ACCESS TO AFFORDABLE, HEALTHY AND NUTRITIOUS FOOD (“FOOD SECURITY”) 

FACTS

• “Food Security” is defined as the situation where “all people at all times have physical and economic access to sufficient, safe and nutritious food necessary to meet their dietary needs and food preferences for an active and healthy life”.¹

• Food security is recognized as an important determinant of health.² A lack of food security resulting from economic and geographic barriers has the potential to compromise the health of a significant number of Canadians.

• The World Health Organization estimates that 80% of premature heart disease and stroke can be prevented through lifestyle, including healthy eating.³ Healthy eating can be described as adhering to a diet that is consistent with Canada’s Food Guide, including choosing a variety of foods from the four food groups (Vegetables and Fruit, Grain Products, Milk and Alternatives and Meat and Alternatives) and choosing foods lower in fat, sugar, and sodium.

• Healthy eating is also a key element in human development and health throughout life, from prenatal and early childhood years to later life stages.⁴

• A number of studies have shown that low income households do not have enough income to pay for the basic costs of living, including the cost of a nutritious food basket.⁵ ⁶ Studies of low income households have shown that incomes often fall hundreds of dollars short of household expenses.⁷ ⁸ Since many monthly costs are fixed (e.g. housing, transportation) food purchases are often the budget items where families look to reduce expenses.⁹

• In Canada, “food insecurity” is measured by the number of people who are uncertain of having, or being unable to acquire enough food to meet needs because of insufficient financial resources.¹⁰ A recent analysis of the Canadian Community Health Survey (CCHS) data found that 12.2% of Canadian households experienced food insecurity in 2011.¹¹ This is higher than a previous estimate of 11.3%, calculated in 2007-08.¹²

• The 2011 CCHS demonstrated a clear relationship between income level and household food insecurity, with the data showing an increase in food insecurity rates as income declines.¹¹ Earlier CCHS data (2004) indicated that the ratio of severe to moderate food insecurity was also higher at the lowest income levels.¹³

• In addition to those with low income, several specific categories of people are more vulnerable to food insecurity than the general population. These include single parent families¹⁴, women¹⁴,¹⁵, children¹⁶, Aboriginal peoples¹⁷, and recent immigrants.¹⁷

• Women are especially vulnerable, as their incomes are lower on average than men’s¹⁵ and they lead a disproportionate share of single parent families.¹⁸ Single parent families are generally more likely to have low incomes¹⁷, and single parent families led by females are more likely to have low incomes than single parent families led by males.¹⁵
ACCESS TO AFFORDABLE, HEALTHY AND NUTRITIOUS FOOD (“FOOD SECURITY”)

• Children are particularly affected by food insecurity. For example, 700,000 Canadian children (12.5% of the total number of children in Canada) were living in food insecure households in 2006, and children account for 38% of the more than 880,000 people who used food banks as calculated in March, 2012.13, 19, 20

• Aboriginal peoples, living both on and off-reserve, face particularly high rates of food insecurity. Among those living off-reserve, roughly one fifth of households are food insecure, which is three times the rate in non-Aboriginal households.17 Those living on-reserve and in remote communities are challenged by the high price, low quality and limited availability of nutritious foods. A 2004 survey found that food insecurity rates ranged from 40% to 83% in isolated Aboriginal communities.21-24 More recently, the Inuit Health Survey (2008) determined that almost 70% of adults in Nunavut were food insecure.25

• Recent immigrant households were found to have roughly 5% higher rates of household food insecurity than both non-immigrant households and non-recent immigrant households in Canada in 2007/2008.17

• In addition to the problems presented by low-incomes, evidence points to variety of factors that can influence the affordability of nutritious foods. For example, agricultural policies can influence the price of sugars, grains, vegetables and fruit, sometimes creating a situation where high calorie and less nutritious foods are cheaper to buy than healthier foods such as fresh vegetables and fruit.26

• A survey conducted by the Heart and Stroke Foundation in 2009 revealed wide ranges in prices of healthy foods across the country, with particularly high prices in remote and northern communities. For example, while six apples could be purchased for $1 in Toronto, they cost $7.64 in Rankin Inlet. Similarly, 4 litres of one per cent milk could be purchased for $3.49 in Vancouver, compared with $11.89 in Rankin Inlet.27

• Physical accessibility is another important factor that may compromise nutrition. Poor availability of food outlets offering healthy and high quality well-priced foods in some neighbourhoods and communities can influence what Canadians eat.28-30 Distinct geographic areas where residents have very limited access to affordable healthy food have been identified in several Canadian cities.29,31, 32

• Studies indicate that food banks, which are designed to provide emergency relief from hunger, are frequently unable to provide sufficient quantities of food to meet the requirements for healthy eating.33

RECOMMENDATIONS

The Heart and Stroke Foundation recommends that:

CANADIANS
1. Support and encourage government policies and programs that take a comprehensive, long-term approach to addressing poverty and food insecurity.
2. Support community programs (such as community kitchens, community gardens, and food distribution programs) that promote the local availability of affordable, high quality and healthy foods.

FEDERAL AND PROVINCIAL GOVERNMENTS
1. Establish inter-departmental and federal/provincial/territorial policies to reduce poverty and food insecurity. For example, give consideration to the following measures:
   • Adjust provincial income assistance and minimum wage rates to ensure that households can afford the basic costs of living and have the ability to eat a healthy, balanced diet as represented by the National Nutritious Food Basket.34
   • At the federal level, establish market-based guidelines for social assistance rates to help ensure that they correspond to the basic costs of living in all regions of Canada.
   • Improve housing benefit systems in order to ensure that housing expenses for the poorest families leave them with enough money to be able to afford a healthy, balanced diet.
2. Continue to support and improve the Nutrition North Canada program to ensure affordable pricing of nutritious foods in remote northern locations.
3. Provide financial, research and policy support to foster growth of local food procurement initiatives and the improvement of food distribution networks that increase access to healthy food (particularly traditional food) for First Nations, Inuit, and Métis populations, as well as others living in remote communities.∗

4. Develop agricultural policies and subsidies that provide incentives for the production and distribution of healthy foods (particularly fruits and vegetables) in order to improve affordability.

5. Fund intervention and evaluation research to study the impact of policies and programs aimed at reducing poverty, food insecurity, and other barriers to accessing healthy foods.

6. Support organizations and programs that work to improve access to healthy food such as Farm to Cafeteria Canada35, Breakfast Club of Canada36, FoodShare37, and Community Food Centres Canada.38 Some of these programs provide additional benefits like improved food literacy and enhanced social interaction.

7. Establish regular, coordinated surveillance of food insecurity with consistent measures to allow monitoring of trends.

MUNICIPAL GOVERNMENTS
1. Promote the establishment of Food Policy Councils and Food Charters that promote and develop local policies, programs and strategies related to access to healthy food.†

2. Establish policies and zoning by-laws designed to promote the establishment of grocery stores and other venues (e.g., farmers’ markets, community gardens, community kitchens etc.) that provide affordable access to healthy food, particularly in areas of low availability. Where possible, also promote the availability of a wide variety of foods in order to accommodate cultural and individual preferences.

RESEARCHERS
1. Conduct research to assess the impact of policies and programs aimed at enhancing food security, paying particular attention to vulnerable populations including those with low incomes, children, Aboriginal peoples, and recent immigrants. For example:

   - Examine how agricultural and food policies (e.g., commodity subsidies, transportation and revenue insurance, etc.) could be most effectively used to promote the production of healthy foods such as fruits and vegetables in order to improve affordability and access.

   - Investigate how to make the most effective use of community level strategies for increasing physical access to healthy foods (e.g., community kitchens, community gardens, farmers’ markets, local food distribution networks, and food policy councils).

   - Study the relationship between food security and geographic and social barriers to healthy eating, such as living in remote communities, proximity to grocery stores, and food pricing.

2. Examine the relationships between the wide variety of food security related policies and programs in order to determine how to maximize the effectiveness of intersectoral and interjurisdictional food security efforts.

∗ For example, see the Produce Availability in Remote Communities Initiative, a program of the Government of B.C. and the Heart and Stroke Foundation: <www.health.gov.bc.ca/healthyeating/pdf/summary-report-pai.pdf>.

† For example, see the Toronto Food Policy Council: <www.toronto.ca/health/tfpc/index.htm>.
Lack of access to a sufficient quantity of healthy food has extremely important health, economic and social consequences. Access to healthy food is, therefore, acknowledged as a universal human right. While Canada is among the most advanced and economically prosperous countries in the world, not all Canadians have sufficient access to affordable, healthy food.

People who are food insecure eat diets with less variety, consume lower amounts of fruits and vegetables, are more likely to have micronutrient deficiencies and are more likely to suffer from malnutrition. Furthermore, low socio-economic status has been linked to the consumption of higher amounts of unhealthy food, for example, fatty meats, refined grains, and added fats.

Food insecurity is associated with a wide variety of health problems including increased rates of heart disease and other illnesses including adult obesity, type 2 diabetes and poor mental health. In addition, lack of access to healthy food has particularly negative consequences for children. These include: anemia, weight loss, infections and difficulty in concentration and performance at school, all of which have potentially very important long term health and social consequences.

In Canada, food insecurity is strongly linked to income, with those in the bottom 10 per cent of the range of income showing by far the highest rate of food insecurity (32.5 per cent), and with rates of food insecurity decreasing steadily as income increases. As a result, reducing the number of people with low incomes is a key strategy for addressing food insecurity. According to Statistics Canada, about nine per cent of Canadians (three million people) were considered to be in the category of “low income” in 2010.

Within the broad category of those with low incomes, food insecurity tends to be higher among particular groups of Canadians. These include single parent families, women, children, Aboriginal peoples, and recent immigrants. For example, in 2007-2008, single parent households made up 22.9 per cent of all food insecure households. Of single parent households, those led by women were twice as likely to be food insecure as those led by men. Meanwhile, according to the Conference Board of Canada, more than one in seven children in Canada live in poverty and are at a high risk for being food insecure given their dependency on parents and guardians. About 21 per cent of off-reserve aboriginal households live in poverty, which is roughly three times the rate for non-Aboriginal households. Finally, recent immigrants are also at increased risk for food insecurity. This can be attributed to low incomes, the high cost of food used in traditional diets, as well as changes in lifestyle and working conditions.

Apart from the specific challenges related to low incomes and particular population groups, geographic factors affect both prices and physical access to healthy foods, e.g. perishables such as fresh fruits and vegetables. These problems are particularly acute in remote and northern locations (including First Nations’ reserves) where many foods must be brought in by air.

Concerning prices, in 2009 the Heart and Stroke Foundation discovered widely varying costs for a number of healthy staples from a variety of locations across Canada. For example, while six apples could be purchased for $1 in Toronto, they cost $5.69 in Dryden. Similarly, four litres of one per cent milk could be purchased for $3.49 in Vancouver, compared with $11.89 in Rankin Inlet. Geographic factors can also influence physical access to the food required for healthy diets. At the local level, the location of affordable food outlets and the availability of affordable transport options have been identified as factors that influence access to healthy food. For example, distinct areas where residents have poor access (e.g., as a result of long trip distances to grocery stores combined with not owning a vehicle and/or poor access to public transit) to affordable healthy food have been clearly identified in several Canadian cities.

In terms of appropriate responses to food insecurity, it should be noted that food banks, while a well-recognized and important emergency response to hunger, cannot be expected to adequately respond to the long-term challenges of food insecurity in Canada. They are not generally able to guarantee a nutritious diet, and are forced (by virtue of limited resources) to limit the level of assistance provided to any particular person or family.

Efforts to improve food security in Canada should address lack of income as well as food pricing and physical access. Specific federal/provincial/territorial measures that have
been identified in order to address low income and its impact on food security include ensuring adequate minimum wage and income assistance rates, as well as affordable housing. In order to improve geographic accessibility and the affordability of healthy food, a wide range of measures at federal, provincial and municipal levels should be considered. Examples include the implementation of appropriate agricultural policies and subsidies, and support for programs and policies that assist with the transport and local distribution of healthy food. Finally, local level policies that provide incentives for the establishment of programs and venues that increase the availability of affordable healthy food are recommended.

REFERENCES

12. PROOF. Unpublished analysis of 2011 Canadian Community Health Survey Data (http://nutritionalsciences.lamp.utoronto.ca/food-insecurity/).
ACCESS TO AFFORDABLE, HEALTHY AND NUTRITIOUS FOOD (“FOOD SECURITY”)


The information in this Position Statement is current as of August, 2013