with a disability ● Single person in SAID prog



Powered

Childcare and Education Funding

Canada's spending on early childhood education relative to its prosperity ranks the lowest among first world countries and below the OECD average

- We need to intervene early by investing in universal early childhood education and 'wrap around programs'
- Universal Public Daycare (pays for itself) and addresses the gender gap in poverty (allowing women to work)
- \$6 is saved for every dollar invested in early childhood interventions

The top 10% have made great gains but the bottom 20% almost none

- Saskatoon Health District: Median income in the highest income neighborhoods is 10X that in the lowest income neighborhoods

Prescribing Money Works

- Government income transfers reduce poverty (OAS and CPP quickly and significantly reduced risk of poverty in elders in Canada)
- Evidence shows childhood cash injections show persistent benefits to age 25
- Manitoba “Mincome” (Experiment in Guaranteed Annual Income, Dauphin, Manitoba) reduced hospital admissions by 8.5%, raised school stays and decreased mental health incidence*
- Raising the Canada Child Tax Benefit will markedly impact child poverty in Canada

* Evelyn L. Forget, March 2016, University of Manitoba

Health outcomes improve with food and income subsidies

- ***Raising the Canada Child Tax Benefit (CCTB) to \$5100 per year per child would decrease child poverty by 37% from this national initiative alone***

- *(currently \$2200)*

Policy Directions

- 1. Progressive taxation (tax inheritance, property, financial transaction, close tax loopholes and end tax havens)
- 2. Eliminate low pay and precarious labour conditions, increase minimum wage and support unions and collective bargaining
- 3. Enhance food security, UI, pensions
- 4. Regulate employment and social rights for a gender equity and set inequality reduction goals (and achieve them!)
- 5. Social investment in children – early and high quality child care, improvement in pay and employment for women
- 6. Social investment in Housing – money spent on housing will be returned in reduced healthcare costs and will help stabilize many families. But we have to put the money upfront.
- 7. Address social inclusion (racism)

Address Working Conditions

- Migrants, temporary foreign workers
- Unionization positively correlates with improvements (remember who got us all maternity leave!)
- Workplace protections
- Benefits
- Sick Leave
- Dental and Drug Coverage

Housing

- \$1 spent on Housing saves \$11 in healthcare costs
- Affordable Housing Initiatives
- Funding of subsidized Housing, Public Housing, high density housing (versus more Luxury Condos)
- Advocacy for Tenant versus Landlord Rights

Saskatchewan ? Alabama North?

- Indigenous people in Saskatchewan are 33X more likely to be incarcerated
- Indigenous children are 13% more likely to be apprehended
- Indigenous people have a 60% high school dropout rate
- And 41% of people in Saskatchewan blame Indigenous people themselves for their problems (versus 26% in Canada overall)
- So we need to address racism and issues of social inclusion

COVID (We are NOT in this together!)

- Covid has pulled back the curtain on inequality
- Poor children are much more impacted both at home and in virtual learning environments
- Increases in domestic violence
- Lack of access to technology
- Crowded multigenerational living
- Food and employment insecurity

- Poverty costs \$3.8 billion annually in Saskatchewan
- We need to invest upstream
- Now is the time to remove the root causes of childhood poverty and invest in social programs and human services for our children
- It's the only way forward