

Authored by **Health Providers Against Poverty**

ACKNOWLEDGEMENTS

Thank you to all of the organizations and individuals who contributed to this project.

DISCLAIMER

This report is not an endorsement of any one party or candidate.

MEDIA INQUIRIES

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HEALTH PROVIDERS AGAINST POVERTY

Health Providers Against Poverty is an alliance of healthcare providers who recognize that poverty is one of the most significant risk factors for poor health. Through advocacy, education, and patient care, we are working to eliminate poverty and reduce health inequities in Canada. Since we were founded in 2005, we have grown to have a network of several hundred providers as well as provincial chapters in Ontario, Nova Scotia, and Newfoundland and Labrador.

For more information, visit our website at: healthprovidersagainstopoverty.ca or follow us on social media.

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EXECUTIVE SUMMARY

Grounded in a social determinants of health approach, this report focuses on five key election priorities that significantly impact and influence physical and mental health outcomes. These priorities are (1) Indigenous rights, (2) poverty and income security, (3) work and employment conditions, (4) affordable housing, and (5) health and social services.

Using the selected priorities, we reviewed existing research conducted by leading researchers, advocacy groups, and non-partisan government stakeholders to assess if and how each of the major provincial parties' platforms is addressing these pressing issues.

Unsurprisingly, no one party achieved a perfect score when we graded them against our criteria. Across most categories, the New Democratic Party (NDP) scored the highest. While the Green Party was able to match the NDP in two categories, overall they had the second strongest platform. The Liberal party scored consistently low across various categories despite offering a handful of promising programs and policies. The Progressive Conservatives' platform addressed only a small proportion of our criteria, giving their platform a failing grade across all categories except health and social services.

Of all the parties' platforms, only the NDP's included a full, complete, and explicit commitment to implementing all provincial Calls to Action from the Truth and Reconciliation Commission. Both the NDP and Greens were strong on poverty and income security, receiving almost perfect marks in this area. All the parties' platforms fell short in the area of work and employment conditions. The NDP and Liberals were the highest in this area, but their low mark of a C leaves much to be desired. The Greens did even worse, receiving scoring just 1.5 marks out of five.

On the affordable housing front, the Liberal party scored a D while the Green party scored a slightly better C. Once again, the NDP surpassed both parties by achieving a B score.

For the last priority of health and social services, the Greens and NDP outflanked the other parties by achieving B+ scores, followed by the Conservatives and Liberals with D scores.

Although the NDP achieved the highest score among all parties, it is important to note that their cumulative grade is a B+. It is evident they still have room for significant growth when it comes to proposing policy solutions to intervene in the province's most pressing social and health issues.

Please note that this document has been updated from its original version in response to the Conservatives releasing a platform and in response to feedback that prompted us to reevaluate the Green Party platform and increase some of their scoring accordingly.

FINAL GRADES OF PARTY PLATFORMS



Indigenous Rights			
F	D+	A	D+
Poverty & Income Security			
F	D+	B+	B+
Employment & Working Conditions			
F	C	C	F
Affordable Housing			
F	D	B	C
Health and Social Services			
D	D	B+	B+
Final grade based on improving health and social outcomes			
F	D+	B+	C+

METHODOLOGY

Grounded in a social determinants of health approach, this report focuses on five key election priorities that significantly impact and influence physical and mental health outcomes. These priorities are (1) Indigenous rights, (2) poverty and income security, (3) work and employment conditions, (4) affordable housing, and (5) health and social services. Using these main priorities, we reviewed existing research conducted by leading researchers, advocacy groups, and non-partisan government stakeholders to devise our grading criteria.

In order to be as specific and objective as possible, selection of the grading criteria was based almost exclusively on specificity and whether a promise was tangible. As a result, we prioritized estimated funding requirements and new or old policies with specific dollar amounts attached. Due to the complexity and siloed nature of existing health and social services, we included both means-tested and universal policies and programs as appropriate.

To reduce the potential for bias, the authors did not “read between the lines” of the parties’ platforms. As a result, full marks were only granted if a party explicitly voiced a commitment to one of the criteria. Vague commitments to “increasing funding” or similar campaign promises were granted half marks. As a result, while some parties may have made significant public commitments to issues we have highlighted in this report, we did not wish to reward such statements if they have not been backed up by a specific commitment to provide the necessary funding or required legislative changes as identified by leading experts across the health and social services spectrum. See the Appendix for a detailed outline of our grading scheme.

This report is not an endorsement of any one political party or candidate. We encourage all readers to thoroughly review each of the parties’ platforms and make a decision based on their own values and judgement. This report is merely meant to contribute to the provincial dialogue about economic, social, and health priorities in the upcoming election.

ELECTIONS SCORECARD

INDIGENOUS RIGHTS

Systemic colonialism has caused substantial multigenerational suffering and trauma for Canada's Indigenous peoples (First Nations, Inuit, and Métis) [1-2]. In particular, the residential school system, which operated in Ontario for more than 150 years, displaced generations of Indigenous youth from their communities, language, and culture [2]. Despite their closure, widely-held attitudes and existing colonial structures still perpetuate both insidious and overt acts of violence and continue to foster racism and discrimination against Indigenous peoples [2].

Indigenous peoples in Ontario (and indeed, the rest of Canada) are disproportionately affected by income insecurity, unemployment, low levels of education, decreased food availability, and inadequate housing compared to non-Indigenous populations [3-4]. For many Indigenous peoples in rural and remote settings, access to clean water, consistent health care, and affordable food remains inadequate [4].

In urban settings, precarious housing and homelessness, unemployment and low-income, and racism comprise some of the major health disparities for Indigenous communities [3-6]. A 2018 community-driven report showed that within Toronto, 63% of Indigenous peoples are unemployed, and 87% have a low-income [6].

Indigenous youth in Canada face specific barriers to health and well-being, including disproportionate representation within the child welfare system (Indigenous youth make up >25% of children (<14 years old) in Ontario's child welfare system), displacement from communities for pursuit of education, and alarming rates of suicide [1-2]. Many of these institutions fall under the purview of the province of Ontario; a greater commitment to health infrastructure (including mental health outreach), and redefining the nature of child and family services in the province is sorely needed.

TRUTH AND RECONCILIATION COMMITTEE CALLS TO ACTION

The Truth and Reconciliation Committee (TRC) was created in 2008 with a mandate to educate Canadians on the residential school system, to document experiences of survivors and their families, and to guide a reconciliation process [1,8]. In order to address the legacy of residential schools and advance the reconciliation process, the TRC created 94 recommendations, or 'Calls to Action' [8]. These Calls to Action are multifaceted and are directed to governments, churches, organizations, and all Canadians. Working with Indigenous partners for guidance and leadership, Ontario has laid the groundwork for reconciliation through Ministry of Indigenous Relations and Reconciliation as detailed in [The Journey Together](#) plan. While these efforts have been promising, the current provincial government has never made a public statement expressing full, complete, and explicit commitment to implementing all provincial-related Calls to Action. Furthermore, as noted by the Chiefs of Ontario, there has been a significant lack of public communication regarding progress made on certain priority areas previously outlined in the plan. [9]

INDIGENOUS RIGHTS SCORECARD



Full, complete, and explicit commitment to implementing all provincial-related Calls to Action from the Truth and Reconciliation Commission

No official statement or commitment.	No official commitment to implementing all Calls to Action. However, several promising proposals have been made.	Yes, full commitment to implementing all Calls to Action.	No full commitment mention in platform. However, several promising proposals have been made.
×	—	✓	—

Bonus commitments related to improved social, health, and economic wellbeing

Resource revenue sharing from mining, forestry and aggregates.	<p>Financial commitment of at least \$4.5 million in 2018-19 for the Indigenous Supportive Housing Program.</p> <p>\$220 million over three years to improve access to healthcare.</p> <p>\$40 million over three years in new operating funding for on-reserve child care programs and \$290 million to double on-reserve child care spaces.</p> <p>Commitments to reducing barriers faced by indigenous people across the justice system.</p>	<p>Implementation of a cooperative, government-to-government accord.</p> <p>Revenue sharing from mining taxes.</p> <p>\$209 million commitment to providing better healthcare funding to Indigenous communities.</p> <p>Exemption for First Nations communities from electricity delivery charges while also connecting remote communities.</p>	<p>Commitments to ensure and respect self-determination.</p> <p>Funding to increase self-governance capacity by First Nations communities.</p> <p>Infrastructure and training support to ensure safe drinking water is available in Indigenous communities.</p> <p>Proposals to work collaboratively with National Centre for Truth and Reconciliation.</p>
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✓ : Full Marks — : Half Marks × : No Marks

A NOTE ABOUT OUR INDIGENOUS RIGHTS SCORECARD

As stated previously in this report, many Indigenous Peoples in Ontario face myriad social, health, and economic challenges. Although several of the provincial parties are offering some promising commitments to address the needs of Indigenous Peoples, the authors of this report made a decision to grade parties based solely on their public commitments to the TRC Calls to Action. This was done to acknowledge the robust and thorough nature of the Calls to Action, while also honouring the time, resources, and spirit used to create the report, and its recommendations. As a non-Indigenous group, Health Providers Against Poverty did not feel it was appropriate, necessary, or ethical to suggest what the election priorities should be for Indigenous Peoples across Ontario. As a result, no extra marks were provided for bonus commitments.

POVERTY & INCOME SECURITY

Income is the single most important factor which determines whether someone is healthy or not. People living in poverty have higher rates of chronic illness including diabetes, cancer, depression and heart disease. Children in low income families are at higher risk of mental health problems, nutritional deficiencies, asthma, hospitalization and injury. [10] Poverty also disproportionately affects women, children, Indigenous Peoples, racialized people, and people living with disabilities. [11]

At present, Ontario employs a variety of programs and services to address poverty, including the Ontario Disability Support Program (ODSP) and Ontario Works (OW). In addition, there are federal programs such as Employment Insurance (EI), Canada Pension Plan (CPP), and both levels of government provide child tax benefits. Together, these programs are known as the income security system.

Despite these programs, poverty and income insecurity are widespread across Ontario. In 2016-2017, there were over 923,000 Ontarians who relied on OW and ODSP. [12] Although both Canada and Ontario lack an official definition or measurement of poverty, the most recent low-income measure calculation indicates that roughly 14% of Ontario's population were low-income in 2014 [13], a number which includes both social assistance recipients and the working poor.



ODSP and OW are largely punitive, outdated, and barrier-filled. For example, up to 50% of recipients who leave OW for a work opportunity later return to the program [14]; the jobs recipients leave for are often highly precarious [15]; and racialized recipients routinely struggle with caseworkers who are “difficult, unhelpful or even adversarial” to work with. [14]

The current level of financial assistance provided to recipients is equally troubling. Presently, a single person on social assistance receives \$721 from OW [16] or \$1151 from ODSP [17] for monthly living and shelter expenses. A single parent with two children on ODSP is entitled to just \$22,416 yearly [17], while a single person experiencing homelessness who receives OW is entitled to \$337 per month [16], just over \$4,000 annually.

Eliminating poverty and reducing inequity makes fiscal sense. According to some estimates, poverty costs the province an estimated \$32-38 billion per year in preventable expenses. [19] Ontario's income system requires a major transformation in order to better serve its users, bring them out of poverty, reduce inequity, and improve health and fiscal outcomes.

POVERTY & INCOME SECURITY RECOMMENDATIONS

Our recommendations for improving poverty and income security outcomes in Ontario come exclusively from the [Income Security: A Roadmap for Change](#) report that was delivered to the Ontario government on November 7, 2017. These recommendations include:



1. Immediate increases to social assistance rates over the next three years, including yearly increases for Ontario Works rates by 10%, 7%, and 5% and increasing Ontario Disability Support Program rates by 5%



2. Increasing and setting social assistance rates to a standard flat rate



3. Co-design of an “assured income” approach for people with disabilities



4. Implementation of a minimum income standard based on the Low-income Measure (LIM) within 10 years



5. New legislation to transform the culture of social assistance to one of trust, collaboration, and problem-solving

POVERTY & INCOME SECURITY SCORECARD



Increases to social assistance rates (yearly increases of 10%, 7% and 5% for people on OW and 5% yearly for those on Ontario Disability Support Program)

No official statement or commitment.	No. 3% annual increases for both OW and ODSP.	Yes. Full commitment to the above increases.	Yes. Full commitment increasing OW & ODSP rates to provincial low-income measure (LIM).
×	—	✓	✓

Increasing and setting social assistance rates to standard flat rate

No official statement or commitment.	Yes. Starting 2020-21, Liberals would implement a standard flat rate.	Yes, full commitment to establishing “a new, flat rate structure that is simple and fair.”	Yes, full commitment to implementing a basic income rate at 100% of the LIM.
×	✓	✓	✓

Co-design of an “assured income” approach for people with disabilities

No official statement or commitment.	No mention in official platform.	No mention; however, platform does commit to implementing Roadmap objectives.	No mention; however basic income approach will lead to improvements in this area.
×	×	—	—

Implementing a minimum income standard (ie. LIM) within 10 years

No official statement or commitment.	No mention in official platform.	Yes. Full endorsement to develop a minimum income standard over the next decade.	Yes, full commitment to implementing a basic income rate at 100% of the LIM.
×	×	✓	✓

New legislation to transform the culture of social assistance to one of trust, collaboration and problem-solving

No official statement or commitment.	Yes. Commitment to simplify the many rules governing our social assistance programs to make the system more respectful and less intrusive.	Yes. Commitment to changing rules to ensure “trust, working together, and solving problems.”	Yes. Commitment to cut red tape for the poor who now have to navigate a complex bureaucracy to find help.
×	✓	✓	✓

✓ : Full Marks — : Half Marks × : No Marks

EMPLOYMENT & WORKING CONDITIONS

Employment and working conditions comprise a key social determinant of health. Direct work-related risks to health include occupational injury, hazardous materials, and communicable disease, and effects of work-related stress of cardiovascular disease, mental health, and musculoskeletal disease. Employment also indirectly affects health through income and poverty.

Unemployment affects health in two main ways: through poverty, and through secondary stress that can lead to poorer physical and mental health; [20] stress around uncertainty is also a major problem for those engaged in precarious employment, as well as stress secondary to lack of control, and high work demands. Temporary workers in particular are more likely to be exposed to hazardous working conditions, higher rates of occupational injury, and repetitive movements and ergonomic injury. Finally, in the informal sector, workers are at higher risks for ergonomic injury, and for exposure to toxic chemicals, excessive noise, poor sanitation, high workload, pesticides, violence and sexual assault. [21]

From 2014 - 2017, it was estimated that 30 - 32% of workers in Ontario were precariously employed [22]; those who were precariously employed were more likely to be workers with less than a high-school diploma, single parents with children < 25, recent immigrants, women, and visible minorities. The median hourly wage for workers in non-standard employment was \$15, compared to \$24 for standard employment, and 77% of precarious workers lacked medical benefits through jobs. Further, due to technical exemptions, only 23% of minimum wage workers were fully covered by the Employment Standards Act.[22]

In 2017, the [Fair Workplaces, Better Jobs Act](#) (Bill 148) was passed, which enacted several provisions for workers in Ontario. The Act included the following changes: a \$14 minimum wage; a policy to ensure equal pay for equal work, regardless of full-time, part-time, or seasonal employment status; 3 weeks paid vacation after 5 years of employment; personal emergency leave for 10 days (with 2 of those days paid); and employees of temporary agencies must be provided with one week written notice or extra pay for the premature termination of contracts scheduled to last 3 months or more. [23]

Despite the above changes, there is still work to be done to hold employers accountable and to ensure government commitment to these new provisions. Individuals who are unemployed, precariously employed, and employed in the informal sector are disproportionately affected by work-related health risks. These health risks are further varied based on factors like age, gender, race, and personal susceptibility. Ongoing action is required from the provincial government in order to improve financial and health outcomes for vulnerable workers.



EMPLOYMENT & WORKING CONDITIONS RECOMMENDATIONS

Our criteria for grading the employment and working conditions policies of each party was influenced by the demands devised by the [Fight for \\$15 and Fairness](#) campaign. These demands include:



1. Increasing the minimum wage to \$15 per hour



2. Seven paid sick days for all employees



3. Fair employment arrangements, including decent hours, proper scheduling notice, and equal pay for equal work



4. Ensuring every worker has the right to unionize



5. The enforcement of labour laws in all work environments and for all work arrangements

EMPLOYMENT & WORKING CONDITIONS SCORECARD



Commitment to \$15 minimum wage			
No. Party would cancel \$15 minimum wage increase in favour of eliminating taxes for minimum wage earners.	Yes. Clear commitment to increasing the minimum wage to \$15 by Jan 2019 and then indexing it to inflation.	Yes, clear commitment to \$15 minimum with indexing it to inflation.	No, but party offers promising basic income rate tied to the LIM.
✗	✓	✓	—
Seven paid sick days for all workers			
No official statement or commitment.	No. Commitment to 10 days of leave with only two paid.	No mention in platform document.	No mention in platform document.
✗	✗	✗	✗
Fair employment arrangements (decent hours, proper scheduling notice, and equal pay for equal work)			
No official statement or commitment.	Yes. Equal pay for equal work; 3 hour minimum payment for last minute schedule changes; 3 weeks paid vacation after 5 years of employment.	Yes. 3 weeks paid vacation for all full-time employees; updates to workplace safety & WSIB; regulation of contract positions.	No explicit proposals but does commit to removing loopholes leading to precarious work, in addition to stricter rules for temp agencies.
✗	✓	✓	—
Ensuring every worker's right to unionize			
No official statement or commitment.	No. However, provisions in Bill 148 extend limited card-based certification to some sectors.	Yes, will allow any workplace the ability to unionize when 55% of workers sign a union card.	No full commitment; platform does discuss supporting and incentivizing freelance workers to unionize.
✗	—	✓	—
Enforcement of labour laws			
No official statement or commitment.	No plan provided in platform. However, previous commitment to hire 175 new employment standards officers.	No plan or commitment provided in platform document.	No plan or commitment provided in platform document.
✗	—	✗	✗

✓ : Full Marks — : Half Marks ✗ : No Marks

AFFORDABLE HOUSING

The connection between stable housing and positive health outcomes is undeniable. Whether a person is homeless or vulnerably housed, they live with a high risk of experiencing physical and/or mental health challenges, hospitalization, barriers to accessing health care, assault, and food insecurity. [24] Likewise, as noted by Toronto Public Health, unaffordable housing often leads to trade offs between paying rent and being able to afford food, utility costs, prescriptions, and/or recreational opportunities important to health. [25]

In Ontario, the need for affordable, safe, and appropriate housing continues to grow at an alarming rate as demand outpaces supply. According to the Ontario Non-Profit Housing Association, there are approximately 171, 360 households from across the province on rent-geared-to-income waitlists. [26] For those housed in market rent dwellings, the situation is equally dire with 46% of renters in the province paying more than 30% of their income on shelter costs. [27]

While the need for new affordable housing projects is undeniable, thousands of existing social housing units also desperately require attention. According to the provincial auditor general, there were over 6,300 vacant social housing units in December 2016 that did not meet minimum health and safety standards and, thus, could not be rented out as a result. [28]

Ontario also continues to have disturbingly high rates of homelessness. According to the most recent census data, there were 8,785 Ontarians living in emergency shelters in 2016. [29] Although quite high, these numbers certainly underestimate the total number of Ontarians who experience homelessness by not capturing those who experience hidden homeless (ie. couchsurfing, sleeping on park benches, or living out of a car).

Since 2011, the provincial government has launched a variety of initiatives aimed at reducing homelessness and curbing the housing affordability crisis. These include the [Canada-Ontario Investment in Affordable Housing Initiative \(IAH\)](#), the [Community Homelessness Prevention Initiative \(CHPI\)](#), the [Expert Advisory Panel on Homelessness](#), and the [Long-term Affordable Housing Strategy](#).

Despite implementing a range of programs and services, these initiatives have had a limited impact to date. For example, in 2017 the City of Toronto alone recorded 100 deaths among those experiencing homelessness. [27] Likewise, emergency shelters continue to reach capacity as the demand for market rent apartments continue to outpace supply, even in the face of climbing rent costs. [31] [32]

A NOTE ON EXISTING PORTABLE HOUSING BENEFITS

At present, a portable housing benefit, also known as a housing allowance, is currently provided by the provincial government through the Investment in Affordable Housing Initiative. However, as detailed in the [program guidelines](#), municipal service managers hold the authority to determine the value of the the housing allowance for each of their own jurisdictions with no guarantee that these set amounts will reduce a recipient's rent to 30% or less of their household income

RECOMMENDATIONS FOR AFFORDABLE HOUSING

The recommendations in this report for increasing access to affordable housing come for a variety of sources and stakeholders. These sources are credited below.



1. Provincial cost-matching with the federal government's National Housing Strategy ([Government of Canada](#))



2. Addressing the affordable housing crisis by funding the creation of 4,500 new rent-geared-to-income (RGI) units annually ([Ontario Non-Profit Housing Association](#))



3. Funding the creation of 3,000 new supportive housing units per year for people with mental health and addiction challenges ([Ontario's Mental Health & Addictions Leadership Advisory Council](#))



4. Introduction of a Portable Housing Benefit to reduce a household's monthly rent to 35% of its income ([Income Security: A Roadmap for Change](#))



5. Funding to sustain current social housing stock and prevent/resolve issues of disrepair, with an estimated provincial government contribution of \$533 million for current and outstanding repair needs ([Ontario Non-Profit Housing Association](#))

AFFORDABLE HOUSING SCORECARD



Provincial cost-matching with federal government's National Housing Strategy

No official statement or commitment.	Yes. As of April 10, the provincial Liberal government has signed on.	Yes, as evident by party's expressed commitment to the strategy.	Yes, as evident by party's expressed commitment to the strategy.
×	✓	✓	✓

Addressing the affordable housing crisis by funding 4,500 new RGI units annually

Commitment to increase affordable housing in GTA but no clear commitment or definition of affordable housing provided.	No clear commitment in official platform.	Yes. Will fund creation of 65,000 units over next decade (6,500 units per year).	20% of all new developments will be affordable. No specific number of units or definition of affordable housing provided.
×	×	✓	×

Funding the creation of 3,000 new supportive housing units per year

No official statement or commitment.	No. Commitment to fund the creation of 2,475 new units over four years does not meet need.	Yes, plans to build 30,000 new supportive housing units over 10 years (at least 3,000 per year).	Part of a \$200 million housing investment will go to supportive housing, unclear how many units.
×	×	✓	—

Introduction of a Portable Housing Benefit to reduce a household's monthly rent to 35% of its income

No official statement or commitment.	No mention in platform.	No commitment in platform.	No, but would provide benefit for women fleeing violence.
×	×	×	—

Funding to sustain current social housing stock and prevent/resolve issues of disrepair (estimated provincial share of \$533 million)

No official statement or commitment.	Yes. Commitment of \$547 million over five years.	Yes. Platform commits to funding province's share of repair costs.	Yes, commitment to providing municipality with necessary funding for repairs.
×	✓	✓	✓

✓ : Full Marks — : Half Marks × : No Marks

HEALTH & SOCIAL SERVICES

Across Ontario, millions of individuals and families continue to lack access to essential health services. For instance, Ontario has the lowest provincial rate (1.3%) of publicly funded oral health services in Canada [33], resulting in 32% of Ontarians without dental insurance [34]. Moreover, 4.6% of those in Ontario are ineligible for public or private drug coverage, which is significantly higher than the national average of 1.8%. [35] The lack of a universal drug plan also results in limited purchasing power and increasing drug prices across Ontario. [36] It is thus unsurprising that 10% of individuals on prescription medications cannot adhere to their medications due to financial concerns. [37]

Despite popular belief that healthcare is universally available to everyone, between 200,000 and 500,000 individuals in Canada lack healthcare coverage entirely, with the majority of them in Ontario. [38, 39] The lack of adequate medical care causes uninsured individuals to develop more serious conditions and seek more urgent care, resulting in greater healthcare costs. For example, uninsured residents are twice as likely to require resuscitation at emergency facilities, and account for 0.5% (5,000 visits) of all emergency room visits in Toronto. [39]

Ontario's mental health and addictions system also leaves much to be desired. Since 2011, emergency room hospital visits from people struggling with their mental health has increased by 21 percent. [40] Preventative interventions such as psychotherapy are often inaccessible with waitlists for publicly funded services often exceeding 6 months. [41] Moreover, the social determinants of health continue to have a profound impact; those living in low-income neighbourhoods are twice as likely to visit an emergency department for a mental health or addictions-related emergency than residents of wealthy neighbourhoods. [42]

In addition to lacking access to healthcare services, many low-income families find themselves unable to access licensed child care, especially in major urban areas such as Toronto. [43] As of 2017, less than 30% of children 2-4 years old used child care programs in Ontario. [44] Affordability is the biggest barrier to childcare access, with 75% of those in Toronto finding child care unaffordable. [44, 45] Inadequate access to childcare services, in turn, leads to challenges in finding and maintaining employment and perpetuates cycles of poverty. [46]

Many of Ontario's health and social service systems are under increasing pressure due a lack of funding coupled with an increased demand. Guided by the belief that lack of access to universal services is a significant driver for poor social and health outcomes, HPAP offers the following recommendations as remedies to the current gaps in our health and social systems:

- Dental care for all Ontarians who lack private coverage
- Pharmacare for all Ontarians who lack private coverage
- Childcare for all low-income families
- Increase mental health & addictions funding by \$145 million per year ([Mental Health and Addictions Leadership Advisory Council](#))
- Universal health coverage for all residents regardless of immigration status ([OHIP for All](#))

HEALTH & SOCIAL SERVICES SCORECARD



Dental care (creation of a new system where everyone has dental coverage)

No. Party has only committed to providing low-income seniors with publicly funded dental care services.	Party only commits to funding \$400 for singles and \$600 for couples, plus \$50 for each child in dental benefits.	Yes, commitment to ensure all workers, social assistance recipients, and uninsured seniors have access to dental benefits.	Yes, platform states the party would implement a universal dental care program.
—	—	✓	✓

Pharmacare (creation of a new system where everyone has prescription drug coverage)

No official statement or commitment.	No. OHIP+ coverage will only be extended to seniors.	Yes, commitment to enacting universal pharmacare by 2020.	Yes. Party would push for federally funded program and fund provincial program if need be.
×	×	✓	✓

Childcare (creation of a new system where all low-income families have free access)

Will pay up to 75% of a family's child care expenses, with "lower income families receiving the most support."	Will only implement free licensed child care for preschool-aged children from the age of two-and-a-half.	Yes, free childcare for households with incomes <\$40,000; average \$12/day for households with incomes >\$40,000.	No, but stated commitment to increasing funding for the number of publicly funded child care spots.
—	—	✓	—

Mental health & addictions (commitment to an additional \$145 million in funding/year)

Yes, commitment to providing \$1.9 billion over next decade (\$190 million/year).	Yes, commitment to an additional \$2.1 billion over next four years.	No overall funding numbers provided. However, would fund 2,200 new mental health positions.	Yes, commitment to an additional \$4.1 billion over next four years as first step to making mental health part of OHIP+.
✓	✓	—	✓

Universal healthcare coverage for all uninsured people in the province

No official statement or commitment.	No mention in official platform.	Yes. Party would declare Ontario a sanctuary province and ensure open access to ERs.	Yes. Party would declare Ontario a sanctuary province and end 3-month OHIP waiting period.
×	×	✓	✓

✓ : Full Marks — : Half Marks × : No Marks

ADDITIONAL CONSIDERATIONS: FOOD ACCESS & HEALTH PROMOTION

Household food insecurity, defined as the inadequate or insecure access to food due to financial constraints, is a significant concern in Ontario. According to the most recent statistics, an estimated 595,000 Ontario households were food insecure in 2014. [47] This represents approximately 12% of Ontario households and over 15% of children in Ontario. [47] This is particularly concerning as food insecurity greatly impacts the health and wellbeing of those affected, being associated with numerous physical, mental, and dental health illness. [47, 48] Moreover, food insecurity leads to poor management of chronic diseases such as diabetes and heart disease. [48] Consequently, individuals in these households experience up to 121% higher health care costs, increasing with severity of food insecurity. [49]

It is widely recognized that poverty is the root cause of household food insecurity and that income-based strategies are needed. [50, 51] However, responses to the problems of food insecurity have historically been food-based, including food banks, and community-based initiatives to encourage skills development and nutrition education. However, these strategies are limited in their effectiveness and do not address the root cause of food insecurity. For example, only one fifth of food insecure households use food banks, and even then they do not receive an

adequate supply of food. [50, 51] While dignified and empowering food-based approaches could offer some benefit, many authorities on this issue recommend income, employment, and social-assistance based policy changes to solve food insecurity. [50, 51]

Currently, there are various programs for income support in Ontario, and programs such as the Special Diet Allowance, which provides social assistance for those requiring diets related to specific medical conditions. [52] However, these programs are limited and have questionable efficacy, as discussed previously in this report. In 2017 the provincial government began working towards a food security strategy which recognized the need for income-based responses. [53] While this is a promising step forward, household food insecurity still presents a significant concern and more work needs to be done on this front.

As these poverty-alleviating strategies have already been covered and assessed in detail elsewhere in this report, no formal grading will be completed for this section. Instead, we have outlined in the table below aspects of the provincial parties' platforms that focus on food access, promotion, and security outside of those specific poverty-alleviating policies.



ADDITIONAL CONSIDERATIONS: FOOD ACCESS & HEALTH PROMOTION COMPARISON



Indigenous food sovereignty

No official statement or commitment.

Indigenous-led initiatives to improve access to traditional foods and traditional practices of food production.

Increase northern access to food through reducing costs and environmental impacts of the retailing, storage and transportation of food.

Commitment to ensuring all Indigenous communities have safe drinking water.

Commitment to improving water treatment facilities in Indigenous communities.

Overall commitment to supporting Indigenous self-determination in all aspects of health, housing, economic, and social programs.

Food access (emphasis on health, environmental sustainability, and community building initiatives)

No official statement or commitment.

Launching the Food Security and Climate Change Impact Fund to identify and support community projects that will help reduce greenhouse gas emissions.

Commitment to Working with the Ministry of Community and Social Services to make food more affordable to low-income families.

Will work with municipalities, universities, colleges, schools and hospitals and their food providers to increase healthy local options.

Will support community food hubs to empower people to grow their own food and improve their health literacy; implement a school food program to ensure students have access to healthy, local sustainable food; and increase funding for food security programs available for postsecondary institutions.

Nutrition and healthy lifestyle promotion initiatives

No official statement or commitment.

Commitment to funding food skills and nutrition literacy programs.

Development of a food curriculum that will deliver culturally and regionally appropriate learning about growing and cooking food.

Setting targets to reduce diet-related illnesses.

Reinstate the Eat Right program that helps individuals and families make healthy food choices.

Fund nutrition programs to promote learning readiness, and improve student health.

VOTING RESOURCES

Ontario PC Party

[Party website](#) | [2018 Platform](#)

Ontario Liberal Party

[Party website](#) | [2018 Platform](#)

Elections Ontario

[Main website](#) | [Find Your Electoral District](#) | [How to Vote](#)

Ontario NDP

[Party website](#) | [2018 Platform](#)

Green Party of Ontario

[Party website](#) | [2018 Platform](#)

APPENDIX

GRADING SCALE FOR INDIVIDUAL SCORECARDS

# of marks	Percent grade	Letter grade
0.0/5	0%	F
1.0/5	20%	F
1.5/5	30%	F
2.0/5	40%	D
2.5/5	50%	D+
3.0/5	60%	C
3.5/5	70%	C+
4.0/5	80%	B
4.5/5	90%	B+
5.0/5	100%	A

GRADING SCALE FOR TOTAL SCORE

# of marks	Percent grade	Letter grade
0 - 7.5	0 - 30%	F
7.5 - 10	30 - 40%	D
10 - 12.5	40 - 50%	D+
12.5 - 15	50 - 60%	C
15 - 17.5	60 - 70%	C+
17.5 - 20	70 - 80%	B
20 - 22.5	80 - 90%	B+
22.5 - 24.9	90 - 99.9%	A
25	100%	A+

GRADE CALCULATIONS FOR FINAL MARKS

Priority	Total # of marks out of five*			
	PC	Liberals	NDP	Green
Indigenous Rights	-	2.5	5	2.5
Poverty & Income Security	-	2.5	4.5	4.5
Employment & Work Conditions	-	3	3	1.5
Affordable Housing	-	2	4	3
Health & Social Services	2	2	4.5	4.5
Total # of marks out of 25	2	12	21	16
Percentage	8%	48%	84%	64%
Final Grade	F	D+	B+	C+

*Indigenous Rights graded out of 5 for the sake of equal weighting, despite having only 1 criterion.

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