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Health Providers Cautiously Optimistic About Basic Income Pilot, Worry Consultations Will Delay Immediate Action on Poverty Reduction

TORONTO – [Health Providers Against Poverty](#) (HPAP) is optimistic about several recommendations put forth by Ontario’s special advisor on basic income, Hugh Segal, last month, but remains concerned that the consultations and planning for this pilot will delay action on poverty reduction.

There are around 900,000 people, according to 2015 data, reliant on Ontario Works and the Ontario Disability Support Program to meet their basic needs, who are living well below the poverty line. Single individuals receiving social assistance have incomes of roughly 45 percent of the Low Income Measure – a measure of poverty calculated by Statistics Canada.

There is extensive evidence that poverty negatively impacts health and is associated with premature mortality. The province must take urgent action, including raising social assistance rates and legislating a living minimum wage. This should be accompanied by tangible steps towards addressing gaps in other social determinants of health, such as affordable housing, transportation, and childcare.

“Our current social assistance system traps people in poverty and compromises their health. Social assistance rates need to increase significantly while we await alternate solutions. Lack of immediate action is costly to our patients lives and to the health care system,” said Katie Dorman, a family physician in Toronto.

“There are also people living close to the poverty line, while working full time and earning minimum wage. Many workers are precariously employed, do not have access to paid sick leave, and lack health benefits such as drug coverage. The province needs to seriously consider implementing a living wage”, added Samantha Green, a family physician in Toronto.

The discussion paper by Segal proposed a non-taxable no-strings attached income supplement for a group of participants age 18 to 65 years of age, set around \$1320 with an additional \$500 for people with disabilities. This is a welcome improvement from current income support programs, but still perpetuates the cycle of poverty, since the base amount is only 75 percent of the Low Income Measure. HPAP feels strongly that for the province to make any significant strides towards poverty reduction, the basic income would have to be set above the poverty line.

Health care providers were relieved to hear that Segal specified that no individual should be made worse off during or after the pilot. “It is important that a basic income pilot does not come at the expense of dismantling existing social programs,” said Lucy Barker, psychiatry resident in Toronto.

“We also hope the government will take seriously, Segal’s recommendation to create a Basic Income Pilot Advisory Council that includes First Nations peoples, individuals with lived experiences of poverty, representatives from community organizations, and the health sector,” said Barker, speaking on behalf of HPAP.