



STAFF REPORT ACTION REQUIRED

Cost of the Nutritious Food Basket – Toronto 2010

Date:	November 5, 2010
To:	Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

SUMMARY

The purpose of this report is to provide information on the cost of the Nutritious Food Basket in Toronto for 2010 and to advocate to the provincial government to undertake a comprehensive and timely review of Ontario's income security system, as recommended by the Social Assistance Review Advisory Council (SARAC) in their report entitled *Recommendations for an Ontario Income Security Review*¹ www.accesson.ca/en/mcss/publications/social/socialServices.aspx. The Nutritious Food Basket (NFB) is a survey tool that measures the cost of healthy eating and monitors the affordability and accessibility of nutritious foods by relating the cost of the food basket to individual/household incomes. In 2010, the average cost of the NFB for a reference family of four in Toronto is \$165.19 per week (\$715.28 per month), a slight increase of 0.6% as compared to the 2009 pricing survey.²

RECOMMENDATIONS

The Medical Officer of Health recommends:

1. The Board of Health support in principle the broad directions and process proposed by the Social Assistance Review Advisory Council (SARAC) for a comprehensive and timely review of Ontario's income security system;
2. The Board of Health urge the provincial government to consult with the City of Toronto as an order of government, as well as key stakeholders from the health and social service sectors, including public health, through the process established to review Ontario's income security system and to complete this review as soon as possible;

3. The Board of Health forward this report to the following key stakeholders: the General Managers of Shelter, Support and Housing Administration, Children's Services, Employment and Social Services, Long-term Care Homes and Services, and Parks, Forestry & Recreation; the Ontario Minister of Health Promotion and Sport; Ontario Minister of Health and Long-Term Care; Ontario Minister of Community and Social Services; Ontario Minister of Children & Youth Services the Association of Local Public Health Agencies; the Ontario Public Health Association; Ontario Boards of Health; the Association of Ontario Health Centres; the Ontario Society of Nutrition Professionals in Public Health; and Dietitians of Canada.

Financial Impact

There are no direct financial implications arising from this report.

DECISION HISTORY

The 2008 *Ontario Public Health Standards*, published by the Ministry of Health and Long-Term Care, specifies a Nutritious Food Basket Protocol which requires boards of health to implement the Nutritious Food Basket costing survey and submit results to the Ministry of Health Promotion and Sport by July 1st of each year. Information about the cost of the Nutritious Food Basket (NFB) can inform policy development to increase access to nutritious food. Toronto Public Health reports the NFB survey results annually to the Board of Health, City Council and a wide range of stakeholders.

ISSUE BACKGROUND

Since 1999, boards of health in the Province of Ontario have been required to complete an annual Nutritious Food Basket survey. The Nutritious Food Basket (NFB) is a survey tool that measures the cost of basic healthy eating representing current nutrition recommendations and average eating patterns. Food costing is used to monitor both affordability and accessibility of foods by relating the cost of the food basket to individual/household incomes.²

Following release of the 2007 *Eating Well with Canada's Food Guide*, Health Canada revised the National Nutritious Food Basket in 2008. The revised NFB food costing survey tool includes 67 basic food items from all food groups but does not include processed convenience foods, snack foods and foods of little nutritional value. The NFB also excludes essential non-food grocery items such as laundry detergent, soap, paper products, toiletries, etc. Therefore, the cost of the NFB is generally lower than actual grocery expenditures of the average resident.²

The NFB reflects the lowest price available in the store in a specified purchase size, regardless of brand. An additional 5% is automatically added to the cost of the food basket to cover the cost of miscellaneous foods used in meal preparation (e.g. spices, seasonings, condiments, baking supplies, etc.). The Ministry requires that the annual NFB costing be done in May as food at this time most closely reflects the annual average Consumer Price Index for food.² The pricing survey results are used to estimate the average cost of feeding 22 age and gender groups and a reference family of four.²

The annual reports on the affordability of the Nutritious Food Basket highlight the association between food insecurity and financial insecurity that could result in poor health outcomes. Community food insecurity is an important public health issue. Understanding the determinants of inequalities in food security is a precondition for developing policy responses.

Results of Nutritious Food Basket for Toronto, 2010

In May 2010, utilizing the Ministry's *Nutritious Food Basket Guidance Document*, Toronto Public Health staff conducted the NFB survey in 12 grocery stores across the City. The results showed that the cost of the Nutritious Food Basket in Toronto is \$165.19 per week (\$715.28 per month) for a reference family of four, a slight increase of 0.6% in food costs from the 2009 pricing survey. This result parallels a 0.4% increase in the provincial average cost of the NFB for 2010.³ The 2010 NFB survey results for Toronto are summarized in Attachment 1.

Food Insecurity

Despite comparatively low food prices in most parts of Canada, food expenses are one of the most compromised components of a household budget for families living on social assistance or minimum wage and are often strategically managed to accommodate other basic needs. Priority is given to shelter costs because shelter is the core household expense while other expenses, such as food, clothing, transportation and other household goods come out of the post-shelter income.⁴ As a result, many low income individuals and families do not have the ability to acquire or consume an adequate quality diet in a socially acceptable way. In other words, they are food insecure and are forced to rely on food banks and other emergency food programs to meet their basic needs.

Food insecurity refers to the inability to acquire nutritionally adequate and safe foods in a socially acceptable way.⁵ Food insecurity is mostly the result of low income and it is one outcome of growing poverty and inequities in Canada.⁶ Findings from the 2004 Canadian Community Health Survey 2.2 on Nutrition, showed that 8.4% of Ontario households were food insecure, with Toronto having the highest level of 10.1% of households being food insecure.⁷

Food insecure individuals are characterized by nutritional inadequacy, insufficient food intake, lack of choice and feeling of deprivation and unpredictable eating patterns. At the household level, food insecurity is associated with food depletion, anxiety and obtaining food in socially unacceptable ways.⁴ When incomes drop and food budgets shrink, people tend to buy and consume cheaper low nutrient, highly processed foods that are less expensive than healthier options such as vegetables and fruit.⁸

Food Insecurity and Health

People living in food insecure households are more likely to report multiple health issues such as heart disease, diabetes, high blood pressure, food allergies and poor social support.⁹ A recent study reported that food insecurity is associated with cardiovascular risk factors, estimating that adults who are food insecure have a 20% higher risk of developing hypertension and a 50% higher risk of diabetes.¹⁰

Although studies are inconsistent with regards to the association between food insecurity and obesity, there appears to be a trend toward this relationship.¹¹ It is believed that people with inadequate resources to buy food are maximizing their caloric intake by purchasing low cost, energy dense foods and thus exchange quality for quantity. They experience periods of hunger, so when food is available, they tend to overeat. Also, the body may conserve energy during the periods of low food availability. All of these factors may contribute to a higher incidence of overweight and obesity among food insecure individuals.¹²

Poor Pregnancy Outcomes

A woman's nutritional status before and during pregnancy is important to the health of both mother and baby. According to a recent study, pregnant women living in food insecure households have higher odds of greater weight gain and pregnancy complications, particularly gestational diabetes. This is a significant public health finding since gestational diabetes has implications for both the fetus (i.e., excessive weight gain), as well as for the mother. Gestational diabetes is a significant risk factor for diabetes later in life.¹³ Additionally, food insecurity during pregnancy may lead to reduced micronutrient intakes, maternal depression, and decreased mental health status.¹⁴

Early Childhood

Children require sufficient nutrients for healthy growth and development. Deficiencies of even small amounts during this important period could have long term health consequences. Children who live in food insecure households are more likely to have growth and developmental problems, be susceptible to illness and perform poorly in school, compared to children who are food secure.¹⁵

COMMENTS

One of the leading barriers to access to sufficient and nutritious foods is poverty. Like many Ontario cities, Toronto was severely impacted by the recession in 2008-09, which contributed to increased poverty among Toronto residents. Although the recession has been officially declared over and recovery is underway, its health impact lingers. Evidence from the last two recessions in the 1980s and 1990s demonstrates that it will take many years for employment and poverty rates to return to pre-recession levels. Low income people who were economically vulnerable before the recession suffered disproportionately from the effects of the recession.¹⁶

The unemployment rate for Toronto is significantly above the regional, provincial and national rates. The rate increased from 7.5 % in October 2008 to 8.9% in December 2009.¹⁶ In June 2010, the unemployment rate was 10.6%.¹⁷ The number of Ontario Works cases jumped by 19% over the course of the recession. In October 2008, there were 76,876 cases and by December 2009, there were 91,544 cases, an increase of 14,668. The peak month in 2009 was September, when there were 94, 466 cases, which was the highest caseload in Toronto since October 1996.¹⁶

The recession exposed the limitations of Employment Insurance (EI) benefits. Half of unemployed Canadians do not receive benefits. The inadequacy of EI contributed to the increase in welfare caseloads across the country; the provinces and communities with the lowest EI coverage, including Toronto, were significantly impacted.¹⁶

Food banks, which were originally intended to provide temporary respite from severe hunger, are now a stable fixture in the lives of many Ontario residents. The number of people using food banks increased significantly in 2009-10. According to Daily Bread Food Bank, between April 2009 and March 2010, the number of client visits to food banks in the GTA was 1,187,000, representing an increase of 15% over the previous year. This was also the highest increase in food bank use since social assistance rates were cut by 21.6% in 1995. In Toronto, total food bank use rose by 14% from 873,954 in 2009 to 997,000 in 2010.¹⁸

Canada is experiencing a housing crisis. Over the past 20 years, rent has risen faster than the cost of living, especially in cities like Toronto. The proportion of Toronto residents spending more than 50% of their income on shelter is as high as 20%, putting them at risk of imminent homelessness.¹⁹ Toronto is the least affordable city compared to Montreal, Hamilton, Winnipeg and Vancouver, and one of the least affordable cities in Canada.¹⁶

Food bank use and food insecurity are important indicators of the state of the economy and the extent to which social policies designed to achieve a range of objectives including meeting basic needs, improving peoples' lives, and creating incentives to participate in the labour market, are not working.^{18,20} Food banks provide the last resort to food insecure households and these exist as a consequence of failed public policies.¹⁹ Public policy change should focus on poverty reduction to improve food security among both those on social assistance and the working poor.

Advocacy Initiatives to Reduce Poverty and Improve Access to Nutritious Food

Low income individuals and families in Toronto often live in rental housing. In 2010, the average monthly cost of a three bedroom apartment is \$1,326.00. For a family of four on Ontario Works, this represents 69% of their monthly income (see Case Scenario, Attachment 2). When housing costs and other living expenses are considered, people on social assistance or working in minimum wage jobs do not have adequate income to purchase nutritious foods on a regular basis.

Numerous national, provincial and regional anti-poverty groups and coalitions are advocating for poverty reduction, as well as for access to safe affordable housing for low income people. The Senate Committee on Social Affairs, Science and Technology submitted a report titled, *In From the Margins: A Call to Action on Poverty, Housing and Homelessness*, to the federal government.²¹ Among the report's 72 recommendations, the most fundamental recommendation calls for the federal, provincial and territorial governments to adopt a poverty eradication goal that could lift Canadians out of poverty. Another report from the Wellesley Institute in Toronto highlights the impact of

precarious housing on health and provides a five-point plan that could serve as blueprint to end homelessness in Toronto.²²

In Ontario, health workers and advocates are working to reduce poverty and improve access to nutritious foods. *The 25 in 5 Network* for poverty reduction is advocating for a strategy that calls for the provincial government to decrease poverty by 25% in 5 years and 50% in 10 years. The *Put Food on the Budget* campaign advocates for an initial \$100 monthly Healthy Food Supplement for Ontarians on social assistance. *Do the Math* is another campaign that highlights the limitation of social assistance rates in supporting individuals and families.

What is the Government of Ontario Doing?

In 2008, the provincial government released the report, *Breaking the Cycle: Ontario's Poverty Reduction Strategy*²³, a strategy that aims to reduce child and family poverty by 25% in five years. The strategy includes a number of steps that the government will undertake to meet this commitment. These steps include an increase in child benefits, investment in education and early learning, building stronger communities, an affordable housing strategy, and a social assistance review.²³ Since then, the following activities have been undertaken:

- The provincial government introduced the Ontario Child Benefit (OCB) in 2007 and increased the benefit incrementally. In 2009, the annual OCB per child was set at \$1,100 (\$92 per month). The provincial government projects that in 2013 the program will fully be implemented when families can receive up to \$1,310 per child per year.
- Investment of \$63.5 million per year for child care. This funding is intended to fill the gap left by the federal government so that 8,500 childcare spaces could be saved.
- Increased Ontario Works benefit rates in 2010. The provincial government announced a 1% increase to Ontario Works Basic and Shelter allowances in the 2010 budget. This increase will take effect in December 2010.
- Increased minimum wage from \$8.75 to \$10.25 in March 2010.
- Began phasing in a full-day early learning program for four and five year old children in September 2010.
- Created the "Social Assistance Review Advisory Council" (SARAC) to provide recommendations to the Province on how to proceed with a review of the income security system.

Although some progress has been made towards poverty reduction, the impact has not made meaningful differences to the economic situation of low income families and individuals.

Finding Solutions

In June 2010, the SARAC released its report, *Recommendations for an Ontario Income Security Review*. The recommendations called for a comprehensive review of Ontario's income security system, rather than a more limited review of Ontario Works (OW) and the Ontario Disability Support Program (ODSP) that represent only 23% of all provincial

and federal income security program spending.¹ SARAC recommended that the social security system review should include federal programs such as EI, provincial programs (e.g., Ontario Works and Ontario Disability Support Program), as well as municipal, local, and community roles. Furthermore, the report recommended that the review should include a financial plan that considers the mechanisms required to support a changed income security system. Additionally, the report noted that the transformation process will involve other orders of government. However, in the absence of a federal partner, the process of identifying the changes required to transform Ontario's income security system should not be impeded. The review panel recommended that the consultations and social system transformation should be completed within a period of 12 to 18 months.¹ Recently, the General Manager of Toronto Employment and Social Services reviewed SARAC's report and recommended that City Council endorse in principle the broad directions and process proposed by the Social Assistance Review Advisory Council.¹⁷

Additionally, the Social Assistance Review Advisory Council (SARAC) provided advice to the provincial government regarding the design and principles of proposed changes to the Special Diet Allowance (SDA). The SDA is designed to provide additional funding to people on social assistance who have special medical conditions that require dietary modifications. SARAC advised the provincial government to ensure low income Ontarians, including those on social assistance, with medical conditions that require special dietary needs, can afford to meet these needs; current recipients of SDA should be grand-parented to the new program; key stakeholders to be engaged; and the unique conditions among the First Nations people should be recognized.¹ The Medical Officer of Health addressed the issue of the Special Diet Allowance to the Board of Health in a recent report, *Update on Proposed Changes to the Special Diet Allowance*²⁴; the Board of Health approved several recommendations similar to the SARAC advice.

Food System Approach

Ontario's food system is largely based on supporting productivity and economic efficiency. It does not necessarily ensure people, especially those living on low incomes, have access to a nutritious diet that would improve their health.²⁵ Mainstream food systems do not provide fresh, healthy foods to people in many low income areas. Grocery and supermarket chains that sell fresh foods are also not located in many low income neighbourhoods. These are areas that are sometimes referred to as food deserts, and food deserts contribute to the severity of food insecurity.²⁶

The Toronto Food Strategy is a city initiative that connects food and health with the City's environmental, economic and social objectives. The strategy identifies priority areas for action that includes eliminating hunger in Toronto and information and collaboration among different orders of government to establish health focused food policies. The strategy urges the federal and provincial governments to establish a comprehensive income security system for all Ontarians, including people on social assistance and the working poor.²⁷

In response to hunger and poverty, a number of local multi-service food centres in Toronto provide a wide range of services to low income residents in their

neighbourhoods. These centres ensure that food is available, deliver programs, facilitate food skills development, provide urban agriculture training and resources, engage the community and advocate for policy change.²⁷ Stop Community Food Centre is an example of a multi-service food centre that goes beyond the provision of food and food skills and offers courses that help people advance social justice in their communities through volunteering, public speaking, and advocacy.²⁵

Paid employment positions could be created through the establishment of a sustainable and self-sufficient local food system, including urban agriculture and food processing initiatives, food distribution centres, and healthy food market outlets.²⁸

In partnership with Toronto Employment and Social Services (TESS) and other City divisions, Toronto Public Health is exploring the possibility of establishing a pilot community food skills program that combines food handler training and certification with broader food skills for people on social assistance and other low income residents. Because one in eight Toronto jobs is related directly to food, the skills the participants would acquire through this pilot project would increase their level of employability.²⁷

CONCLUSION

Adequate, safe and nutritious food is a pre-requisite for good health and well-being throughout the life span. Food insecurity is a major public health issue and should be addressed through public policy related to income, access to affordable housing and childcare, employment opportunities, and other strategies that improve the lives of low income residents. The strong association between food insecurity and overall health is a powerful incentive for a comprehensive poverty reduction strategy, including a review of the income security system in Ontario.

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SIGNATURE

Dr. David McKeown
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ATTACHMENTS

Attachment 1: Weekly Cost of the Nutritious Food Basket in Toronto (May 2010)
Attachment 2: Food and Shelter on a Social Assistance Budget (November 2010)

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Attachment 1: Weekly Cost of the Nutritious Food Basket in Toronto (May 2010)

How to Calculate the Food Costs of Nutritious Food Basket*			Gender/Age Years	Cost Per week
Follow the steps below to find out the cost of a weekly nutritious food basket				
STEP: 1 Write down the age and gender of all the people you are feeding For example: Reference Family of Four			Children	
Man, (aged 31-50 years) and Woman, (aged 31-50 years)			Boy 2-3	21.91
Boy, (aged 14-18 years) and Girl, (aged 4-8)			Girl 2-3	21.49
			Boy 4-8	28.24
			Girl 4-8	27.39
STEP 2: Write down the cost of feeding each person			Males	
STEP 3: This is your subtotal				
STEP 4: It costs a little more to feed a small group of people and less to feed a large group. Use the following adjustments for household size:			9 - 13	37.44
1 person – multiply by 1.20 4 people – make no change			14 - 18	52.75
2 people – multiply by 1.10 5-6 people – multiply by 0.95			19 - 30	50.92
3 people - multiply by 1.05 7 or more people – multiply by 0.90			31 - 50	46.04
			51 - 70	44.49
			Over 70	44.03
STEP 5: To determine the cost per month, multiply by 4.33			Females	
			9 - 13	32.08
			14 - 18	38.29
			19 - 30	39.43
			31 - 50	39.01
			51 - 70	34.61
			Over 70	33.98
			Pregnant Women	
			18 & younger	42.68
			19 - 30	43.08
			31 - 50	42.04
			Breastfeeding Women	
			18 & younger	
			19 - 30	44.46
			31 - 50	45.67
				44.63

Gender	Age (years)	Cost Per Week (\$)	Example
Man	31-50	\$46.04	
Woman	31-50	\$39.01	
Boy	14-18	\$52.75	
Girl	4-8	\$27.39	
Subtotal		\$165.19	
Total		\$165.19x no adjustment= \$165.19 x 4.33= \$715.27/month	
Example: Reference Family of 4, Toronto (May 2010)			
Gender	Age (years)	Cost Per Week (\$)	Your Household
Subtotal			
TOTAL			

*The cost of the Nutritious Food Basket is based on the 67 food items collected from 12 stores across the City. The software program automatically adds 5% to the basket cost to cover the cost of miscellaneous foods used in meal preparation, e.g. spices, seasonings, condiments, baking supplies etc.

Attachment 2: Food and Shelter on a Social Assistance Budget (November 2010)

	Scenario 1	Scenario 2	Scenario 3	Scenario 4
	Family of Four, Ontario Works	Single Parent Household With 2 Children, Ontario Works	One Person Household, Ontario Works	One Person Household, ODSP
Monthly Income				
Income from Employment				
Basic Allowance ^a	\$438.00	\$341.00	\$221.00	\$578.00
Shelter Allowance ^a	\$674.00	\$620.00	\$364.00	\$464.00
Child/Family Benefits ^b	\$733.00	\$733.00		
Federal GST Benefit ^d	\$63.00	\$63.00	\$21.00	\$29.00
Total Income	\$1,908.00	\$1,757.00	\$606.00	\$1,063.00
Selected Monthly Expenses				
Average Monthly Rent(may or may not include heat/hydro) ^e	(3 Bdr.)	(2 Bdr)	(Bachelor)	(Bachelor)
	\$1,326.00	\$1,134.00	\$802.00	\$802.00
Food ^f	\$ 715.28	\$ 541.73	\$ 226.24	\$ 226.24
Total Expenses	\$2,041.28	\$1,675.73	\$1,028.24	\$1,028.24
Monthly Funds Remaining (for other basic needs e.g. telephone, transportation, child care items, clothing, school supplies)	\$(133.28)	\$81.27	\$(422.24)	\$34.76
Percentage of income required for rent	69%	65%	132%	75%
Percentage of income required to purchase healthy food	37%	31%	37%	21%

Note: All dollars rounded to nearest whole number.

Scenario References:

Scenario 1 – 2 adults (male and female ages 31-50, 2 children (girl age 8, boy age 14); on Ontario Works (OW)

Scenario 2 – 1 adult (female age 31-50), 2 children (girl age 8, boy age 14); on Ontario Works

Scenario 3 – 1 adult (male age 31-50); on Ontario Works

Scenario 4 – 1 adult (male age 31-50); on Ontario Disability Support

^a Basic and maximum shelter allowance. OW and Ontario Disability Support Payment (ODSP) rates effective May 2010. Source: Social Assistance, Pension and Tax Credit Rates April to June 2010, Ministry of Community and Social Services <http://www.cra-arc.gc.ca/bnfts/clcltr/menu-eng.html> (accessed July 23, 2010)

^b Includes maximum Canada Child Tax benefit, National Child Benefit Supplement, & Ontario Child Benefit. Effective July 2009 - June 2010. <http://www.cra-arc.gc.ca/bnfts/clcltr/menu-eng.html> (accessed July 23, 2010).

^c Ontario Sales Tax Credit

^d Based on net annual income. GST credit issued on a quarterly basis, but calculated on a monthly basis. Figures derived from GST Guideline Table effective July 2009-June 2010. <http://www.cra-arc.gc.ca/bnfts/clcltr/menu-eng.html> (accessed July 23, 2010)

^e Rental Market Reports, Canada Mortgage and Housing Corporation. Spring 2010. Some communities may need to add utility costs.

^f Reference: Nutritious Food Basket Data Results 2010 Toronto Public Health – Includes Family size adjustment factors.