WALK A MILE
IN THEIR SHOES

Documenting the Experiences and Needs of Singles in Receipt of Ontario Works in Toronto

Improving Our Knowledge of and Responses to Singles on Ontario Works in Toronto
Working Report #2, Prepared for the Ontario Centre for Workforce Innovation
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From the perspective of developing more effective policies, programs and services, listening to the voices of people living on social assistance and documenting their experiences is always important. This is especially true for this study given the current absence of detailed research on singles. With this in mind, it is important to acknowledge the partnership with the Ontario Centre for Workforce Innovation (OCWI), a leading-edge centre of research and innovation, which enabled Toronto Employment and Social Services (TESS) to undertake this project. This partnership was integral to the development and completion of the study. Similarly, the study benefitted from the support and insights of several City of Toronto staff and external reviewers.

Lastly, and most importantly, we are grateful to the people who agreed to take part in the study and share their personal experiences. Given the deep levels of poverty they face, it was important that we were able to provide an honorarium to thank them for their time, insights and expertise. Over and above any financial benefit, however, the majority expressed an even more compelling reason for participating: to have their voices heard. They welcomed the chance to tell their own story, and hoped that their contributions would lead to changes that both reflected and respected their lived experience.
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EXECUTIVE SUMMARY

Despite the fact that singles represent two thirds of the social assistance caseload, they are often on the margins of research and policy discussions. The singles study was designed to develop greater insights into the characteristics and experiences of singles in receipt of Ontario Works (OW) in Toronto. This report details the key themes and issues that emerged through in-depth interviews with 51 singles. Participants shared a range of positive impacts, where specific workers, programs or simply just access to financial assistance (albeit extremely inadequate) helped them stabilize their lives or make progress. However, they also highlighted challenges and concerns some of which were applicable to all family types, but which were magnified for singles and some which were specific to singles. And, most importantly, they described the deep and persistent poverty that shaped their daily lives, frequently forcing them into impossible decisions. Overall, their experiences highlighted the following key issues:

- Singles have access to less financial assistance inside social assistance than other family types and having less money impacts every aspect of their daily lives, from their ability to access affordable and stable housing and buy sufficient, nutritious food, to addressing their health needs and pursuing employment;
- The financial inadequacy they experience inside social assistance is compounded by the fact that they also have access to less money outside social assistance compared to other family types;
- The interviews also highlighted concerns with mounting debts and predatory lending, criminal records, stigma and discrimination and a strong sense of social isolation, especially for older singles, those with poor health and newcomers/refugees;
- While all singles are disadvantaged financially, some participants also identified concerns with policies and practices, such as barriers to education and housing;
- More subtly, some felt that they received less empathy, and less information and guidance because they were single. This fed into a feeling of being overlooked in some areas and provided with less support in others, creating multiple layers of disadvantage and making the path forward more challenging; and
- While there is no universal single experience, some participants highlighted either the need for more targeted information for singles so there was greater clarity and awareness of what resources might benefit them, or dedicated workers for older singles who often have different labour market, health and retirement concerns. More generally, however, participants wanted services to be based on their individual needs and to be informed -- but not limited by -- family type.
INTRODUCTION: THE CHANGING FACE OF SOCIAL ASSISTANCE

In the late 1990s, singles comprised just over a third of the overall Ontario Works (OW) caseload in Toronto. Between the end of 1999 and 2016, the proportion of singles on the monthly caseload increased substantially from 38% to just over 60%. Singles also represent a significant proportion of the long-term caseload. For example, of those on assistance 3-5 years, approximately 60% are single; while of those on 5 years and longer, almost half are single. Unlike lone parents, who have benefitted from federal and provincial child benefits and more generous tax credits, singles have limited options for financial support and unless they fit into specific categories such as youth and newcomers, they are often outside the focus of targeted programs and services.

As well as being on the margins of policy discussions, singles are rarely the focus of research on social assistance. Notable exceptions include a study by Stapleton and Bednar (2011)\(^1\) which noted the rise of a new ‘family bias’ in the amounts of money paid to low-income people, evident not just in basic benefits, but also in the design of refundable tax credits such as the Harmonized Sales Tax and the Working Income Tax Benefit where singles receive significantly less. The study also highlighted important economies of scale that, for example, leave single people paying significantly more for accommodation than other household types. More recently, Food Banks Canada (2017)\(^2\) provided an overview of challenges facing singles (see Box 1). Describing singles as being at the leading edge of need, with a high risk of negative physical and mental health outcomes, lacking family supports, and without access to income supports that cover even basic needs, the report concluded that Canada is “utterly failing this population.”

This study was designed to develop greater insights into the characteristics and experiences of singles in receipt of OW in Toronto. A number of companion reports document the demographic characteristics of the 69,000 singles on the caseload in Toronto in 2016; identify the factors associated with exits from assistance to employment among singles; and showcase 30 narratives that describe the lived experience of singles in rich detail, charting their individual pathways onto assistance, the supports that helped them progress and the barriers that held them back. This report details the key themes and issues that emerged through in-depth interviews with 51 singles. Participants shared a range of positive impacts, where specific workers, programs or simply just access to financial assistance (albeit extremely inadequate) helped them stabilize their lives or make progress. However, participants also spoke about the barriers they faced, the rules and practices that held them back and the services and supports they needed most. And, most importantly, they described the deep and persistent poverty that shaped their daily lives, creating challenges with housing, food security and poor health, among others and frequently forcing them into impossible decisions. Appendix 1 provides more detail on the interviews and the participants. Throughout this report the names of participants have been replaced with pseudonyms and research numbers to ensure confidentiality.

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**BOX 1: SINGLES AND DEEP POVERTY**

A recent report by Food Banks Canada (2017) highlights the challenges facing singles:

- Three times as many working-age singles (33%) live in poverty compared to all Canadians (10%).

- Singles live in deep poverty, with average incomes of less than $10,000 a year or 50% below the poverty line.

- Singles face a much harder time exiting poverty. Characteristics strongly associated with a decrease in the probability of exiting poverty include being unattached, receiving social assistance, being an immigrant and being disabled.

- Among singles, those aged 45-64 have the highest risk of living in persistent low income: more than 20% experience poverty for six straight years or more.

- From a government program perspective, singles have few places to turn and seem to have been largely forgotten by federal and provincial governments. Indeed, government transfers to singles have declined from 23% of after-tax income in 1994, to 14% after 2007.

- Three times as many singles aged 45-64 (30%) are not working or looking for work compared to all Canadians (10%).

- Compared to all Canadian households, singles are almost twice as likely to have core housing needs (22% compared to 13%) and 1.3 times as likely to experience food insecurity (17% compared to 13%) compared to all Canadian households.

- Almost one fifth (17%) of singles experience mental illness and/or substance abuse-related issues compared to 7% of all Canadians.

- More than a quarter (27%) of singles aged 45 to 64 have a literacy score of Level 1 or lower compared to 17% of all Canadian adults.
BEING SINGLE

As well as documenting the general experiences of singles on assistance, the study examined the degree to which participants felt that ‘being single’ shaped their journeys. Certainly a number of participants did not attribute much significance to their status, with some indicating that they were better off than families, given the additional costs associated with raising children. Others, however, described the disadvantages they faced compared to other family types. Again, the primary focus was the deep poverty that singles faced and the multiple ways in which this shaped their lives, from higher per person living costs, to mounting debts and social isolation. However, participants also highlighted concerns about certain policies and practices inside social assistance, as well as unique barriers outside assistance. For example, some participants noted that OW directives specifically restrict single people attending a post-secondary institution and in receipt of OSAP from accessing assistance, effectively limiting their options.

Some highlighted the challenges they experienced accessing quality, affordable housing. Over and above their inadequate incomes, this reflected both the barriers they faced from some private sector landlords -- denied because they are on assistance and single -- and their feeling of being “at the back of the queue” for subsidized housing.

Importantly, a number of participants also felt that they received less empathy, and less information and guidance because they were single. These participants felt that their family type -- rather than their individual needs -- shaped how they were served. Indeed, overall, there was a feeling of being overlooked in some areas and provided with less support in others, creating multiple layers of disadvantage and making the path forward more challenging. Some participants noted that it took multiple spells and/or several workers before they got the services they felt they needed. This may have reflected changes in their circumstances or the sharing of insufficient information during previous interactions. However, it might also suggest a more complex interplay between how the system writ large defines, understands, and responds to the needs of singles. Historically, for example, within social assistance systems, singles are typically seen as less ‘deserving’ and provided minimal benefits; lacking dependents they are often understood to require fewer resources and less intensive supports; and, for the most marginalized and vulnerable, the system can respond negatively to the way
Being Single

Being single is really hard because you’ve got nobody else that you can depend on … You’ve got nobody. You’ve got to do it yourself or it doesn’t get done. It’s taxing, physically and mentally. It’s draining (Richard).

Think about us … Try to understand what we’re going through … If you have more sympathy for the people who are on the assistance, you’ll get more people talking about how it can work and more people will follow what you’re trying to do because they know you’re there for them (Denise).

As a single it can be hard. If you want to do something, it’s on your own and every decision you make will also affect you. If you make a mistake you’ll pay the price of your mistake, so it’s very hard mentally and physically (Amadi).

I feel single people, we’re mostly alone. We don’t really have anyone to turn to in the sense of [getting] help. People kind of look at us like we have it easy because we don’t have anybody to support. But in reality we have it just as hard as everybody else. You don’t know what’s in somebody’s mind or what they’re going through. You don’t know anyone’s situation until you walk a mile in their shoes (Jennifer).

When you’re on your own, when you’re in a ditch … you’ve got to dig yourself out somehow and more often than not, it seems like it’s impossible to do that by yourself (Kabelo).

Being single on social assistance, [is a] struggle, incredible struggle (Jacub).

If you’re single, most of the thing you spend for one person and family is the same thing. If you need internet at home, even one person can pay the same thing as five people. A bachelor you have to pay almost as much as you pay for two bedroom or one bedroom (Rahim).

It’s harder for single people … I think families get a lot more money and they get a lot more programs. They get more help … Just because you don’t have children doesn’t mean you don’t have to survive. You’ve got to survive still (Tracy).

As a single person, just make us equal so that we can compete. That’s all (Jackie).
they present themselves (for example, struggling to meet administrative demands in the face of multiple and complex health, isolation and substance abuse issues).

The remainder of the report is divided as follows. Section 1 provides an overview of the realities of daily life for participants who described living in deep poverty and the challenges they faced trying to make ends meet, despite a number of ‘survival strategies.’

Section 2 digs deeper into the major themes that emerged from the interviews. Specifically, it provides insights into the experiences of participants with regard to housing, food insecurity, health, debt, criminal records and stigma and discrimination.

Section 3 examines the experiences of participants ‘inside’ social assistance. It reports the experiences and opinions of participants with regard to issues such as drug and dental coverage, information requests, specific rules and practices and relationships with workers. While many of the experiences are reflective of previous research and general experiences of those in receipt of assistance, where applicable, the section identifies issues that were specific to, or of particular importance for, singles.

Section 4 shifts from current realities to future possibilities. It highlights the key changes within social assistance -- and income security more broadly -- that interviewees felt would help them progress and create a more effective and humane system. Notably, given the recent introduction of a provincial pilot, it captures participants’ perspectives on how basic income might impact their lives.

The report concludes by noting that as efforts to reform social assistance and income security more broadly continue, both policy directions and on the ground practice must better respond to the pressing and often complex needs of singles. Over and above increased incomes, this will require changes that enable more supportive relationships with workers, such as the removal of punitive rules and excessive information requests, the provision of wrap around supports and enhanced human services coordination, and, as a foundation, more detailed assessment of need.
SECTION 1: DEEP POVERTY AND THE STRUGGLE TO MAKE ENDS MEET

The starting point for any discussion of social assistance -- but especially for singles -- is the deep poverty that people experience. Despite a series of small increases in recent years and the provision of additional amounts to singles, Ontario Works (OW) rates remain far below any measure of adequacy, especially in an expensive city like Toronto. Research shows that the poverty gap -- the distance between total benefit income and the poverty line -- has worsened significantly over time. For example, in 1989, a single person on OW faced a poverty gap of just under 40%. By 2014, the gap had widened dramatically to 59% and it would take an additional $12,301 to close the gap. Indeed, along with reduced access to benefits outside assistance, it is estimated that singles receiving OW have experienced a decrease in their spending power of $315 per month over the last two decades.

In the summer of 2017 when the interviews were conducted, singles were entitled to a maximum of $706 for basic needs ($330) and shelter ($376). Those who filed tax returns could also qualify for a GST/HST credit of approximately $23 a month and an Ontario Trillium Benefit of $65 a month, for a maximum of $794. Some do not file returns, however, believing there is no reason to do so if they have little or no income, lacking the appropriate identification/paperwork, or worrying they may end up owing taxes. Finally, some participants, depending on individual circumstances, might qualify for various discretionary benefits. Nevertheless, with average monthly rent for a bachelor apartment in Toronto reaching more than $950, and the monthly cost of an individual’s nutritious food costing $280, it is apparent that even basic costs leave singles struggling to make ends meet.

Given this context, it is not surprising that for the vast majority of participants, low rates and the struggle to make ends meet was a recurrent theme. Exasperated at the growing disparity between social assistance rates and rental costs, Felecia explained “Toronto is a very expensive city. We know that rent is very expensive and what you guys give is a joke. It’s a joke.” Echoing this concern, Deon elaborated:

The amount of money is a joke … How you going to live on $706? The average one bedroom apartment, we are looking at $900 and that’s on the lower end too. One bedroom apartments rent now for $1,200 and that’s not all in, you have to pay utilities. And then you got to eat, by the way. A little thing called eating!

Numerous participants described a similar “disconnect” and, as Richard pointed out, it is not just one bedroom or bachelor apartments that are out of reach, but increasingly single rooms as well, “Gone are the days when you could go and get a room for $300 a month.” With every moment and aspect of their lives framed by deep poverty, participants also expressed
concerns about having enough money to eat, to get around the city given the rising cost of public transit and the costs associated with the simplest of daily tasks:

The first thing is how can I eat properly? What can I put into my body? How can I budget this little pittance … Luckily I can cook [but] I’m not going to cook every day because that’s electricity (#038).

Getting around the city can be hard sometimes … if you’re spending $3 each time you get on the bus that does get expensive (#001).

Transit is everybody’s money but using it is almost out of my reach. A car is out of my reach. I don’t cook during the day because the bills became too expensive (#035).

I have to leave the lights off probably all the time. I don’t cook that often either, ‘cause the stove takes up a lot of electricity … it’s too expensive (#037).
IMPACT OF INADEQUATE RATES

I find it almost impossible to live off that a month because after paying rent, $500, you only have like $200-$300 left, which is not really much. You can’t really do anything or go out or experience anything which can really affect your emotions. You’re just stuck in one place all the time, not able to experience life. You’re kind of surviving; you’re not living any more (Vicky).

They don’t realize the expense and everything is going up, but they’re not giving any more money. It just doesn’t make any sense. It’s actually physically impossible to survive off that amount of money (Tracy).

Word of mouth is the biggest form to help you do anything. To get a job, to even find out things, if you can get around and speak to people, you have a bigger chance. If you have no money, you’re stagnated. You can’t get anywhere. You stay where you are (Denise).

I have diabetes, cholesterol, high blood pressure, I have them all … How can that guy survive on $87? Not a week, a month … After I pay rent and the bills, I am back to the same spot that I was just before I got the cheque … It’s totally exhausting for people like me. They’re giving me enough not to die (Tony).

It needs to be on par with EI … That will alleviate so many people falling into mental illness. That will alleviate so many of the housing problems … It will give people back their dignity. When you have your dignity and you can walk into an interview with confidence, you will get that job. And that’s the ultimate goal. And they don’t realize that when you are financially independent, it’s a ripple effect, it’s a snowball effect that just builds you up and makes you bigger and bigger and stronger (Felecia).

The impact of this constant struggle to make ends meet was evident not just in the accounts of malnourishment and deteriorating physical and mental health, but also in the palpable sense of social isolation:

I’ve got to stay home. Where am I going to go? If I go out, I’ve got to spend money. I can’t spend money. If I wouldn’t be here this morning, I would have been home already laying down on the couch. That’s what I do daily. I go out, I go spend $2 to buy a coffee … I stay there a couple of hours, home on the couch, laying down, all day long, every day. All day long. Come on, this is no life. I think this is – it’s worse than being in jail. At least in jail, you don’t pay rent or food. It’s a nightmare (#003).
You feel sad, depressed … You have no money, you can’t do anything. You can’t feel the way you want to feel. You can’t look the way you want to look. You can’t do the things you want to do because you’re limited. Then you feel like all your money is just going to rent or paying a bill. The cycle never ends (#009).

As these accounts suggest, although some participants described their social networks, for many, there was a strong sense of exclusion. Whether expressed with references to the absence of friends, the inability to move around or the lack of social activities, their experiences reflected a feeling of being left behind:

When people aren’t getting the money, they’re not going out, they’re staying inside just hiding from society. That’s what I did in a way, I just hid from everything. I couldn’t go anywhere (#015).

How am I going to get to job interviews so that I can get that job so that I can come off social assistance? How am I going to get around and network? How am I going to get around and meet new people who can potentially get me a job or take me out of my loneliness or my depression? (#038).

While these feelings of isolation were evident across all groups of participants, they were often felt most strongly by those who received assistance for longer, experienced health or substance abuse issues, or were newcomers. The latter were often especially emotional as they reflected on the lives they had left behind or had hoped to live. For example, Kabelo explained, “I always feel like an outsider … out of place in this city,” while Maria elaborated – “When we come from other countries … we don’t have that many friends or family [and] the friends we had we lost … Nobody wants to be with a poor friend.”
SURVIVAL STRATEGIES

Facing an almost impossible financial balancing act, with even minimal living costs far exceeding their income, participants described a number of survival strategies to try and make ends meet. These included setting priorities, seeking out deals, turning to family and friends and finding ways to earn additional income. Importantly, each of these was typically limited, episodic and itself precarious. For some, this began with a concerted attempt to plan and set priorities with careful budgeting. For example, Mya explained that her mother taught her how to budget carefully and always stressed an important distinction – “This is your needs, this is your wants.” Similarly, Jennifer explained that her grandmother, who had worked as an accountant, taught her to divide up the money left after rent into a weekly budget. As a result, she was able to put aside small amounts to travel to job interviews and appointments. Even so, she recognized that if she was not living with family she “wouldn’t be able to maintain for the month.” Other participants described how they prioritized their funds to meet either the most important or most pressing needs:

Rent has always been paid. In my eyes, that’s the most important. Because having a roof over your head is more important than anything ... Sometimes [I’ve] had to skip over the groceries ... It’s been tough (#043).

The first thing I spend it on are my bills, whatever bill is past due the most I make a little payment to that so cell phone or helping with the cable or even just groceries if we haven’t had it for a while (#009).

Food is my second priority. I pay my bills. Food because I can go to a food bank, I can beg ... Six to eight times [a month] ... I go to different locations and grab food (#008).

Despite their best efforts to plan, budget and prioritize, participants still struggled to get by and faced difficult decisions about where to allocate limited resources. Numerous interviewees spoke about missing meals, eating a limited diet, using multiple food banks and, as Jackie explained, relying on money that was provided for transit to make sure she can eat, “Are you going to buy these few things to eat for a week or buy a Metropass that you’ll probably only use two or three times?” Indeed, faced with a steady stream of impossible choices, the daily reality for most participants was one of continuous juggling and uncertainty.

A second strategy, which often took up a significant amount of time and effort, was constantly searching for deals, both checking flyers online, and often physically walking long distances to get the best prices at various grocery stores. Mya and Gabriella both took pride in describing their resourcefulness:

I have to be very careful when it comes to money, so I’m resourceful. There’s points programs ... People can get free birthday lunches, free birthday dinners at certain restaurants ... There’s ways to do things and not spend an arm and a leg.
Sometimes I have to go to three, four supermarkets ... I go through the flyers right and I circle ... There’s apps you can get on your phone that tell you where to go, where the bargain is, you get the flyer, you go through the weekly bargains ... I go to places where you don’t have to pay. In Toronto there’s a lot of places you can go where you don’t have to pay.

However, as both later explained, there was a little more to their stories. For Gabriella there was a limited dietary intake because of health issues. Mya, meanwhile still needed to visit food banks and even resorted to begging for food from her neighbours, something which rocked her self-esteem:

In order for me to eat I have to go to food banks. I kind of been begging people for food, like my neighbours. I had to ask people for food, literally knocking on my neighbour’s doors and say, ‘listen my mum died and I only paid my bills, do you have any extra cans of food that you don’t need?’ I literally had to go knocking on doors ... It’s very difficult. I feel like a loser when I do that.

Unable to make ends meet alone, participants who were able also turned to family and friends for support. A small number received regular financial support, however, for most participants the support provided -- whether money or in-kind such as groceries -- was limited and episodic. The accounts of Charmaine and Deon were typical:

My grandma is my soldier ... [She] helps me out sometimes, not financially but with food. If I’m out of food or whatever, she’ll be like, ‘okay, come over and go grocery shopping here!’ I mean, that’s a good thing that I have that kind of support, but financially, I really don’t get much support.

My parents are cool. They are a great support system; they are very supportive of me ... My mom likes to cook and I’ll call her and she’s like, ‘you eat?’ I said, ‘no mom, I didn’t eat’, she says, ‘you come over’ ... They would help me out with food and buy me groceries sometimes if I was having a hard time.

As Denise explained, it was essential to turn to “friends, family, somebody, just to get you through because obviously you can’t survive.” In many instances, those who helped were also living precariously, in receipt of benefits, in low-wage work or close to or in retirement, reinforcing the limited and uncertain nature of support. Others disliked feeling obligated and knowing that as soon as they received their income, money was owed to a friend or high interest lender, creating a never-ending financial trap:

You are in debt with people because you had to borrow 50, 50, 50 and when the month comes and the money is due all the people want their money back. Your money’s done. You didn’t get to buy food, rent, nothing (#050).
It doesn’t take me past half the month. I’m struggling right now ... Every time I get my cheque at the end of the month, I go to [a lender] to get an extra hundred dollars, which costs me $18. I’m in that loop just to get by (#040).

Finally, participants described the ways they were able to earn additional income. Less than a handful indicated that they had any significant or consistent income that they had not declared to social assistance. Importantly, they described how low social assistance rates and restrictive rules created the context in which people would not declare earnings because they needed every additional dollar just to get by. Much more frequently, people instead cobbled together small amounts of money that were episodic, rather than reliable. Some sold personal belongings or searched stores for items they could resell at a small profit. Others found occasional gigs, but again the earnings were small and inconsistent:

I did photography on the side. I did a couple of baptisms, a communion … One of them I got $300 for. The other was $150. It came in handy and that was pretty much how I made things meet was doing little things that I could, whether it be selling things I really didn’t need or trying to get a photo gig (#015).

My income is very sort of, stop and go. There will be some months that I make like $500 or $600 in a month and then there will be three or four months that I don’t make anything (#026).

Overall, despite their clear financial need, the majority of participants lacked the networks, opportunities or resources to generate consistent and meaningful additional income. While some were not able to work at all given their poor health or other challenges.
In addition, to financial hardship and isolation, a number of other overarching issues were evident across the interviews. Most often participants highlighted concerns with housing instability, food insecurity and poor and deteriorating health. After taking a closer look at each of these in turn, this section concludes with a brief review of experiences with debt, criminal records and stigma and discrimination which were also identified by a significant number of participants. While the various issues identified in this section are relevant for many living in poverty and on assistance, in some areas there are specific concerns and challenges for singles. Indeed, along with the deep poverty and isolation identified above, from the vantage point of participants, there was a feeling of being overlooked, provided with less support or left waiting at the back of the queue, creating multiple layers of disadvantage and making the path forward more challenging.
Affordable, quality, safe and stable housing is essential to people’s health and well-being and their efforts to move out of poverty and find and keep jobs. Unfortunately, as has been well-documented, Toronto faces a severe shortage of affordable housing. Rental prices in Toronto are among the highest in Canada and have risen above the rate of inflation. The lack of affordable market options can force people into unsafe, overcrowded or poor-quality accommodation. It also creates huge waiting lists for social housing. Indeed, approximately 90,000 households were on the wait list in Toronto in 2017, around a third of which had no dependents.7 Reflecting a historical lack of investment, much of the existing social housing stock is also in a poor state of repair, creating unsafe and unhealthy living conditions for some residents. The lack of affordable housing and stagnant wait lists also creates huge pressures on the shelter system.

For those on assistance, finding affordable, quality accommodation is especially challenging. Current shelter amounts under OW do not come close to meeting shelter needs in Toronto, where in 2017, the average monthly rent for a bachelor apartment was $962. Approximately half of the research participants identified housing as the major barrier they faced to leaving assistance. They spoke about the cost of accommodation which placed it out of their reach, the poor quality of the accommodation that was available and the barriers and discrimination they faced looking for housing as singles in receipt of assistance.

Benefits of Stable Housing

Numerous participants expressed their hopes for stable and affordable housing and, notably, a place of their own. They described the difference it would make not only in terms of stability, security and safety, but also as a platform for independence and progress, enabling them to focus more on other aspects of their lives. For example, Angela described the benefits that would come from better accommodation, “It all starts with the home. If you’re happy where you live and you’re comfortable, maybe you can start to get things going in terms of bettering yourself and finding employment.” Echoing this, Marco, who had experienced homelessness as a result of his substance abuse, identified stable housing as the single most important factor in his recent progress. Having secured affordable housing, he reflected:

My drug use when I was in transition it was the worst … From one place to another, one shelter to another, one job to another … The number one thing is stable housing … I can now start to plan a life. Start to look long term instead of everything short, transition, transition, short.

7 https://www.toronto.ca/city-government/data-research-maps/research-reports/housing/social-housing-waiting-list-reports/
There’s a certain part of your dignity that is returned when you have your own roof over your head. There’s a certain sense of security that you feel when you’re pushing your own key so to speak. Knowing that nobody can kick you out. You will not end up on the street, begging with a Tim Horton’s cup. There’s a certain amount of dignity and security and mental wellness that comes with having a roof over your head (Felecia).

It means everything. Now I’ve got a place and I’m comfortable with it. It feels like a home … My own shower, fix up my own place, things like pictures, family, my own TV, a bit more reading in private … Now I can focus on my health. I can sit down and write what I’m going to eat, what I’m going to make. It changed a lot (Marco).

I would like my own place. Independence is what I’m searching for … I had my own place before and I had to lose my place so I’m looking to have it again. But to have an apartment now is so expensive. Nobody wants to really share a room, you can’t trust people nowadays … It’ll be so nice to have my own place … Pulling my own curtain, my own living room with a nice TV. That’s life right there. Independence (Frank).

I didn’t have enough money for any of the places at all, period … I ended up living – true story, with 18 other people in a rooming house, mostly homeless. There were like two schizophrenic people, one was on meds, one bipolar. It was basically a house of horrors … I was there for a year, maybe a year and a half … It had no windows and they smoked inside. I developed a health problem, I couldn’t breathe very well. Apparently windows cost more, so my room had no windows, I was in the dark (Josephine).

[I’m] in a basement … I cannot go any lower except if I move into a sewer. How can I go ahead, how can I survive? … I would like to move because it’s so humid down there. And I have arthritis too, but … where am I going to go? Move and then go where? In a sewer because lower than a basement, it’s just a sewer (Tony).
However, unlike other family types, singles on assistance often have no choice but to live in shared accommodation and they described issues with cost and quality, as well as challenges related to securing leases, poor credit and discrimination in the housing market.

**Cost and Quality**

There were significant variations in the cost and quality of accommodations reported by participants. Some felt fortunate to share space in a house or larger apartment with family or friends, or to have stumbled upon accommodation that was reasonably priced. Others like Kathy tried to maintain a degree of comfort, albeit this was increasingly precarious in the face of growing financial pressures:

> I was working when I moved. I didn’t expect life to happen like this …I have a small place but I have my laundry and I have a small backyard I can go out and enjoy ... When push comes to shove I’ll have to give that up, but that’s why I want to maintain. I came from a house and a career to a very tiny apartment [emotional] so I wanted to at least have a little bit of comfort.

More frequently, however, participants lived in basement apartments and rooms in shared houses “because they have no other choices” (#006). Without exception, participants found it hard to believe what they were expected to pay for rent. For example, Charmaine was exasperated to be paying $400 for “A ROOM! And it’s really, really small.” In reality, though, this was among the lowest rents identified by participants. Richard and Frank shared similar concerns as they reflected on their experiences looking for housing:

> It’s disgusting because you can’t, even a room nowadays is $600 minimum for a room and that’s probably some shithole and we’re talking probably the size of 4 foot by 4 foot closet room. It’s awful what housing is for people nowadays, and irrelevant to the fact that there’s not enough of it, the quality of it is shitty.

> They want $500 a month and OW is only paying less than $400 for shelter. There’s nowhere right now that’s going to be renting for less than $450, $480. People always say the room is big ...but it’s not big and they want $600 … you’re sharing the kitchen and the washroom.

The rising cost of rent creates challenges for all family types, but they are particularly magnified for singles who given their inadequate incomes are often effectively shut out of decent accommodation. Commenting on the unfavorable economies of scale facing singles, Olivia noted that “the amount that welfare gives you to live alone just does not reflect the amount that rent costs … The amount that single people get should be reflective of the amount that single people pay for rent which is often per person higher than what you would pay if you were comfortable sharing a bed with someone.” Others recalled facing difficulties accessing quality housing because of poor credit histories, as Richard explained, “then they’re kind of stuck being somewhere where they don’t want, whether it be living in a room [or] sharing a room with somebody they don’t [know].”
The limited options available to singles led participants to endure poor quality housing, noting problems with mold, infestations and the absence of repairs. As Marco put it, “[Landlords] are giving you the lowest possible quality of place and taking the most amount of money because they know what you get.” For example, Vicky and Olivia described problems with cockroaches, while Tracy, who lived in shared accommodation with 3 other people explained:

It was pretty shitty … I felt safe [but] I didn’t leave nothing around just in case it got stolen … The whole time I’ve been there nothing got fixed. The lights were dim and everything was really shitty. Five years, she didn’t fix nothing.

Underlining this point, Josephine provided a graphic description of the rooming house she ended up in when no other options were left:

The only place that welfare could cover was this tiny room, like this big. There was one kitchen in the basement for 18 people and people live in couples, so it’s 18 rooms, so let’s call it 25 people, 26, 28 … I can’t even shower in the room. You have to bring like a bucket of your own stuff, you can’t leave a towel in there … the shower curtain, it looks like somebody’s a coal miner, always with dirt.

While those in social housing faced lower rents, as the following examples show, there were still concerns about living conditions and safety:

I’ve seen people with their ceilings coming down in their bathrooms, nothing up there and they’re waiting on two years, three years for work orders to repair the bloody ceiling … In our building two of the elevators break down two to three times a week. Every long weekend for as long as I can remember for a decade or more, one of the elevators has broken down [and] half the people that are living in that building are senior citizens with scooters, wheelchairs and walkers (#014).

The [building] I’m living in now, on the internet I saw it’s one of the worst in Toronto. Not only the building, but the people living there … I don’t go out late at night … One of friend’s father, he had to leave in the early morning and two people came from nowhere and beat him. He was in emergency (#042).

**Discrimination and Other Barriers**

Despite the existence of legislation protecting against discrimination, numerous participants highlighted a different on the ground reality, with those on assistance, especially singles, facing barriers to housing. They noted reluctance among landlords to rent to people on social assistance, reflecting both concerns about the reliability of payments, but also stigma about those on assistance:

I’ve had potential landlords tell me to my face that they wouldn’t accept someone who was on assistance and they don’t find it a reliable source of income … [so] I never tell potential landlords that I’m on assistance (#026).
People don’t trust people like us on incomes … You know how many rooms I’ve had to call before I even be accepted? As soon as I said welfare, bye, bye (#005).

These perceptions were intensified for single people; not just because of their limited income, but also because of perceptions about them. Gareth, who had worked as a superintendent, explained that his managers had told him not to rent to singles on assistance -- “Landlords want to have families and couples … It’s like a security blanket for them.”

Others explained that their limited income meant that they could not even get a formal rental agreement in their name. Felecia wanted policymakers to understand that a single person cannot get an apartment let alone a lease on their own. While Farah explained, “I can’t afford to rent a place and live for $800 so it’s not logical to ask for a real contract because everyone is sharing with someone else to afford that amount.”

Those who had experienced wait lists for social housing shared their frustrations at the number of years they had to wait and the fact that they needed to resubmit their application to stay in the queue. Some struggled to do this given the instability in their lives and were forced to start the process from the beginning:

You have to update it every year. If you don’t, they put you on the back of the list. That’s why it took 10 years. It was only supposed to take six, but I forgot about it. I never called them once a year to update it (#023).

I went on a housing list maybe eight years ago. I found out that if you don’t update it every year, you get off. So now I’m off and if I go back on, I’m going to probably have to wait another 10 years. Single people it’s 10 plus (#009).

Compounding their struggles in the market sector, participants felt that as single people, they were at the back of the queue for social housing. Many understood that those fleeing violence or facing other challenges needed quick access to support, but in the absence of sufficient affordable housing felt that they were the ones who experienced the impact. Denise and Michael, captured the sense of unfairness and desperation expressed by others:

If you have three kids you’re on the top of the list. Two kids are next, one kid is next. Singles are always at the bottom which I understand, fine. But I think maybe we should be separated because somebody with kids’ lifestyle and what they need is different from somebody single. I don’t have kids, but I still need to support myself … If I’m in a bad position and they’re okay, they can live with family, they’re fine, they’re still going to give it to them first.

If you are homeless, that means you need it. There is no such thing as being more homeless than somebody else … As a [single] male … you need to get addicted to drugs or something and say that you’re at risk because you are going to do a bunch of drugs on the street and die. That’s what you have to do to get housing as a [single] male.
FOOD INSECURITY

While access to affordable, sufficient, safe and nutritious food is essential to achieve and maintain good health, across Canada, 13% of all households and 17% of singles, experience food insecurity. Closely linked to a range of negative health outcomes, those who experience food insecurity cannot afford the quantity and quality of food they require. People are compelled to choose less healthy and cheaper food items, and to eat less or miss meals completely. Often they experience ill-health and fatigue, live in a heightened state of stress, fearing that they or someone close will not have enough food to eat.

In Toronto, the rising cost of affordable food, along with other increases to the cost of living, has resulted in more than one in eight households being food insecure. Those on social assistance, along with recent immigrants, and those of Indigenous backgrounds, are most likely to experience food insecurity. In 2017, for example, the estimated cost of nutritious food for a single person in Toronto was $288 a month, far beyond the available income of a single person on social assistance. Given the costs of housing and other fixed bills, singles have no choice but to treat food costs as a flexible expense, limiting the quantity, quality and variety of food they eat, as well as missing meals completely to make ends meet.

Reflecting these challenges, recent years have seen a surge in food bank use among singles. Nationally, singles have increased from 30% of households helped by food banks in 2001 to 45% in 2016. Similarly, food bank use in Toronto has grown significantly over time, with greater demand in the suburbs, among singles and among people aged 45 and older. While food banks provide some relief, continued reliance has a negative impact on long-term physical and psychological health. Numerous research studies show that large numbers of food bank users are deficient in various nutrients, and experience deteriorating mental health through an increased sense of impoverishment, feelings of alienation, and overwhelming stress. For these and other reasons, including stigma, large numbers of those who are in need, do not use food banks, leading to worsening physical and mental health.

The growing challenge and impact of food insecurity was confirmed by participants. Along with housing, consistently obtaining access to nutritious healthy food was noted as a primary barrier to progress by more than half of those interviewed. The experiences shared by participants mirrored the existing research in this area. For example, there was widespread concern, expressed here by Jennifer and Jackie at the rising cost of food and the difficulty this posed in ensuring they had enough to eat:

8  https://www.toronto.ca/legdocs/mmis/2017/hl/bgrd/backgroundfile-107929.pdf
9  http://www.wellesleyinstitute.com/wp-content/uploads/2016/05/Bringing-Food-Equity-to-the-Table.pdf
People can’t afford to live in Toronto any more. The daily cost of living is crazy. Sometimes I go grocery shopping for my grandmother and it’s $150 of groceries in five bags. You put it in the fridge and you still look like you didn’t do groceries.

It would be nice if social assistance could give a little more per month, not even to just pay rent, but to buy groceries. You can’t even go to the grocery store without spending an arm and a leg. I spent $80 last week and I got milk, eggs, bread, the necessities.

You get sicker because you’re not eating properly. I just was eating one samosa, one soup a day. How could you not get sick? How could your mind function when you’re not eating anything properly because you have to make a decision? Either I buy this or I eat (Maria).

[People] suffer from malnutrition because they can’t afford many things. They need to reform Ontario Works, give them more money … One time I went to a food bank and I saw the line … and I saw the type of people that go to the food banks and I said this is not for me … Why is that happening in Ontario? (Halima).

We keep telling people, eat a colourful diet. Well, if the only thing you can afford comes in a can, that’s what you’re going to eat. There’s a reason so many people eat corn and it’s because corn is the most readily available and it goes on sale for 29 cents a can … Frozen vegetables, three times the price of canned vegetables because they’re more healthy (Mark).

At the end of the second week, I’m pretty much broke. Then I use all the drop-in centres … At the end of the two weeks, I don’t have any food anymore so I have to go out and eat at those places. That means that the whole diet changes because when I go there then I’m eating the food that they serve. A lot of bread (Marco).
As even basic food costs were out of their reach, participants indicated that they had to cut back on the quantity and quality of food they ate, eat a monotonous diet and/or miss meals entirely. For example, Peter noted how having access to his children on weekends created an extra financial strain that exacerbated his struggles to eat well, while Mya explained how she tries to stretch her food:

I skip meals every other day ... I don’t eat very well when my kids are there because I have to buy for them ... I have to sacrifice.

I skip meals in order to make ends meet. I normally don’t eat breakfast as a result. I try to skip ... I figure if I skip breakfast and then I make lunch like a breakfast and a lunch, then that’s okay. I do get hungry.

As well as describing feeling hungry and having little energy, interviewees also shared their fears about how their poor diet was comprising their health. Marvin, for example, was placed on a limited diet after a heart attack, but was typically unable to afford the healthy options. Meanwhile, Maria pointed to the negative impact of a compromised diet:

My diet should be based on grilled white meat, grilled fish, no salad dressing. I’m basically on a diet of cardboard and grass, being comical ... It can only get worse based on my diet ... I’m not on a diet that I’m supposed to be on. I’m consuming the things that I’m not supposed to consume, because I have to eat ...I can’t always afford the diet that’s recommended.

I wasn’t eating anything proper. I was thinner than I am now ... You don’t know how bad it is until, fast forward you get sick ... You don’t talk to anybody, you don’t say anything, you go downhill. I went downhill by not eating proper.

As noted earlier, some participants highlighted their resourcefulness in trying to get by. While some noted the lengths they went to find deals on food and to buy in bulk when possible, such deals sometimes proved to be a false economy, as Mark explained:

If you buy enough when it’s on sale, by the time it’s used, you’ve thrown away the last half of it ... They’ll put them on 50 per cent off. But then you look on the date and they expire the next day. What is the sense in buying something for half price if I have to throw it away the next day because half of it has expired?

And while Michael explained that he doesn’t go without meals anymore because he knows “how to be broke” and can rely on various community resources, relying on food banks was more problematic for some. A number of people interviewed expressed reservations about using food banks, highlighting issues with the quality and quantity of food, as well as concerns about the stigma associated with seeking such help or noted that other people needed them more:
It’s all outdated. You open a can of this, a can of that, it’s bad. It just started getting worse and worse and worse … They say a week’s worth of food, you’re lucky if it was a day’s worth of food … And plus, it’s bad most of the time. So, I just stopped going (#005).

I don’t think I should go [to the food bank]. It doesn’t make me feel good. I’m not comfortable with that idea. I feel ashamed … going there asking for food is like humiliation to me (#011).

Very rare do I go to food banks, very rare that I go to them … There is people that need it more than I do. I don’t go that often. Sometimes I call my kids and they bring me some food … I just manage with what I have (#007).
POOR AND DETERIORATING HEALTH

People living in poverty live shorter, less healthy lives than those with higher incomes. While health is the result of a combination of factors, it is estimated that social and economic factors account for as much as 50% of all health outcomes. Low income, unemployment, poor housing and food insecurity combine to shape health outcomes. Indeed, studies suggest that ongoing poverty particularly relates to the risk of developing conditions such as cardiovascular disease, Type 2 diabetes, and nutritional deficiencies as well as a variety of mental health issues.

In Ontario, research suggests that self-reported health is 3 times worse among those with the lowest income than the highest; twice as many men in the lowest income group and 2.5 times as many women report having diabetes compared to those in the highest income group; and people living in the poorest neighbourhoods report lower positive mental health. Similarly, in Toronto, residents with low incomes have poorer health status compared to higher income groups, on numerous measures. These include poor mental and physical health, greater risk of chronic diseases such as heart disease, diabetes and high blood pressure, and nutrient inadequacies.

Those on assistance face significant barriers to good health. Research suggests that almost a quarter of those in receipt of assistance identify mental health as a barrier, and that they are five times more likely than the non-poor to report their health as poor or fair; have 2.4 to 4.6 times the rates of diabetes, heart disease, mood and anxiety disorders and other chronic conditions than the non-poor; and are almost twenty times more likely to attempt suicide.

Reflecting the well-established relationship between poverty and poor health, a large number of participants (36) indicated that mental or physical health conditions were a significant barrier to leaving assistance. They identified a wide range of physical and mental health conditions, many of which are strongly associated with or exacerbated by poverty, including diabetes, heart disease, high blood pressure, anxiety and depression. In addition, they described the impact of poor and deteriorating health on all aspects of their lives, including their search for employment, the limited availability of mental health supports and the challenges they experienced accessing ODSP. Indeed, given the poor health of many participants there was a sense of being trapped – too unhealthy to work consistently, if at all, but considered too ‘healthy’ to qualify for ODSP and the additional income that could support a healthier life.

16 Toronto Public Health, The Unequal City 2015
17 Canadian Mental Health Association Ontario, http://ontario.cmha.ca/mental-health/services-and-support/income/
In some cases, health problems were a key part of the participants’ pathway to assistance. For example, Karen, who had experienced mental health issues from a young age, explained that “It’s never been so bad where I can’t function” and she had to leave her job and eventually turn to assistance. Similarly, Gabriella described how the onset of debilitating health issues led her to OW:

I had to stop working. I really didn’t have a choice … I went back to [education] for a while before I went on government assistance and it just wouldn’t work. My body just shut down. I had to take time off and then someone said, ‘why don’t you go and get the help that you need?’ So that’s how my journey started.

**LIVING WITH POOR HEALTH**

OW should be a one stop service. If you handle people’s money it means you are managing their health (Josephine).

When you don’t have your health, you’re poor. That’s as simple as I can put it. If you’re sick all the time, you’re either spending money to get to the doctor or spending money because it’s not covered or you don’t have OHIP (Felecia).

Some days it’s difficult because if you have a flareup, your nerve pain is so high, it’s just coping with that pain. It never shuts off. You don’t know when you’re going to have a flareup, so when you do it’s 10 times as bad … It affects your mobility, your thinking process, causes depression (Kathy).

I have a hard time getting to sleep at night because of medical issues. My head races, I just think of everything, I’m always worried … It’s making sure that all the money is covered that needs to be … I’ve been homeless before a long time ago. I don’t want to be there again so it’s just a constant worry …It’s not a fulfilling life (Jackie).

Anyone on social assistance had a life that has now changed. It would be helpful to have access to psychological advice, a session with someone who can provide them help with their problems and provide guidance (Farah).

This year I started receiving ODSP for the first time. I applied 10 years ago. I was denied many times but it seems that my body is falling apart and now I’m actually eligible eight months before I turn 65. Thank God for the system. They gave it to me in the last leg of the marathon. I’ve seen my friends die before they got it (Tamas).
For some, years of living in poverty made their recoveries more precarious or significantly worsened their overall health. Unable to work because of a back injury and unable to access ODSP for many years, Tony explained, “I never had diabetes in my life. High blood pressure, the same thing. High cholesterol, same thing.” Others described how their poor or deteriorating health impacted their daily lives:

Ever since my health has been gone, everything else is gone. It’s hard because I know I can’t get back to doing what I used to do. Every day, every year my body gets more sore and more pain... I’m going to be 44 next month. These should be my happiest years. I feel like my parents are, old. A grumpy old man ... I’ll need food for myself and I won’t even go for a couple of days …I’ve never had the experience before. I should just get up and go ... Now my mind just races all the time about all the bad things (#005).

I’m starting to feel crippled. I walk and then I have to stop … I need to lose this weight, I don’t want to be crippled, I want to be able to walk. But after maybe 5 minutes, couple of minutes of walking I have to sit down ... It’s really hard … My legs start to hurt, my feet start to hurt. I don’t want to feel like a cripple, I’m only 46, I’m not 80 but I feel like an 80 year old (#008).

The various health issues participants faced meant that work was either not possible or extremely difficult to secure. Although Jackie and Kathy wanted to work, neither saw a clear path forward. Managing the pain associated with her condition, makes daily life and work challenging for Kathy. While she feels able to work part-time, its episodic nature makes it hard to set a reliable schedule. Still keen to work, not least because she is single and no longer has any savings, she is reluctant to be categorized as “disabled.” However, unable to find secure employment, Kathy now relies on temporary work agencies which as she described further complicates her situation. For Jackie, meanwhile, a number of health issues create significant barriers:

Some of my days are good. ... [Other times] you can’t function anymore you have to lay down. You just hit the wall … The temp agency will call you the night before and say ‘can you go here?’ I don’t always know how I am going to feel the next morning because sometimes it takes me two or three hours to put my clothes on. It’s challenging.

I don’t have the concentration to do a 9-5 job. I don’t. The physicality of the job or whatever that exists isn’t there. I can’t be walking around, lifting something up. I can’t really carry it. I’m kind of useless … Sometimes I can’t even think of the simplest of words. I can’t even remember a sentence I read in a book recently.

Finally, given the serious nature of many of the health issues, a number of participants had applied for ODSP. Some, such as Tracy, highlighted the positive impact this had. Having struggled with mental health and substance abuse over many years, she felt that accessing
ODSP was an important step in her progress, not least because the extra income she now receives enables her to make healthy choices.

However, a larger number of participants, including Peter and Olivia were denied access or it took several applications and a significant amount of time:

[ODSP] failed me two or three times so I had to start all over … I had so much problems with those people. It took me five years to get on it. My health is worse. Every doctor, every specialist I went to said you should be on this. That’s why I had to get the lawyers involved.

I have applied to disability and I am currently in the midst of a second application to disability … I got rejected the first time. I applied on the basis of mental illness … I have a habit of downplaying my symptoms … I’ve heard that when you’re applying to disability, you should apply on the basis of your worst days.

**Improved Access to Health Supports**

Given the deep poverty they experienced and the clear links between poverty and chronic poor health, a number of participants stressed the need for OW to better connect people to health supports. Although research suggests that people living in poverty find it more difficult than others to access a family doctor, the accounts of participants focused only on mental health supports. Participants identified the need for improved access to mental health assessments and supports and they saw OW as a vital connection to those services. For example, commenting that “I look composed, but you don’t know what’s going on inside my head,” Daniella suggested a more formal hand-off or connection to mental health providers, and even having a mental health resource inside every OW office. The need for more support was echoed by Felecia, Farah and Josephine among others, the latter of whom noted that as not everyone is self-sufficient enough to seek out mental health services, improved connections are essential. Karen specifically highlighted the importance of more 1 on 1 supports. Unlike other participants she had been provided with resources for group based support, but stressed that talking about such personal issues was not always possible in a group setting.

Underpinning these various suggestions was the importance of treating the whole person. As good physical and mental health is integral to achieving stability and making progress, whether in or outside of the labour market, any path from social assistance has to address this. As Gareth powerfully expressed it:

If we address people with their health issues, that’s going to save us because we’re going to get them healthy and now they’re going to be motivated or they’re going to be able to get back to work … People are struggling with depression because they can’t find a job. There should be something that helps all the areas that people struggle with – with the emotional side of losing a job and trying to get a career to the physical side. We need a support network, a support system that helps those people.
DEBT, CRIMINAL RECORDS AND STIGMA AND DISCRIMINATION

Along with the major issues of housing instability, food insecurity and poor health, a significant number of participants also described the impact that large levels of debt, criminal records and stigma and discrimination had on their daily lives and plans to progress.

Debt and Predatory Lending

As well as the small amounts of day to day debt described earlier in the report, more than half of those interviewed indicated that they faced much higher and long-lasting debt. While a few had informal arrangements with family and friends, more had loans owing to the Ontario Student Assistance Program (OSAP), to mainstream financial institutions and to alternative financial service providers, such as pay day lenders. A number also had regular deductions from their monthly OW income as a result of previous overpayments. Given the perilous financial circumstances already described, even small payments towards debts created additional struggles and anxiety, while the shadows of unpaid debts also created challenges and barriers.

The amounts of debt varied widely, from several thousand to many tens of thousands of dollars, with numerous participants juggling debts from multiple providers. While some loans could be deferred, others were accumulating ongoing and high levels of interest. Despite their impossible circumstances, some participants tried to chip away at their debts. For example, Gabriella with debts of more than $20,000 reported paying $50 a month against two separate loans. However, with such limited income for basic necessities, many struggled to make even small payments. Importantly, while the deferment of student loans was a possibility for some, this debt still cast an important psychological shadow. Incurred as a result of efforts to build a better future, it not only acted as a reminder that newly acquired skills and qualifications did not translate into labour market success, but was also a barrier to a subsequent return to education.

Some pursued by debt collectors dreaded the unknown phone calls, while others highlighted the additional barriers that flowed from bad credit scores. With regards to poor credit, Mark and Charmaine described the limitations it placed on efforts to secure work or accommodation:

I tried to get a job working at a bank. I tried to get a job going back into insurance again. Both of them cancelled my applications because of my credit.

It is going to affect me later in life, ‘cause I do want to buy a home and be able to get a car at one point in life (sigh) but I don’t know how that’s going to work.
The experiences of others underlined the stress and anxiety that participants lived with. Frank explained that he was constantly “afraid to answer the phone” in case it was the bank or a debt collector, while Marvin described both the stress and the futility of the calls – “I’ve still got these collectors on me now for about three grand. Last year they contacted me if I could pay $1,500 in three months; I said I can’t afford it. I don’t even get $500. Even if I starved and didn’t pay my rent, I couldn’t afford it.” And despite explaining that she has “learned how to deal with debtors” and ensures that she stays in contact with them whether she can pay or not, Mya provided insight into the toll this took, both in terms of her time and stress:

It takes up all my time … A phone call will take an hour with Hydro and then you’re so tired, you’re drained emotionally. You spend an hour on the phone and then right away you call [name of gas company], because [the bill] is due and then your [phone] bill is due and then you are making arrangements. You have to keep things organized as to when you owe to who, you got to take that into consideration how much money you have for food … It’s very hard.

**LIVING WITH DEBT**

I’m in debt with OSAP [about $15,000] and phone companies [a couple of thousand] ... You don’t think that when you get older, you’re going to need to have good credit in order to get apartments … If you don’t have good credit, you’re getting denied (Jennifer).

I got a student loan and I can’t pay it off. I still owe them $3,000 because I was incarcerated. I was three weeks into the program. I got incarcerated. It was $11,000 and I still got to pay it back. I never finished that 36 week course (Marvin).

It’s bad when Pay Day Loan companies won’t qualify you for a loan. But I had Pay Day loans on Pay Day loans on Pay Day loans. I was taking out a loan on Tuesday to pay the loan on Wednesday so that I could get a loan on Thursday (Mark).

Three years ago my debt was about $45,000. Then I wanted to know my credit report and added everything up and there’s $53,000 because I have my credit card, that’s 20% interest rate … This is a credit card that got cancelled for no-payment right so they’re still charging me those fees and late fees so it just keeps going up and up and up (Kabelo).
Reflecting the fact that people living in poverty are often underserved by mainstream financial services, they often turn to alternative financial providers. A recent study in Toronto found that a significant minority of people using these services are on assistance and that most people accessing these services use them as a last resort, after they are maxed out of or denied access to mainstream services. In 2017, the Ontario government passed legislation to limit the number and location of payday lenders and to ensure lenders show the cost of borrowing a payday loan as an annual percentage rate and do not lend people more than 50 per cent of their net income per loan. This builds on actions that have lowered the cost of borrowing offered by payday lenders from $21 for every $100 in 2016 to $15 in 2018. The province has also provided municipalities with more control over where lenders can operate.

The experiences of participants pointed to ongoing issues in this area. Notably, the reliance on payday loans leads to much higher borrowing costs, making it difficult, if not impossible, for people to move out of poverty. Some spoke about borrowing from multiple payday lenders and trying to juggle payments or taking one payday loan after another with the same provider. Several appeared increasingly trapped, and few indicated they were receiving any support or guidance on how to manage their debt and related financial stress. Frank and Kabelo both now recognized the dangers of payday lenders having borrowed from them in the past and struggled with high interest rates and limited repayment times. Mark stated he had been trapped into paying a “huge amount of interest,” which he could no longer pay after losing his job, leaving him with a large debt and poor credit. He also spoke about the targeting of high interest loans to people with nowhere else to turn, recalling how he received a flyer that pre-qualified him for a loan of $5000 and was subsequently told by the company that they “send them to people we know who are going to take the money.”

Overall, the experiences of participants further underlined how living in such deep poverty, impacted not just their day to day lives but their future possibilities. Many needed to borrow simply to get by and over time this created barriers in all areas of their lives, creating a vicious cycle from which few seemed positioned to escape.

**Criminal Records and Access to Records Suspensions**

Approximately 15% of participants indicated that they had criminal records, typically for relatively minor offences. For many interviewees, the charges were a lifetime away, committed when they were much younger and they had subsequently turned their lives around. For example, Gary explained how his life changed when he committed credit card fraud with some fellow students. The incident has shaped his life ever since, limiting his employment and leading him to live a quiet, simple life, “I want to stay home. I don’t want to get into any trouble.” Meanwhile, reflecting on the fraud she committed as a youth, Denise recalled the moment she committed to a fresh start:

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20  See, for example, [http://johnhoward.on.ca/download/the-invisible-burden](http://johnhoward.on.ca/download/the-invisible-burden) which highlights the barriers to employment, education and training that result from conviction and non-convictions records.
I didn’t like that jail scene … I didn’t like that worry, worry, worry … The last straw was my [family] had to come to court … It broke my heart to see my [family] crying on the stand … Why did they have to go through that because I’m an idiot? Right there, I was not doing it again.

And yet the charges continued to cast a shadow over their attempts to progress, limiting employment, education and even volunteer opportunities, and keeping them on assistance longer. In Gary’s case, he struggled to establish secure work over two decades as the conviction was a major barrier to sustainable employment. As he noted, “I do get jobs here and there” but this work was typically limited to temp. agencies. Even if there was no criminal check initially, once there was a chance for the contract to become permanent after 3 months, he was let go. As a result, his longest spell of employment over the past two decades was little more than 6 months. Compounding his struggle, lacking support and guidance, he misunderstood the process and although the offence happened so long ago it still has not been pardoned:

I didn’t know the probation starts after you make that payment … I didn’t know that. I thought the probation would start there from that day right after.

**LIVING WITH CRIMINAL RECORDS**

It’s indictable up to six months if you lie on a resume … You go for an appointment now, an interview, you’ve got to be straight up when the question is asked, ‘do you have a criminal record? ’ ‘Yes, sir, I have a criminal record.’ You know you’re not getting that return phone call … You’re like a mushroom with a rock on top of you! (Marvin).

I got myself in trouble with some fraud charges, credit card issues. It’s been on my record … I do get jobs but it’s not consistent … The longest I’ve had is maybe six months (Gary).

I’m not going to lie, if I had a business and I saw somebody that had a criminal record and somebody who didn’t, I’d probably look at the person that didn’t. But in the situation I am now I would probably look at the person with the criminal record because they want it so much more. I think that they would try harder to do a good job … I think everybody deserves a chance no matter what … Don’t write them off completely because of something that they did (Denise).
Similarly, Denise explained that employers were not interested in hiring a person with a criminal background, “It’s just hard trying to get a job when you have a bad background … Every time I went for an interview I never got called back.” For Marvin, what he described as an ‘alleged’ domestic incident, has been a major barrier to finding work. While he had been able to find work previously he understood that a change to the law made not declaring a criminal record on a job application an indictable offence. As a result, despite supportive caseworkers, he felt trapped on assistance and disillusioned about even participating in training programs:

I went to some employment programs … After a while, it was just a waste of time being there. Having a criminal record, all of the programs, all the training, no matter how dynamic your resume looks, when you’ve got to answer that one question, you’re not getting that return phone call.

Prior to his incarceration, Kobe was doing well, with an apartment, steady job and no financial issues. His criminal record changed the direction of his life. As well as facing barriers to employment, he also disclosed applying for a volunteer position but being refused as a direct result of his background. Several interviewees indicated that their caseworkers had helped them secure a pardon, either by connecting them to a supportive agency or helping with costs. Some were knowledgeable about the process and confident that OW would help:

I can get a pardon this year. Hopefully that will take off some of the burden … You have to wait five or six years and then you start your paperwork and it pretty much will expunge everything … And Ontario Works also helps with that as well too. So, they’re going to be helping me get the pardon (#009).

Angela, meanwhile, who declared past involvement in the criminal justice system as a result of a fight with her ex-partner, had commenced the record suspension process. She explained that she found out herself online that OW helps with the suspension process and eventually raised it with her worker:

I ended up paying a little bit of money towards another pardon department and lost that money because I wasn’t aware that they paid for the pardon to a certain society … I guess because it was so expensive, I just didn’t think that they’d do that.

However, others, saw no way clear path forward. For example, Marvin did not believe that he was eligible for a record suspension, and that the costs were beyond his reach anyway.
Stigma and Discrimination

Across the interviews people also spoke powerfully about their feelings of stigma at having to turn to assistance and the kinds of discrimination they experienced in the labour market and elsewhere which made it harder to progress. Some participants reflected on their direct experiences of being treated differently because they were on OW. Jackie, for example, highlighted the barriers she faced apartment hunting, noting that, “They see you’re on social assistance and they think you’re just a cheque collector at the end of the month. You’re a bum … Anybody who’s on the system is barely a human being.” Meanwhile, Daniella recalled being publicly questioned about her status on OW, leaving her feeling judged:

The [optician] receptionist gives me the dirtiest look ever and looks at me as if I had robbed her … ‘When did you start OW? … because you have to be on it for a certain amount of months before I can do the eye test’ … No matter how I look or present myself, if they know I’m on OW, they automatically see this person because I’m Latino, I’m Indigenous, I’m a woman and that’s all they end up seeing. I really hate it.

These experiences echoed and reflected the deeper societal stigma that participants were well aware of. Captured graphically by Tracy -- “People look down upon you when you’re on it. They think you’re a low life” -- numerous interviewees shared their belief that people on assistance are seen as “welfare bums,” and “losers,” who are “taking away from society.” Perhaps most powerfully, stigma was also evident in participants own feelings of shame and disappointment at receiving assistance. They spoke of being “embarrassed” and “ashamed” and many expressed shock at seeking support they never imagined they would need:

It never occurred to me that I would at any time use that service because I was unwilling, but I was forced because I needed that assistance … I was so ashamed (#036).

It was probably the most difficult thing I had to do … I felt shame, taking away from someone who probably needed it more than me. I kept it very private because people say, ‘oh, you have so much education, why are you doing that?’ I didn’t want to explain my health reasons. It really affected my self-esteem (#031).
LIVING WITH STIGMA AND DISCRIMINATION

I can honestly tell you I don’t know of anybody who is on social assistance that’s proud of it … When you go to the office you don’t want anybody to see you (Gary).

There’s a big stigma about being on OW… A lot of people are afraid of telling their story about how long they’ve been on it because they’re judged, it’s all a stigma, ‘you’re a welfare bum’ or ‘you’re just a welfare user’ and that’s how people see it (Richard).

I felt low. I felt almost ashamed, like, ‘again, really?’ That’s how I felt. It’s not something that I’ve actually mentioned until today. You’re asking the questions, so I am answering it, but I’ve never spoken about it (Deon).

I don’t want to tell my problems to anybody. I’m talking to you now, I don’t go around saying what I’m saying to you. I’m ashamed (Tony).

Every time I land a job, there are people who get paid over $15 and there are people that get paid under $15. The people who get paid over $15, are always, always white. The people who get paid under $15 are always not white (Michael).

I was really surprised when I arrived here … I was being told over and over there are two things very important to employers here: One is Canadian certificate, one is Canadian experience. At the same time they kept telling us that there is no job discrimination in Canada which is rather funny (Shabnam).

Employment discrimination among trans people is incredibly high. Additionally, a lot of people are not able to be out as transgender at their jobs, so they end up having to live a double life where they live as their chosen part of their identified gender with their friends and at school and then they go into work and have to live as their legal gender instead. And it is extremely mentally toxic (Olivia).

For those returning to assistance, or enduring longer spells, such feelings were especially strong. Marco quickly left assistance even though he was struggling with substance abuse issues. When he inevitably returned, he was able to find help, but had to overcome feelings of profound failure – “My whole life fell apart because of the drugs … I looked at it as failing. Failing at everything because I’m back on assistance.”
Describing feeling low at having to return to OW, Deon revealed that he had never told anyone -- not even his caseworker -- because no one ever asked. Many other participants indicated that they guarded their receipt of social assistance like a secret, refusing to confide in friends, family and even partners:

My girlfriend doesn’t know. The other day she was like, ‘how do you do it, you know?’ … She’s saying, ‘I know you’re on welfare’. I said, ‘I’m not on welfare. What are you talking about?’ She’s going to find out (#044).

I don’t really like to tell people that I’m on OW. I feel embarrassed because some of my friends are better off than I am financially. I just keep quiet (#013).

Finally, a number of participants described how their efforts to find or maintain work were impacted by discrimination. Participants highlighted the discrimination they experienced because of their race, newcomer status and, in one case, because they were transgender. For example, Felecia highlighted the workplace discrimination she experienced that led her to leave her job and the impact it had on her:

I’ve seen emails where he’s said about his dumb assistant from [country] and the responses … It’s just every day sort of eating away at you, different things like that … It was a very difficult, emotionally and mentally challenging time … I handed in my resignation … It was my mental and physical health at stake.

The challenges facing newcomers were captured succinctly by Shabnam. Since entering Canada as a skilled worker, she has been unable to secure employment, and, to her bewilderment, has even been denied volunteer positions. In stark contrast to the welcoming vision of Canada that was sold to her she has lived a much harsher reality, with employers placing little value on her international credentials and experience. Explaining her situation, she posed a difficult question:

They claim that there is no discrimination [but] I’m sure there is discrimination. I can see it every day … I didn’t expect Canada to be like this …. If you have been working here even for a couple of months in a Tim Hortons, it will be more welcome as Canadian experience than the experience you have had in your country as a professional. If it is not job discrimination, what is it called?

Meanwhile, Olivia provided insights into experiences of transgender individuals, noting both barriers to finding work and being misgendered in employment:

A lot of trans people struggle with being out on the job, whether they want to be out or whether they are unable to be out or whether they tried to come out and have been forced back into the closet by their co-workers reactions … They try to be as transgender to their boss and their co-workers, but because they don’t look a certain way or because they don’t sound a certain way, their transgender status is not taken seriously or is not accepted by the workplace.
Given their recent growth on the caseload, the experiences of older workers were especially noteworthy. Research confirms that older workers are often judged by employers as less capable, less ambitious and hardworking and less able to adapt.21 For these and other reasons, accessing employment can be challenging. Reflecting this, older participants shared their experiences with discrimination in job search and interviews. Tony, for example, described how an interview that seemed to be going well suddenly changed when one of the interviewers pointed out his age -- “That’s when everything changed … Instead of looking at my knowledge, they look at my age” Marvin and Kathy shared similarly discouraging stories:

Even to get a job at this stage of the game right now is pretty tough … When you start getting into your late 50’s, applying for a job, people are really looking at what can I get out of this person … It’s definitely a challenge being employed at my age, or being retrained and employed.

You go for an interview, you show up, and it’s, ‘oh you’re not 30 years old, you’re mature, older, we’re not looking for that’ … You lose some confidence. Your skill set is still good and you are still capable, but it’s hard to bring that across when you haven’t had stability in work … It’s frustrating. In my head I know I can do it. I know if someone gave me a chance and it was a good fit and it was a good environment, things would be great.

Based on her experiences, Kathy suggested having specialized workers for older jobseekers believing that they would better understand the needs of an age group that wants to be self-sufficient, but faces challenges accessing jobs and may face increasing health issues and the transition into retirement. Others noted that while there were targeted employment programs for youth and newcomers, there was almost nothing for older workers who may need access to new labour market experiences and skills.

Since the introduction of Ontario Works in the mid-1990’s, numerous reviews and reports have repeatedly highlighted significant challenges and limitations and outlined key steps to improve income adequacy, reduce administrative complexity, eliminate unnecessary rules and practices and to establish more client-centred and supportive relationships. In addition, they have also argued that changes to social assistance must be considered within the broader context of income security, and that many benefits and supports, such as housing allowances and dental benefits, should be enhanced and delivered outside social assistance.

As part of the interviews, participants were asked to describe their experiences with OW. This section briefly captures some of the general findings and, where applicable, highlights issues that were specific to or of particular importance for singles. To a large extent it confirms the findings of previous work with, for example, an overall perception that the system was administratively burdensome and there were rules and practices that acted as barriers to progress. In addition, given the critical importance of interactions with workers, reflections on these relationships were central to the feedback provided. Building on the identified strengths and limitations, the section suggests some key elements of service planning that were most valued by participants and critical to both positive relationships and outcomes.

Making a Difference

Many participants spoke about the important role that social assistance played in helping them to stabilize or turnaround their lives. Despite the inadequate levels of financial support, with nowhere else to turn, participants frequently expressed sentiments such as “[OW] helped me get through when I needed it most” (Gregory), it “helped me to keep afloat” (Gareth) and “it was a great relief” (Jacub). For Karen, who had left her job after a debilitating bout of depression, the decision to seek assistance was difficult to come to terms with. However, despite her initial reservations, she explained that social assistance provided the time and space she needed to recover and rebuild. Supported and provided with helpful resources, she eventually left assistance to return to school. Other interviewees highlighted the positive impact of employment programs and other supports. For example, as an older worker, Richard felt that he benefitted from a course that addressed how resume writing has changed and the steps that can help people get back into the workforce. In the case of Deon and Patrick, participation in programs led directly to jobs. Deon had taken advantage of a number of programs over the years which had helped him find work at different times. Now employed in a stable and well-paying job, access to a truck license had proven to be key to his progress:

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That is what I use to this day to feed myself and house myself … In terms of support and people doing their job and great customer service and good people … I did it, I passed, got the license, I got a job … and I was off Ontario Works.

Similarly, Patrick, a teenager whose parents had both died, was immensely grateful that social assistance existed and for the specific role it played in his journey. OW has paid for him to participate in a number of employment programs, including training as a painter and a forklift driver. He successfully completed both and secured work shortly after each. Importantly, a number of participants also highlighted the big difference that seemingly small supports, often only a few hundred dollars, can make. Kabelo explained that after his driving license was suspended, he was issued funds to reinstate it and he was quickly able to find work. While Marco benefitted from a two day “crash course” that provided an essential workplace certificate.

SUCCESS STORIES

Social assistance was there when I needed it … It helped me a lot. It helped me grow. I’m a better person now. I know how to cope with things better (Karen).

I wouldn’t be where I am right now without it. I wouldn’t have a place or… I’d probably still be homeless … I was malnourished and had abscesses in my throat … I got a place and started eating again with OW money … It’s been very helpful. I’m actually really grateful that these services are here in the city (Vicky).

[My situation] has changed a lot. I can eat; I have housing and I get transportation. It was really helpful. Without them, I don’t know what I would have done (Habte).

[The work based] programs are effective. Even if you didn’t get hired on, you still got your foot in the industry. You have basic entry level experience and if they didn’t hire you, you could go somewhere else in the industry and try and get a job (Michael)

They basically implemented everything that they could to actually help me. So in regards to me actually having somebody to kind of fall back on when it comes to financials and funding, I don’t. OW is basically it (Patrick).
Challenges and Concerns

Nevertheless, participants also described a variety of challenges and concerns. Most often interviewees highlighted issues with limited health and dental coverage, excessive information requests, and specific rules and practices which were a barrier to progress. Importantly, a number of participants believed that singles faced specific disadvantages with regard to certain policies and practices and accessing benefits and services compared to others. Indeed, approximately one quarter reported that they felt disadvantaged accessing programs compared to other family types. For the most part, this appeared to reflect the lower financial benefits they received, but some spoke about either the absence of targeted information or even programs for singles, especially older singles, compared to youth or the sense that they were too easily overlooked. As Daniella explained, “there is this idea that you don’t have to spend a lot of money or you don’t need a lot of things because you’re single and you’re just one person. But that’s not the case.” Similarly, Gabriella stated that the system assumes single people need less money and support and that’s a “form of discrimination:"

You still are going through a difficult time and my situation might be different from yours and they just sort of lump everybody together … Each case is different and should be treated differently.

Limited drug and dental coverage

Although insufficient drug and dental benefits can be problematic for all people receiving assistance, the limited income of singles magnifies the financial struggle, creating additional challenges and impossible trade-offs. Participants described how the lack of appropriate coverage jeopardized their short and long-term health, acted as a barrier to employment and forced them into impossible decisions about whether to pay for food or medicine. For example, Vania stressed that paying for medicines means eating less, while the absences of sufficient medication left Peter in constant pain:

Food is expensive and medicines are expensive. Medicine just goes - $83 only one that I have to pay, $83 and I have to buy other ones. It comes out to $100, sometimes $140 … Put more medicine into the coverage … That would be great because that money that I use to pay, I can save it for myself and buy food.

I was taking three [pain killers] a day and then the government all of sudden said I couldn’t do that so he had to cut me down …. They only give you 30 per month … When I’m sleeping that five or six hours I’m not taking no medicine. It’s gone. I’m in so much pain at night it’s crazy, crazy pain … [I’m] trying to balance the medicine but you can’t when you don’t have enough medicine to balance.
Mark and Olivia explained that although the coverage was limited it was essential and the lack of significant transitional benefits, coupled with the absence of a provincial drug plan for low income people over 25, was a barrier to leaving assistance:

You have mental health issues that are perfectly controlled by taking medication, but then you can’t get the medication you need for three months after you get the job or six months after you get the job, if they even give you benefits.

If I was not getting coverage through Ontario Works, I would be paying $430 for medication every month which is completely unfeasible. I’m very grateful that I get prescription coverage, but it also makes me very nervous that … I would not be able to afford medication that I need to get by.

Participants expressed similar concerns with regard to dental services. As the only available coverage was for emergency removals, they were left to deal with significant pain or the consequences of an extraction. Recounting their experiences, Richard and Josephine explained how this approach left them with few options and had lasting consequences:

[The dentist] told me the best thing to do would be to get a crown and a crown is $2,000 or something … How is anybody supposed to pay for that? … OW has something for emergency but it’s only for extractions … You could save that tooth and have it fixed, but you can’t afford to.

It doesn’t cover dental work. It only covers friggin pulling it! I was in such severe pain. I’m now missing two and soon to be another tooth. I’m going to have to spend $2,000 each on getting it repaired. It’s just perpetuating poverty. Now when I have a job … I have to pay extra for the problems I had while I was on.
CHALLENGES AND CONCERNS

They cover the basics but not the higher-level medicines when you have these kinds of diseases ... I'm trying to survive. I asked my Mom to help me. I asked my sister to help me. I asked my uncle to help me to buy my medicines ... I have to hustle for the medication, that's my life, hustling for medication (Fawzia).

My diabetes for instance ... They'll supply the insulin, but they don't give me the needle tip. I have to buy the needle tip out of my money. Why would you approve that medicine but not the tip and they're like what $20 or $30 a box. I don't get that (Peter).

Dental care is essential ... We don't fix things, we put a band aid on, so when it's an emergency we'll take care of that emergency but it doesn't address the underlying illness, and dental health affects every other aspect of your health ... Not to mention the shame and stigma of people who have bad teeth face (Mark).

Dental should be part of health care in general. Every other part of your body is covered except your eyes and teeth ... How am I going to get a job when I'm missing a front tooth? ... It becomes a cycle, they have no confidence, they can't get a job ... and they're stuck on the system (Richard).

There's so much welfare discrimination ... Name a ... person not on welfare that would show their bank account statement. No one. We're all getting $600. You know that's not fair. We wouldn't be there if we had savings. We're broke (Josephine).

There are good people on assistance that are genuinely needing of help. Don't make it hard for those people to prove that they need help. Cut down on the paperwork ... If somebody needs help, give it to them. Don't make them like a circus, jump through hoops. I don't know if they do that on purpose to dissuade some people ... They figure some people will give up so we have less people to help (Mya).

The job market is changing and welfare is still in the dino. They are still faxing when everybody is emailing. Let's get into the future now, come on! (Michael).
Echoing these concerns, other participants noted the importance of addressing dental health given its connection not only to overall health but also to the ability to find employment. Gabriella described how she had to leave education due to health issues that resulted in her developing significant gum disease. The disease has impacted her self-esteem and ability to participate in training programs or find work as she avoids environments where she might be questioned about her appearance. Finally, Mark, noting the need to move beyond emergency solutions, summed up the feelings of many participants:

Dental health affects every other aspect of your health … Not to mention the shame and stigma of people who have bad teeth face. Let’s start giving dental to people that need it. Not just kids, not just people who are on ODSP, everyone who needs it. That would make such a difference.

**Information**

Numerous participants highlighted concerns around information, from the initial application to ongoing requests, as well as the method of communication. Reflecting a broader feeling about “old fashioned” communication methods, Jackie noted the costs and time associated with faxing rather than emailing:

Who faxes? I can’t find a fax machine anywhere … I can take a screenshot on my phone and it turns into a PDF and I can email it to you in seconds and it doesn’t cost me anything. Faxing costs a $1 per page.

Several participants acknowledged issues of privacy and confidentiality, but, like Olivia, felt that these could be resolved -- “[Some organizations] will send you an email that says ‘we have correspondence for you. Please call us at your convenience’ -- and that offering people a choice was important. Olivia also noted privacy concerns with existing methods, commenting that mail can go missing, be picked up by roommates or most worryingly a landlord: “I don’t want my landlord to know that I’m on welfare. So having clearly addressed mail from welfare that might accidentally end up in my landlord’s mailbox, does not make me feel secure.”

Others highlighted the amount of information required and the impact of this. Exclaiming that you “sign your life away” at intake interviews, Deon felt that the provision of bank statements was especially intrusive and should be replaced with a simple Record of Employment. Meanwhile, Mark noted concerns about the costs and impracticalities of certain requests:

I have this envelope of documents that I have to send to them, which is going to cost me $10. I asked if I could just bring it over to their office which is right near my house and they’re like, ‘no, no, that’s not possible. You can take it to your local office, they may mail it for you.’ [Why] are we making so many barriers in the system to people? It should be easier.
Interestingly, for some, burdensome information requests marked a sharp contrast with the information they were provided, reinforcing their perception of a system that was out of balance. For example, Tony felt strongly that there was a need to make people aware of all the benefits and services that are available, especially for singles who are known to be in deep poverty. Similarly, Gabriella, despite her documented health concerns commented that she was not told about the additional money available for dietary needs. Although Gary got most of his jobs through temporary agencies and had to buy safety equipment which would then be deducted from his pay, he explained that he was not made aware of financial help towards these costs. Finally, one participant noted that information sessions were too generic and suggested that they could be targeted so that “people who are on OW who are single … [receive] information that is geared towards them” (#051).

**Rules and Practices**

Numerous participants highlighted the challenges they faced as a result of rules and practices that made little sense or acted as barriers to progress. For example, although two thirds of singles on the caseload have attained a high school education or less, and unemployment rates are known to be higher for those with lower educational attainment, OW policy directives restrict single people from receiving assistance, if they are attending a post-secondary institution and in receipt of OSAP.²³ For those who saw a return to education as the best way to build a sustainable path out of poverty, this barrier made little sense. As Mark commented:

> People that have children can still get assistance. People who are on ODSP can still get assistance … The fact that we disqualify [single] people from receiving any kind of assistance because they go to school isn’t sensible.

Most frequently, reflecting financial struggles, interviewees noted their frustrations at the amounts that were deducted when they did find work as that made it harder to get ahead. Several participants pointed out that this was counterproductive as it either acted as a disincentive to work or made it more difficult to disclose small amounts of additional income. Most importantly, such rules hindered the ability of participants to develop open and supportive relationships with workers. Others spoke about the challenges that resulted from overpayments that arose when their circumstances changed. The fluctuating income made juggling their bills even more difficult.

**Going the Extra Mile**

As participants reflected on their experiences with OW, there were many accounts that described caring and knowledgeable workers going “the extra mile” to help at critical moments in their lives. For example, Felecia was full of praise for the emotional and practical support provided by her worker, “She was really supportive emotionally and understood my situation … She can’t do anything about the amount of money I get, but she can listen and give you

²³ [https://www.ontario.ca/laws/regulation/980134#BK9](https://www.ontario.ca/laws/regulation/980134#BK9)
moral support and she did that.” Several themes characterized their experiences with workers, such as being approachable, non-judgmental, supportive and knowledgeable. Frequently, they explained how workers helped them access benefits and supports they were unaware of and helped them to identify their best path forward. Yeshe, for example, described the “complete guidance” he received as a refugee seeking to enhance his education and to pursue a career, while Richard reflected that his worker “encouraged me to look at different ideas” and think “where do I want to go from here.”

GOING THE EXTRA MILE

Honestly right now, my caseworker is amazing. Every time I call her and ask her about anything, she’s always telling me about extra things …. She always goes the extra mile I guess is what I’m trying to say (Jennifer).

I got a lady she was so amazing … She was different because she treated me like a human being when I needed to be treated like a human being … First of all she was a great listener and listened to everything that I had been through and was currently going through. Second of all, she apologized for everything I had been through in the system. And third of all, she gave me a list of places and resources to help me get a job. She gave really good advice and just treated me like one, a human being and two, like I was her only client (Felecia).

She was very supportive. She said, ‘you’re not less because you ask for help.’ She said everybody falls sometimes and they need help getting themselves back up. She was very caring. I appreciated that. She knew that my self-esteem was way down … I wasn’t forthcoming with a lot of information and she said you’re here to get help, just take the help. There’s no shame in it (Gabriella).
**Challenges and Concerns**

Numerous participants explicitly recognized the demands and limitations that workers themselves face, acknowledging the stressful nature of the job and the challenges associated with large caseloads, restrictive rules and inadequate benefits. For example, Maria stressed that despite good intentions "workers don’t have time. They’re overwhelmed," while Mya noted their hands are tied by too many rules. There was frustration, however, at experiences where participants felt that they had not been adequately listened to and supported, or there was a lack of information and responsiveness. Importantly, in the context of the stigma noted earlier, a handful of participants noted how negative interactions prior to meeting their worker impacted them.

Overall, in terms of dealings with workers, as evidenced by the following quotes, participants highlighted three consistent themes:

- Unequal relationships as workers are gatekeepers to financial and other supports;
- Concerns about the limited number and transactional nature of meetings; and
- Need for more proactive sharing of information on available benefits and services.

The [intake worker] sat the file down and called me the wrong name … If you don’t even know who I am …do you really care what I need to get off this system? … You’re going to do the exact same thing every time you walk in the room, ask for this piece of paper and this piece of paper (#002).

I sometimes feel, should I be reaching out to her and say, ‘hey, do you know of anything else I could be doing? Do you have any other suggestions for me or am I on the right track? Am I doing the things I am supposed to be doing? Or, am I aware of all the programs that I am entitled to or that would benefit me?’ I’m the one that keeps going in and asking because I have to repeat my story each time … It feels like we keep repeating the same conversations (#045).

She’ll give me the information, but she doesn’t really come to me and [ask], “Oh, what are you planning on doing” or something like that …I feel like if she did say those things …then it could maybe turn into a bigger conversation … The next time you call, just be, ‘okay, I know you’re calling about this. I’m going to get that information for you, but along with that I remember last time we spoke you were looking into getting into a program. Did you find out about that? (#013).
CHALLENGES AND CONCERNS

There is definitely a lot of power dynamics within OW with case workers and the participants … It’s a myth but it’s like whether or not I will receive benefits or not … I do not have the same amount of power as they do in terms of being able to communicate if they are being unprofessional or inappropriate (Daniella).

You have a job where your job is to help people. Your job is not to make me feel like I’m coming to you with a mug, shaking it. I’m not pan handling (Deon).

They should take people’s complaints more seriously … This is not a game for the person who does not get their cheque. This is not a joke … They really need to be more focused on giving you stuff than holding it back (Michael).

Cultural differences play an important role but whenever I make a mistake, she doesn’t try to understand or try to advise me. She’s always aggressive being the fact that I’m asking money and new to the country, it does feel very sad you know, make me feel sad (Amadi).

Underpinning these was the desire for a supportive and open relationship that would help them make informed choices. Reflecting on these interactions, the following key elements of service planning were seen as most valuable in ensuring that existing good practices are built upon:

<table>
<thead>
<tr>
<th>Priority</th>
<th>Participant Perspective</th>
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<tbody>
<tr>
<td>Understand people’s lives</td>
<td>I know this might be an uncomfortable situation for you or you might be [going] through a crisis right now … but I just want to let you know that this is a non-judgmental place. However you present yourself or communicate to me is perfectly fine because that’s the way that’s best for you. If you ever feel like I’m imposing any sort of judgment or any other staff is imposing judgment, please let us know because we take that very seriously. That’s not the impression that we want to give to you. We want to give [you] a safe space and an open space (Daniella).</td>
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<tr>
<td><strong>Get to know the Whole Person</strong></td>
<td>[They] need to get to the core of what’s really going on with us, not just get us back to work … What’s really going on … Everybody is able to be counselled some way … It’s needing to know people rather than what jobs they need. Once you know the person, then you’re going to know more about what suits them better (Gareth).</td>
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<tr>
<td><strong>Show Empathy</strong></td>
<td>You’re dealing with human beings who have problems and if you can, in the midst of doing your work, just be human … Try and understand where the other person is coming from. There’s a reason why the person is there. I don’t think anybody chooses to be there. Things happen, a little empathy, be kind (Gabriella).</td>
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<tr>
<td><strong>Build Trust</strong></td>
<td>Once you get to your worker they need to be able to listen, take notes, bring it back in the conversation another time … Say a month later, ‘hey, remember when I did the intake we discussed so and so, so how is that going?’ Check up on it, make your notes, check up on things … You can build trust. Listen to the person, cater to them. [Don’t] do a carbon copy of the next person (Felecia).</td>
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<tr>
<td><strong>Ask Open Questions</strong></td>
<td>Just say, ‘How are you coping with the changes in your life or with the sudden loss of a job or being in a new country? Ask open ended questions. How are you? Because there’s, ‘how are you? Oh, I’m doing good, give me my cheque, bye.’ And there’s, ‘how are you coping? How are you managing your stress now that you’ve lost your job? What are the next steps you’re going to take to ensure that you’re healthy enough to get another job or to thrive.’ (Josephine).</td>
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<tr>
<td><strong>Listen and Probe</strong></td>
<td>You already feel nervous and weird going in there, so somebody who is pleasant, really listens to you and understands what you’re going through and just tries to have sympathy and work with you … Don’t be, ‘Okay, what’s your name? Did you find a job? Be, ‘So how’s the job hunt going? Oh, it’s not too good. Okay, is there anything that I can help you with? … A little bit of sympathy and understanding for people who are on it because not everybody is abusing it and not everybody wants to be on it. They’re there to just survive (Denise).</td>
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<tr>
<td><strong>Share knowledge/resources</strong></td>
<td>I would just give them whatever information I had … I’d say if you need help, this is where you go. Point them in the right direction because sometimes they don’t ask … Maybe they’re too embarrassed … Encourage them (Gabriella).</td>
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<tr>
<td><strong>Connect the dots</strong></td>
<td>Ontario Works helped cover the medication but they didn’t say, ‘hey, you’re on this medication. Do you want some therapy, do you need to talk to someone? … I was living with mental health until I was 29 without being aware … so that was contributing to my inability to maintain a job (Josephine).</td>
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<tr>
<td>Co-develop Plans</td>
<td>Find out from the person what you can do to help them rather than you come up with a solution … Everybody is different right … Everything has to be tailor-made (Gareth).</td>
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<td>Invest in Sensitivity and Anti-Oppressive Training</td>
<td>There needs to be better training for case workers that it’s not just the policy and legislation and the procedures that they need to be trained on and the system but also like how to properly interact with people (Daniella). Workers need more workshops and training to learn to attend to people ... They need training on respect, sensitivity and discrimination. They should treat person A the same as person B (Esther).</td>
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SECTION 4: FUTURES

Just as they took different pathways onto assistance, participants also shared different hopes for the future. Some had big plans, with dreams of establishing non-profits, publishing books, pursuing education and starting businesses. Many expected to find work soon and several hoped to give back by volunteering and helping organizations that had helped them progress. Despite their difficult current realities, a sense of positive momentum infused these conversations. For others, however, the future consisted of smaller steps to stabilize their lives, or they saw no clear path forward.

HOPES LARGE AND SMALL

I am always closing the gap [between] my aims and my dream. I am getting closer to my dream. I feel these moments are the happiest moments. I can see my future (Yeshe).

I hope I have the white picket fence. I hope I have a house ... If I could paint a perfect picture for myself in three years. I would love to be a homeowner, have a good job that I enjoy doing and hopefully be married (Jennifer).

I just want to live comfortably, look outside a window, see flowers, trees, the lake and live happily ever after (Tamas).

To have peace, to be able to live peacefully. That’s the whole thing when I think of my life (Amadi).

If I’m still on the system, it doesn’t matter to me. As long as I’m on a stage where I can be fully ready to move on from assistance. That’s where I see myself. Good mental and physical state ... I don’t want to be in a crowd and have an anxiety attack ... I want to wake up in the morning and not have every bone crack (Jackie).

I don’t want to stay on it forever. I want to [find] a job, but I really don’t know what I want to do ... I’m looking for stability, but I don’t know what I’m going to do (Jennifer).

I don’t know where my future’s going. I’m trying to stay alive and do the best with my health problem that I can to aid my life. Emotionally, if it wasn’t for my mom and my girlfriend, I would be in a shambles. ... You wake up, you see all the progress around you and you can’t make that one [step] forward. Finance, health, emotions, just holding you back (Marvin).
Regardless of the futures they imagined, participants identified the most important key changes, within social assistance and income security more broadly, that would help them progress and make a more effective and humane system. Echoing the concerns identified in earlier sections, the majority of participants pointed to the need for action in the following areas:

- Increasing social assistance rates;
- Addressing the crisis in affordable housing;
- Transforming the culture of social assistance to encourage more supportive relationships with workers;
- Treating the whole person and recognising that for those facing multiple challenges, progress may involve many small steps over time;
- Simplifying information requests and eliminating rules and practices that act either as barriers to exiting assistance or make it harder to make ends meet while on assistance;
- Enhancing coordination and integration between different human services; and
- Supporting health while on assistance and transitions off assistance by enhancing drug and dental coverage.

Given the recent introduction of a provincial pilot, participants were also asked for their perspectives about how basic income might impact their lives. Some 85% indicated that they saw positive possibilities for themselves. Those who were opposed, had significant reservations or were uncertain, believed that strict eligibility and participation conditions would be needed. Interestingly, there were a significant number of participants who were supportive of a basic income and noted various positives for them, but were concerned about the negative impact it might have on other people.

However, as noted above, a large majority of participants expressed a strong interest in and support for basic income. Strikingly, in a number of the interviews, simply describing the idea of a basic income transformed the interviewees’ body language, shifted their mood and opened up new possibilities. They spoke about it being a “miracle” (#003), offering them “more dignity, less worry” (#038) and “breathing room” (#009) and noted that it was both transformative and timely:

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24 The Government of Ontario is testing how a basic income might help people living on low incomes better meet their basic needs, while improving their education, employment, and health. It will measure outcomes in areas including food security, stress and anxiety, mental health, health and healthcare usage, housing stability, education and training and employment and labour market participation. The pilot provides participants with an income based on 75% of the Low Income Measure (LIM), plus other broadly available tax credits and benefits, which translates into $16,989 per year for a single person, less 50% of any earned income.
[It] would be a game changer … There would be a sense of comfort, there would be a sense of security. That would give me so much more time to actively search for employment, but it’s more than that. If my search doesn’t work out, I am going to be okay. It’s my safety net (#051)

This is the time for basic income. At one time, social assistance was only for needy people. Now it’s not like that … The picture that they had years ago, the time has passed. I agree with the need for a basic minimum income. I meet many people who are working and not doing well. That has to change (#035).

Participants identified a range of concrete benefits such as a simpler process with less paperwork, but more powerfully they also described how it would be “humanizing,” offer “dignity” and “hope” and remove the fears and uncertainty that plagued their daily lives.
I would feel like a human being. I would feel like I have a bit of worth … A basic income that pays my rent, gets me a metro pass every month. I don’t have to worry about do I get this or do I get that. I would just feel more human, to be honest. I’m all for it (Jackie).

It would give me peace of mind that I was still able to have shelter, food, to basically take care of myself. Instead of investing all of your thoughts like, ‘I will never be able to pay my rent or have food.’ If you have basic income, that takes that stress and that worry away. It gives you the opportunity to be more constructive. It’s self-care. Basic income is self-care. It allows you to have the time to put your energies and your resources into finding work, to finding something to better yourself (Kathy).

It would give me financial stability. I could sleep at night, not having to worry if I’m going to have enough to pay what I need to pay for. It would be a breath of fresh air to me personally. It wouldn’t be like, ‘oh I can buy those new hundred dollar shoes.’ I would still buy at Payless. I would still go to Walmart. It would just mean the world to me (Jackie).

I feel like it’s definitely a step forward. How can that be bad? If somebody is experiencing poverty, now the government is basically stepping in and saying, ‘hey, listen, if you make under a certain amount we’ll help you get you over the line of poverty.’ If there’s no strings attached, how could that be a bad thing? … What is there to lose? That’s amazing (Patrick).

It’s going to allow us to live a normal life, to buy whatever you need and to have some savings as well because when you’re on social assistance you can’t have savings. I think that’s going to be a big help … I could put some money in savings and buy some new furniture. I could buy a phone, I can buy other stuff that I need (Nelson).
Importantly, by providing greater stability and security, as evidenced by Mark, participants explained that they would be able to do something that deep poverty makes desperately difficult – shift from surviving to planning:

That’s why there are so many people on and off the system. It’s more a matter of trying to survive when those things happen … Life is much more unexpected when you can’t take the liberty of planning for it. I think that happens to poor people. They don’t have the liberty of planning for life because it just happens.

Indeed, numerous participants described how basic income would remove barriers to employment that exist with social assistance, and encourage returns to school and business ventures, and enable them to care for aging loved ones, or to volunteer:

I’m a simple person. I don’t expect a lot. I don’t need a lot. I’m not this extravagant fancy person. I’m just me. I would still keep doing what I’m doing. I would still keep pushing myself to be the best I can be and try to find that amazing job that’s going to be good for me (#013).

That sounds like a really good idea. Because on assistance, you can’t go to school. They cut you off as soon as you get OSAP or anything. To know that you can go to school and work and not lose all that money cause you could go to work part-time (#018).

I would be a lot more able to support myself especially if I was working and still had basic income. I’d also be able to invest in starting my own business … It would definitely help the wheels start turning more (#019).

Finally, participants pointed to the broader ripple effects of addressing the individual and social costs of poverty that result from longer stays on social assistance, worse health and incarceration. A key part of ensuring the broader benefits of a basic income was the critical need to maintain or even expand current programs and services. Participants noted that basic income should not mean the erosion or loss of other health and human services. These were seen as vital elements in helping people to stabilize their lives and plan and build for the future.
SECTION 5: CONCLUSION

Although numerous reports over the years have highlighted systemic weaknesses with social assistance and a number have done so through the lens of lived experience, relatively few have documented the experience of singles on assistance. While this report highlights numerous challenges, four points, perhaps, stand out:

• First, by highlighting the multiple and interconnected impacts of deep poverty on all aspects of individuals’ lives, the research underscores the need to raise rates inside assistance and enhance financial supports outside assistance;

• Second, given the levels of poverty and isolation, as well as challenges with poor and deteriorating health, the research supports the needs for more empathetic and supportive relationships with workers, with the provision of wrap around supports and enhanced human services coordination;

• Third, in confirming that singles are staying on assistance for longer than was previously the case, the research underlines a simple but significant point – that detailed assessment of need, rather than family type, should be the primary driver of services; and

• Finally, the findings provide support for approaches that recognise that for those facing multiple and complex challenges, progress might involve many small steps over time and supports for multiple facets of life, such as housing, health and education and training. As a result, resources need to be in place to support the whole person.

Similar suggestions have been made at other times. Most recently a report to the province -- *Income Security: A Roadmap for Change* -- set out a 10-year plan for a modern, responsive and more effective income security system. With regard to social assistance, the Roadmap envisions a transformed system that is fairer, simpler and client-centred, with a sharp focus on social inclusion, helping people overcome barriers to moving out of poverty, and securing training and employment opportunities. To do this, among other things, it recommends dramatically increasing social assistance rates; improving rules and redesigning benefits to remove barriers to progress and making essential health and dental benefits available to all low-income people to make it easier to leave assistance for employment. The experiences of participants support these actions and as efforts to reform social assistance and income security continue, underline the point that both policy directions and on the ground practice must better respond to the pressing and often complex needs of singles.
APPENDIX 1: RESEARCH PARTICIPANTS AND INTERVIEWS

Participants

Over the course of 2016, almost 69,000 unique singles -- individuals who had applied to OW without any dependents or a spouse -- received assistance at least once during the year. A randomly drawn sample of 400 singles was generated. There were no statistically significant differences between the singles population on OW in Toronto in 2016 and the randomly drawn sample. While the 51 research participants were comparable to the overall singles population in terms of average age and the distribution of age, there were notable differences with respect to sex, country of origin, educational attainment, and length of time on assistance. Most notably, males, people born outside of Canada, and people with less than high school were under-represented among interviewees relative to the overall singles population. Compared to all singles, the interviewees were less likely to have dropped out of high school, but more likely to have high school as their highest level of educational attainment. All singles and interviewees were comparable in terms of post-secondary attainment. The average length of time was statistically comparable between interviewees and the population of singles. Also, the number of spells since 2002 was comparable between interviewees and the population.

In-depth Interviews

Between June and August, 2017, 51 singles who had received OW in Toronto during 2016 were interviewed. Each interview lasted between approximately 1 and 2.5 hours. Interviews were recorded for subsequent transcription and analysis and field notes were taken to provide additional detail. The interview schedule was deliberately extensive, enabling participants to talk not just about their experiences with OW, but their daily lives, work histories, support networks and health and housing, among others.

Importantly, participants were encouraged to share their hopes for the future, including their thoughts on social assistance reform, basic income, and any changes they believed would better support singles on OW. Finally, although there is no unifying “single” experience, the study sought to identify the extent to which participants felt that “being single” was important to their story and either directly or indirectly shaped their experiences.

While a small number of interviews were limited in nature, most were expansive, emotional and compelling. Participants shared their personal experiences and the vast majority, while welcoming and needing the honorarium provided -- to buy food, pay a bill or even support an educational goal -- above all valued the chance to tell their story and to have their voices heard. As Michelle expressed it:

I don’t want the money, I really want to voice my opinion. Hopefully you guys can fix something.
The views expressed in this publication are those of Toronto Employment and Social Services and do not necessarily reflect the views of the Ontario Centre for Workforce Innovation, Ryerson, or the Ministry of Advanced Education and Skills Development.