

# *GIVING VOICE TO POVERTY IN THE REGION OF DURHAM*



September 2011

Community Development Council Durham

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*CDCD would like to thank Dr. Marvyn Novick (Professor Emeritus, Ryerson University and the Social Planning Network of Ontario) for reviewing earlier versions of this report and providing valuable insight and advice.*

*The authors wish to acknowledge all of those who took the time to meet with us and share their stories. Your courage and willingness to speak out about difficult and even traumatic experiences inspires us and our work and we hope that it will inspire others in our community to get involved in the fight to end poverty.*

**Funding for this project was provided by:** The Regional Municipality of Durham, Social Services Department Social Investment Fund, 2009.

## EXECUTIVE SUMMARY

The experience of poverty is characterized by material hardship, chronic stress, poor physical and mental health, inadequate and unsafe living conditions, hunger, social exclusion, and violence. These are facts that are often missing in analyses of poverty in communities that focus exclusively on quantitative measures and statistics instead of qualitative experiences. While good statistics may in fact help us to the depth and breadth of poverty, such work runs the risk of marginalizing the experiential impact that poverty actually has on individuals, families and communities. By engaging in qualitative analysis, we are better able to give voice to these experiences, helping to develop a more robust and accurate picture of poverty at the community level.

Beginning in 2009, the Community Development Council Durham set out to better understand poverty in the Region of Durham by moving beyond the available quantitative data and statistics to examine the qualitative experiences of those who live in poverty. The purpose of this project was to develop a local assessment of the experience of poverty in Durham in a way that could inform local policy and service practice while also contributing to provincial and federal dialogue on poverty amelioration and eradication. The Community Development Council Durham, along with Dr. Shahid Alvi from the University of Ontario Institute of Technology, conducted in-depth interviews with individuals living in poverty in Durham. Interviews and focus groups were also completed with local community and government service providers. The latter process was used to inform our understanding of the policy and service environment with which those who live in poverty interact in Durham.

Through this process, 22 in-depth interviews were completed with individuals who identified themselves as living in poverty, 18 interviews were completed with representatives from local service organizations, and 20 individuals participated in 3 focus groups with frontline Social Services staff from the Regional Municipality of Durham.

## FINDINGS

A detailed analysis of the data from the interviews and focus groups revealed several interrelated dimensions that contribute to the overall experience of poverty in Durham. These dimensions include: (1) Financial Instability, (2) Difficulty Accessing Programs and Services, (3) Lack of Opportunity and Choice, (4) Lack of Social Participation, (5) A Lack of Security, and (6) A Lack of Respect.

### *Financial Instability*

Participants talked about income poverty and their inability to meet monthly expenses. Every day, week and month, people living in poverty are forced to make financial decisions that require sacrifice and, in the experiences of the participants, there is never enough. From this, many participants expressed fear about their financial futures. Their meager incomes did not even meet their daily expenses, let alone provide any extra for savings, thus eliminating any hope of stability.

### *Difficulty Accessing Programs and Services*

Both agency personnel and persons living in poverty spoke to the complexities of the social assistance system and the difficulty that many have in navigating through programs and services. The complex nature of the current social assistance system in Ontario appears to be the culprit in creating strained relationships between members of the community who are accessing programs and those tasked with implementing them. Complex factors have resulted in an apparent lack of empathy on the part of

staff and an apparent ignorance on the part of clients. In fact, in every interview and focus group that was conducted there was some discussion of this frustration.

#### *A Lack of Mental and Physical Health*

Feelings of anxiety and stress were a constant theme during the interviews with those living in poverty, and seemed to permeate the lives of participants. The constant worry and strain of living in straightened and unstable circumstance takes a toll on people's mental well-being, where seemingly innocuous activities become times of worry and anxiety. Nearly all of the participants talked about the stress and anxiety of daily life and many talked of depression, profound sadness and fear. In addition, many participants talked at length about their health concerns and how they are related to, and exacerbated by, their socioeconomic position.

#### *A Lack of Opportunity and Choice*

Discussions around a lack of opportunity and choice appeared most poignantly when participants talked about housing and food banks. Other barriers such as a lack of child care and affordable, accessible transportation were mentioned as factors that have prevented people living in poverty from taking advantage of education and employment opportunities. From an analysis of the participants' experiences, socioeconomic circumstances create conditions in which self-determination and choice are limited in both implicit and explicit ways and in ways that are both real and perceived.

#### *A Lack of Social Participation*

Participants talked extensively about how poverty is exclusionary and isolating. Participants living in poverty talked about feeling disconnected from society and the community in which they live, and that they felt estranged from family and friends. Shame and embarrassment were also mentioned as emotions that established and maintained these estrangements. . Thus, in the experience of participants, poverty reduces social connections that provide an important source of social, psychological, and economic support.

#### *A Lack of Security*

In analyzing participant experiences, we were able to see the many ways in which poverty overtly reduces the options and choices available to individuals and often places them in precarious, unhealthy, and dangerous situations. This was most significantly seen in the lives of participants who had experienced domestic violence. Several participants talked about their living conditions and the neighbourhoods in which they live as being unsafe, but they were also resigned to the fact that they had to live there and could not move to a "better" community. Thus, poverty may be seen as contributing to a vulnerability that results in a lack of personal safety and security from violence and exploitation.

#### *A Lack of Respect*

Participants in the research consistently identified stigma as a key component of their experience of poverty in Durham and as a primary obstacle to overcoming poverty. Several participants highlighted how stigma and the judgment that they feel is associated with a lack of awareness about the social assistance system, the rules and the amount of money that people actually receive. There was also a theme of self-stigmatization, where respondents appeared to ridicule stigma in one part of the interview and then reinforce it later on in the discussion. This revelation of stigma from both society toward those living in poverty and the self-stigma of respondents toward themselves is consistent with existing research on poverty and stigma. From this, we can see that a lack of respect (social respect and self-respect), is

an important dimension of the experience of poverty in the Durham Region.

## RECOMMENDATIONS

Based on this research and the data presented in this report we make the following recommendations to guide next steps in our community. They are not presented in any particular order.

- 1) Poverty has been identified as a leading cause of morbidity and mortality, and the results of our research further support this. Therefore, there is a need to support local health promotion activities that recognize the social determinants of health and use this model as the underlying structure for programming, service and policy development. This process needs to begin with the Region of Durham Health Department and be supported by local community organization in both the health and social services sectors.
- 2) There needs to be an examination of local housing policies and development planning that leads to a diversification of housing options in the Region and the promotion of affordable housing development. This must result in a combination of planning policies that support the diversification of new housing and the maintenance of older housing in Durham as well as investment, and advocacy for investment, in the development of more subsidized and affordable housing options in the Region. As a starting point, the Region of Durham and local housing providers should ensure that they participate fully in the Government of Ontario's proposed provincial housing review process when it is initiated.
- 3) We recognize that there are frustrations on the part of both Social Services staff and clients of Regionally administered income support programs. These frustrations are based on an increasing client load and overly complex systems of administration. It is recognized that the rules and regulations of the income support programs are provincially mandated. From this we make the following recommendations:
  - a) The Region of Durham Social Services Department with key community partners should lead community dialogue on concerns with the social assistance system in Ontario and make contributions to the province Social Assistance review process that is occurring in 2011. These contributions should be based on both staff and client experiences with the delivery of income support programs and have the goal of improving understanding and client-staff relations.
  - b) Efforts should be made to promote staff-client engagement outside of the service relationship in an effort to promote understanding. As an example, the City of Hamilton has regular facilitated meetings between staff and clients to talk about issues of concern and to help staff increase their empathy for client experiences and help clients better understand the position of staff as administrators of programs and services.
  - c) Opportunities for staff discourse should be promoted internally within the Social Services department to help in building employee relations and to create opportunities for knowledge sharing.
  - d) Information on service and programming available to the community should be provided in a simple and concise manner to help clients and potential clients better understand the rules and regulations of the social assistance system and improve their ability to navigate it.
- 4) Persistent myths about poverty and the poor need to be exposed. A strategy to educate the general public about the realities of poverty should be developed with the goal of reducing the stigma attached to poverty. This process should include persons with lived experience of poverty, the community at large, the Region of Durham's Social Services Department and local service

organizations.

- 5) There needs to be a coordinated effort to advertise and promote community based services so that the community and staff from local organizations are all aware of what is available in the Region.
- 6) Communities with strong economic foundations are those with a diversity of industries and locally available jobs. As we can see from the data presented here, a shifting economy in Durham has created opportunity for some while leaving others behind. Work in this area is required and should involve Economic Development departments at the Region and lower tier municipalities, Chambers of Commerce, Boards of Trade, the Durham Region Local Training Board and organizations in employment services and other relevant social services. We recommend that:
  - a) Economic development efforts across the Region make certain that diversity of industry is a primary focus, thus ensuring that our community attracts new and sustained investment in primary industries such as agriculture, the manufacturing sector, and in the growing knowledge based economy.
  - b) Our community must support efforts to create good, stable jobs that pay living wages and provide stability for members of our community.
- 7) Efforts to improve local transportation systems needs to continue and needs to take into account issues of accessibility and affordability.
- 8) The Region of Durham needs to take the lead in local efforts to advocate for changes to relevant policies and programs that will reduce poverty at the provincial and federal levels . This must include, advocacy for increase Social Assistance rates, investment in childcare, investment in affordable housing, and the further increase of minimum wage to a livable standard. In addition, the Region of Durham should support local community organizations in their efforts to access provincial programs that will support development in these areas.
- 9) Local policy planning and research organizations need to work with the Region of Durham and the University of Ontario Institute of technology to complete further research and assessment in the following areas related to poverty in Durham:
  - a) We need to better understand the barriers that those living in poverty face when it comes to employment, education and training opportunities.
  - b) We need to improve our understanding of how poverty creates isolation and marginalization locally and what the impact of these conditions may be for individuals, families and the community.
  - c) We need to assess the relationship between conditions of poverty an crime in our community and develop community based strategies for intervention.

As a final recommendation we propose the development of a community driven and regionally supported Poverty Committee for Durham. This committee would be tasked with the coordination and support of local efforts to assess and reduce conditions of poverty and for the development of strategic actions based on the results and recommendations of this report. This “committee” must be community driven and include representatives from Regional government, local civil society organizations, educational institutions and researcher, persons with lived experiences, and members of the community at large.

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## INTRODUCTION

*When it is genuine, when it is born of the need to speak, no one can stop the human voice. When denied a mouth, it speaks with the hands or the eyes, or the pores, or anything at all. Because every single one of us has something to say to the others, something that deserves to be celebrated or forgiven by others*

Eduardo Galeano, *Celebration of the Human Voice*/2

Although numerous academic and community research studies have documented the nature and extent of poverty in Canadian communities, relatively few have attempted to explore the subjective experience of poverty at the local level in a way that may inform policy. Although these quantitative, statistically based studies are of importance we believe that they only convey part of the story about poverty in Canada. Poverty is a subjective experience that plays out in the lives of an unacceptable number of Canadian individuals and families. This experience is characterized by material hardship, chronic stress, poor physical and mental health, inadequate and unsafe living conditions, hunger, social exclusion, and violence. These are facts that are often missing in analyses of poverty in communities that focus exclusively on quantitative measures and statistics. As author Paul Brodeur has stated, “statistics are human beings with the tears wiped off” (Brodeur, 1985). Although we do need to understand the nature, depth and breadth of poverty in our communities, and good statistics can help us develop this understanding, we believe that such work runs the risk of marginalizing the true impact that poverty actually has on individuals, families and communities. Through qualitative analysis we are able to give voice these experiences helping us to develop a more robust, and accurate picture of poverty in our community.

With this in mind, in 2009 the Community Development Council Durham initiated a project to help us better understand poverty in the Region of Durham by moving beyond the available quantitative data and statistics and examining the qualitative experience of those who live in chronic states of material hardship, poor health and social exclusion in our community. The purpose of this project was to develop a local assessment of the experience of poverty in Durham in a way that could inform local policy and service practice while also contributing to provincial and federal dialogue on poverty amelioration and eradication. Our approach to this work is informed by our commitment praxis research that develops our understanding while also contributing to processes of social change. Through this process we have tried to give voice to poverty in our community, providing a venue for those struggling in poverty to be heard, if only for a brief moment in time. It is our hope that this work will further local knowledge while also acting to create informed dialogue on what poverty means in our community.

In order to achieve a more comprehensive view of poverty in our community this report presents both primary data collected through a qualitative methodology for this study as well as relevant and available socioeconomic data on the Region of Durham. In this way the goal is to present a holistic picture of the experience of poverty and socioeconomic difficulty in the Region and provide guidance to policy and programming development both within government and for local social service organizations.



## Methodology

Primary data for this study was collected through a series of in-depth interviews with individuals living in poverty in Durham, with those who work with them in the community services sector, and through a series of focus groups with frontline staff in the Income and Employment Support division of the Durham Social Services Department. The purpose of this qualitative process was to gain insight into the local experience of poverty from those who experience poverty and from those who serve them in both government and civil society.

The research presented in the report was conducted in 2009 and 2010 across the Region of Durham.

Participants for this project were selected variously depending on the group that they represented. Those from the community were self-selected, identifying themselves as living in poverty and responded to calls for participants posted in various strategic locations across Durham. Each of these participants received a gift card upon completion of the interview.

Those representing community organizations were invited through email sent to the CDCD agency contact list and passed on through other contact networks (such as the Durham Advisory Committee on Homelessness).

Staff from the Region of Durham Social Services Department were invited to participate in set focus groups through an internal post sent throughout the department.

The interviews were based on a semi-structured interview schedule prepared by the lead researcher. A semi-structured approach was utilized so as not to constrain the respondent to particular categories of question. Rather, we were interested in starting a guided conversation with the respondents and then letting the interview proceed in directions that the interviewees chose for themselves. In this way, we hoped to capture the issues that were most meaningful from the point of view of the respondents, rather than imposing the interviewer's categories of interest on the respondent. The interview schedule followed the same theme for both community and organization participants but varied in the kinds of questions asked.

Each interview was recorded with permission of the respondent and lasted between 1 and 2 hours.

The focus group discussions were facilitated by a primary researcher and captured in writing by a research assistant. They followed a semi-structured question guide similar to the one used in the interviews.

All data captured through the interviews and focus groups were analyzed repeatedly to the point where "saturation" of themes occurred. Saturation occurs when repeated analysis of the data reveals no new information and the emergence of consistent themes occurs. To increase the reliability of the analysis and to guard against interpretation bias, the two primary researchers compared notes on their own independent analysis of the themes.

Secondary analysis was completed using socioeconomic trends data from various statistical sources, including Statistics Canada, the Ontario Ministry of Finance, and the Region of Durham in order to provide an analysis of local socioeconomic trends that relate to local conditions and experiences of poverty.

In this report, then, the aim is to document the experience of poverty in Durham Region in an effort to provide more “texture” to local understandings of poverty. This is completed through a basic assessment of local socioeconomic trends and an analysis of the qualitative data collected through the primary research process. The report makes no attempt to generalize the experiences of those we interviewed to the entire to the population of those living in poverty in Durham. Rather, the data presented here tells the stories of a few so that we may better understand what it means to experience material hardship and social exclusion in our community.

## Participant Profile

The number of participants in the research varied by group:

- ⇒ Twenty-two individuals from the community who identified themselves as living in poverty were interviewed.
- ⇒ Eighteen representatives from various community organizations that work with those living in poverty or on poverty related issues were interviewed.
- ⇒ Twenty Social Service Department staff who work in frontline service positions participated in focus groups

The participants from the community came from various backgrounds, age groups, and circumstances:

- ⇒ 100% of community participants were receiving some form of government transfer payment as at least part of their income, with 16 of 22 receiving Ontario Works, and 6 of 22 receiving Ontario Disability Support Program payments
- ⇒ 8 of 22 participants were currently working in part-time jobs
- ⇒ 2 of 22 participants were attending school part-time
- ⇒ 2 of 22 participants were attending English as Second Language classes
- ⇒ 5 of 22 participants were immigrants to Canada, with 2 of these individuals having arrived within the past 10 years
- ⇒ The majority of participants were females (17 of 22) and the majority of these women had children at home (15 of 17), none of the male participants had children at home
- ⇒ None of the participants were currently living with a spouse or partner, but 10 of 22 indicated that they were currently in a relationship
- ⇒ The majority of participants were over the age of 35 years (13 of 22), 2 of 22 were under the age of 20 years, 3 of 22 were under the age of 30 years

Participants from community service organizations varied by sector and level of experience.

- ⇒ 5 of 18 participants represented general social services
- ⇒ 2 of 18 participants represented emergency shelter services
- ⇒ 3 of 18 represented housing support services

- ⇒ 2 of 18 represented mental health services
- ⇒ 1 of 18 represented food security services
- ⇒ 1 of 18 represented direct health services
- ⇒ 2 of 18 represented employment services
- ⇒ 2 of 18 represented immigrant settlement services
- ⇒ 10 of 18 participants have been serving the community in Durham for 10 years or more

## DEFINING AND MEASURING POVERTY

*I am poor, I have always been poor, I will always be poor. This is the way it is.*  
Oshawa Resident, 2010

A key component of the public discourse that contributed to the province of Ontario's poverty reduction strategy was dialogue on the conceptualization and measurement of poverty. This makes sense, as any understanding of complex social phenomena requires a common conception of what is being discussed and a methodology for tracking and measuring relevant trends. Thus, a credible, reliable and standardized measurement of poverty (or combination of measurements) allows communities to track and better understand poverty and how it is manifest locally and across jurisdictions. The World Bank argues that the definition and measurement of poverty is important for at least four reasons (World Bank, 2005, pp. 10 - 13). First, and most importantly, it keeps poverty and those living in poverty on the public's radar and thus on political and economic agendas of communities and governments. Second, it allows for the development of targeted and relevant policy and programming interventions to improve living conditions. Third, it allows for the monitoring and evaluation of these policy and programming interventions to assess their effectiveness in the amelioration and elimination of poverty. Finally, it allows for the assessment of the effectiveness of public institutions, including both government institutions and civil society (i.e. those organizations that have a mandate to support and improve a community).

However, despite the strong justification for the definition and measurement of poverty the topic has a tendency to be contentious in the public and policy discourse on poverty in Canada. As a recent report from the Standing Committee on Human Resources and Social Development and the Status of Persons with Disabilities (HUMA) states:

*The conceptualization and measurement of poverty is complex and continues to be a source of debate among poverty reduction advocates, social policy analysts and policy-makers. In general, poverty is defined either in absolute terms – inability to obtain the basic necessities of life – or in relative terms – being at a relative disadvantage economically and socially in comparison to others living in the same community (Hoeppe, 2010, p. 9).*

In light of the general disagreement we believe that it is important to briefly review the various ways in which poverty is defined and measured in Canada and Ontario, and to outline how poverty was conceptualized throughout this project.

### Absolute Measures of Income Poverty

Absolute measures of poverty are often referred to as basic needs measurements whereby the poverty line is defined as “the cost of a list of basic needs required for long-term physical well-being” (Sarlo, 2008, p. 3). Thus, poverty is defined as a state of absolute deprivation whereby individuals and families lack access to the basic necessities of life and therefore face a direct threat to their physical well-being. According to the absolute approach to poverty measurement, “[p]eople are poor if they cannot afford all basic physical

necessities – items the absence of which is likely to compromise long term physical well-being” (Sarlo, 1996, p. 196). Measured in absolute terms poverty becomes a narrow income-based concept that measures ability to access a basic basket of goods that are deemed necessary for physical well-being in Canada.

In its most basic form, absolute poverty measures are based on only the most basic necessities of life, food, shelter and clothing. The measure is calculated based on the cost of meeting these basic needs with those below the threshold being defined as living in poverty. In a recent publication Chris Sarlo (perhaps the most well-known developer and proponent of absolute poverty measurement in Canada) identified these basic necessities as including: nutritious food fulfilling all Canada Food Guide requirements, rental accommodation, clothing purchased new at major department stores, household furnishings, supplies, personal hygiene items, laundry, insurance, out-of-pocket health costs, such as medications, dental, and vision care. These are goods and services that may be deemed necessary for the maintenance of a basic standard of well-being in Canada. Sarlo advocates for the omission in poverty measures of goods and services that may be viewed as social amenities. In his testimony before the Standing Committee on Human resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA), he stated that he:

Would urge [the Committee] to resist the temptation to bulk up the poverty line by adding things like recreation items and vacations and so on. The critical issue here is not that the poor shouldn't have these things – of course they should – the question is whether people are impoverished for lack of them (Hoeppner, 2010, p. 13).

Thus, from a basic needs standpoint we should understand poverty as a state of absolute deprivation rather than one of relative deprivation. That is, proponents of this measure argue that there is a real value in knowing who in our communities cannot afford to meet even the most basic of needs and are thus living below a subsistence standard. Using this approach, Sarlo (2008) has calculated income poverty lines for Canada based on household size (see Table 1).

Table 1: Poverty Lines Based on Basic Needs Measurement in Canada, 2007 Income base

Size of Household (persons)	Basic Needs Poverty Line (annual income)
1	\$10,520
2	\$16,508
3	\$20,064
4	\$23,307
5	\$26,323
6	\$29,163

Source: Sarlo, 2008, p. 8

## Relative Measures of Income Poverty

Relative poverty measures are those that examine poverty as a contextual socioeconomic phenomenon. That is, poverty is understood to be a situated socioeconomic phenomenon that indicates ones position in relation to

others in the same community or society. Conceptualized in this way poverty basically becomes a measure of inequality and socioeconomic exclusion within a society, as Peter Townsend states:

Individuals, families and groups in the population can be said to live in poverty when they lack the resources to obtain the types of diet, participate in the activities and have the living conditions and amenities which are customary, or at least widely encouraged, or approved, in the societies to which they belong. Their resources are so seriously below those commanded by the average individual or family that they are, in effect, excluded from ordinary living patterns, customs and activities (Townsend, 1979, p. 31).

In general, poverty is perceived in relative terms in most industrialized nations (Hoepfner, 2010; Palmer, n.d.). In Ontario there are three widely accepted measures of low-income that are used to understand poverty: the Market Basket Measure (MBM), the Low-Income Cut-Off (LICO), and the Low-Income Measure (LIM). In 2008 the Government of Ontario adopted the Low-Income Measure as its official measure of poverty (Ministry of Children and Youth Services, 2008), however, the others are, to date, still in use (Statistics Canada, 2010).

### **Market Basket Measures (MBM)**

Similar to basic needs measurement, the Market Basket Measure (MBM) of poverty is based on the cost of a specific basket of goods and services that allow individuals and families to achieve a modest standard of living (Statistics Canada, 2010). It is a measure of the disposable income (i.e. income minus taxes, payroll deductions, and child/alimony support payments) that a household requires to purchase this predefined basket of goods and services (Hoepfner, 2010, p. 11). This data is calculated for a reference family of 2 adults (aged 24-49) and 2 children (aged 9 and 13) at various levels of geography defined as MBM Regions<sup>1 2</sup>. Unlike in the calculation of the basic needs poverty levels, the MBM basket includes some basic social amenities that go beyond the subsistence level, accounting for items that may be seen to improve well-being and social inclusion (e.g. transportation costs, computer and internet services). In this way, the MBM measures poverty in a more relative way than basic needs calculations do, taking into consideration some basic goods and services that promote equal opportunity and a level of well-being beyond basic subsistence in a community.

The MBM was originally developed by a working group that included Federal and Provincial/Territorial officials and led by Human Resources and Skills Development Canada. In 2009 and 2010 the MBM was extensively reviewed revised (Hatfield, Pyper, & Gustajtis, 2010) leading to an updated series of thresholds for measuring low-income (see Table 2).

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<sup>1</sup> There are 49 MBM 'Regions' used across Canada. These 'Regions' consist of predefined major metropolitan areas as well as general Regions defined by total population. See Hatfield, Pyper, & Gustajtis (2010) for more detail.

<sup>2</sup> Statistics Canada recommends that calculations for other family sizes be achieved by dividing the calculated MBM lo-income measures by 2 and then multiplying the result by the desired family size (Statistics Canada, 2010, p. 28).

Table 2: Market Basket Low-Income Thresholds, Ontario, 2008, by MBM Region, for a family of 2 adults and 2 children

Geography	MBM Low-Income Threshold (annual income)	Geography	MBM Low-Income Threshold (annual income)
Rural	\$27,756	Ottawa	\$29,797
Population less than 30,000	\$28,904	Hamilton/Burlington	\$27,907
Population 30,000 to 99,999	\$26,620	Toronto	\$31,129
Population 100,000 to 499,999	\$28,044		

Source: Statistics Canada, 2010, p. 28

### Low Income Cut-Off's (LICO)

The Low-Income Cut-Off (LICO) measures may be viewed as a more relative way of measuring poverty. Using household spending data from the 1992 Family Expenditure Survey, LICO's are established economic thresholds that are based on average household expenditure in Canada rather than on the absolute cost of goods and services. In this way they are meant to measure low-income in relation to a reasonably derived and relative cost of living in Canada. Although not officially recognized as measure of poverty by Statistics Canada, the Low Income Cut-Off's (LICO's) have been widely used as a standard measure of poverty in Canada by social policy groups, advocacy organizations and researchers since the 1970's. The LICO's provide a threshold, below which families will devote a larger share of household income to necessities such as food, clothing and shelter than the average family (Statistics Canada, 2010). They are calculated by determining the percentage of after-tax income that an average Canadian household spends on food, clothing and shelter and adding a 20% margin. The addition of the 20% margin is arbitrary, however Statistics Canada states that: "Twenty percentage points are used based on the rationale that a family spending 20 percentage points more than the average would be in "straightened circumstances"" (Statistics Canada, 2010). In order to account for differences in cost of living based on community and size of the household, LICO's are defined for five categories of community size and seven of family size resulting in 35 cut-offs for both before-tax and after-tax income (Statistics Canada, 2010).

Table 3 provides the most recent LICO's as calculated by Statistics Canada (2010).

Table 3: Low Income Cut-Off's by Household Size (# of persons) and Community Population, Canada, 2009

Household Size	Community Size				
	Rural	Less than 30,000	30,000 to 99,999	100,000 to 499,999	500,000 and over
	Current Dollars				
1 person	\$12,050	\$13,791	\$15,384	\$15,579	\$18,421
2 persons	\$14,666	\$16,785	\$18,725	\$18,960	\$22,420
3 persons	\$18,263	\$20,900	\$23,316	\$23,610	\$27,918
4 persons	\$22,783	\$26,075	\$29,089	\$29,455	\$34,829
5 persons	\$25,944	\$29,692	\$33,124	\$33,541	\$39,660
6 persons	\$28,773	\$32,929	\$36,736	\$37,198	\$43,984
7 or more persons	\$31,602	\$36,167	\$40,346	\$40,854	\$48,308

Source: Statistics Canada, 2010, p. 18

## Low Income Measures

The Low Income Measure (LIM) is an internationally recognized measurement of low-income and poverty, used by both national and supranational governments (e.g. the European Union). This allows the LIM to be used to make international comparisons of poverty. The LIM is a fixed percentage of the median household income of a community (Statistics Canada, 2010). In Canada the LIM is set at 50% of adjusted median family income<sup>3</sup>. These measures are categorized according to the number of adults and children present in families, reflecting the economies of scale inherent in family size and composition. That is, the LIM takes into account the inherent increases in cost of living that occur as family size increases. An individual or family is determined to live in poverty if they have an annual income that is below the LIM, that is, less than 50% of the median. Using the principles of the LIM we are able to adjust the measure to account for the depth of poverty in our community. For example, we may define deep poverty as being below 40% of the median, thus allowing for more nuanced measurements of income deprivation in our communities.

The LIM is calculated annually by Statistics Canada using an annual survey of household income and is usually calculated three times: with market income, before-tax income, and after-tax income (Statistics Canada, 2010). The after-tax LIM is the most useful as it provides a measure of the net income of an individual or household.

Table 4 provides the most recently available after-tax LIM's for Canada as calculated by Statistics Canada (2010).

Table 4: Low Income Measures (LIMs) after-tax, Canada, 2008

Household Size	Low Income Measure
1 person	\$18,582
2 persons	\$26,279
3 persons	\$32,185
4 persons	\$37,164
5 persons	\$41,551
6 persons	\$45,516
7 persons	\$49,163

Source: Statistics Canada, 2010, p. 6

## Deprivation Measures of Poverty

The common trait of the measures discussed above is that they all consider poverty in terms of income deprivation. That is, they define income as a proxy indicator of ability to secure basic necessities of life (defined in either absolute or relative terms). Each of these measures assume that a family or individual with an income below a certain level is likely to be living in poverty, and thus unable to meet their needs for a basic standard of living (Matern, Mendelson, & Oliphant, 2009).

<sup>3</sup> "Adjusted" indicates that household needs are taken into account when determining income levels and thus the median income (Statistics Canada, 2010, p. 10)



However, as can be seen above the various constructs of poverty measurement that rely on income data provide vastly different definitions and measures of poverty. As a result we can have vastly different understandings of the nature of poverty in communities. For example, if we were to use the basic needs measurement developed by Chris Sarlo and used by the Fraser Institute, we would determine that only about 5% of Canadians live in poverty (Sarlo, 2008). In contrast, if we use the more relative LICO, LIM, or MBM measures from Statistics Canada we would determine that between 12% and 15% of Canadians live in poverty (Statistics Canada, 2010). Both approaches have value in helping us to understand the nuances of poverty in Canadian communities. However, critics of these approaches argue that income measures do not provide us with a full picture of an individual or family's "command over resources" (Boarini & Mira d'Ercole, 2006, p. 10). Income measures do not, for example, provide us with a picture of additional assets that individuals and families may have access to, such as health benefits, credit, savings or income supplement programs. At the same time, income based measures do not tell us about the true expenses and liabilities that individuals and families may have that impact on their ability to meet basic needs (Boarini & Mira d'Ercole, 2006). Thus, income based measures may inaccurately tell us who and who is not struggling in our communities.

For this reason there has been a push to develop deprivation measures of poverty that assess an individual or family's ability to access goods and services that are considered fundamental to a decent quality of life in a given social context (Boarini & Mira d'Ercole, 2006; Matern, Mendelson, & Oliphant, 2009a). These measures generally take the form of a deprivation index that is comprised of multiple deprivation indicators that are socially contingent. Thus, deprivation indices are socially constructed and should include those items that are assumed to be necessary for a household to have a standard of living above the poverty level. These should be items that most households not in poverty are likely to have access to and that those in poverty may find to be unaffordable (Matern, Mendelson, and Oliphant, 2009a). As Matern, Mendelson, and Oliphant (2009a) state, "if it [the deprivation index] is well developed, [it] should contain those items that distinguish the poor from the non-poor in the prevailing social and economic conditions" (p. 5).

Several industrialized nations have established deprivation measures of poverty, including Ireland and the United Kingdom. In 2008 and 2009, the Daily Bread Food Bank in Toronto and Caledon Institute for Social Policy completed a comprehensive community-based research process and developed what may be seen as the first official deprivation index in North America. The resulting Ontario Deprivation Index (ODI) is intended to "distinguish the poor from the non-poor" (Matern, Mendelson, & Oliphant, 2009, p. 3) and has ten relative indicators of deprivation. These include:

1. Being able to get dental care if needed
2. Being able to replace or repair broken electrical appliances
3. Being able to buy small gifts for family and friends at least once a year
4. Having appropriate clothes for a job interview
5. Ability to have friends or family over for a meal at least once a month
6. Have fresh fruit and vegetable everyday
7. Being able to get around your community (access to transportation)
8. Able to have a hobby or leisure activity

9. Able to eat meat, fish or a vegetarian equivalent at least every other day
10. Have a home that is free of pests

An individual or household is assumed to live in poverty if they are deprived in two or more indices.

Although no comprehensive analysis of poverty in Ontario has been completed using the Ontario Deprivation Index to date, it was used to develop a series of questions used by Statistics Canada in a supplemental questionnaire delivered with the monthly Labour Force Survey in March and April of 2009 (Statistics Canada, 2009). A preliminary test of the validity of the Ontario Deprivation Index (ODI) was completed in 2009 (Matern et. al, 2009b). This validation test used basic data from the Ontario Deprivation Survey and simply correlated those who were defined as poor by the index (i.e. those who indicated deprivation in two or more of the ten variables) with well-accepted indicators of poverty (i.e. income, education, employment status, immigration status, family make-up, and housing tenure). From this simple analysis the authors concluded that the deprivation index was a good measure of poverty in Ontario (Matern et. al. 2009b).

## Participant Definitions of Poverty

The participants in our research overwhelmingly defined poverty in relative terms and rejected the notion that to be poor means to be living strictly in circumstances of absolute destitution (although they did generally acknowledge how close they felt to being in such circumstances). One respondent summed this perspective up effectively by stating that:

*Poverty is being less fortunate... [it is] not being able to afford what the average person can*

While participants often began to describe and define their own circumstances in monetary terms they quickly transitioned into the language of material and social deprivation creating links between struggles with income and their inability to participate in basic social and economic processes. As one participant stated:

*I think that most [people] think that poor people are people with no money. I guess this is true, but it is more. Being poor is being alone, not being able to do things, not being able to find a job, [not] being able to do what you want to do.*

Another participant said that:

*Poverty... is not being able to go to the dentist, it's not being able to afford that pair of shoes so that I can continue my walking group [which she requires to maintain her fragile health], it's not being able to afford to buy my daughter that book from the book order that comes home from school. To me that's poverty.*

The interviews and focus groups with community service and Social Service staff supported the participants view that poverty is a relative phenomenon, with one focus group participant stating that:

*The definition of poverty is ambiguous; it changes with each and every individuals experiences,*

*circumstances, perceptions and assumptions... At the end of the day it is really about being excluded from life in our community.*

From these brief but indicative statements from participants we are able to see that poverty is perceived as a relative phenomenon, contingent on situation and circumstances.

## Summation

What then, is poverty? As can be seen by the review in this section, this is a perpetual question asked in the discourse on poverty reduction in our community and the answers vary widely. The use of a basic needs measurement may be important in helping us to understand the level of absolute deprivation in Canada and our community, but it really does not provide us with a full picture of who is struggling in our society. Relative income based measures help us here providing a basic understanding of who is deprived of the basic social needs required to live in Canadian society. Respondents in our research generally supported a definition of poverty similar to the one stated by Peter Townsend and quoted above (p. 8). Thus, based on the views and experiences of participants in this research report we view poverty as a relative experience, based on ones ability to participate in the normal socioeconomic activities and customs of or community. This is a multidimensional socioeconomic phenomenon, and therefore requires a multifaceted approach to measurement and assessment. This must include standard statistical measures of poverty such as the LICO and LIM, but must also include deprivation measures, like the Ontario Material Deprivation Index, as well as qualitative assessments of local experience. This report focuses on the former.

## COMMUNITY CONTEXT

The Region of Durham lies just east of the City of Toronto in Southern Ontario, comprising the eastern edge of the Greater Toronto Area. The Region is comprised of eight lower level municipalities with the urban communities of Pickering, Ajax, Whitby Oshawa, and the southern part of Clarington home to the vast majority of the Region's population. The three northern municipalities of Scugog, Brock and Uxbridge are largely rural and make up the majority of the Region's land mass. Durham is a community in transition with a growing, increasingly diverse population.

The Ontario Ministry of Finance (2011) has projected that the population of the Region of Durham will reach 628,920 in 2011<sup>4</sup>, an estimated increase of 8,490 persons from 2010. This growth is not new in the community, with the population in Durham increasing by approximately 29% between 2000 and 2009 (Earle, 2008). This growth is expected to continue, with the population in Durham projected to reach 670,950 in 2015, 736,980 in 2020, and 992,830 in 2036 (Ontario Ministry of Finance, 2011).

Overall population growth in Durham has been accompanied by increasing diversity. For example, immigrants accounted for 34% of the overall population growth in Durham in the period between 2001 and 2006; of this group, 53.5% were recent immigrants, having arrived in Canada between 2001 and 2006 (Earle, 2008). These new Canadians are increasingly coming from non-traditional source countries in East and South Asia, the Middle East, and Latin America (Earle, 2008). The vast majority of this population is located in the lakeshore communities of Pickering, Ajax, Whitby, Oshawa, and Clarington (Courtice, Bowmanville and Newcastle), with growing pockets in Township of Scugog (Port Perry) and the Township of Uxbridge (Uxbridge).

### LICO and LIM Based Poverty Rates in Durham

To get a basic understanding of the scope and nature of poverty in Durham it is helpful to review basic low-income data produced by Statistics Canada.

According to Statistics Canada, approximately 9 percent of the population of Durham were living with low incomes in 2005 (LICO), an increase of 25 percent from the year 2000. Of these individuals the highest rates of low income were experienced by women over the age of 65 (36%), working age women (32%), lone parents with children under the age of 18 (34%) and recent immigrants (25%). In addition data on low income after-tax by family structure in the region shows that the prevalence of poverty among couple families is 5.7% as compared to 18.6% for lone female parent families (Earle, 2008).

If we use the Low Income Measure (LIM) we can estimate that in 2005 there were 149,315 individuals in the Region with low-income, or 26.6% of the population (Earle, 2008). Of this number 63.5% were women (Earle, 2008).

<sup>4</sup> The Ontario Ministry of Finance projects the population for the province based on three scenarios: high growth, low growth, and a reference scenario (2011, p. 5). These scenarios are based on plausible variations in the components of growth, which include fertility rates, mortality rates, and net migration (a summation of immigration, emigration, non-permanent residents, inter-provincial migration, and intra-provincial migration) (2011, p. 18-27). The projections for each Census Division in Ontario (including Durham) are based on the reference scenario, which is assumed to be the most likely to occur.

Using both the LICO and the LIM, the Children's Aid Society of Toronto (2008) estimate that the child poverty rate in Durham was between 9% (LICO) and 15% (LIM) in 2005.

From these divergent statistics we can see the issues with poverty measurement that exist. For our purposes it is significant to note that the income poverty rate in Durham is somewhere between 9% and 15% overall and that several groups in the community, such as new Canadians and lone female parents are more likely to experience income poverty than other groups.

## The Shifting Local Economy

Although it is important to understand the level of poverty that exists at a given point in time in a community it is equally important to understand how changing socioeconomic conditions may create circumstances in which individuals and families may struggle. Throughout the research process participants raised concerns over the shifting local economy and labour market. This was most significantly heard in the focus groups with Social Service Department staff in Oshawa:

*We are seeing new clients who had jobs at GM or at other manufacturing facilities in Oshawa and Whitby. They had good jobs. But now they have been laid off and can't find permanent work. Many are working sporadically through temp agencies, but nothing permanent. We can do little to help them, other than refer to job programs, until they have used their savings and lost their house. But they need help now because there is not much work available to them.*

This quote exemplifies the fact that, like many other communities in North America, Durham has been experiencing an economic transition over the past twenty years or so. This shift is characterized by the loss of generally well-paid jobs in manufacturing and related fields and the replacement of these jobs with employment opportunities in two disparate areas: jobs in the new knowledge-economy that are generally high-income, professional and technical jobs; and jobs in the service economy that are generally low-wage and precarious. This trend is well underway in the Region of Durham.

In the 5 year period between 2002 and 2007 the Oshawa Census Metropolitan Area (CMA) lost 7300 jobs in the local manufacturing sector, representing a 21% decrease<sup>5</sup>. This made it one of the hardest hit manufacturing communities in the province with only Windsor having a higher rate of decline. Despite the significance of this decline it has been masked by overall population growth and growth in the local knowledge-based economy. Between 2001 and 2006 the local labour force grew significantly in the health and social services sectors and the education sector (Earle, 2008). The rapid expansion of the University of Ontario Institute of Technology and additions to Lakeridge Health such as the Regional Cancer Centre are indicative of this growth. These labour market trends have brought many benefits to the community, creating new opportunities, increasing the populations' general education level and increasing average individual and household incomes.

This being said, although we need to acknowledge our successes we cannot ignore the fact that our changing labour market is also creating many challenges that we now need to face. At the same time that Durham's

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<sup>5</sup> Source data: Canadian Auto Workers Union, Research Department, 2008

knowledge economy has been growing and creating opportunities in our community we have also seen significant growth in the local retail services sector. Between 2001 and 2006 alone, there were over 3000 retail jobs created in Durham (Earle, 2008). Jobs in this sector are precarious, offering low-wages, little or no benefits, part-time hours, and no opportunity for employee development. These jobs place many vulnerable workers, who lack the education and skills required to participate in the new knowledge economy, into unstable employment situations.

Essentially, the shifting local economy has replaced many good paying, unionized, safe and previously stable jobs in the manufacturing sector with jobs characterized by lower pay, part-time hours, poor or no benefits, decreased security and unsatisfactory, even unsafe working conditions. Jobs in the retail services sector are indicative of this trend, however, we are seeing a growth in precarious work in other sectors. For example, manufacturing jobs are increasingly precarious, offering lower wages and less security than in the past, and even in the knowledge economy, temporary and contract work are an increasing reality for many.

This shift is significant because it has the effect of creating employment conditions that do not protect individuals and families from poverty as job security and income are impacted. This is especially true for vulnerable groups and those displaced from good jobs to bad ones. For example, the average Ontario worker who replaces a lost manufacturing job with new work experiences a 25% reduction in annual income (Campaign 2000, 2008). The impact on the income levels of those at the lowest end of the economic spectrum becomes evident when we consider the fact that there is nearly a \$20 gap between the median hourly wage in the automotive manufacturing and that for the retail sector. In light of which sector is growing and which is in decline in our community the potential impact is plain, we simply need to look at the facts: in 2007 in Ontario, 41% of low-income families with children had at least one parent who worked full-time, full-year and 70% of low-income families with children had at least one parent who participated in the workforce at some point during the year (Campaign 2000, 2008).

## Impact of the Economic Recession

As we need to understand the level of economic poverty in our community, and changing socioeconomic conditions that may lead to circumstances conducive to poverty, we also need to understand the impact that the most recent decline in the economy may have on members of our community in the short and long term. Recessions create poverty (Pasma, 2010), and the most recent recession of 2008-2009 was no exception. Although the recession has officially ended according to standard economic growth measures (i.e. Gross Domestic Product), its effects are still permeating our community.

Excluding Newfoundland and Labrador, the province of Ontario experienced the largest economic decline of all provinces during the recession of 2008 - 2009. The provincial Gross Domestic Product (GDP) dropped 5% between 2007 to 2009 and lost over 200,000 jobs (Ontario Ministry of Finance, 2009b). The impact of this decline has been felt at the local level across the province.

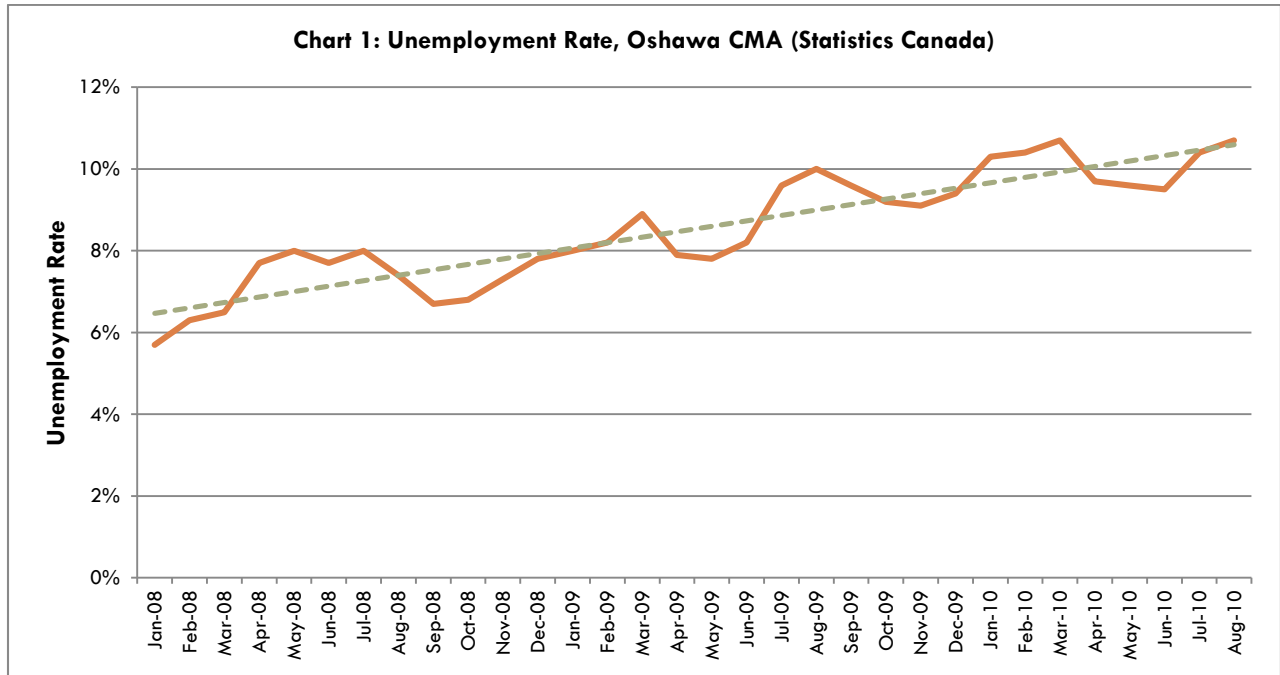
Data from previous recessions in Canada strongly indicate that recessions create poverty. During the 1981-1983 recession poverty in Canada rose 2.4%, peaking at 14% (Pasma, 2010). Similarly, in 1990-1993 the poverty rate increase in Canada by 4.1%, peaking again around 14% (Pasma, 2010). In the latter case the poverty rate continued to rise years after the recession officially ended, peaking in 1996 and only declining to its pre-recession rate in 2007 (Pasma, 2010). Recent data indicates that the 2008 recession also had an impact on the poverty rate in Ontario. Using the official poverty indicator adopted by the Government of Ontario in 2008 – the after-tax Low-Income Measure (LIM-AT) – data from Statistics Canada indicates that 13.1% of the population was in poverty in 2009 (Poverty Free Ontario, 2011). This rate had increase 17% since 2007, the highest rate of growth in Canada (Poverty Free Ontario, 2011). Thus, a total 1,689,000 individuals had poverty level incomes in Ontario in 2009, an increase of 277,000 individuals since 2007 (Poverty Free Ontario, 2011). In addition to provincial data on general poverty levels there are several indicators that we may look at to gain some perspective on how the recent recession created precarious living conditions for many in our community, including: unemployment rates, Employment Insurances claims, Social Assistance caseloads, housing trends, bankruptcy data, and food bank usage.

### Unemployment

Unemployment is a key factor in the determination of poverty. Since 1980, poverty rates in Canada have been significantly correlated with levels of poverty (Pasma, 2010). Simply, and logically, as unemployment rates increase so do levels of income poverty.

In 2006 the unemployment rate in Durham was 6% for males and 7% for females, both consistent with the provincial average at the time. Since 2008, with the onset of the economic recession, the unemployment rate has risen consistently in Durham communities (Chart 1). For example, unemployment in the Oshawa Census Metropolitan Area (CMA) increased from 6.2% at the end of 2007 to 8.2% at the end of 2008 (City of Oshawa, 2009). This rise continued as the effects of the recession affected the community. From February 2009 to August 2009 the unemployment rate in the Oshawa CMA increased from 8.3% to 10% and by August 2010 it had increased to 10.7% (Statistics Canada, 2010). In real numbers this means that as of August 2010 there were 23,300 individuals unemployed in the Oshawa CMA, representing a 14.8% increase

from August 2009 (Statistics Canada, 2010). Since this time the unemployment rate in the Oshawa CMA has decrease to prerecession levels, dropping from 10.3% in July 2010 to 8.2% in July 2011 (Statistics Canada, 2011). This positive trend does indicate that people are getting back to work in the Region. However, in attempting to understand poverty we must consider the impact that 2 years of increased unemployment may have had on individuals, families, and the community in Durham. Families depleted savings, debt loads may have increased, and spending declined. The long-term impacts of these trends are not yet known. Further, recent trends in the global economy may indicate that the recession is only in remission and that there are further declines to come. We must carefully monitor the effects of these trends on our community.



**Employment Insurance**

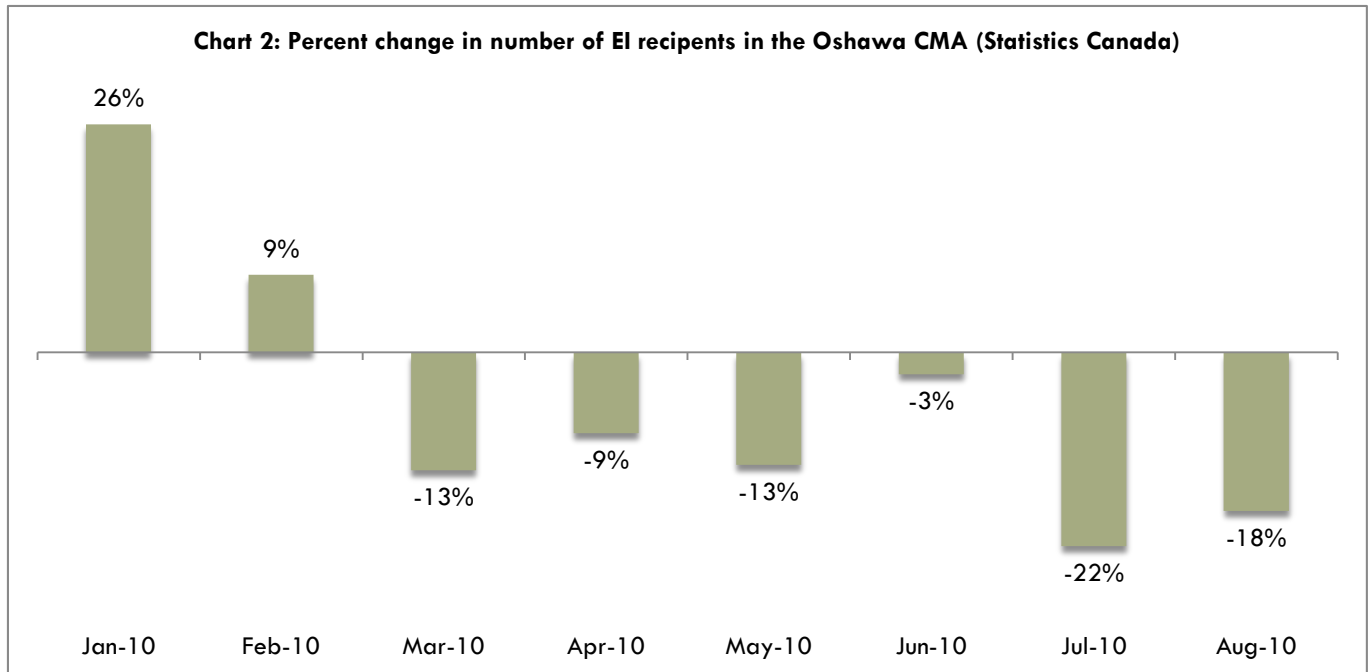
Employment Insurances becomes a key source of income for those who have lost work and are not immediately able to replace it with a new job. Without EI coverage individuals and families are forced to use savings and credit to get by while they are unemployed. This has the effect of creating precarious and straightened living conditions while they are unemployed and leaving families with reduce or eliminated savings and increased debt once new employment is secured.

In a recent paper, Jackson and Schetagne argue that the current economic recession represents an extreme “stress test” for Canada’s EI program (Jackson & Schetagne, 2010). The data they present indicates that the percentage of unemployed workers in Ontario receiving EI benefits increased from 32.3% in October 2008 to 41.4% in October 2009 (Jackson & Schetagne, 2010).

When we look to our community we see that there was a dramatic increase in the number of Employment Insurance beneficiaries in the Oshawa CMA, increasing 25.9% between January 2009 and January 2010 - from 5,900 individuals receiving regular EI benefits to 7,430. However, following provincial and national patterns, the growth in the number of EI recipients in the Oshawa CMA has been on a steady decline since



February of 2010 (see Chart 2). To large extent this indicates that the local economy is in recovery and people are heading back to work. However, given that the unemployment rate has remained stable to over the same period in 2010 (Chart 1) we may infer that the EI data may simply indicate that there are no new cases and that there is a contingent of those unemployed who have exhausted their EI benefits. We do not have currently available data that would allow for a detailed assessment of this hypothesis.



This being said, data from Statistics Canada covering 2006-2007 indicates that 27.9% of all EI claimants that year reached the 31 week time limit and thus exhausted their EI eligibility (Jackson & Schetagne, 2010). Based on the extent of the 2008 recession, and its impact on the labour market in Ontario, we can therefore infer that a significant proportion of unemployed persons who qualified for EI have exhausted their benefits before finding new employment. The result will be a significant number of persons who are forced to rely on savings and credit or turn to social assistance programs to get by.

In addition to EI exhaustion we must also consider the drop in number of eligible EI claims that has occurred, as a recent analysis completed by the Mowat Centre for Policy Innovation indicates that far fewer individuals were able to access EI benefits in Ontario since 2008 than during past declines in the economy (Mendelsohn & Medow, 2010). Pasma (2010) reports, during the past two recessions that have impacted Canada, more than 75% of Canada's unemployed have been able to access Unemployment Insurance, however, in the 2008 recession, only half of all unemployed Canadians had qualified for Employment Insurance as of October 2009. This left a staggering number of people without income support while they were unemployed in the immediate aftermath of the economic downturn.

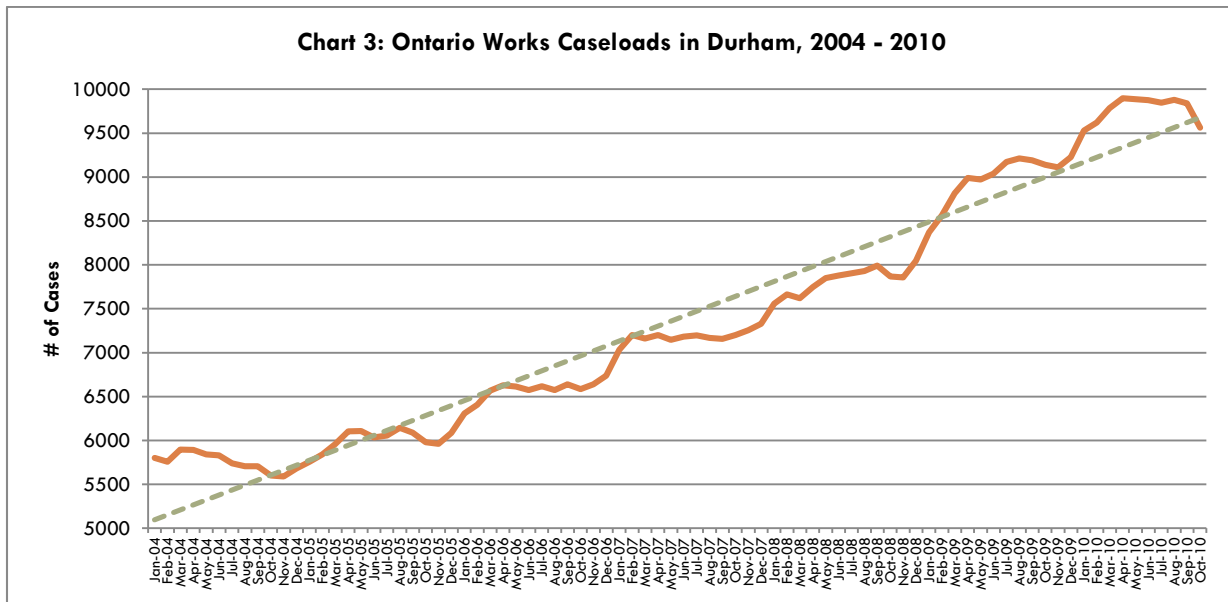
This eligibility gap was not equally felt across the labour market. Jackson and Schetagne (2010) show that the number of male regular EI beneficiaries (aged 25 and over) rose much faster than the number of unemployed males over the same time. For women the number of EI beneficiaries rose at around the same

rate as the number of unemployed women. This indicates that men are more likely to qualify for EI benefits in the event of unemployment than are women, a fact which Jackson and Schetange (2010) attribute to the type and tenure of employment that men and women affected by the recession had prior to unemployment. That is, males affected by the recession were generally employed in stable, full-time, manufacturing and construction industry jobs, while women were more likely to be employed in precarious, part-time jobs in, for example, the retail and service sectors.

**Social Assistance Caseloads**

Social assistance is the social safety net of last resort in Canada, providing income to meet basic the basic needs of individuals and families who have exhausted all other means of financial support (National Council of Welfare, 2010). Basic needs are generally defined as items such as food, shelter, clothing, household expenses, transportation, and personal grooming items. The amount available to meet these needs is often set arbitrarily by provincial government policy without any actual consideration of the actual costs of necessities (National Council of Welfare, 2010; Pasma 2010), thus leaving people who receive social assistance payments with income below LICO and LIM levels (Pasma, 2010).

We do know that local Ontario Works caseloads have been on the rise steadily over the past several years in Durham, rising from 5803 cases in January 2004 to 9841 in September 2010<sup>6</sup>. There was a spike in the number of cases beginning at the end of 2008 and carrying on through 2010 (see Chart 3).



**Housing**

Over 70% of the housing stock in the Region of Durham is comprised of single, detached, family homes and the majority of recent local housing starts maintain this pattern (Earle, 2008). As a result there is a diminished supply of affordable rental units, a fact that is reflected in the relatively low, and stable local vacancy rate of 3.7% (Canadian Mortgage and Housing Corporation, 2010). The average monthly rental cost in Durham

<sup>6</sup> The caseload remains consistent since this time, with a reported Regional caseload of 9,834 in April 2011.

as of April 2010 was \$847.00 for all rental unit types (Canadian Mortgage and Housing Corporation, 2010). Thus, there is a pronounced lack of affordable housing in the Region, providing few options for those who cannot afford to own a home. This housing situation has the effect of creating precarious living conditions as individuals and families are forced to spend a greater proportion of their income on housing costs, thus leaving them vulnerable if job loss or income reduction occurs.

According to the Ontario Not-for-Profit Housing Association there were 3,926 people on the subsidized housing waiting list in Durham in 2010 (2010). Of this number, 716 are seniors, 1336 are non-senior singles, and 1874 are families of two or more individuals (Ontario Not-for-Profit Housing Association, 2010). The average wait time for seniors in Durham is 2.5 years, for non-senior singles 4 years, and for families 2 years (Ontario Not-for-Profit Housing Association, 2010). These numbers have not increased significantly over the past few years.

### **Bankruptcy**

Bankruptcies act as an indicator of how individuals and businesses in a community are managing their debt-to-income ratios. As is expected both individual and business bankruptcies increased in the immediate aftermath of the recent recession. In the Oshawa CMA there was a 27.4% increase in consumer bankruptcies between 2008 and 2009, compared to a 21.1% increase in the period between 2007 and 2008 (Office of the Superintendent of Bankruptcy Canada, 2009). However, more significantly there was a 67.9% increase in the number of consumer bankruptcy proposals between 2008 and 2009, compared to a 13% increase between 2007 and 2008. Businesses did not fair much better in the Oshawa CMA, with a 35% increase in bankruptcies between 2008 and 2009 compared to 0% between 2007 and 2008. From this we can see that the immediate impacts of unemployment and economic decline in 2008 had a significant affect on many households and businesses in our community.

### **Food Bank Use**

According to the Region of Durham Health Department, in 2010 a healthy food basket for a family of four in Durham cost \$702.30 per month, for a single parent household with 2 children \$506.74, per month and for a single person \$195.56 per month (Region of Durham Health Department, 2010). They further calculate that the percentage of household income spent on food and other necessities, such as housing, increases dramatically for those with lower incomes and those living on Ontario Works (Region of Durham Health Department, 2010). This has the effect of creating precarious situations for those living in poverty as they increasingly strain their budgets to meet basic needs.

This results in reliance on external sources of support such as food bank. As the Daily Bread Food Bank reports, in the year 2010 food banks in the Greater Toronto Area saw the largest increase in client visits (15%) since 1995, when social assistance rates were reduced by 21.6% (Daily Bread Food Bank, 2010). The increase was even greater in the 905 region of the GTA, including Durham, where food bank use increased by 21% between 2009 and 2010, compared to 2% between 2008 and 2009 (Daily Bread Food Bank, 2010). They go on to argue that food bank use is an important indicator of how social policies and programs are working to support families and individuals in experiencing hardship, and therefore, this significant

increase in food bank usage indicates that recovery from the recession is ongoing and that current income security programs are severely limited in their ability to support those who are struggling (Daily Bread Food Bank, 2010).

## Summation

From this basic review of relevant data we can see that Durham is a growing community with a shifting demographic and economic landscape. This creates many new challenges as local government, civil society organizations and businesses attempt to meet the needs of a dynamic and changing community. For the most part this growth is generally good for the community, creating new social, economic and cultural opportunities.

However, we also see that there is a growing risk that some individuals and families are being left behind as shifting labour markets demand a more formally educated and trained labour force. A result of this shift is that those who were previously employed in stable, well-paying industrial jobs are increasingly relegated to unstable, low-wage jobs in a destabilized manufacturing sector and the local service economy.

We also see that a preliminary analysis of basic economic trends indicate that the recent economic recession has had a significant impact on some members of our community. The rise in Employment Insurance was a good indicator of this initial impact. The long-term effects of the recession are just now starting to take hold in Durham and we will need to closely monitor other indicator data such as OW caseloads, bankruptcy data, and food bank usage to help us understand who is struggling in our community and how. Many people initially affected by the recession will find new employment opportunities and slowly get back on stable financial ground, however, we need to be mindful of those who will not recover as quickly.

The data reviewed here only gives us a snapshot of our community, of how we are doing overall. It does not provide a nuanced picture of how people are faring day-to-day in Durham, especially those who live in poverty. The next section of this report reviews the findings from our primary research and attempts to add some texture to local experiences.

## FINDINGS: THE EXPERIENCE OF POVERTY IN DURHAM

The research process for this project included interviews with twenty-two individuals from the community who identified themselves as living in poverty; interviews with eighteen representatives from various community organizations that work with those living in poverty or on poverty related issues; and focus groups with twenty Region of Durham Social Service Department staff who work in frontline income support positions across Durham.

A detailed analysis of the data gathered through these interviews and focus groups allows for the identification of several interrelated dimensions that contribute to the overall experience of poverty in Durham. Poverty is a complex socioeconomic phenomena that is manifest and experienced in various and dynamic ways across the community and although our participants spoke about common experiences and conditions of living they all brought unique and positioned perspectives to the discourse. As such, the dimensions identified here were not universally experienced by all of the participants in this research project. Rather, we have only presented those that were manifest in a majority of our discussions with respondents.

These dimensions may be viewed together, as a set of factors that contribute to an overall socioeconomic outcome (i.e. poverty). They may also be viewed individually, providing insight into the complex array of social and economic phenomena that contribute to local experiences of hardship and exclusion. They are presented and discussed below in no particular order.

### FIANCIAL INSTABILITY

Participants initiated the discussion of poverty by talking about financial hardship and economic instability as a defining feature of their daily lives. This experience was characterized by loss, deprivation, struggle and stress. In general, participants reported that their income was primarily derived from social assistance payments, Ontario Works (OW) and the Ontario Disability Support Program, or other government transfers (e.g. Canadian Pension Plan Disability payments) A few participants also held part-time jobs to supplement their social assistance income. In all cases, the income of participants, no matter the source or sources, participants spoke of economic hardship, struggle, and sacrifice associated with low-income and a lack of financial resources and employment opportunity. As one participant, a single mother said:

*I can't make my money stretch far enough. I go without so many things that others take for granted because I just cannot afford it...I struggle to make sure that my daughter has what she needs, to eat, for school. But I worry that she is not getting enough...I will not eat breakfast, or even dinner some nights just to make sure that she gets what she needs. I am not sure if she knows this...we don't talk about it.*

The lack of economic stability present in our participants' lives had a harsh implications for their lives day-to-day, but also impacted on their futures, as participants expressed fear and worry about their ongoing financial situations. As their meager incomes did not even meet their daily expenses, people living in poverty are not able to think about savings, let alone even basic investments for retirement or children's education.

This fact contributes to a general lack of stability in the lives of individuals and their families. As one participant said:

*I always thought that I would own a house. But now I struggle to pay the rent. How could I save enough to buy a house? And even if I could, how could I pay for the mortgage, the taxes...I will never own a home.*

Another stated:

*I want my kids to go to college or university, to do better than me. But I am so afraid that they will not be able to afford it...It feels awful, not being able to save for their future. But I need to feed them today, so what can I do.*

Finally, one participant, a senior said:

*Who thinks that they will have to worry about being evicted, or about food, when they are retired? I knew that I would never be rich, but I thought that I would have some stability. But I am worse off now than I was before... It is not right that I have to live like this.*

As the majority of our respondents were receiving social assistance as their primary source of income, the financial inadequacy that they face is not surprising. The National Council of Welfare reports that, despite the fact that Ontario instituted a social assistance rate increase in 2009, welfare incomes remain “far below most socially acceptable measures of adequacy” (2010: vii). Significantly, the social assistance levels for the province from 2009 are still lower than in 1992, the peak year for. Social assistance rates in Ontario. As Table 6 indicates, a single person on Ontario Works (OW) received \$3,933 less in 2009 than they would have in 1992. This general decline has occurred despite rising costs of living in the province.

Table 5: 2009 Social Assistance (Welfare) Incomes in Ontario, Select Household Types

Household Type	Basic Social Assistance	Tax Credits	TOTAL (annual)
Single, employable (OW)	\$6,877	\$624	\$7,501
Person with a disability (ODSP)	\$12,284	\$621	\$12,905
Lone parent, one child	\$10,937	\$1,011	\$17,372
Couple, two children	\$13,210	\$1,273	\$22,695

Source: National Council of Welfare, 2010

Table 6: Changes in Social Assistance (Welfare) Incomes in Ontario, from 1992 (Peak Year) to 2009, Select Household Types

Household Type	1992 Welfare Income	2009 Welfare Income	\$ Change 1992 to 2009
Single, employable (OW)	\$11,434	\$7,501	- \$3,933
Person with a disability (ODSP)	\$15,762	\$12,905	- \$2,858
Lone parent, one child	\$22,510	\$17,372	- \$5,138
Couple, two children	\$29,978	\$22,695	- \$7,283

Source: National Council of Welfare, 2010

In fact, current levels of social assistance are well below several accepted measures of low-income (see Table 7). For example, a single parent with one child receiving Ontario works has an income that is \$5,048 below

Statistics Canada's Low Income Cut-Off (LICO), and \$2,951 below the 2009 Market Basket Measure (MBM) of low-income. If we compare the same household income to the Low-Income Measure for 2009 we see that they are just at the accepted poverty level (i.e. 50% of the median income for this household size). In all cases we can see how Social Assistance rates are inadequate in meeting basic needs of individuals and families.

Table 7: Changes in Social Assistance (Welfare) Incomes in Ontario, from 1992 (Peak Year) to 2009, Select Household Types

Household Type	2009 Welfare Income	LICO	\$ Difference	Welfare Income as % of LICO
Single, employable (OW)	\$7,501	\$18,421	- \$10,920	41%
Person with a disability (ODSP)	\$12,905	\$18,421	- \$5,516	70%
Lone parent, one child	\$17,372	\$22,420	- \$5,048	77%
Couple, two children	\$22,695	\$34,829	- \$12,134	65%
Household Type	2009 Welfare Income	2009 Market Basket Measure (MBM)	\$ Difference	Welfare Income as % of 2009 MBM
Single, employable (OW)	\$7,501	\$15,633	- \$8,132	48%
Person with a disability (ODSP)	\$12,905	\$15,633	- \$2,728	83%
Lone parent, one child	\$17,372	\$20,323	- \$2,951	85%
Couple, two children	\$22,695	\$31,267	- \$8,572	73%
Household Type	2009 Welfare Income	2009 Median Income (after-tax)	Welfare Income as % of Median Income	
Single, employable (OW)	\$7,501	\$22,667	33%	
Person with a disability (ODSP)	\$12,905	\$22,667	57%	
Lone parent, one child	\$17,372	\$35,008	50%	
Couple, two children	\$22,695	\$78,591	29%	

Source: National Council of Welfare, 2010

## DIFFICULTY ACCESSING PROGRAMS AND SERVICES

Both agency personnel and persons living in poverty spoke to the complexities of the Social Assistance system and the difficulty that many have in navigating through programs and services. This is not a problem unique to Durham Region. The Social Assistance system in Ontario is now generally recognized as one that provides inadequate income (as discussed above), strips those who are vulnerable of most of their existing assets (Stapleton, 2009), and is overly complicated and in need of review and repair in order to work as intended (Novick & Clutterbuck, 2010; Battle, Mendelson, & Torjman, 2006; Herd, 2006).

The result of this complexity appears to be strained relationships being developed between members of the community who are accessing programs and those tasked with implementing them. In fact, in every interview that we conducted with persons living in poverty there was some discussion of this frustration:

*My first social worker told me I was entitled to a whole bunch of things, which I apparently wasn't entitled to....so that was kind of awful to go through. I phoned her and said I need pots, I need pans, I have nothing, and she said "well you're working" and I said well "I just lost my job." And she said "the fact that you're working means you're only entitled to a couple of hundred of dollars for*

set up, it doesn't matter what your job is and that you just lost it....because you had a job when we did our initial intake you're not entitled to those things" [furniture, pots, pans, etc].

There are so many rules to follow, so many things to worry about when you apply for assistance, it is hard to keep track. I was cut off by my new worker because she needed me to fax in some information and I faxed it in the day after she asked for it, I phoned her to let her know the fax was there, she didn't phone me back. Two weeks later she finally tells me that the fax wasn't there and that my benefits were cut off...she was she was really quite resentful... I got it fixed, but she was not that helpful

I sometimes think that the staff at the food bank think that you are trying to steal from them... they ask you if you have already been this month, because you can't go to much... even when you say no they seem to not trust you... I know that there are rules, but I need to eat...

Sometime I think that they [agency staff] think you're stupid. I have health problems, it doesn't affect your brain.

I want to go back to school so I went to my old high school to get my transcripts. When I showed them to my [OW] worker and said I want to finish school, she said, "you've missed the last two appointments. If you can't even commit to two appointments in one month, how do you expect to go to school every day"? All of a sudden all the motivation and excitement about going back to school was gone. I didn't care anymore.

The problem with OW specifically is that I think their case load is overwhelmed, and it's the attitude of staff...."are you people trying to scam the system? are you telling the truth?...it was the worst experience I ever had in my life, dealing with those people....

This sense of frustration was also expressed by the staff from the Social Services Department and by staff from community agencies. As focus group participants said:

We know that our clients are frustrated, we know that they are struggling and need help...but there are rules that we need to follow, a lot of rules that come from the province. I wish that clients would understand that we are not trying to stop them from getting help, we are just trying to do our jobs and that we want to help them.

Sometimes I think that clients just don't care about the rules, they just want you to help them...They seem to think that I am in control of everything, but I am not. I am only the frontline worker, I don't make the rules... I just wish that they would understand this sometimes...

Sometimes clients leave here in tears, and I feel completely helpless. I want to help, I try to bend every rule that I can to get them help, but the rules are the rules and sometimes we have to just be blunt and say no. I really don't like my job on those days... but overall, I think we are helping.

From this we can see that both members of the community and Social Service and agency staff are often frustrated with the service relationship. We believe that this may be attributed to the systemic barriers



inherent in Ontario's Social Assistance system. Clients are in need of help and are not in a position to understand all of the complexities of social assistance programs. They are focused on their immediate concern of meeting basic needs. Staff, on the other hand, understands the complexity of the system and are responsible for administering a stringent set of rules and regulations that are ostensibly in place to improve accountability. This translates into strained relationships between clients and workers, and creates an apparent lack of empathy on the part of staff and an apparent ignorance on the part of clients.

This situation illustrates the importance of consistent empathy on the part of service providers in their daily interactions with clients, but also that we need to understand the difficulties faced by frustrated staff. We know from the data presented above that Social Assistance caseloads have been rapidly on the rise for past five years, increasing worker caseloads. This creates a situation where staff are left with little time to deal with the individual needs of all of their clients, clients who are all struggling with a crisis situation of some form. This creates service situations that may understandably lead to frustration and strained relationships. From the clients' point of view their needs are the only ones that matter and they become frustrated with workers who do not, cannot, view it this way. From the workers point of view they are trying to help an ever-increasing number of clients navigate through a complex system of rules and regulations and they become frustrated with clients who do not, cannot, understand this.

## **A LACK OF MENTAL AND PHYSICAL HEALTH**

Poverty is the key determinant of health and well-being (Raphael, 2007; Elliot, Beattie, & Kaitfors, 2001), as the World Health Organization's Commission on Social Determinants of Health stated in their final report: "[i]n countries at all levels of income, health and illness follow a social gradient: the lower the socioeconomic position, the worse the health" (2008, p. xvi). This finding is not new having been reported in various epidemiological studies over the past several decades, most notably and dramatically in the Whitehall I and Whitehall II studies of British civil servants (Marmot, Rose, Shipley, & Hamilton, 1978; Marmot, et al., 1991). The relationship between poverty and ill-health was a significant theme in our discussions with participants. Illness and disease were described as both as cause and consequence of poverty in their lives.

*I feel like I am always getting a cold, always have a runny nose. I don't really have one thing that bugs me, but I just don't feel well a lot of the time... I do think that it is related to my situation.*

*I have lived on welfare for a long time and I do believe that my health has suffered...I had cancer four years ago and just when I was in full remission I had a heart attack...it is the stress, I don't eat well, I don't sleep well...it all adds up...*

Not all participants indicated that poverty had caused their health concerns in the first place. However, all of those who had a longstanding health concern did believe that poverty had made it worse. For example, as one participant told us:

*My health is not so good, I have arthritis that used to be okay, manageable. But now I don't eat well, or take vitamins because I can't afford them. Being poor makes the arthritis worse... I'm in pain 24 hours a day, 7 days a week. I'm mobility challenged. I need a double knee replacement and it's excruciating.*

Others spoke about how their economic circumstances affected their ability to access care or some basic medical tests that may help them improve their health.

*I have had a health problem for about a year and the doctor can't figure out what it is. It keeps me from sleeping, so I am tired all the time. I need a special blood test, but it is not covered by healthcare. If I had the blood test the doctor may be able to help me. But how can I pay for it?*

*I have diabetes that is getting worse. My doctor tells me to eat differently, and I try, but...I needed a new [insulin] tester last year, but I could not afford one. I was able to get some help buying it, but it took a while to get it. This was a little scary because I was never sure if the old one was accurate. It was dangerous, but what could I do...*

There were also participants who directly linked their current socio-economic circumstances to health problems, both chronic and acute.

*I was like everybody else. I had a good job. The same job for 12 years. I was paid well. Had savings. Then I got breast cancer. I was sick for a long time. My employer was great, but they could not hold the job forever. Eventually I just quit. My savings went, and I was still not well. I am in remission now, but I have nothing left. I am too old to get re-hired. I live on disability for now.*

*I had my accident around 4 years ago. I had a good job before. But my accident, car accident, caused brain damage, and I lost that job. I can't work now, because of my injury. I had support at first, but then the insurance coverage ran out. I had to sell my house and move into an apartment. I did get a small amount from the insurance, but it was not enough to live on, so I sold my house. Now I get disability, and a little from my pension, but I could never afford to buy a house again... I get by, but it is not easy.*

*I have had joint problems for a long time. At first I was able to deal with it and keep working. I had a good job, and the company did a lot to help me. They gave me leave when I went for my first surgery and, since I had good benefits, I was okay at first and able to get the physio and equipment that I needed. But as my health worsened I had to take more and more time off work and eventually I had to quit. I don't think that they would have fired me, but it was not easy for them to keep accommodating me. I had to use all of my savings and sell my house so that I could live before I got ODSP. Now I have this place [subsidized housing] and get ODSP and my*

pension. It can be tough, financially, but mostly, I feel isolated now.

The constant worry and strain takes a toll on the mental well-being as well. Nearly all participants talked about the stress and anxiety of daily life, many talked of depression, profound sadness, and fear:

*...living in poverty...it means pressure, unrelenting pressure, seven days a week, wondering if you're going to make it...and it eats away at your health.*

*I feel so depressed all the time...poverty does that to me...I feel like there will never be a way out...It makes me sad and depressed.*

*There is a fear that I have. I am afraid that things will never change for me. I am afraid of how people judge me. I am afraid that my daughter will end up the same as me.* Participants spoke at length about constant feelings of anxiety and stress, and the ways in which these conditions affected them day-to-day. For many, poverty had made everyday activities stressful and full of worry, as one participant stated:

*It's the stress, constant stress of daily life. Grocery shopping [for example]...is not a fun time because I have to think about everything I buy. I have to think about what spending money on food means for the rest of my life...I guess other people do this too, but when you live on welfare, it can be a matter of paying your rent or not.*

*For me the biggest worry is for my kids. I get so stressed out at the start of school, at Christmas, birthdays...I can't make it nice, I can't get what they want. I feel like I am letting them down and the anxiety is so intense. I don't sleep for a month before school starts...*

From these responses we can see that participants have clearly identified physical and mental health concerns as a defining feature of their experiences of poverty, linking physical and mental illness to their socioeconomic situations in multiple ways.

## **A LACK OF OPPORTUNITY AND CHOICE**

In the lives of our participants, poverty has resulted in a lack of opportunity and choice, and, in many ways, has hindered the process of self-determination. That is, socioeconomic circumstances influence the ways in which we interact with society and the opportunities that we have for advancement and the choices that we have in our daily lives. As one Social Service worker said in a focus group discussion:

*For many of our clients there are no choices in life. They eat what they can get, they live wherever they can afford, which is very limited. They can't go out, or do anything that costs money... Poverty limits opportunities to just live your life, and we see this every day.*

This lack of choice appeared most poignantly when participants talked about housing and food banks. For example, one participant, who has severe arthritis and mobility issues, described her housing situation:

*I am lucky to live here, in a subsidized apartment. When I moved in it was such a relief because I really could not afford to pay rent before. I was living in some pretty awful places, with mildew, mice, not nice at all. So I was happy to move here where it is clean, and the rent is cheaper. But I am on the third floor, and there is no elevator because it is a small building. I can't go up and own stairs without a lot of pain in my legs. It really is debilitating. But what can I do? I need a place to live that is not awful? And it is subsidized rent so I can't complain.*

Another participant expressed similar sentiments when talking about the food bank:

*I do go to the food bank as much as I can, I need to and I really appreciate what they do for me. I would go hungry a lot if I did not have help from them... I do get frustrated though, that I am not able to have some choice when I go. I don't always like what they give me, but I can't complain.*

Others spoke about barriers such as a lack of child care and affordable, accessible transportation that have prevented them from taking advantage of education and employment opportunities.

However, this dimension of poverty was expressed less overtly in many other facets of participants lives. Many expressed concerns over the relationship between employment opportunities that were available to them and their reliance on social assistance:

*I am on welfare, but I would like to get a job. But the only jobs I can get are in stores or with temp agencies. These are okay, but they don't pay enough or give you good hours. They are not reliable. Welfare is not good, but at least I know that I will have money*

*I did go off assistance last year because I got a job as a bus driver. I thought that it would be okay. But I was not home after school for my daughter, and I had to leave early, so I needed daycare. The job did not pay enough and my hours were cut in the summer. I am back on assistance, and I work as a bus driver part-time. It is the only way that it can work so that we can live and I can see my daughter.*

Some participants revealed poverty as a lack of choice and opportunity even less explicitly as they talked about their life experiences. For example, one participant who identified a learning disability (that was only diagnosed recently) and who lived in subsidized housing with his mother talked about his experiences in school:

Teachers didn't want me. They would try to help me at the beginning but then gave up. School was always hard for me. I don't know why. I just couldn't get it. When I was in high school I was too far behind, so they forced me to stop when I turned sixteen. It was too hard for me. Mom

tried to help, but she was not able to. She was trying to support us.

Although not expressed by him explicitly, this participant's experience reveals the struggle for self-determination and advocacy that many living in poverty have. Through further discussion with him and his mother (who was also a participant in the research study) it appears as though his learning disability was never officially identified while he was in school, and his mother, struggling to simply provide basic necessities for her family, was not able to take an active role in advocating for her son's education. She herself expressed frustration with her own perceived powerlessness in the situation, believing that she was not in a position to tell teachers and principals how to do their jobs. This was exacerbated by her lack of understanding about her son's disability. In turn, teacher's and school administrators, frustrated by an inability to properly provide for their student (most likely the result of a lack of official diagnosis of a learning disability), and by a perceived lack of caring by his parent, were not able to accommodate his needs and simply moved him on and out.

From an analysis of our participant's experiences we can see how socioeconomic circumstances create conditions in which self-determination and choice are limited in both implicit and explicit ways and in ways that are both real and perceived. That is, the individuals in this research revealed to us how their poverty has impacted on their ability to take advantage of opportunities in education and employment and how they are restricted in making choices about the circumstances of their lives. As one agency staff person who we interviewed stated:

*I have a young girl that I am working with, she is smart and wants to go to college. She can qualify for subsidized child-care, but it may not help. First she will have to wait, and the subsidy list is long, and second she will need care in the evenings because she will have night classes. This means that she may need to find an in-home day care space because day care centre's are not open evenings. She may not find a space that qualifies for subsidy in someone's home in time to start class. And she has limited choice as to where she can place her child. It may come down to a decision to place her daughter with a sitter who she is not comfortable with or not going to school... I don't think many of us would accept this...*

Another participant highlighted a catch 22 situation inherent in accessing affordable childcare:

*I have no childcare....I cannot work enough to pay for the childcare I need...I can't do anything. I want to go back to school and get my B.Ed., I want to be a teacher. Eventually I want to get my PhD, but I can't even go to classes because I have no childcare...a friend of mine just finished her degree, she has a two year old, she can't go to job interview...she's got no childcare so how can she get a job? If someone offered you your dream job [and said] you can start on Monday, you'll make enough money to cover your expenses, but that's still two weeks after the fact that you start working, so what do you do for those two weeks? You're really trapped when you have kids, there's no support.*

In speaking about transportation concerns, one participant who has mobility concerns described her situation:

*I can't drive because of my condition; I can hardly walk some days. The stores are not too far away, but I can't walk to them because of my leg. I try to take the bus, but even that is a problem sometimes if I need to stand for too long waiting. It is a struggle to get to the stop too. I have a boyfriend, he comes on weekends with his car and takes me shopping. This helps, and I like him. But I sometimes wonder what would happen to me if he were not around. How would I get to the store to just get my food?*

As we can see, a lack of access to amenities, such as child-care and transportation concerns, limit individual choices in a cascading way, limiting opportunities in other areas such as education and employment. These limitations may even extend into personal relationships as we see from the participant who spoke about her transportation concerns. Although not explicit in her comments there is an underlying concern about her relationship with her boyfriend and a fear of what may happen to her should the relationship deteriorate or end. From this we may see how a barrier in one area may lead to concerns in other areas.

### **A LACK OF SOCIAL PARTICIPATION**

In a related theme to their lack of opportunity and choice, participants also spoke about their limited participation in the social life of Durham. In this sense, poverty has resulted in significant exclusion and isolation in the lives of those who live in poverty in our community. This was manifest in participants lives as a disconnection from society and the community in which they live, as well as through estrangement from family and friends.

*I am on my own a lot of the time. I can't go out. I can't get anywhere. I have friends but I don't see them much. My family lives in Kingston, so I don't go see them much because it is too expensive.*

*I feel so...excluded. Like no one sees me, like I don't belong... poverty has excluded me from the world...*

*I don't see my kids anymore. They are grown and since my accident I have just become a burden... I don't want them to feel sorry for me.*

*I grew up around here and I know that many of my friends still live in the area. But since I lost my job and went on welfare, I stopped seeing them. They don't understand. They can't understand... I don't talk to my brother much anymore. I am ashamed that I needed his help in the past. He has never said anything, and was always understanding, but I just don't want him to feel like he has to help me... this is my problem.*

Therefore, for many of our participants poverty has created conditions of isolation and exclusion in both their social and personal lives. This isolation disconnects these individuals from the community and reduces the social capital of those living in poverty. That is, poverty reduces the social connections of individuals, connections that provide an important source of social, psychological, and economic support. Strong social connections are also important for the broader community, having an impact on economic development,

governance, public health, and levels of crime.

## A LACK OF SECURITY

Poverty creates conditions of vulnerability and distress by reducing an individual's social and economic security. Because poverty reduces the options available to individuals it often places them in precarious, unhealthy and dangerous situations. This was most significantly seen in the lives of those participants who had experience domestic violence. As one woman told us:

*My husband was very abusive. To me and my kids. And he trapped me with poverty. I had no money of my own. I had to sacrifice my safety so that my kids had a home and food...it was impossible...One woman expressed this vulnerability even more poignantly when she told us that upon leaving a shelter that was closing (due to lack of funding) she was faced with an impossible choice:*

*[The shelter] was closing, and there was no room anywhere else in Durham. I would have to go on a waiting list. I stayed as long as I could. Then I had to go, the shelter workers tried to find me a place, but my only choices were to be homeless or to move home where my kids were, where my abuser lived. I was terrified. I did move in with him for a while, and he did not abuse me again then. Finally a subsidy was available and I moved out for good.*

This lack of personal security was not limited to those participants who were victims of domestic violence. Participants also spoke about their poor living conditions and problems in the neighbourhoods in which they lived.

*I live in a co-op and most people are nice. But there are some groups who sell drugs in the co-op and we can't do anything. They do leave us alone most of the time, but I have kids and I don't want them to grow up around this kind of thing.*

*My neighbourhood is generally okay, but one night a few months ago there was a big fight outside the apartment. Someone was beat up bad. There was a lot of yelling and noise. It kept us all up.*

Participants spoke to us about such experiences in their neighbourhoods, about their lack of comfort and fear. But they were also resigned to the fact that they had to live there and could not move to a "better" community.

Several respondents also talked about vulnerability that was not related to personal safety or violence. As a focus group participant who works for Social Services stated:

*I see many clients who have agreements with rent-to-own places and pay-day loan businesses. These place take advantage of those who are poor, promising them a sense or normalcy while having them sign their lives away on unfair contracts... We also see similar things with temporary employment agencies that promise good jobs but don't deliver*

Thus, poverty may be seen as vulnerability that results in a lack of personal safety and security from violence and exploitation. This may be manifest in very distressing forms of violence, but also in less obvious forms of abuse through exploitive schemes like bad pay-day loan agreements or poor employment opportunities.

## A LACK OF RESPECT

A major component of the experience of poverty is stigma and feelings of a lack of respect. Research has documented the how stigma toward those living in poverty acts to reduce social inclusion, increase isolation, and reproduce inequalities by masking the realities of poverty to the general public (McIntyre, Travers, & Dale, 1999; Reutter, Stewart, Veenstra, Love, Raphael, & Makwarimba, 2009). Participants consistently identified spoke about stigma in their lives as a detrimental part of their daily lives.

*People in our community so not respect the poor. We are dirt to them. They don't realize that we are their neighbours. Their kids go to school with our kids....They don't get this at all.*

*I think that people judge those who are poor. They think that we are all lazy and drunk. They think that we are stupid and live the high life on the government's money. I don't think people really understand what poverty is and who the poor are in Durham.*

Several participants highlighted how stigma and the judgment that they feel is associated with a lack of awareness about the social assistance system, the rules and the amount of money that people actually receive:

*I think that people would be shocked if they really knew what we lived on each month. I think that they assume that we get enough to live on, and live well. I would like to see them live on welfare. Then they would really know what it is like.*

*People assume that getting welfare is easy, that you just show up at the office and fill out a form. They really do not get it...I had to lose everything before I got help. It was a last resort.*

*The people who live in middle class homes don't care at all... these people are ignorant because they haven't had to live it.*

There was also a theme of self-stigmatization throughout our interviews, where respondents appeared to deride stigma in one part of the interview and then “buy” into it in another part:

*When I go to the food bank I feel ashamed, I feel worthless... why can't I just get a good job and keep it, why can't I live like everyone else... I feel real worthless sometimes, like I just don't matter.*

*I don't know why I struggle, why I need assistance... I guess I just can't cope in society.*

This revelation of stigma from both society toward those living in poverty and the self-stigma of respondents toward themselves is consistent with existing research on poverty and stigma. From this we can see that



poverty, as a lack of respect (social respect and self-respect) is an important dimension of the experience of poverty in our community.

## Summation

From the experiences and concerns expressed by the participants in our research we can see that poverty in Durham is a complex and multifaceted socioeconomic experience. These experiences are not universal, and we have no doubt missed some of the unique concerns of others who are struggling in our community. But what this analysis does tell us is that poverty in Durham is a real experience that is wrought with conditions of desperation, frustration, fear and anxiety, ill-health, hopelessness and feelings of being trapped. Poverty leaves those who experience it isolated and marginalized from the social, economic, political, and cultural life of our community. If we are truly to be an inclusive society, where all members are provided with equal opportunity to flourish and participate, we must address the concerns raised by participants in this research study. We must find ways to improve living conditions locally and support those who are most vulnerable.

This must not be viewed as an act of charity; rather it must be viewed as an investment in the social and economic well-being of the entire Region. Conditions of inequality and material hardship not only have a destructive impact on individuals and families, but they also have a serious detrimental impact on communities. The Ontario Association of Food Banks (2008) argues that there are several remedial costs associated with poverty that impact on the health of communities, such as increased costs to health care associated with dealing with the health concerns of those living in poverty, increases in crime associated with the marginalization of poverty, and growing costs in the existing social assistance system. Poverty also erodes social capital and the collective efficacy of communities. This creates conditions that act to isolate us from our neighbours, hindering our ability to act collectively and address common concerns and issues. Further, investment in poverty reduction and elimination has become an accepted method for economic stimulus and growth (Ontario Association of Food Banks, 2008; 25 in 5 Network for Poverty Reduction, 2010). Thus, poverty may be seen as having a targeted impact on individuals and families while also having a general impact on the community, making it an important concern for us all.

## RECOMMENDATIONS

Based on this research and the data presented in this report we make the following recommendations to guide next steps in our community. They are not presented in any particular order.

- 1) Poverty has been identified as a leading cause of morbidity and mortality, and the results of our research further support this. Therefore, there is a need to support local health promotion activities that recognize the social determinants of health and use this model as the underlying structure for programming, service and policy development. This process needs to begin with the Region of Durham Health Department and be supported by local community organization in both the health and social services sectors.
- 2) There needs to be an examination of local housing policies and development planning that leads to a diversification of housing options in the Region and the promotion of affordable housing development. This must result in a combination of planning policies that support the diversification of new housing and

the maintenance of older housing in Durham as well as investment, and advocacy for investment, in the development of more subsidized and affordable housing options in the Region. As a starting point, the Region of Durham and local housing providers should ensure that they participate fully in the Government of Ontario's proposed provincial housing review process when it is initiated.

- 3) We recognize that there are frustrations on the part of both Social Services staff and clients of Regionally administered income support programs. These frustrations are based on an increasing client load and overly complex systems of administration. It is recognized that the rules and regulations of the income support programs are provincially mandated. From this we make the following recommendations:
  - a) The Region of Durham Social Services Department with key community partners should lead community dialogue on concerns with the social assistance system in Ontario and make contributions to the province Social Assistance review process that is occurring in 2011. These contributions should be based on both staff and client experiences with the delivery of income support programs and have the goal of improving understanding and client-staff relations.
  - b) Efforts should be made to promote staff-client engagement outside of the service relationship in an effort to promote understanding. As an example, the City of Hamilton has regular facilitated meetings between staff and clients to talk about issues of concern and to help staff increase their empathy for client experiences and help clients better understand the position of staff as administrators of programs and services.
  - c) Opportunities for staff discourse should be promoted internally within the Social Services department to help in building employee relations and to create opportunities for knowledge sharing.
  - d) Information on service and programming available to the community should be provided in a simple and concise manner to help clients and potential clients better understand the rules and regulations of the social assistance system and improve their ability to navigate it.
- 4) Persistent myths about poverty and the poor need to be exposed. A strategy to educate the general public about the realities of poverty should be developed with the goal of reducing the stigma attached to poverty. This process should include persons with lived experience of poverty, the community at large, the Region of Durham's Social Services Department and local service organizations.
- 5) There needs to be a coordinated effort to advertise and promote community based services so that the community and staff from local organizations are all aware of what is available in the Region.
- 6) Communities with strong economic foundations are those with a diversity of industries and locally available jobs. As we can see from the data presented here, a shifting economy in Durham has created opportunity for some while leaving others behind. Work in this area is required and should involve Economic Development departments at the Region and lower tier municipalities, Chambers of Commerce, Boards of Trade, the Durham Region Local Training Board and organizations in employment services and other relevant social services. We recommend that:

- a) Economic development efforts across the Region make certain that diversity of industry is a primary focus, thus ensuring that our community attracts new and sustained investment in primary industries such as agriculture, the manufacturing sector, and in the growing knowledge based economy.
  - b) Our community must support efforts to create good, stable jobs that pay living wages and provide stability for members of our community.
- 7) Efforts to improve local transportation systems needs to continue and needs to take into account issues of accessibility and affordability.
- 8) The Region of Durham needs to take the lead in local efforts to advocate for changes to relevant policies and programs that will reduce poverty at the provincial and federal levels . This must include, advocacy for increase Social Assistance rates, investment in childcare, investment in affordable housing, and the further increase of minimum wage to a livable standard. In addition, the Region of Durham should support local community organizations in their efforts to access provincial programs that will support development in these areas.
- 9) Local policy planning and research organizations need to work with the Region of Durham and the University of Ontario Institute of technology to complete further research and assessment in the following areas related to poverty in Durham:
- a) We need to better understand the barriers that those living in poverty face when it comes to employment, education and training opportunities.
  - b) We need to improve our understanding of how poverty creates isolation and marginalization locally and what the impact of these conditions may be for individuals, families and the community.
  - c) We need to assess the relationship between conditions of poverty an crime in our community and develop community based strategies for intervention.

As a final recommendation we propose the development of a community driven and Regionally supported Poverty Committee for Durham. This committee would be tasked with the coordination and support of local efforts to assess and reduce conditions of poverty and for the development of strategic actions based on the results and recommendations of this report. This “committee” must be community driven and include representatives from Regional government, local civil society organizations, educational institutions and researcher, persons with lived experiences, and members of the community at large.

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