



BUILDING POVERTY SOLUTIONS: IDEAS FOR ACTION

A COMMUNITY REPORT

HALIFAX REGIONAL MUNICIPALITY - 2018



HALIFAX



United Way
Halifax

BUILDING POVERTY SOLUTIONS: IDEAS FOR ACTION **A COMMUNITY REPORT**

HALIFAX REGIONAL MUNICIPALITY - 2018

Report prepared by United Way Halifax staff, led by Tracy Boyer, Dr. Paula Hutchinson, Michelle Johnson, and Jennifer Wilcox. Designed by Docaitta Design.

Poverty is more than the lack of income and resources to ensure a sustainable livelihood. Its manifestations include hunger and malnutrition, limited access to education and other basic services, social discrimination and exclusion as well as the lack of participation in decision-making. Economic growth must be inclusive to provide sustainable jobs and promote equality.

United Nations Sustainable Development Goal – End poverty in all its forms everywhere

BUILDING POVERTY SOLUTIONS: IDEAS FOR ACTION

CONTENTS

Poverty Solutions – A Message from the Co-Leads	4	Our Approach	24
Acknowledgements	5	Principles to Guide our Ongoing Collective Learning Through the Consultation Process	25
Introduction	6	Summary of Community Conversations	26
The Case to End Poverty	9	Important Learning Through Consultation	27
The Equity Approach	10	A Call to Action: What We Heard	28
The Human Rights Case	10	Poverty Solutions Themes and Ideas for Action	29
The Economic Case	11	Quality Jobs and Livable Incomes	30
The Public Opinion Case	11	Transportation	33
Understanding Poverty	12	Food Security	35
Causes of Poverty	13	Homelessness and Housing	37
Social Determinants of Health as a Framework for Understanding Poverty	13	Service Access for Health and Well-being	41
Poverty in HRM	16	Education and Learning	43
An urban, suburban and rural focus	17	Systemic Change	46
Most people living in poverty are employed; they are the working poor	18	Working Together as a Community	50
Some people are at higher risk of living in poverty than others	18	Summary of our Community Learning	50
• Female & lone parent families	19	Building a Movement	51
• Children	19	Mobilizing Early Action: How do you see yourself in this?	52
• Youth in care	20	References	53
• People with disabilities	20	Appendix A: Summary of Community Consultations	56
• Racialized groups living in poverty	21		
• Recent immigrants	22		
• LGBTQ2SIA+ community	23		
• People with mental illness or addiction to substances	23		

When United Way Halifax and the Halifax Regional Municipality (HRM) joined together to tackle the issue of poverty, we set out with a bold vision: to create a poverty-free Halifax, filled with compassion and opportunity, where everyone lives a life with dignity.

This initiative has been an essential opportunity for us to engage the entire community for positive community change. We started by building on the great work that was already happening. We also took steps to ensure the process was inclusive so many diverse voices could be at the table.

We were humbled by the honest, passionate, intelligent voices of our community and are grateful to everyone who contributed to this Community Report and the more than 100 Ideas for Action. In particular, we extend our thanks to people living in the experience of poverty, and their advocates, for their ongoing input and commitment to creating change.

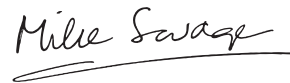
Now we must turn our focus to action. In so doing, United Way Halifax and HRM will continue to be champions for change.

We are committed to action now – finding solutions to address immediate needs facing the people of Halifax – and we’re committed to addressing root causes so we can create long-term sustainable change. We also will continue to work in collaboration, engaging all sectors to build and advance poverty solutions that create the opportunity and prosperity we want for everyone in our city.

We believe it will take all of us to end poverty. It is work that will involve multiple organizations, all orders of government, the private sector, and individuals. As we begin to shape our plan and seek community endorsement, please take time to review, reflect, and discuss this report with your friends, family, neighbours, and community networks. We ask you to reflect on how you can be a part of the change our community needs, and we ask you to challenge those you know to consider the same question.

Join us in building a better Halifax for everyone

Thank you for your interest in this work which we know is so vital to the future growth and health of Halifax. As we test new ideas and innovations to change our community for the better, we need your passion to stay strong, and we need your voice to champion the need to keep moving forward. We look forward to engaging you in the next phase of the journey and encourage you to visit unitedwayhalifax.ca for regular updates. We will stay close to this work, and do everything we can to make sure this is not a report that sits on a shelf, and rather is used as a roadmap to create prosperity for everyone in Halifax.



MAYOR MIKE SAVAGE



SARA NAPIER
PRESIDENT & CEO OF UNITED WAY HALIFAX

ACKNOWLEDGEMENTS

Thank you to the people of Halifax Regional Municipality who contributed their time, talent, and wisdom to this work now and who stay committed going forward.

Thank you to the **Poverty Solutions Advisory Committee** for their leadership and unique perspectives. Poverty Solutions Advisory Committee Members include:

- Dr. Rhonda Britton, Pastor, Cornwallis Street Baptist Church
- Shawn Cleary, District 9 Councillor, Halifax Regional Municipality
- Sacha Curran, Program Coordinator, Navigator Street Outreach
- Patricia Doyle-Bedwell, Professor/Native Studies Instructor, Dalhousie University
- John Esaiw, Director, Fuels, Energy & Risk Management, Nova Scotia Power
- Mark Fraser, Executive Vice-President, T4G
- Lynn Hartwell, Deputy Minister, Nova Scotia Department of Community Services
- Nick Jennery, CEO, FEED Nova Scotia
- Bill Lahey, President, King's College
- Elwin LeRoux, Superintendent, Halifax Regional School Board
- Don MacLean, Superintendent, Halifax Regional Police
- Betty MacDonald, Society of Deaf & Hard of Hearing Nova Scotians
- Wayne MacNaughton, Poverty Advocate
- Ian Munro, Chief Economist, Halifax Partnership
- Gerry Post, Executive Director of Accessibility, Nova Scotia Department of Justice
- Bonnie Ste. Croix, former Executive Director, Chebucto Connections

- Michelle Pickles, Director, Public Health – Central Zone, Nova Scotia Health Authority
- Steve Streach, District 1 Councillor, Halifax Regional Municipality
- Jennifer Watts, Director of Settlement and Integration, ISANS

Special thanks for the input and contributions from the task teams, focus group participants, and individuals who have made ending poverty their life's work.

Rita MacAulay, Nadine Romaine, and Ali Shaver of the **Public Health - Central Zone, Nova Scotia Health Authority** for their dedication to and facilitation of several task team meetings.

Dennis Pilkey for his investment of time over the decades contributing to community data, the kind coaching, and ongoing great working relationship.

Pam Gloade-Desrochers and the **Mi'kmaw Native Friendship Centre** for sharing their wisdom and time to work towards building a relationship guided by reciprocity and reconciliation.

Lesley Frank & Christine Saulnier for their work on creating the **2017 Report Card on Child and Family Poverty in Nova Scotia**.

Donna Gates and Carrie Tanasichuk of **Living Saint John** who we continue to build bridges with and learn about how to build solutions to end poverty.

Ricardo Tranjan of **TO Prosperity** for their great report, working hard to support those with lived experience, and openly sharing learning about the process and journey to date.

Cheryl Smith and Jen Carter from **London for All** for sharing their understanding of poverty and experience in their municipal strategy.

Tamarack Community - Cities Reducing Poverty, Federation of Canadian Municipalities, and Vibrant Communities Canada for their hosting and convening to connect cities nationally.

End Poverty Edmonton for their boldness, inspiration, and strong approach to ending poverty.

Becky Mason, Abby Crosby, and Karen Theriault at **FEED Nova Scotia** for sharing communication ideas and content as well as data sharing and being a great support.

Anna Jacobs for sharing the Provincial Diversity and Inclusion Framework¹ and her wisdom.

Thanks to **Halifax Regional Municipality and Department of Community Services** for leaning into this work with a spirit of collaboration and building bridges to shared solutions.

And finally, special thanks to **United Way Halifax** donors and staff. This work is made possible by the generosity of donors, including The Griffiths Family Fund, who believe in the potential of a united effort to end poverty, and by the dedication of the staff team that led the process with passion and purpose.

INTRODUCTION



ENGAGING HRM IN POVERTY SOLUTIONS TIMELINE



SITUATIONAL ASSESSMENT & ENGAGEMENT →

Community consultations held to inform Government of Canada Poverty Reduction Strategy

- Online portal and digital resources created to engage community in poverty solutions →
- Multi-sector task teams formed to discuss themes and solutions →
- Focus Groups meet to discuss barriers and solutions →

APRIL 2017	MAY 2017	JUNE 2017	JULY 2017	AUGUST 2017	SEPTEMBER 2017	OCTOBER 2017	→
	April 25: HRM Regional Council approves collaboration with United Way Halifax to engage community to develop poverty solutions		HRM and United Way Halifax establish Poverty Solutions Advisory Committee				<ul style="list-style-type: none"> • Municipal, Provincial Alignment – Representatives from United Way Halifax, Department of Community Services and HRM meet bi-weekly to collaborate and align solutions around actions → • Business Alliance Group Meets →

This report is an important marker in the ground. It represents a point in time for us to understand the state of poverty in Halifax Regional Municipality (HRM), listen to the voices of the community, and reflect back content developed with cross-sectoral community input. It is an important first step in building our understanding and supporting community partners to address the experiences of poverty in HRM, with a focus on eliminating it.

The work for this report began on April 25, 2017 when United Way Halifax and the Halifax Regional Municipality received approval from Halifax Regional Council to develop recommendations on what was needed to eliminate poverty in the urban, suburban, and rural regions of HRM.

The ideas and actions in this report were generated by the community through a process guided and stewarded by the Poverty Solutions Advisory Committee (Advisory Committee). The content is rooted in the best available research and evidence, the social determinants of health, good work already happening in the community, and consultation and engagement with more than 1,100 residents over an eight-month period.

We recognize the critical importance that this work be led by the diversity of voices in our community. While there was diverse representation among our Advisory Committee, task teams and focus groups, we acknowledge more needs to be done to ensure we build our understanding and develop the relationships needed to tackle poverty. This is particularly true for the important, and historically silenced, voices of our Indigenous and African Nova Scotian communities. We are also learning about how to be respectful and inclusive in our engagement efforts and support the pace and scope of change. While some members of our communities want to move swiftly, and take immediate action given the level of need in HRM, others want to slow down to build trust and capacity within our communities.

The next steps are to move through a transition phase to a shared implementation phase with community members, non-profit services, faith and spiritual groups, businesses, and all orders of government. Relationship-building will continue with an ongoing commitment to ensuring that experts by experience and diverse communities are central in developing the solutions to end poverty.



Guiding Principles

1

To promote the inclusion of all voices in poverty solutions decision-making.

2

To promote opportunities for cross-sector collaboration.

3

To seek endorsement and commitment by members of the HRM community who can engage in this work.

We took a collaborative approach to this work, engaging with individuals and groups representing multiple sectors. The work in this report was stewarded by a committee of 22 who made up the Advisory Committee and 48 individuals across six task teams. For more information, reference Appendix A.

THE GUIDING PRINCIPLES:

- To promote the inclusion of all voices in poverty solutions decision-making. This means we strive to ensure people with lived experience of poverty are an integral part of our work and we collaborate with organizations from those communities where poverty is most severe to engage directly in the work together.
- To promote opportunities for cross-sector collaboration. This means we recruit business, non-profit and public sector organizations, and other allies from a variety of different organizational backgrounds and perspectives. We undertake outreach to ensure we have diverse representation reflected in our consultation and engagement initiative.
- To seek endorsement and commitment by members of the HRM community who can engage in this work. This means we engage an advisory committee to help build, maintain, communicate with, and seek to mobilize a broader list of organizational endorsers and individual signatories.

Poverty is complex and personal. By providing members of our community with a voice for input, this community report shapes a broader understanding of the experience and complexity of poverty in HRM.

While there is a great deal of work underway to resolve the immediate needs of those experiencing poverty, as well as to address the systemic issues that perpetuate the deeply-rooted experience of intergenerational poverty, more needs to be done. We need to continue to engage more people from a variety of backgrounds and sectors to gain a deeper understanding of the experience of poverty, support a movement for change to really make a difference, and take bold steps towards ending poverty. We believe that as long as people in our community are experiencing poverty, it is a net loss for our whole community. If we seek to have a prosperous community that includes diversity and inclusion, eliminating poverty must be a priority for all.

THE CASE TO END POVERTY



PHOTO: Linda Rowe, Dartmouth Community Resident and Volunteer. Sandor Photography

There are many considerations when striving to solve poverty. We examined four ways to approach this work – equity, human rights, economic, and public opinion.

THE EQUITY APPROACH

The principle of equity acknowledges that there are populations who are at greater risk of experiencing inequities as a result of economic, social, and environmental conditions that are unfair, systemic, and avoidable. As a result, there are populations who have been historically underserved and underrepresented. It is recognized that not everyone in a systemically disadvantaged population has the same experience and outcome. Everyone, including those experiencing inequities, are impacted by our identity and social position such as sexual orientation, class, gender, ability, and race. Equity recognizes that there are differences between populations and each person within the population is unique with different needs for supports and resources to prevent inequities. Essentially, the equity approach to poverty is not a “one size fits all” solution.

THE HUMAN RIGHTS CASE

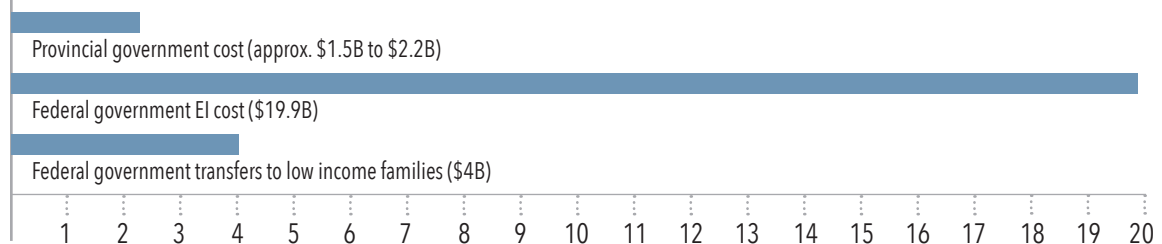
Poverty is more complex than living with a lack of income. It affects people in multiple ways, and some with greater intensity than others. A case in point involves children in Nova Scotia who are disproportionately and profoundly affected by poverty. The recent (2017) Report Card on Child and Family Poverty in Nova Scotia highlights that child poverty rates remained consistently high over the last decade.² We know that Indigenous and racialized children, recent immigrant children, and children with disabilities are more likely than Caucasian children to be marginalized in our society.² This points to underlying systemic and societal issues such as racism, ableism, and stigma associated with visible differences. These realities are unfair and unjust.

We must uphold the Canadian Human Rights Act⁴, Canadian Charter of Rights and Freedoms⁵, United Nations Convention on the Rights of the Child⁶, and United Nations Convention on the Rights of Persons with Disabilities⁷ by adhering to the basic human rights and freedoms of all children, youth, and adults to prosperously grow, learn, live, work, and age in our society. If we do not act at the municipal level to recognize these basic rights, we are silently accepting the welfare approach, which requires children and adults to prove they are “deserving” enough in order to have adequate food, shelter, and educational opportunities.

“Human rights are rights inherent to all human beings, whatever our nationality, place of residence, sex, national or ethnic origin, colour, religion, language or any other status. We are all equally entitled to our human rights without discrimination. These rights are all interrelated, interdependent and indivisible.”³

Ariella Azoulay

COST OF POVERTY IN NOVA SCOTIA, PER YEAR (in billions of dollars)





THE ECONOMIC CASE

Whether your perspective is that of a tax payer, a concerned resident, a business person or policy maker, the economic case for investing in poverty elimination is compelling. Consider the social costs that result from poverty – health care, policing, incarceration, isolation, poor mental health, not to mention that the opportunity cost of not enabling all of our residents to achieve their full economic and social potential. These are costs that impact all orders of government.

It has been calculated that the cost of poverty to Nova Scotia is approximately \$1.5 to \$2.2 billion per year.^{8(p23)} Both the federal and provincial governments spend a significant portion of their annual budgets on managing the impact of poverty on our community. In 2011, the federal government spent \$19.9 billion on employment insurance and an additional \$4 billion on transfers to low income families.⁹

We know that supporting people to move out of poverty can save taxpayers money and grow our economy. We can strengthen the economy by ensuring people living in poverty have income security, through livable incomes and/or quality jobs. This means people with challenges to participating in society and the workforce are provided with appropriate supports, while helping unemployed or underemployed people to get jobs that support them and their families. Our future economic growth is dependent on a financially healthy community; we can ensure this through income security, skill development, and continued labour force expansion. Together we can ensure each resident is equipped to play their role. In some cases, spending on poverty solutions (ex: training) will result in

long-term savings (ex: as the trained person transitions to work and paying taxes, rather than receiving taxpayer-funded support). In other cases, there will be no such fiscal payback, but we spend the money to lift someone out of poverty simply because it is the right thing to do (ex. someone with a disability that prevents her from working and earning income).

The business and the non-profit sectors will benefit from ending poverty. Increased incomes mean more purchasing power to live a healthy life, and buy more goods and services. Workers with adequate wages contribute to increased prosperity. The leadership and innovation offered by the business and the non-profit sectors will be key in growing our economy and ending poverty. The cost of poverty is unsustainable. It simply makes good business sense to create a strong economic and social legacy for future generations. Investing in finding solutions will not only yield a healthier, more engaged, more productive population. It will also save us money.



THE PUBLIC OPINION CASE

Support for poverty elimination is strong in HRM. A City Matters survey in 2017 indicated that 92 percent of people believe that poverty is a priority.¹⁰

Between October and November 2017, 621 people responded to a Poverty Solutions survey, in which they were asked to describe their quality of life and an ideal HRM. People described many of the barriers they encounter to accessing safe and affordable housing, affordable food, accessible and affordable transportation, quality jobs, education, and health care. Their ideal community, as described by one respondent, was a community where “Everyone has choice – where to live, what to eat, how to live their life.”¹¹

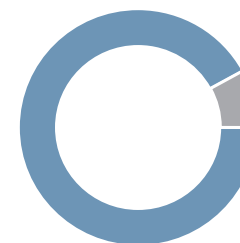
Respondents to the Poverty Solutions survey also overwhelmingly emphasized that the responsibility for actions to eliminate poverty rests with all of us – all orders of government, businesses, non-profits, faith communities and spiritual groups, and individual HRM residents.

Early consultations held in the spring of 2017 to inform the federal government’s poverty reduction strategy also demonstrated a need for a public awareness campaign. Although many people recognized the need to eliminate poverty in HRM, there was a lack of understanding about the causes and impact of poverty. Some participants reflected values, assumptions, and beliefs that perpetuate the stigma, discrimination and inequity that affect those living in poverty. Others were more open to reconciling the historical and current social, economic, and financial injustices.

And finally in a recent survey conducted by EKOS Politics, Halifax and the Atlantic Region rank among the highest for our open attitudes as measured by the EKOS Open-Ordered Index. This Index was constructed in response to an observation that the basic ideas of progress and shared prosperity were in decline while the gaps in income inequality were on the rise.¹²

SUPPORT FOR POVERTY ELIMINATION IN HRM

92%
believe that
poverty is a priority



2017 City Matters Survey

UNDERSTANDING POVERTY



When people live in poverty, they have fewer choices and chances to achieve their dreams, and a reduced ability to contribute to society. By necessity, they focus their energy on survival. The constant stress takes its toll, as individuals and families try to navigate daily life and overcome systemic barriers. Despite peoples' best efforts, children often do not receive what they need to break free of the cycle of poverty. Many children and youth feel defeated before they enter adulthood, and the cycle continues.

CAUSES OF POVERTY

The experience of poverty is not just about a lack of money, and it is not about people making poor choices that lead to disadvantaged economic circumstances. Poverty is a lack of choices, societal barriers, and not having enough of what is needed to live a good life.

“We should remind ourselves though that poverty is not just a measure of inadequate income. Poverty is felt. It is a social condition manifested in families’ struggles to afford the cost of housing, food, childcare, clothing and transportation in the face of low wages, precarious work, racial and gender discrimination, a weak social safety net, inadequate public services and lack of affordable and available child and family services.”^{2(p6)}

To eliminate poverty, and not just manage it or help people to cope with it, it is important to understand the causes and the conditions that increase or decrease the possibility of poverty.

The experience of poverty can be transitional, chronic, or passed on from generation to generation.

- Transitional poverty may be a temporary or short-term situation for people who experience a disruptive event, such as illness, or because they are in a particular life stage where they have limited access to resources and opportunities (ex: attending post-secondary education or temporarily stuck in precarious employment).
- Chronic poverty occurs when people experience a continuous low income, lasting ten years or more, caused by a combination of many factors beyond the individual's control (ex: disability).
- Intergenerational poverty is a product of failed systems that allow poverty to be passed on to individuals, families, or communities trapped in the complexity of poverty's causes. There is little or no access to help in getting out of it. The likelihood of children raised in poverty becoming adults living in poverty is very high.¹³

“The things a lot of people say about people who live in poverty are the same things they say about me, my family, and my Indigenous communities. In the same way that the barriers Indigenous people struggle to overcome are not just a problem for the Indigenous – they are a problem for all of Canadian society. So too are the barriers created for those living in poverty.

Poverty isn't just a problem for people living in poverty or in the margins, it's a problem for all of society. We all need to ask – what are we working towards, what is our responsibility, and how do we create a society we all would be proud to live in?”

Dylan Letendre, ECHO Hub - Chebucto Connections

SOCIAL DETERMINANTS OF HEALTH AS A FRAMEWORK FOR UNDERSTANDING POVERTY

Every day we see how issues such as income, nutrition, education, and access to adequate housing and social supports are impacting the health of individuals and families, and the long-term health of our communities.

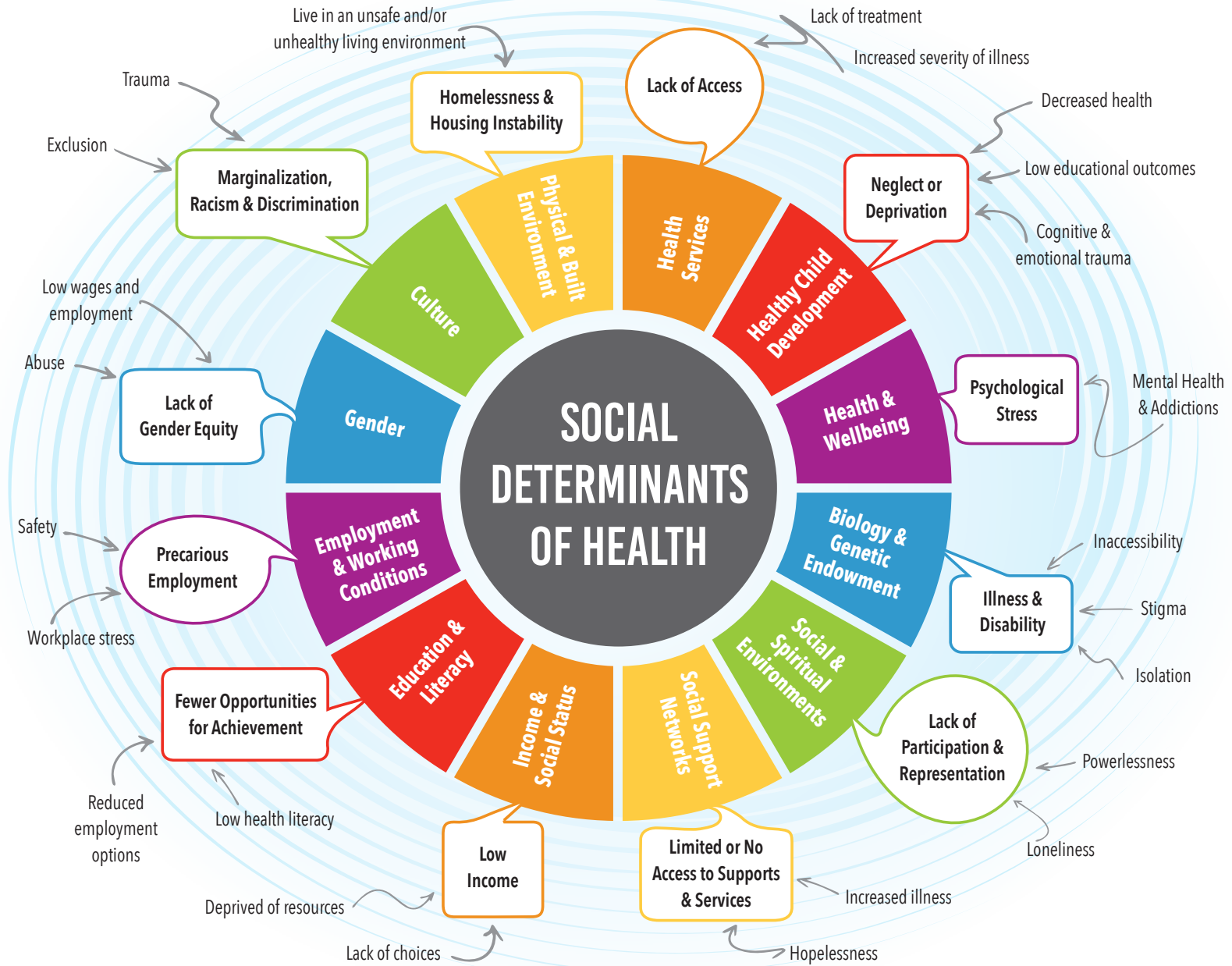
Many people in HRM do not have the resources and opportunities they need to remain healthy throughout their lives. We know the conditions in which our residents are born, grow, live, work, and age have more of an impact on health and well-being than medical treatments or lifestyle choices.

Housing, nutritious food, employment, and education are stronger predictors of health and well-being than access to healthcare or genetics. These social conditions and others, known as the social determinants of health, influence our ability to achieve and maintain our well-being.¹⁴

In addition, the quality of our neighbourhoods, housing situations, work settings, health and social service agencies, and educational institutions have a greater impact on an individual's health status than any combination of personal practices, behaviours, and work ethic.¹³ Ultimately, it is harmful conditions that result in poverty situations and crises. For example, a lack of access to resources and supports can lead to an increase in a resident's stress, which could result in personal challenges with mental health or substance addictions.

Figure 1 on the following page demonstrates how the social determinants of health can create harmful conditions and result in personal challenges that prevent people from reaching their full potential.

FIGURE 1: SOCIAL DETERMINANTS OF HEALTH AND WELL-BEING¹⁴



Just as one stone thrown into a pond creates a cascade of ripples across the water, the social determinants of health ripple through all areas of peoples' lives. Similarly, the cascading effect demonstrated above is also found when examining the effects of intergenerational poverty. Without addressing the systemic barriers responsible for their circumstances, the harmful effects often ripple from parent to child, from generation to generation.

The institutions and systems of our society have facilitated the development of social and health inequities. The inequities felt by our community members stem from systemic barriers that have emerged from our nation's histories of colonialism, racism, and discrimination. Inequities arise due to the unequal and inequitable distribution of the resources and opportunities people need to achieve their full potential. The principle of equity acknowledges and recognizes that there are historically marginalized, underserved, and underrepresented populations. The term equity recognizes that some people and populations may require a tailored distribution of resources and opportunities to ensure fairness and justice and to prevent and redress the social and health inequities.

The harmful legacy of racism, for instance, is the focus of the Nova Scotia Home for Colored Children Restorative Inquiry. It is hoped that through this inquiry we will understand not only what happened, but why it happened and why it matters for all Nova Scotians. The Restorative Inquiry is examining the past with a focus on future solutions: not only to prevent more harm, but to make changes that will help us treat each other more justly and equitably in the future.¹⁵

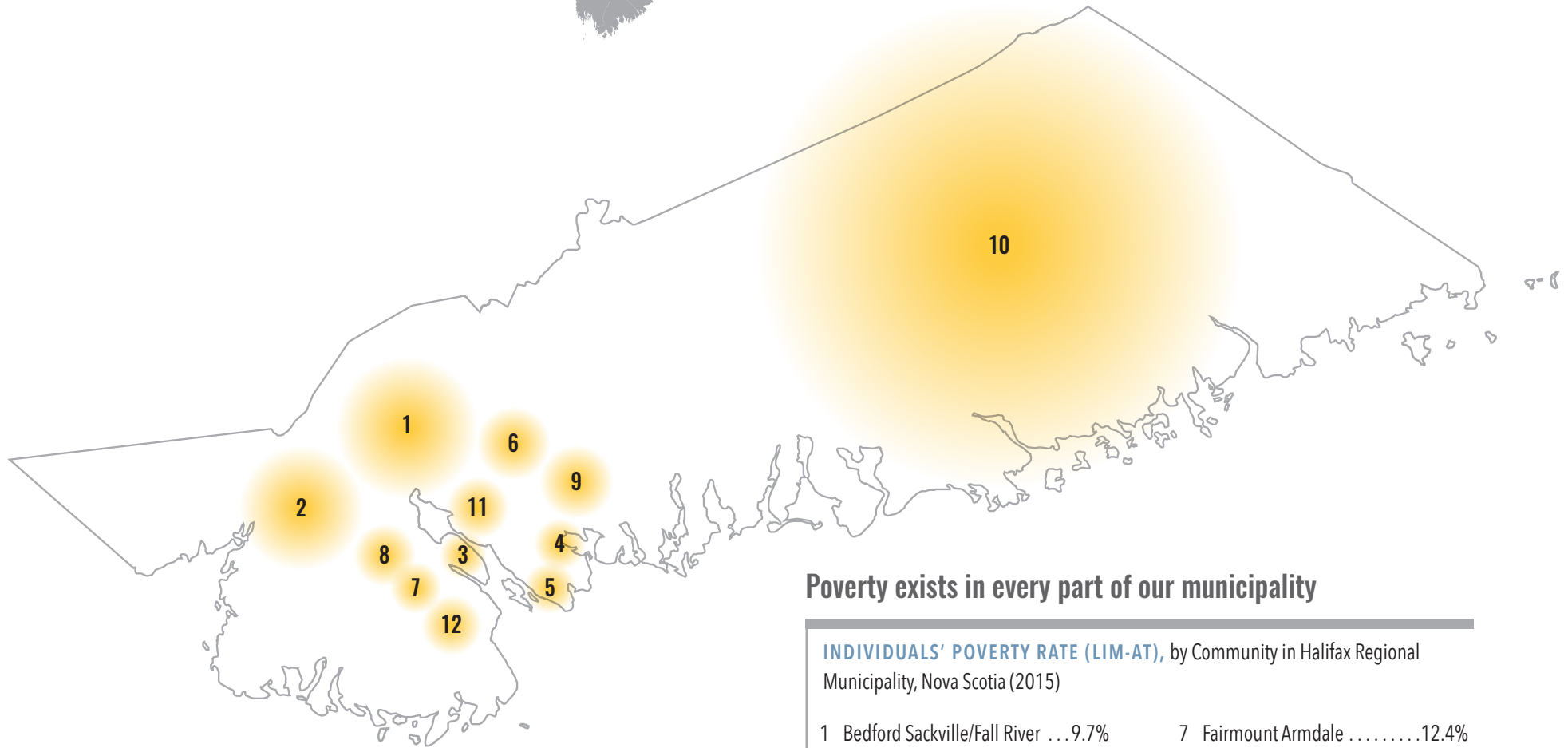
The philosophies that have guided our systems and social institutions have led to the privileging of some groups and the marginalizing of others. Inequities are felt more

strongly by groups who are pushed to the margins of our society. These realities have created values, assumptions, and beliefs that have permeated our institutions and led to the development of historic and current social, economic, and financial policies resulting in the racialization, feminization, and geographic concentration of poverty. People with disabilities, African Nova Scotians, Indigenous people, and recent immigrants are over represented among the municipality's residents living in poverty. As we look across our municipality to better understand the experience of poverty at a more granular level we begin to see how pervasive and concentrated it can be.

“Reconciliation requires deliberate, thoughtful and sustained action. Political action will be required to break from past injustices and start the journey toward reconciliation.

Justice Murray Sinclair
Chair of the Truth and Reconciliation Commission of Canada,
June 2, 2015

POVERTY IN HRM



Poverty exists in every part of our municipality

INDIVIDUALS' POVERTY RATE (LIM-AT), by Community in Halifax Regional Municipality, Nova Scotia (2015)

1 Bedford Sackville/Fall River ...	9.7%	7 Fairmount Armdale	12.4%
2 Halifax Rural West	7.3%	8 Fairview	30.3%
3 Halifax Peninsula	24.2%	9 Preston Area	22.0%
4 Dartmouth Cole Harbour	11.8%	10 Halifax Rural East	19.1%
5 Eastern Passage	8.5%	11 North Dartmouth	33.6%
6 Enfield & Area	7.2%	12 Spryfield	28.7%

An Urban, Suburban and Rural Focus

In a municipality as prosperous as ours, people may be surprised by our rates of poverty. For example, 14.7% of all HRM residents (vs 15.7% of Nova Scotians and 12.9% of Canadians) cannot afford to maintain a basic standard of living according to the recently released Market Basket Measure (MBM) results by Statistics Canada.¹⁶ The rates of people who cannot afford basic necessities are similar to the rates of people reporting low income. Using the After Tax Low Income Measure (LIM-AT), the average rate of poverty in HRM is 14.8% or 58,830 people.¹⁷ This rate is consistent with the national average of 14.2% and lower than the provincial average for Nova Scotia as a whole of 17.2%.¹⁷

With any municipal-wide measure or average, it's important to recognize that they mask the range that exists in specific communities or neighbourhoods. For example, when comparing 12 different communities within HRM, the LIM-AT rate ranges from 7% to 33%.¹⁷

In recognizing these variances, it is equally important to note why and how we construct community measures. For the purpose of this report, we wanted to reflect the poverty experience that exists in urban, suburban, and rural HRM and capture areas that we know have high rates and deeply rooted conditions of poverty. For this reason, we've constructed and modeled five distinct communities – Dartmouth North, Fairview, Spryfield, Preston Area, and HRM Rural East. It's important to acknowledge poverty does not define the identities of residents in these communities.

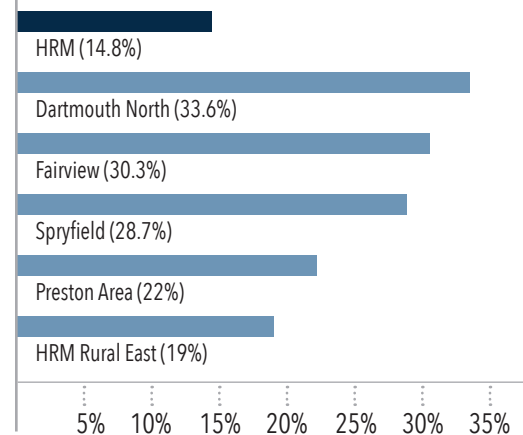
Despite the strength and resilience of community members, poverty unfortunately defines their realities. It's also important to note, for each of these five areas, we consulted with residents to identify the boundaries and footprint they use to define their geographic communities.

A note about HRM Peninsula: We have not modeled income data that is specific to HRM Peninsula despite the fact that it has a number of census tracts with high levels of poverty. The primary reason for not including a data focus for the Peninsula is it has a number of more complex characteristics, including a higher proportion of residents who are students or live in public housing and a greater diversity of neighbourhoods. HRM Peninsula is also unique in that it generally has a higher concentration of services than other parts of the municipality.

When we consider the experience of poverty, where people live and income measures only help us to understand one aspect of its impact. The quality of transportation, food, housing, and access to services, such as health and education, adds to our understanding of the experience and its depth of impact.

Living in rural HRM brings unique challenges. For example, many community members have no access to transportation. The further away from the urban core, the more difficult it can become to access essential services. Accessible transportation is a crucial service that provides access to basic needs that can prevent, reduce, and potentially eliminate the experience of poverty for some people.

FIGURE 2. INDIVIDUALS' POVERTY RATE (LIM-AT), by Neighbourhood in Halifax Regional Municipality, Nova Scotia (2015)



Rural HRM residents are predominantly older than urban residents. Of the HRM population living in HRM Rural East, 26.6% are aged 65 years and over (vs 15.7% in HRM). HRM Rural East families are less likely to have children living at home; 39.7% of households in this area report having no children at home compared to 28.8% in HRM.¹⁵ The experience of isolation and some of the health risks for those over 65 years old like arthritis, heart disease, cancer and Alzheimer's disease can become more difficult to address in rural areas if people are living alone.

Based on our consultations, more focus and engagement are required to better understand the unique experiences of poverty for people living in rural communities.

Most people living in poverty are employed; they are the working poor

The assumption that people who are experiencing poverty do not want to work is wrong, unfair, and stigmatizing. Access to quality employment that provides a living wage is difficult to find in our municipality. We know based on Statistics Canada's (2016) latest data for HRM, 28% of the labour force is earning under \$15/hour¹⁸. Some of these individuals and families are working more than one job and are not able to make ends meet.

The living wage for HRM is \$19.17/hour. This represents the amount that two working parents with two children need to each earn to support their basic needs.

"The living wage is calculated to lift families out of poverty and help them avoid falling back into poverty. The living wage is an hourly amount that enables a family to cover the costs of adequate food, shelter, clothing, transportation, and other basic necessities."^{19(p8)}

Nearly 25% of people employed in Nova Scotia work in sales and services.¹⁹ These jobs tend to be low paying and precarious. Employees in precarious work fill employers' permanent job needs, but are denied permanent employee rights (ex: health benefits, sick time, and pensions). Women and youth are very likely to be in low-paying and precarious employment.

In Nova Scotia, the minimum wage is \$10.85/hour for experienced workers and \$10.35/hour for non-experienced workers. From 2009-2014, at least 70% of youth (age 18-24) were employed in low-income jobs and continued to stay in the low-income category in the second year of their tax filings.²⁰ These low wages are concerning given the multiple benefits that could accrue from investing in youth and keeping them in the workforce. The 2016 census results show that almost half of the people aged 15 to 29 years and living alone in Halifax Regional Municipality (49.3%), cannot afford the basic necessities.¹⁶

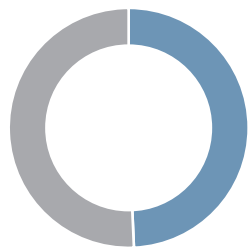
In Nova Scotia, men earn more than women and this earning gap is notably higher than the national gap in all fields of work (except for business, where men's higher earnings are the same provincially and nationally).¹⁸

Women continue to earn less than men regardless of their level of education. This is particularly concerning when we take into consideration that single-parent families are predominantly led by mothers who face additional barriers to employment, such as lack of affordable childcare and no access, or inadequate access, to employment insurance and maternity leave.

Some people are at higher risk of living in poverty than others

Female led lone-parent families, children and youth, and people with disabilities are the populations most impacted by poverty. Within these populations, several groups of people are overrepresented in the experience of poverty. This includes Indigenous people, African Nova Scotians, immigrants and recent immigrants and the LGBTQ2SIA+ community. Additionally, these identities overlap and some people identify with more than one identity or social location (ex: female, lone-parent, African Nova Scotian, and has a disability). Multiple intersecting identities, such as race, class, and gender compound to create interrelated and inextricable systems of oppression and experiences of discrimination and poverty.

ACCESS TO QUALITY EMPLOYMENT THAT PROVIDES A LIVING WAGE IS DIFFICULT TO FIND IN HRM



49.3%

of those aged 15-29 years living alone in HRM can not afford the basic necessities.



The living wage for HRM is **\$19.17/hour**. This is what two parents with two children need to each earn working full-time to support their family's basic needs.

FEMALE & LONE-PARENT FAMILIES

In HRM 10.8% of families are led by a lone-parent. Within this group, 8.7% are led by a female lone-parent compared to 2.1% led by a male lone-parent. Again, the aggregate community level measure masks realities that exist in neighbourhoods with high levels of poverty. For example, Dartmouth North, Spryfield, and Preston Area all have higher levels of lone-parent families (14.5%, 16.2%, 25.3%, respectively; see Figure 3). Women are 3 to over 6 times more likely to lead a lone-parent family in these HRM neighbourhoods.¹⁷

"African Canadian women find themselves entrenched in a cycle of poverty, with low levels of vocational and/or career advancement, lack of access to justice and deprived of the resources necessary to fully enjoy and participate in Canadian culture and life."^{21(p16)}

Of the families led by lone-parents in HRM, 30.7% cannot afford the basic necessities of life according to the Market Basket Measure. Female lone-parent families are significantly less likely to afford basic necessities than male lone-parent families (45.5% vs 26.3%).¹⁴ This is felt more strongly for both female and male lone-parent families caring for children age 0 to 5 years (43.1% and 66.8%, respectively).¹⁶

CHILDREN

In Nova Scotia, one in five children under the age of 18 is living in poverty. This means that 35,870 children in Nova Scotia are living in families with incomes below the After Tax Low Income Measure (LIM-AT).^{2(p7)} This is unacceptable.

"In 2015, for children under 6 in Nova Scotia, the child poverty rate was 26.2%, close to one in three young children, compared to 21.6% of all children."^{2(p19)}

As a whole, HRM's child poverty rates are slightly higher than national rates (18.8% vs 17%), although the municipality has lower rates of child poverty than Nova Scotia as a whole (18.8% vs 22.2%). However, neighbourhoods such as Dartmouth North (48.9%), Fairview (48.8%), Spryfield (39.6%), Preston Area (26.9%), and HRM Rural East (23.8%) have critically high rates of child poverty.¹⁷

These rates show that close to 1 in 2 children in these neighbourhoods live in a household that is experiencing poverty, which is more than two times the rate for other children living in HRM.¹⁷ This reinforces the evidence that poverty can be hidden when we take an aerial view of HRM. When we look at a neighbourhood level, it becomes clear that poverty is an urgent issue that must be addressed if we hope to live in a prosperous community.

FIGURE 3. MALE OR FEMALE LONE-PARENT FAMILIES, by Neighbourhood in Halifax Regional Municipality, Nova Scotia (2015)

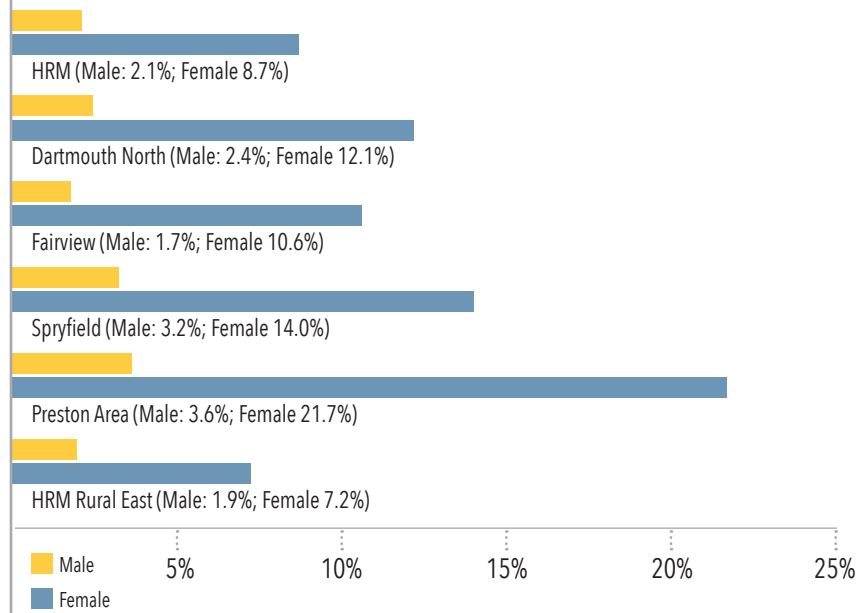
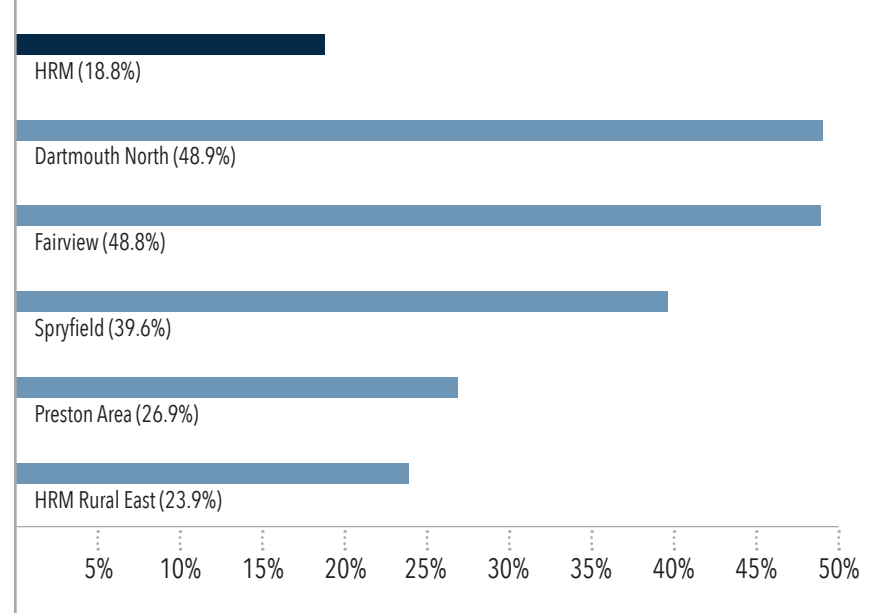


FIGURE 4. CHILD POVERTY RATE (LIM-AT), by Neighbourhood in Halifax Regional Municipality, Nova Scotia (2015)





Child poverty is a particularly important issue to address when we consider long-term outcomes. Children's early years are critical for their development. Each year they spend in poverty represents a significant loss of opportunity to ensure their success and well-being now and into their future. The Conference Board of Canada, for example, reports that investing in early childhood education reduces intergenerational poverty and enables more low and middle income parents to enter the workforce.²² It is essential that we recognize the inequity of the unfair beginning many of our children have and take bold steps to end the experience of child poverty.

YOUTH IN CARE

Youth who have had experiences with the child welfare system are particularly vulnerable, and continue to experience poverty into adulthood. Racialized, Indigenous, and LGBTQ2SIA+ youth are also overrepresented in the child welfare system.²³ Research has shown that they are at a greater risk of experiencing housing instability and homelessness, achieve

lower educational outcomes, experience higher rates of unemployment and underemployment, and have more involvement with the criminal justice system.²⁴ Reforming these systems of care is imperative to addressing structural racism and marginalization.

Youth in care often also experience difficulties as they age out of the system. For example, 30% of youth who have been in care and experienced homelessness indicated that the transition from care directly impacted their current situation.^{25(p6)} Addressing the systems that produce barriers for youth is therefore imperative to eliminating poverty.

PEOPLE WITH DISABILITIES

With 18.8 per cent of the population having a reported disability, Nova Scotia has one of the highest disability rates in the country. Additionally, 46.4% of people with a disability make under \$20,000 a year, and 31.4% make under \$40,000 in Nova Scotia.²⁶ According to a report

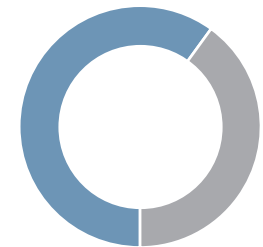
produced by the Nova Scotia Accessibility Directorate, an estimated 60% of Income Assistance clients in HRM have a disability or short-term illness.²⁷

The barriers for people with disabilities and their families are significant. They face challenges with inclusion, attitudinal barriers, access to communication, health care, education, transportation, employment, and housing. To make change happen by 2030 around the inequities faced by people with disabilities, the Nova Scotia Accessibility Directorate was established in 2016. Community organizations and families report inadequate supports for youth with disabilities accessing opportunities for education that could help address some of the income challenges they face in adulthood. For example, a study of deaf and hard of hearing Grade 4 to 8 students in Nova Scotia and New Brunswick scored below same-age hearing peers on reading measures.²⁸ Both women and men with disabilities are significantly less likely to have a certificate, diploma, or degree compared with women and men without disabilities.²⁹ A lack of housing and respite supports also create significant barriers for living independently in safe and supportive environments.³⁰

INCOME ASSISTANCE CLIENTS

60%

of clients in HRM have a disability or short-term illness



Nova Scotia Accessibility Directorate

Children living in poverty may also have a disability but the 2016 census data does not report on the rate of child poverty by disability status. The Child and Family Poverty Report emphasizes though,

"... we do know that children with disabilities are twice as likely to live in households relying on social assistance and families of children with disabilities are more likely to live in poverty due to increased time away from work."^{2(p14)}

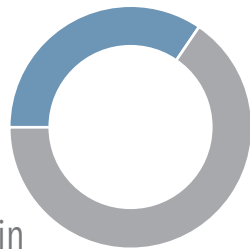
People with disabilities are more likely than people without disabilities to experience social exclusion and discrimination, which can result in unequal access to social, cultural, political, educational, and opportunities and resources. Experiences can vary depending on the type of disability. The Canadian Association of the Deaf surveyed 365 deaf Canadians and found 40% of them to be unemployed.³¹ Nearly half of women and men with disabilities aged 25 to 54 reported that they were disadvantaged in employment due to their condition.³²

RACIALIZED GROUPS LIVING IN POVERTY

The 2016 census data, reporting on 2015 incomes, shows that there are high rates of poverty in our municipality

RACIALLY VISIBLE POVERTY RATE, 2016 census data

34.5%
rate of poverty
in racially visible
population (14.8% in
general population)



among racially visible populations – 34.5% compared to 14.8% for the general population.¹⁷

The municipality has two predominant populations wrongfully displaced from their homes and land – the Indigenous and African Nova Scotian communities. Over several generations and, ongoing to this day, these populations have experienced a tragic history of oppression, racism, and discrimination.

A recent United Nations Human Rights Council report released in August 2017 was very critical of the historical racism and existing conditions in African-Nova Scotian communities. Over a dozen recommendations were made calling on both the provincial and federal government to address issues ranging from comprehensively addressing anti-Black racism and human rights concerns of African Canadians to resolution of land disputes.²¹

In 2015 the Truth and Reconciliation Commission of Canada identified 94 Calls to Action. The Commission engaged Indigenous communities across Canada to document the truth about what happened in residential schools and the intergenerational trauma that is their legacy. The Calls to Action guide us on a path of reconciliation and renewed relationships based on mutual understanding and respect.³³ Reconciliation is an ongoing individual and collective process.

The need for work in collaboration with the municipality's Indigenous and African Nova Scotian communities is ongoing. We are committed to building individual and community resilience with these and other communities. The Public Safety Strategy 2018-2022 was adopted on October 31, 2017 by the Halifax Regional Municipality. This plan names specific risk factors in our social and cultural environments that can negatively impact our communities, such as economic

inequality, gender inequality, racism, social exclusion, and norms supportive of violence. It further identifies risk factors that create unsafe communities, workplaces, and school settings. These factors are unemployment, concentrated poverty, poor housing, poor nutrition, and poor access to services.^{34(p10)} Community consultation participants proposed that we all learn from our Mi'kmaw and African Nova Scotian communities, and commit to a path of reconciliation to end the oppression, racism, and discrimination that continues today and contributes to the experience of poverty.

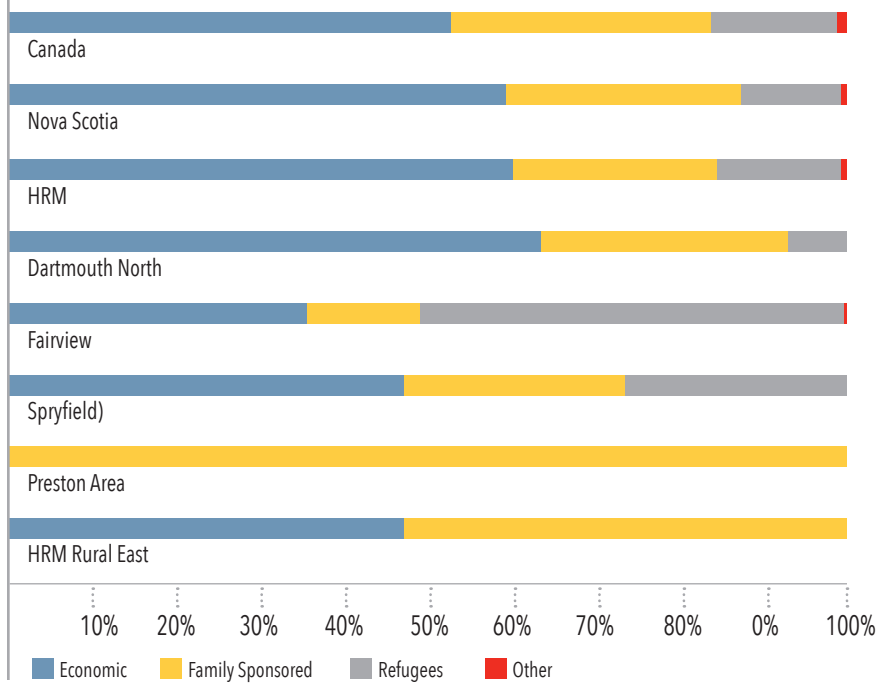
RECENT IMMIGRANTS

Immigrants and refugees offer new perspectives on economic and social issues, and they have the capacity to enrich their communities with their cultural insights, knowledge, and creativity. According to a Conference Board of Canada report, communities that effectively utilize the skills of their immigrant and visible minority populations gain by increasing their social capital and social cohesion.^{35(p20)} Immigrants help keep us aware of our role in the global community and of the strength that we can gain by being more open to new ideas and different ways of doing things.

Attracting and retaining recent immigrants is also an important part of HRM's growth strategy. In fact, the Halifax Partnership included a special analysis of the need for immigration in their Halifax Index for 2017. They make a strong case for attracting and retaining immigrants as a way to mitigate the trend of an aging population and an increasing dependency ratio.²⁰

It is important to consider the diversity of needs in the recent immigrant population as well as understand where people, in particular refugees, are settling in our community. As we can see in Figure 5 (following page), just over 50% of the immigrants in Fairview are refugees.

FIGURE 5. IMMIGRANT STATUS BY NEIGHBOURHOOD IN HALIFAX REGIONAL MUNICIPALITY AND CANADA (landed between 1980 and 2016)



“In 2016, the city nearly tripled its international immigration, from 2,320 in 2015 to 6,150 last year. Some of this growth was due to the increase in Syrian refugees and the addition of new economic immigration streams.”^{20(p20)}

Despite the challenges they may face in settlement, immigrants are resilient. The 2016 census shows that based on the LIM-AT, 26.1% of immigrants who arrived in HRM between 2006 and 2010 had a low income, whereas 40.6% of immigrants who arrived between 2011 and 2016 had a low income.¹⁷ This finding supports earlier reports³⁶ and suggests that within a five-year period, immigrants experience a reduction in poverty as they obtain new skills, establish employment, and stabilize their housing.

It is also important to note that recent immigrants are bringing young families to settle. To successfully transition and remain in HRM, recent immigrants need access to language services and various other social supports (ex: childcare, school support, affordable housing).

Community organizations, non-profits, and government agencies also need to develop cultural competency and provide necessary internal supports (such as interpretation), as part of their commitment to welcome newcomers. Commitment to training of staff in cultural competency and budgeting for inclusionary mechanisms are necessary. Immigrants are a diverse group that includes persons with disabilities, racialized persons, LGBTQ2SIA+ persons, youth and young adults, and seniors so it is important that organizations and agencies provide services that respond to these realities when working with the diverse immigrant community.

We recently came to Halifax as refugees. If my husband and I could find jobs, we would feel better about our quality of life.

HRM Resident

LGBTQ2SIA+ COMMUNITY

LGBTQ2SIA+ people have experienced discrimination and inequities in our community both before and since homosexuality was decriminalized in 1969.

Data related to the LGBTQ2SIA+ community is limited, and the 2016 long form census was limited by using a binary format of identifying sex instead of multiple genders. Although our Nova Scotia data is limited, elsewhere they are beginning to highlight the inequities our LGBTQ2SIA+ communities face in relation to employment and income. Discriminatory hiring practices and workplace harassment have led to the exclusion of many members of the LGBTQ2SIA+ community from participating in the workforce. Until as recently as the early 1990s, the federal government actively interrogated and purged people from the military, public service, RCMP, and foreign service because of their sexual orientation. The impact

of what was then government-sanctioned discrimination is still evident today. The British Columbia Poverty Reduction Coalition states that:

“Trans and non-gender conforming people have double the unemployment rate as the general population, and 1 in 5 have been refused houses or apartments because of their gender identity or expression.”

And

“Queer and trans people are over represented among low income Canadians; for example, in Ontario 71% of trans people have at least some college or university education, yet about 50% are living on \$15,000 or less a year”. As information emerges, we will have a more complete picture of how our LGBTQ2SIA+ community members are disproportionately affected by poverty.”³⁷

People want to feel welcomed, establish trust and get the help they need.

HRM Community Advocate

PEOPLE WITH MENTAL ILLNESS OR ADDICTION TO SUBSTANCES

People with mental illness or addictions are over-represented among people living in HRM who are struggling with stigma and lack of access to services, housing, and food.

At least 2 in 5 Nova Scotians report having a mental health or substance use problem at some point in their lives.³⁸ These rates are higher in Nova Scotia than in Canada (41.7% vs 33.1%).³⁸

Mental illnesses and addictions can begin in childhood and follow someone throughout their lifetime, even with treatment and universal access to services. Income can play a role in the experience.

Nova Scotia's first Health Profile (2015) reports that people with income in the bottom 20% are much less likely to claim having overall excellent or very good mental health than people with income in the top 20% (60% vs 81%).³⁹ Consider for example, smoking behaviours, Nova Scotians with income in the bottom 20% compared to the top 20% are more likely to smoke (29% vs 17%) and report poorer physical health.³⁹

Advocates are calling for a responsive provincial Mental Health and Addictions Strategy with local impact for youth and adults.

OUR APPROACH



Photo: Halifax Harbour Bridges and Dale Wilson Photography

Developing comprehensive poverty solutions requires input from diverse community members – ensuring our plans are informed by the collective wisdom and expertise of our community. Key principles informed our consultation process.

PRINCIPLES TO GUIDE OUR ONGOING COLLECTIVE LEARNING THROUGH THE CONSULTATION PROCESS

☉ Inclusive

Ensure that a cross-section of the community is engaged in the process. Ensure the inclusion and participation of people with lived experience, create space, and provide support.

☉ Transparent

Engage in an open process, with transparent purpose, goals, expectations, and constraints. Be open about how the engagement will be used in decision-making.

☉ Respectful

Be a true community partner; use tools appropriate to participants; hear and listen to what people say; create realistic timelines.

☉ Appropriate

Utilize levels and methods of engagement that are appropriate to the purpose, leveraging existing structures where they exist.

☉ Community Benefit

Provide clear, accessible, and comprehensive information to facilitate involvement.

☉ Balanced and Accountable

Strive to balance the participation and influence of stakeholder groups; monitor ongoing effectiveness of community engagement strategies.

THE CONSULTATION PROCESS

This report is informed by the best available research and evidence, the social determinants of health, good work already happening in community and consultation and engagement with more than 1,100 residents over an 8-month period.



BUILD FROM EXISTING COMMUNITY KNOWLEDGE, RESEARCH AND DATA

- United to Reduce Poverty Consultations (117 participants)
- United Way Halifax Agency & Community Partners
- Policy and Literature Review



INITIATE DATA COLLECTION AND KNOWLEDGE SHARING

- Low income data collected and analyzed for 1000+ census tracts in HRM using 2016 Statistics Canada data
- Participate in a community data working group



CONSULTATIONS TO ENGAGE COMMUNITY AND IDENTIFY BARRIERS AND IDEAS FOR ACTION

- Solutions Task Teams (6 teams / 48 members)
- Focus Groups (13 engagements / 184 participants)
- Business Alliance (18 members)
- Online Consultations (621 participants)



PUBLIC REVIEW AND INPUT

- Ideas for Action Open House
- Public Gallery of Solutions - 80 attend in person and 1,391 views online



ADVISORY COMMITTEE

- Stewarded by a diverse cross section of 22 members of our community - Poverty Solutions Advisory Committee

WE LEARNED FROM...

- First voice - experts by experience
- Non-profit agencies and service providers

- Community advocates
- Government agencies and departments
- Faith-based communities
- General Public

- Business community
- Academic and Poverty Researchers
- Cities reducing poverty and other groups leading and supporting municipal poverty strategies

SUMMARY OF COMMUNITY CONVERSATIONS

To date, approximately 1,139 people have contributed to the 100+ Ideas for Action to Eliminate Poverty. A representative cross-section of HRM's diverse population and communities were consulted and engaged (see Appendix A for a detailed table of the consultations). Consultations included:

- **Solutions Task Teams:** 6 multi-sector groups dedicated to the themes;
- **Focus groups:** 13 groups met to discuss solutions
- **Business Alliance:** Engaging business leaders in solutions development;
- **Community Meetings:** 2 meetings focused on community feedback to the calls to action;
- **Experts** by experience, community advocates, and service providers;
- **Outreach** within municipal, provincial and federal governments, and elected representatives;
- **Shape Your City** public survey.

The first consultations were held in April 2017 when United Way Halifax and community partners hosted community conversations as part of a national engagement initiative. This process was led by United Way Centraide Canada to inform a joint submission to the consultations for the National Poverty Reduction Strategy. From these consultations, several early themes emerged to contribute to our consultation process and the ongoing development of 100+ Ideas for Action and the ongoing development of the strategy.

Throughout the consultation process, United Way Halifax sought to reach out and incorporate the collective wisdom of groups who have worked to eliminate poverty in HRM for decades. The consultation process honoured the significant consultation and engagement that had already occurred in the community around poverty elimination, such as the "600 Voices in '16" consultations in Dartmouth North by Between the Bridges, the work of the Mi'kmaw Native Friendship Centre to develop the Urban Aboriginal Homelessness Community Action Plan, and the "What's Your Recipe for a Better Food System?" Food Secure

Canada discussion hosted by the Dartmouth North Community Food Centre – to name a few. The consultation process built on this work from the community, and incorporated the learnings into the development of the 100+ Ideas for Action. Community-based organizations, advocate networks, service providers, and government were central to informing this report. Their expertise and knowledge were sought through one-on-one meetings, their participation on the Advisory Committee and task teams, in focus groups, and through a gathering of United Way Halifax's funded partners held in June 2017. The consultation also incorporated written work many of these groups have developed.

Building off the wisdom and guidance of the community, six multi-sector Poverty Solutions Task Teams were formed around the theme areas of homelessness and housing; food security; income security; education and early childhood development; health and well-being; and access and equity. Members of these teams included experts by experience, community-based organizations, government, and the private sector. Task teams met from September to November 2017 to identify barriers and develop solutions to be actioned by the strategy in their respective theme areas.

First Voice Story

By the time I have paid rent, I have little left for frivolities like food and toiletries. I do not LIVE, I EXIST. My health, both physical and mental, suffer a great deal because of the circumstances in which I am forced to exist.

HRM Resident

In addition to the task teams, community partners and United Way Halifax co-hosted focus groups. Focus groups leaned into gaps in listening and were used to amplify the voices of groups that are marginalized or at risk of marginalization. Many focus groups (see Appendix A) were also held throughout rural HRM.

The consultation process also included an online survey through Shape Your City, and physical copies of the survey distributed by community-based organizations. This ensured that the survey was accessible to all people, and those who do not have access to internet, a computer, or the technical skills to navigate an online survey tool.

In November, at an all-day open house and a Public Gallery of Solutions, the results of the consultations and ideas for action were shared back to the community for further feedback. It was vital to ensure that the ideas that we heard had been developed through the collective wisdom of our community.

IMPORTANT LEARNING THROUGH CONSULTATION

People with lived experience have the best understanding of poverty. The consultation process was designed to ensure that people with lived experience were not only consulted, but actively involved in developing the ideas for action. The inclusion of experts by experience was grounded in the “Seven Principles for Leadership and Inclusion of People with Lived Experience” established in 2014 by the Canadian Alliance to End Homelessness.⁴⁰

Approximately 38% of people who participated in the consultation process self-identified as currently living in, or having had experiences of poverty. The participation of these experts was valued by paying a living wage, providing appropriate supports for childcare and transportation, and food at each meeting or event. Meetings were held in spaces that were familiar and comfortable to the community, and were often incorporated into existing programs. These were crucial supports that enabled a high rate of participation by people currently living in poverty. In future work, this will need to be resourced sufficiently to ensure the continued meaningful engagement of marginalized people.

As community-based organizations, governments, businesses, and other organizations, we need to incorporate experts by experience in our decision-making processes. This requires organizations to overcome paternalistic beliefs, systems, and practices. For a transformative change, we require the leadership and expertise of people with lived experience of poverty. We need to open up our decision-making processes, and to value the time and contributions of these experts.

We also need to do better and meet communities on their terms, rather than forcing our ways of working and models upon them. The importance of engaging and working with the Indigenous and African Nova Scotian populations was recognized early on in designing the consultation process. Some participants self-identified as Indigenous and African Nova Scotian, and some community conversations were held with the African Nova Scotian community. Indigenous community members also hosted a weekly Sharing Circle throughout February 2018. While these Sharing Circles did not contribute to the ideas for action, they are an important step in working to reconciliation. We are committed to building relationships with these communities and to a much more comprehensive approach to building structures and processes that enable collaboration with both the Indigenous and African Nova Scotian communities.

SHAPE YOUR CITY POVERTY SOLUTIONS SURVEY RESULTS

HRM residents were encouraged to provide feedback on their experience with poverty through an online survey hosted by Shape Your City Halifax. The survey was available from September 27 to November 9 and 621 residents from across HRM participated.

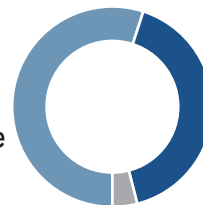
Do you feel you are currently experiencing poverty?

74% no
19% yes
7% unsure



Do you feel you have ever experienced poverty?

55% no
41% yes
4% unsure



Do you feel you have a good quality of life?

13% no
77% yes
10% unsure



A CALL TO ACTION: WHAT WE HEARD



PHOTO: HRM Poverty Solutions Public Gallery Event. Sandor Photography

Through the consultation and engagement work, everyone in the process learned a great deal from each other and worked hard to develop themes where ideas for actions could be clearly articulated. It was important that the ideas for action address immediate needs while working toward longer-term needs by helping individuals and families move out of, and stay out of, poverty. Fundamental to all of this work is building understanding, process, and actions that are informed by an equity lens and the social determinants of health.

POVERTY SOLUTIONS THEMES AND IDEAS FOR ACTION

The community has identified action is needed to reduce and eliminate poverty in seven theme areas. The ideas for action, developed by and with our HRM communities, have far-reaching implications for all orders of government and all sectors. Each sector and organization will need to assess and respond accordingly. The themes align with the strategies outlined in the HRM Strategic Plan for 2017-21 and include economic development, service delivery, healthy livable communities, social development, governance, engagement, and transportation.⁴¹

It takes a lot of work and commitment to build a prosperous and inclusive community. In some areas, HRM and United Way Halifax have the tools, resources, and authority to lead the way. In other areas, we must collaborate with other orders of government, the private sector, and community organizations to counter poverty, promote inclusive economic growth, and ensure community development. Where the municipality does not have jurisdiction, advocacy to the provincial and federal governments is needed.

What follows over the next pages are 129 ideas for action. These ideas are organized by three objectives: Address Immediate Needs, Pathways to Prosperity, and Systemic Change⁴³ and seven important focus areas for change.

-  **Quality Jobs and Livable Incomes**
-  **Transportation**
-  **Food Security**
-  **Homelessness and Housing**
-  **Services Access for Health and Well-Being**
-  **Education and Learning**
-  **Systemic Change**

In describing each focus area and the related ideas for action, we've highlighted how the experience is not felt one issue at a time but as an assault of many issues. We also organized actions to demonstrate how we can help people who are living in poverty cope with the immediate impacts, while also identifying ways to address root cause and generate longer-term solutions that will end poverty for all.

"From coast to coast to coast, in communities large and small, urban and rural, municipalities are the order of government closest to people's lives. Their local solutions are helping tackle national challenges-from growth and productivity to climate change-and are building a more livable, competitive Canada." ⁴²

Federation of Canadian Municipalities



QUALITY JOBS AND LIVABLE INCOMES

Ensuring everyone in our community has livable incomes and opportunities for quality jobs is essential to eliminating poverty in HRM.

Although poverty is not only about a lack of income, insufficient money to pay for basic needs creates barriers that exacerbate inequities and issues with access. Income insecurity also socially isolates, as people are not able to fully participate in community life. We heard from our community consultations that income security is vital to addressing the other priority areas such as housing and food security.

Income insecurity is exacerbated for community members by the prevalence of precarious and low-wage jobs. There has been significant growth in temporary or contract work since the 1980s. These jobs are characterized by insecurity, lack of benefits, and offering little to no career growth. Racialized communities, women, and particularly racialized women, are disproportionately impacted by the growth in precarious employment.^{44(p11)} Precarious employment is also characterized by low wages. A recent survey (2014) found that over half of workers in precarious employment made less than \$40,000/year.^{44(p10)}

Work that can pay a living wage is difficult to find. Of the 58,830 people living on incomes at or below the low income measure (LIM-AT) in our community, many are employed and yet struggling to meet their basic needs. We need to improve the quality of jobs available to HRM residents to ensure that the economic growth that our municipality experiences is equitably shared.

We also understand that not everyone can work. People experience challenges, such as disability, that can limit their ability to participate in the workforce. Other people are not provided with equitable opportunities due to the impact of racism, discrimination, and marginalization.

The income assistance system is supposed to provide a social safety net, but its inadequacy is a significant barrier faced by many in our community. Often people become trapped in the net. Assistance rates and special needs supports are insufficient; clients have earnings clawed back at high rates; and there is a need for better supports for those living with a disability, and those seeking education and training opportunities. The income assistance system should provide a safety net that has resilience or "the bounce back" built into it. It should be a system that

provides people with the supports and income to meet their basic needs and participate fully in our community.

Residents of HRM without income security are missing out on our municipality's prosperity. Advocacy groups within our community and across Canada are asking for governments and businesses to take action on increasing income equality.

Of the 58,830 people living on incomes at or below the low income measure (LIM-AT) in our community, many are employed and yet struggling to meet their basic needs.

The Department of Community Services has committed to implement a transformation project that will impact the Employment Services and Income Assistance (ESIA) program. Transformations include reducing the claw back rate for earned income, and increasing income assistance rates in 2019. Unfortunately, several agencies and community advocates, and numerous participants in our consultations, are indicating the changes are not sufficient and will not address the problem. Rates need to increase to levels that enable clients to meet their basic needs and participate fully in our community. The system needs to be transformed to ensure that clients are treated with dignity and respect. A recent study found that a family of four relying on income assistance in our province would need an additional \$986.44 a month to afford to eat healthily.^{45(p22)} Through the Poverty Solutions consultations, the inadequacy of the income assistance program was emphasized over and over again. It was identified as the number one barrier that people in our community encounter. It traps people into a cycle of poverty and desperation.

To make substantial changes to the income assistance levels, the federal government would need to work with

provincial governments, and increase transfer payments. As the federal government is currently developing a National Poverty Reduction Strategy, we as a community need to advocate for all orders of government to collaborate to build an income assistance system which respects human rights, provides basic necessities to its clients, and ensures they can fully participate in our community. It is essential for the health of our community that we build resilience into our social safety net.

There is a large portion of our population that are fully employed and struggling to meet basic needs. They are the working poor. The municipality is exploring a policy framework for consideration of social economic benefit, employee compensation/living wage, and environmental impacts in the procurement process. This has the potential to provide a livable income to many in our community. Basic Income Nova Scotia is also advocating for a feasibility study into creating a basic income in Nova Scotia. A basic income would lift thousands out of poverty by providing an income sufficient for the necessities of life, including food, clothing, shelter, childcare, and other resources that facilitate social engagement, such as access to transportation. It has the potential to benefit both ESIA clients and the working poor.

Creating quality jobs and liveable incomes is not the sole responsibility of government though, and the private sector has an important role to play. Organizations such as Common Good Solutions are supporting entrepreneurs, non-profits, and cooperatives to start and grow social enterprises. Social enterprises compete in the market place, but have a dual purpose of generating income and achieving a social, cultural, or environmental mission. Stone Hearth Bakery, Café and Catering services is operated by MetroWorks Employment Association to provide meaningful training and employment opportunities for individuals living with mental illness and experiencing barriers to employment. Other organizations, such as The Cooperators, are paying employees a living wage.

A basic income would lift thousands out of poverty by providing an income sufficient for the necessities of life, including food, clothing, shelter, childcare, and other resources that facilitate social engagement, such as access to transportation.



ADDRESS IMMEDIATE NEEDS

1. Improve the quality of and access to income supports.

- 1.1 Advocate and work with the provincial and federal governments to raise social assistance rates and other income supports and benefits (ex: tax credits).
- 1.2 Advocate and work with the provincial government to ensure income supports and services meet residents' needs by reducing barriers and increasing supports (ex: allowing individuals to retain greater earned income, while maintaining eligibility; reviewing the special needs list to reflect actual cost and needs).
- 1.3 Better assist low-income and marginalized residents to access childcare spaces and fee subsidies.
- 1.4 Improve access to health benefits, including dental, pharma, and vision care, for those transitioning to employment from Employment Services and Income Assistance (ESIA) and Nova Scotia Disability Support Program.
- 1.5 Work with all levels of government and community partners to complete a feasibility study looking in detail at how to implement a basic income.



PATHWAYS TO PROSPERITY

2. Create more employment opportunities for low-income and marginalized populations with high unemployment rates and barriers to employment.

- 2.1 Increase access to skill development programs to expand opportunities for marginalized populations.
- 2.2 Develop and provide flexible childcare models that align with the current labour market realities and enable greater participation in the workforce among low-income and marginalized families.
- 2.3 Collaborate with business and community partners to better understand workforce gaps and opportunities for employment.
- 2.4 Provide opportunities for ongoing training for employers around inclusion and cultural competency to influence more inclusive recruitment and hiring practices.
- 2.5 Support low-income and marginalized youth to access volunteer and job opportunities.
- 2.6 Advocate with the provincial government to support participation in the workforce by maintaining open income assistance files, to allow individuals to cycle in and out of the workforce as their situation changes.

3. Raise incomes of marginalized populations.

- 3.1 Work with public and private employers to implement a living wage (ex: develop a Living Wage Network).
- 3.2 Advocate and work with the federal and provincial governments to increase minimum wage and improve labour standards.
- 3.3 Support pension savings (ex: Registered Disability Savings Plan: RDSP) for people with disabilities, and their families and caregivers.
- 3.4 Complete a pilot study and advocate for a full implementation of a basic income.
- 3.5 Explore and consider the benefits of restructuring the tax system (ex: modify tax policy to create a new tax bracket so that individuals living on low-income do not pay provincial income tax; convert existing non-refundable tax credits to refundable credits).
- 3.6 Explore opportunities to increase access to business loans, credit, and other support for marginalized populations.



TRANSPORTATION

In the consultations, participants emphasized the barriers to accessible and affordable transportation. People described the inadequacy of the transportation system, and emphasized the importance of linking low-income neighbourhoods to other areas of the community – increasing access to employment, recreation, and other goods and services.

The cost, reliability, routing, and timing of Halifax Transit are significant barriers for many. Residents of suburban and rural HRM emphasized the limited or total lack of access to public transit options, and the inadequacy of relying on sharing rides with neighbours, community transportation options, or expensive taxis. Many are forced into expensive car ownership.

People requiring Access-a-Bus face a system that does not accommodate all equipment, and requires a week's notice to book. Taxis are expensive, and there are not many that are accessible.

Rural, suburban, and urban residents described the social isolation and difficulty accessing goods and services that occur because of a lack of accessible and affordable transportation options.

A number of steps have been taken to make Halifax Transit more affordable for residents. The annual Low Income Transit program makes monthly transit passes more affordable for low-income residents, allowing participants to purchase adult transit passes at 50% off the regular price. Most recently, HRM, Halifax Transit, and the Province partnered to provide transit passes to all income assistance recipients, their spouses, and dependents that live in an area serviced by public transportation. This new bus pass program will impact more than 16,000 residents.⁴⁶

Barriers to transportation are not just about affordability though, and it is important that HRM and other partners work to build an integrated transportation system. The

Halifax Regional Council voted unanimously for the Integrated Mobility Plan (IMP) in December 2017.⁴⁷ Although there is some rural focus in the IMP, working further with members of the rural community to develop local solutions outside of what is named in the IMP will be important.

Transportation includes vehicles (ex: cars, trains, buses). It also includes other forms of mobility such as walking, rolling, and cycling. Accessibility must also be considered so our municipality (urban, suburban, and rural) is walkable and wheelchair accessible.

People described the inadequacy of the transportation system, and emphasized the importance of linking low-income neighbourhoods to other areas of the community – increasing access to employment, recreation, and other goods and services.



ADDRESS IMMEDIATE NEEDS

4. Make transportation more affordable and accessible for low-income residents and marginalized populations.

- 4.1 Seniors and youth 18 and under ride public transit free.
- 4.2 Provide low-income transit passes.
- 4.3 Comply with the Accessibility Act by using an integrated approach to create an efficient 24/7 paratransit service. This will ensure the public transportation system is fully accessible and available when people need it (ex: improve the reliability, flexibility, and accessibility of the Access-a-Bus system).
- 4.4 Ensure access to an adequate transportation allowance for ESIA recipients in rural areas who have limited public transit access.

- 4.5 Support partnerships that increase access to affordable and accessible transportation through the establishment and expansion of community transportation (ex: community vans, vehicle share options, accessible van share options).
- 4.6 Increase the number of accessible taxis.
- 4.7 Support community transportation options for moving (ex: community moving van or truck).
- 4.8 Support and advocate for the development of active transportation infrastructure (e.g. sidewalks, bike lanes, etc.).

A poverty-free HRM has transit that is accessible, inexpensive and covers the entire municipality.

HRM Resident



PATHWAYS TO PROSPERITY

5. Improve transportation services in urban, suburban, and rural HRM.

- 5.1 Increase reliability, availability, and access across the Halifax Transit system, linking people with community, employment, and services.
- 5.2 Ensure equitable access to public transportation across the HRM.

When people have inadequate income, food is often the last priority. It is the \$20 that is leftover for the month after other expenses such as housing, utilities, childcare, and transportation are paid for. People often do not have the income to afford nutritious food, or to pay for the transportation to get to the grocery store or food bank. Food insecurity can seem invisible when it comes to poverty, but there are many barriers to accessing affordable, nutritious, and culturally appropriate foods, including income security, transportation, and accessibility.

Throughout the community consultations, people described their difficulties accessing affordable, nutritious, and culturally appropriate food in the private market. Accessing food through food banks can pose additional challenges to getting food because of stigma, as well as restrictions related to timing, location, and availability of culturally appropriate food. Many people turn to food banks as a last resort. Food banks served 7,062 unique individuals from 2,921 households in HRM for the month of March 2017. Approximately one-third of the individuals helped were children and youth.⁴⁸

The access to enough healthy food is a human right. Canada has ratified the International Covenant on Economic, Social and Cultural Rights, and must guarantee progressive improvement on the realization of the right

to an adequate standard of living, including the right to food.⁴⁹ People in our community should not be forced to rely on food banks. Our community should be one where people have a choice in what they eat – where they have enough affordable, nutritious, and culturally appropriate food to meet their needs.

There is a lot of important community work related to food security underway in HRM. The Halifax Food Policy Alliance, with many grassroots connections, has gained traction over the past couple of years, and is the driving force behind the creation of a Food Charter for Halifax. Additionally, the work of The Food Action Research Centre (Food ARC) has contributed a great deal to this movement through research, engagement, capacity building, and advocacy efforts.

Our community is working to increase access to food throughout HRM.

The Mobile Food Market brings fresh, high quality, and affordable food to neighbourhoods with limited access to healthy food. Using a converted Halifax Transit bus, the market currently visits six communities throughout HRM. The work of the Dartmouth North Community Food Centre provides an equitable, neighbourhood approach to addressing food insecurity and poverty. It has made incredible progress in making a difference. The Food Centre

not only provides accessible food programming to increase food security, it also supports people through referrals and volunteer opportunities to contribute to the community. Users can be volunteers and build their skill set and a sense of belonging in community. The food centre model is adaptable and scalable. Several neighbourhoods in need in HRM are interested in the food centre model.

Food banks served 7,062 unique individuals from 2,921 households in HRM for the month of March 2017.

Approximately one-third of the individuals helped were children and youth.

Feed Nova Scotia Client Registry, 2017



ADDRESS IMMEDIATE NEEDS

6. Eliminate hunger by increasing access to and availability of affordable, nutritious, and culturally appropriate food in neighbourhoods and communities.

- 6.1 Increase the dignity of accessing food banks (ex: expand food bank times to the weekend and allow access more than once a month; improve the quality of food; volunteer training).
- 6.2 Expand nutrition programs for children and youth in collaboration with the Department of Health and Wellness, Nourish Nova Scotia, school boards, community-based organizations, and other levels of government (ex: school breakfast, snack, and lunch programs; edible school gardens).

- 6.3 Reduce food waste (ex: selling imperfect produce and vegetables at a reduced price).
- 6.4 Provide healthy, affordable food and beverage options within municipally-owned and operated facilities and programs.
- 6.5 Increase funding and empower communities to do more community food programming, like community gardens.
- 6.6 Establish enabling policies and processes to facilitate food initiatives on municipal land and facilities.
- 6.7 Empower residents through place-based agencies with food skills, information, and access to equipment and tools.



PATHWAYS TO PROSPERITY

7. Support the development of a Food Charter and Food Strategy for HRM.

- 7.1 Identify and eliminate food deserts by developing public private partnerships to create service models which address food security and access needs in neighbourhoods.
- 7.2 Remove barriers to expand urban agriculture on government lands.
- 7.3 Invest in community-based food centres that increase access to affordable, nutritious, and culturally appropriate food, and help navigate access to services.
- 7.4 Support the development of procurement mechanisms to create efficient, cost effective, healthy, and local food access across sectors (ex: schools; regulated childcare centres; and recreation and sport settings).

First Voice Story

We have limited access to fresh foods. We can only afford to live on unhealthy junk. I need to have my rent subsidized so I can afford to live in the north end. That's not right.

I work a full-time job, sometimes I work two full-time jobs. We don't enjoy anything. We can't

go anywhere. We pay our bills and go to work, or should I say, decide what bills we can afford to pay this month. There is no enjoying a night at the movies or restaurant with the family.

Can I afford the power bill? Can we get a box of rice to cover us until next payday? Do I have enough bus

tickets to get to work this week or do I have to walk two hours to get there? When do I get to spend time with my son if I'm working all the time and then stressed about finances the rest? I'd like to sleep and not worry about life.

HRM Resident



HOMELESSNESS AND HOUSING

Homelessness and affordable, accessible housing was one of the most prevalent themes that arose out of the community consultations.

In 2016 there were 1,609 people in Halifax shelters.^{50(p2)} More than 2 in 5 tenants and just over 1 in 10 home owners spent more than 30% of their income on housing in HRM.¹⁷

People are struggling to pay for housing because of low wages or lack of income and a lack of affordable, accessible, safe, and appropriate housing across the municipality. In urban HRM average rents increased from \$987 in 2016 to \$1,027 in 2017, while the vacancy rate fell from 2.6% to 2.3%. The vacancy has not been this low since 2003.⁵¹

Populations at Risk: While homelessness can affect many, some populations are more at risk of experiencing homelessness than others. Single adult males between the ages of 25 and 55 account for almost half of the homeless population in Canada. In HRM, 67.8% of shelter users in 2016 identified as male. Youth, Indigenous people, and women and families experiencing poverty and violence are also at greater risk of homelessness.^{52(p7)}

Immigrants and refugees bring additional considerations for housing solutions. Providing temporary shelter and affordable housing needs to include cultural awareness

and cultural competency training so that these services are accessible for immigrant clients. Specific areas for consideration include size of families, interpretation, importance of keeping families together with older children, and culturally appropriate food and programs.

The Hidden Homeless: Many people experiencing homelessness are hidden. They are 'couch surfing' with friends, family, or strangers, rough sleeping (on streets or in cars), or have inappropriate housing. They do not have a sustainable long-term living arrangement, or the ability to secure permanent housing. These people are the 'hidden homeless' because they generally do not access homeless supports and services, and therefore are not captured in the homelessness data. This means that the number of people in our community experiencing homelessness is higher than what is being reported in the statistics.

Homeless Youth: Many youth in our community experience precarious housing and homelessness as well. Nearly 60% of homeless youth in Canada were part of the child welfare system at some point in their lives.^{25(p4)} Involvement with the child welfare system is associated with negative outcomes in housing, education, employment, justice, and overall health and wellness.²⁴ It makes youth vulnerable to experiencing poverty throughout their adult lives.

Many people are forced to make decisions between shelter, food, and other necessities, like transportation. "Affordable" housing units are often in disrepair or located in communities that lack employment opportunities, affordable and accessible transportation, and access to goods and services. There is also a lack of rental units in rural and suburban HRM.

There is a significant amount of work being done in the community to address issues of homelessness and affordable housing.

Mobile Outreach Street Health (MOSH) Housing First has housed 70 people who were chronically or episodically homeless. The Housing First approach provides people with a home and individualized care plans to support them to stay housed in the community.

Community-based organizations such as Halifax Housing Help, the Public Good Society, and others, provide much needed support in helping people access affordable housing. A cross-sector group from the Nova Scotia Health Authority, Corrections, shelters, and service providers, is working to develop common discharge protocols to ensure no one ends up on the street when exiting hospitals, correctional facilities, and other institutions.

The federal government released the National Housing Strategy (NHS) in November 2017, aimed at reducing chronic homelessness by 50%, removing 530,000 families from housing need, and building up to 100,000 new affordable homes. It includes a housing benefit, or rent supplement for low-income tenants, as well as various initiatives and funds to maintain and develop affordable housing.⁵³ It will require co-operation between the federal and provincial governments.

The Housing and Homelessness Partnership developed a Community Plan to End Homelessness and an Affordable Housing Plan with targets that have already been endorsed by Halifax Regional Council.

Some of the initiatives that Housing and Homeless Partnership members support include the above-mentioned Housing First and development of discharge protocols.

Homelessness and housing poverty are more than just a lack of affordable housing. These ideas for action will inform the work of the many service providers, governments, and private sector partners who aim to end homelessness, create affordable housing, and foster a strong service provider and housing sector in our community.



ADDRESS IMMEDIATE NEEDS

8. Minimize new intakes and returns to shelters.

- 8.1 Coordinate intakes and referrals to shelters for the homeless.
- 8.2 Create and maintain emergency housing for marginalized populations who do not fit the traditional shelter model (ex: family housing; people with disability; LGBTQ2SIA+; youth).
- 8.3 Expand and coordinate Housing First.
- 8.4 Increase the number of housing support workers and related resources to manage lower acuity shelter users.
- 8.5 Develop a core competencies training model for service providers.
- 8.6 Create an emergency fund to assist people in securing and maintaining housing.
- 8.7 Implement and expand wrap around supports embedded in the delivery of housing programs for marginalized populations.

"I was happy to be in the jail because it was the most secure housing I had."

Phoenix Youth focus group participant

1,609

people in Halifax shelters in 2016

2 in 5

number of tenants that spend 30% or more on housing. This compares to 1 in 10 for home owners.

9. In collaboration with the Indigenous community, respond to the Urban Aboriginal Homelessness Community Action Plan.

- 9.1 Develop hostel accommodation.
- 9.2 Expand addictions and mental health supports.
- 9.3 Implement a case management model linked to other community-based organizations.
- 9.4 Expand family housing linked to Mi'kmaw Children and Family Services.
- 9.5 Increase the number of affordable units for Indigenous housing providers.

10. Sustain community assets in shelters, transitional, and permanent supportive housing.

- 10.1 Increase investments and supports to ensure the quality and sustainability of shelters, and non-market housing.

11. Improve the quality of all affordable housing.

Calls to action to preserve or upgrade 2000 existing affordable housing units:

- 11.1 Identify the capital needs of non-market and private units in need of repair, and allocate required resources.
- 11.2 Increase the number of licensed single room occupancy (SRO) units by developing a pilot project based on best practices.
- 11.3 Advocate and work with HRM to strengthen the enforcement of minimum housing standards (M-200).
- 11.4 Develop a public database of by-law infractions.
- 11.5 Develop and implement a municipal bed bug strategy.
- 11.6 Expand incentive programs for private landlords and low-income homeowners to improve the quality and energy efficiency of dedicated, long-term affordable housing.

12. Reduce the number of HRM residents living in core housing need.

Calls to action to create 250 rental supplements:

- 12.1 Advocate and work with the provincial and federal governments for long-term commitment to continuing existing rental supplements.
- 12.2 Work with governments, private landlords, and non-profits to phase in additional rent supplements for those experiencing or at risk of homelessness.
- 12.3 Increase the flexibility of the rent supplement program by introducing a portable housing benefit.
- 12.4 Advocate and work with governments to develop rent supplements, and to develop rent geared to income approaches.



PATHWAYS TO PROSPERITY

13. Increase the supply of affordable housing options that meet the needs of marginalized populations and communities.

- 13.1 Prioritize community-based affordable housing options for people with disability, seniors, and people with mental health conditions (ex: home sharing options between seniors and youth).
- 13.2 Identify opportunities to create accessible units through universal design.

Calls to action to create 1000 new social housing units:

- 13.3 Work with community-based organizations and other partners to enable non-profit housing providers to coordinate efforts and pool resources to build affordable housing.
- 13.4 Provide surplus government and community group land for new affordable housing developments, or dedicate a percentage of net proceeds from land sales to affordable housing.
- 13.5 Assist non-market housing organizations to leverage capital to create new affordable housing units by working with community partners such as government, private capital, social enterprise etc.

Calls to action to create 1000 new affordable private rental units, and 500 new secondary suites:

- 13.6 Continue to pursue and advocate for a review of land use planning policies and bylaws to increase affordable housing options (ex: tiny homes, rooming houses, secondary suites etc.).
- 13.7 Expand density bonusing and inclusionary zoning throughout the HRM.
- 13.8 Advocate for the provincial government to incorporate inclusionary zoning and rental preservation in the HRM Charter.
- 13.9 Develop a proposal for the administration of affordable housing units resulting from density bonusing and inclusionary zoning.

Calls to action to create 250 affordable ownership units:

- 13.10 Work with government and community partners to develop a new home ownership program for low to middle income individuals and families.



PATHWAYS TO PROSPERITY

14. Foster a strong housing sector by strengthening and building capacity for increased effectiveness.

- 14.1 Create a central online registry of community-based and non-profit housing organizations and available units.
- 14.2 Host an annual symposium and other programming to build the capacity of the non-profit sector.
- 14.3 Support the creation of community land trusts, and non-profit development resource and management groups.
- 14.4 Enable professional management of housing stock through access to financial and capital planning software.



SERVICE ACCESS FOR HEALTH AND WELL-BEING

The primary factors that shape the health of people in our community are not medical treatments or lifestyle choices, but rather the social, economic, and environmental living conditions they experience.

“Parents working for low wages do whatever they can to provide for their children as best they can, but instead of being able to enjoy quality time or provide what they know their children need, they are constantly struggling and stressed.”^{54(p9)}

These circumstances are shaped by the unfair distribution of money, power, and resources that are needed to support people to achieve their full health potential. Understanding and addressing the social determinants of health is a key component to reducing health inequities. Improving health inequities can be achieved by increasing awareness, creating healthy, vibrant environments and ensuring equitable access to services, resources, and opportunities for all to be healthy.

People with increased access to services and resources to address the social determinants of health are likely to have longer and healthier lives; conversely, those people living in poverty are more likely to be ill, injured or have shorter life spans.⁵⁵

Our consultations illustrated that people living in poverty often have difficulty navigating and accessing affordable, appropriate health care services, mental health and addictions services, recreation services, and other programs and supports necessary for maintaining their health and well-being.

Many community-based organizations play important roles in helping people navigate the complex social assistance system. For example, Chebucto Connections runs an initiative called ECHO Hub, which collaborates with physicians and service providers in the Spryfield community to work on diagnosing poverty. Individuals can get a referral from a physician to ECHO Hub, where a skilled social worker assists in providing wrap around supports offered by a series of 18 service providers in the community that address the social determinants of health.

We can also learn from what other communities are doing. The City of Calgary has adopted a Fair Entry program to reduce the stigma of accessing support. The Fair Entry program supports access to multiple programs and services with only one application with eligibility based on income.

Neighbourhood level services provided by agencies and municipal assets, such as the public libraries and community centres, should also be coordinated to better address the social determinants of health. These place-based responses to poverty adapt to the unique needs of the neighbourhoods and communities within HRM, and with their residents. This is important to eliminating poverty in a comprehensive and responsive way, as the experience of poverty can vary significantly among neighbourhoods, and even within several blocks. This is especially crucial in HRM which is home to the largest number of urban, suburban, and rural residents in our province.

Parents working for low wages do whatever they can to provide for their children as best they can, but instead of being able to enjoy quality time or provide what they know their children need, they are constantly struggling and stressed.



ADDRESS IMMEDIATE NEEDS

15. Increase the coordination, awareness, and capacity of service providers to focus on equity and increase access and availability for everyone.

- 15.1 Establish a Fair Entry program for municipal programs, with a focus on increasing access for marginalized people to recreation and other services that could be subsidized or free.
- 15.2 Collaborate with Service Nova Scotia and other partners to increase timely access and reduce the cost of obtaining identification documentation.
- 15.3 Protect and increase provision of effective services and infrastructure for marginalized populations.

16. Advocate for mental health and addiction supports.

- 16.1 Advocate for the provincial mental health and addictions strategy to be implemented.
- 16.2 Increase capacity and funding for community-based mental health services that focus on prevention, as well as treatment, for marginalized populations.



PATHWAYS TO PROSPERITY

17. Ensure healthcare and pharmacare are accessible, inclusive, responsive, and appropriate.

- 17.1 Ensure that pharmacare is equitable (ex: affordable, acceptable, and available).
- 17.2 Train healthcare providers to understand health inequities and to coordinate with community hubs to support navigation and better access to services.

18. Reduce social isolation of marginalized populations.

- 18.1 Reduce social isolation by providing more affordable and accessible culture and recreation opportunities.
- 18.2 Create inclusive recreation through the provision of equitable opportunities, access, and supports for children, youth, and adults with special needs.
- 18.3 Provide children and youth with universal cultural and recreation passports (ex: Discovery Centre, museums, art galleries etc.).
- 18.4 Increase funding for support services that provide respite and support independence in the community for children, youth, and adults with disability.
- 18.5 Provide funding and support for assistive devices and technology, including access to interpreters and translators.
- 18.6 Create affordable adult day programming for people with disabilities and seniors.
- 18.7 Invest in more services and supports for new immigrants and refugees (ex: language classes).



EDUCATION AND LEARNING

Education and lifelong learning, from birth through adulthood, are significantly impacted by poverty. Our consultations highlighted that families have difficulty accessing quality, affordable childcare, pre-school and after school programs, and educational supports.

Food security, housing, precarious employment, and other barriers resulting from poverty influence the educational outcomes of children. These barriers make it more difficult for children to participate in and benefit from the education system, affecting their future ability to access post secondary education, training and apprenticeship programs, and to obtain quality employment. This ultimately increases the likelihood they will experience poverty as adults.

Schools Plus provides government and other services to students and families at schools to support their success. Some of the measures being taken now are referred to as intensive and individualized supports. The expansion of these initiatives and increased relations with community-based organizations are seen as an excellent opportunity to create success for students and families who struggle with the experience of poverty.

The importance of access to educational and vocational training for people with diverse abilities was emphasized throughout the consultations. ReachAbility offers programs to foster pre-employment skills, and partners with employers to create diverse and inclusive workforces.

Families, however, also expressed the need for young people with disabilities to have greater support to access post-secondary and vocational opportunities through care worker funding. These individuals and their families experience a high level of social isolation due to the lack of access to these opportunities.

Good quality, accessible childcare emerged as a need across theme areas. Lack of affordable, quality, and accessible childcare often keeps people completely out of the labour force or stuck in precarious employment situations. It impacts the ability of parents and caregivers to access educational opportunities to advance career paths, and break the cycle of poverty for their families.

“What made the difference for me was access to education, meaningful employment opportunities along the way, and eventually the ability to earn living wages. These are the foundations that continue to improve my quality of life.”

HRM Resident

Affordable childcare and early education development programs are essential for breaking the cycle of poverty in our community. A recent report (2016) on childcare emphasizes:

"Early Development Instrument (EDI) data shows that one in four Nova Scotian children now arrive at elementary school vulnerable in one or more developmental areas. Even with extra supports and remediation programs in school, it is often too late to change the learning trajectories established in early childhood."^{55(p1)}

There have been some steps taken by government to provide quality, accessible, and affordable early learning

and child care. In 2017 the provincial government introduced the universal, free pre-primary program. In January 2018 the provincial and federal governments signed a new bilateral agreement providing \$35 million over three years for early learning and child care. This agreement will create more than 100 new child care sites and boost subsidies for families earning between \$35,000 and \$70,000 per year.⁵⁶

Access to educational opportunities and affordable, quality childcare is essential to create pathways out of poverty, and break the cycle that many of our community members are stuck in.

Early Development Instrument (EDI) data shows that one in four Nova Scotian children now arrive at elementary school vulnerable in one or more developmental areas.



ADDRESS IMMEDIATE NEEDS

19. Increase accessibility of education.

- 19.1 Expand Schools Plus efforts by working with community-based organizations to provide a holistic approach to education.
- 19.2 Provide more supports for students with a disability in postsecondary and vocational education (ex: funding for support workers).
- 19.3 Increase the amount of supplementary funding to ensure equitable access to extra academic activities (ex: social, cultural, and philanthropic opportunities – field trips, music and art classes, and other school activities).
- 19.4 Develop better options for youth with disabilities to transition from school into meaningful work and learning opportunities.
- 19.5 Explore sliding scales for tuition, and student loan forgiveness.

20. Improve access to affordable, quality childcare and after school programming.

- 20.1 Provide accessible and affordable transportation for after school care and the new pre-primary program.
- 20.2 Create a childcare strategy, including increasing subsidized day care spots, portable childcare subsidies, and a waitlist strategy.
- 20.3 Provide free after school programs and tutoring.
- 20.4 Provide universal childcare and more early education and intervention programs, including more spots for infants under 18 months.
- 20.5 Provide subsidies and other supports to make day cares accessible for children with disabilities.



PATHWAYS TO PROSPERITY

21. Ensure equitable access to lifelong, quality learning.

- 21.1 Governments, community-based organizations, businesses, and other partners work collaboratively to improve opportunities for good quality education and apprenticeship opportunities.
- 21.2 Ensure equitable access to literacy, adult education, and training for all HRM residents.
- 21.3 Provide opportunities for seniors to volunteer as readers and literacy coaches.
- 21.4 Increase access to the Options and Opportunities programming for youth.
- 21.5 Work with community partners and businesses to support mentorship programs for youth and marginalized people.
- 21.6 Support parents with opportunities to upgrade education and provide homework support to their children.



SYSTEMIC CHANGE

The barriers faced by many in our community require systemic change. The need to approach this work holistically, comprehensively, and with a sense of universality and affordability is essential to eliminate poverty. We will not solve homelessness if we do not address the systemic issues that lead to income insecurity. We will not raise people's incomes and increase access to services and supports until we address issues of racism and colonialism. Poverty is not caused by one single issue, but rather is the result of a system that marginalizes people. The system needs to change.

The systemic nature of poverty has resulted in the marginalization of some of our residents. The current social support systems available to our residents have been steeped in a history of colonization, racism, sexism, ableism, capitalism, heterosexism, cissexism, and do not equitably address their needs or work to mitigate those factors that keep them marginalized.

In our consultations, we heard residents describe a system in which they were forgotten, ignored, or actively discriminated against. This resulted in an inability to meet their basic needs, never mind foster their prosperity or provide the conditions for them to flourish. These circumstances were seen to be near impossible to escape, and almost certain to impact their children and future grandchildren in similar ways.

The constant struggle to survive in a system where you are actively oppressed does not provide people with the opportunity to focus on individual growth or actively participate in measures to change oppressive systems. As we move forward, we need to ensure that groups experiencing oppression and systemic barriers are provided with the supports needed to actively and meaningfully participate in initiatives that aim to change our municipality for everyone's betterment.

We believe we all have a role to play – businesses, community-based organizations and advocates, experts by experience, and all orders of government. We need to come together as a community to foster unique initiatives, practices, and policies that will create prosperity for all our residents.

There are examples of great work being done across our community that we can further support or use as models to inform best practices. The Halifax Local Immigration Partnership, for example, works with multi-sector partners to help recent immigrants settle into HRM and ensure that our community is welcoming. This is imperative to create a system that is responsive to the diverse needs of our community.

Canada has a long history of colonialism and racism, which requires systemic change. There are 94 Calls to Action made by the Truth and Reconciliation Commission that we can collaborate with Indigenous communities to action and implement. We must also recognize the impact racism and colonialism has had on the African Nova Scotian population, and the Nova Scotia Government is working with the African Nova Scotian population to access land titles.

Systemic change requires us to recognize the impact of racism and colonialism on our community, and it requires our community to leverage its economic power to ensure everyone enjoys its prosperity. Currently, HRM is exploring a social procurement policy and living wage ordinance. A staff report is due in 2018. Basic Income Nova Scotia is advocating for a feasibility study, and in Ontario, the provincial government is piloting basic income in six communities.

Systems change is difficult and it is complex. It requires organizations, governments, businesses, and community members to shift their thinking and behaviour. It requires our community to recognize the structural injustices, stigma, racism, capitalism, and legacies of colonialism that continue to marginalize residents. Systems change requires us to recognize that poverty is a violation of human rights.

Systemic change requires us to recognize the impact of racism and colonialism on our community, and it requires our community to leverage its economic power to ensure everyone enjoys its prosperity.

22. Empower the non-profit sector to grow their capacity to eliminate poverty.

- 22.1 Stabilize core funding for community-based organizations.
- 22.2 Advocate for the federal government to allow charities to devote more than 10% of their total resources to advocacy.
- 22.3 Support capacity building for the non-profit sector (ex: online knowledge base on best practices; workshops, etc.).

23. Leverage the economic power of HRM to stimulate job growth, support local businesses, and drive inclusive economic growth.

- 23.1 Design and implement a community benefits program for HRM purchasing and capital investments.
- 23.2 Design and implement a municipal social procurement policy.
- 23.3 Work with HRM to implement a living wage ordinance for all municipal staff and third party contractors.
- 23.4 Working with local institutions, connect job seekers, start-up businesses, social enterprises, and worker-owned co-operatives to create more economic opportunities.
- 23.5 Develop models to enhance economic development in low-income communities.

24. Create a seamless social support system.

- 24.1 Increase the level of community navigation, outreach, and capacity by developing a Neighbourhood Strategy featuring place-based responses to support individuals experiencing poverty.
- 24.2 Develop a Community Hubs Plan with HRM and other levels of government to support poverty elimination efforts in neighbourhoods and communities.
- 24.3 Coordinate seamless care and support among hospitals, the child welfare system, Employment Support and Income Assistance, correction and mental health facilities, and HRM services (ex: develop common discharge protocols).
- 24.4 Work with governments to remove legislative and financial barriers to the creation of one stop community access sites for key health, education, and social services that also serve as focal points for community building.
- 24.5 Implement a basic income as a means to provide a live income for low-income and marginalized populations.

25. Experts by Experiences (lived experience) are included in decision making processes.

- 25.1 Develop, resource, and use effective models to meaningfully engage people with lived experience in the decision-making of community-based organizations and governments. Provide a living wage, childcare, transportation, food, and other supports needed including ASL interpreters and language translators.

26. Recognize and reconcile the impact of colonialism and systemic racism on the African Nova Scotian and Indigenous people.

- 26.1 Implement the Truth and Reconciliation Calls to Action.
- 26.2 Guided by their respective communities, work in collaboration to reconcile the impact of racism and colonialism on the African Nova Scotian and Indigenous people (ex: structural, institutional, interpersonal, internalized) and the resulting inequitable outcomes.
- 26.3 Expand cultural competency and trauma-informed training for community-based organizations, governments, businesses, and communities.

27. Develop, implement, and evaluate the implementation of the Poverty Solutions Strategy.

- 27.1 Using an Equity and Collective Impact approach, create a cross-sectoral leadership and staff team (governments, community-based organizations, residents and experts by experience, labour, private sector, faith communities, academia, funders, and others) to support activities related to the planning, implementation, and evaluation of poverty-elimination actions.
- 27.2 In collaboration with governments, community-based organizations, experts by experience and other partners, develop monitoring and measuring processes and tools to inform the implementation and evaluation of this Strategy.

28. Engage HRM residents to learn and act to eliminate poverty, racism and stigma.

- 28.1 Develop change management and staff training tools using gender, rural, racial, and health equity lenses in order to promote a poverty sensitive culture.
- 28.2 Champion poverty elimination as a priority to HRM residents, businesses, and all levels of government.

29. Dedicate funding to poverty elimination actions.

- 29.1 Embed mechanisms that assess the impact of budget choices on poverty elimination in business units' and Halifax Regional Council's decision-making processes.
- 29.2 Find new ways to invest in eliminating poverty by exploring sustainable funding options and new revenue tools (ex: dedicating an amount of property tax to a Poverty Elimination Fund).
- 29.3 Prioritize accessibility for marginalized people and communities when designing programs and services.

WORKING TOGETHER AS A COMMUNITY



PHOTO: HRM Poverty Solutions Public Gallery Event. Sandor Photography

SUMMARY OF OUR COMMUNITY LEARNING

This report reflects the cumulative wisdom of our community. Throughout the consultation process, we heard from HRM residents about their experiences of poverty. They brought to light the stories and wisdom behind the numbers. Where people live and their lack of livable income help us to understand two aspects of the impact of poverty. The quality of transportation, food, housing, and access to services, such as health and education, add to our understanding about the depth of impact in our communities.

BUILDING A MOVEMENT

Our municipality is prosperous, but not everyone is prospering. To be a community that values its diversity of people, we must ensure that our systems, institutions, service disposition, and public policies provide, for all community members, the basic right of having choices and a voice to participate in our democratic society.

There is a great deal of work underway to resolve the immediate needs of people experiencing poverty, as well as to address some of the systemic issues that perpetuate the deeply-rooted experience of intergenerational poverty. To do this work, we need more people from a variety of backgrounds and sectors to gain a better understanding of the experience of poverty, support a movement for change to make a real difference, and take bold steps towards ending poverty. It is our understanding that as long as people in our community are experiencing poverty, it is a net loss for our entire community. If we seek to have a prosperous community that values diversity and inclusion, ending poverty must be a priority for all.

We are building a movement which was started before this report. We intend to bring more of our community together, and invite participation and action to reform and transform the experience of poverty into an experience of prosperity. This is not only a journey of educating ourselves and building cultural awareness but also changing the systemic conditions that lead to oppression and marginalization. For this movement to gain traction, we must all become actively involved in complementary and innovative ways.

Given the scope and complexity of systemic challenges, we will take a collective impact approach. Collective impact is an evidence-based approach used around the world to

address complex and dynamic issues like poverty. We will continue to be guided by a collective impact approach to drive change and to develop, implement and evaluate our successes and failures.

We must stay focused on achieving results and change in the short term and long term for people experiencing poverty in Halifax. We know this work requires a long-term view with years of work ahead to reach the substantial change our community needs. This work will not sit on a shelf – it is critical to persevere together and tackle the work in stages. As the implementation unfolds in partnership with the community, it is essential to focus on three areas:

- ➔ **Build on what's working.** There is no need to re-invent the wheel. We have a talented and passionate community with many assets in government, business, the community sector, academia, and those with lived experience.
- ➔ **Strengthen community capacity.** Residents, community agencies, and advocates have a great understanding of the experience of poverty. More of us need to contribute diverse kinds of capital to increase our capacity as a community to end poverty and build prosperity.
- ➔ **Stay committed to addressing what is hard but not impossible.** We need to stay the course and build bridges for more people to engage in addressing the significant challenges that exist. This work is complex and realizing change will be challenging, with inevitable conflict and tension about the right course of action. In spite of our disagreements, we will be stronger for our ability to navigate through the complexities.

Our commitment to this work is ongoing. Our next steps will include an invitation to a diverse cross-section of our community to respond to the report and provide feedback about evolving our governance structure. We will work with the community to reflect the needs of our learning to date, with the task of building an implementation and investment roadmap which will bring the ideas for action to life.

Our work has not ended with the publishing of this report: it is just beginning. This is a call to action. Ending poverty is the responsibility of everyone in our community. We all have a role to play in building a prosperous and inclusive municipality. The time to act is now.

We all have a role to play in building a prosperous and inclusive municipality. The time to act is now.

MOBILIZING EARLY ACTION: WHERE DO YOU SEE YOURSELF IN THIS?

There are a 129 Calls to Action in this report – more than enough for all of us to share in the work. As we were embarking on this process, we were encouraged to be bold, build bridges, and be willing to get uncomfortable. We did just that. Now it's your turn. As you read the 129 Calls to Action, ask yourself: "what can I do?" We challenge each resident of Halifax Regional Municipality to:

- ➔ Stand up and speak up about the issues of poverty in our community. Do so with your friends, family, elected representatives, and employers. We all have a role to play and the more voices for change, the better.
- ➔ Host conversations within your networks of family and friends about how you can make a difference for others.
- ➔ Think about how you can implement practices in your workplace to combat precarious employment, isolation, and discrimination.
- ➔ Contribute as a volunteer and donor to programs that are making a difference for others.
- ➔ Remember that everyone has a story and greet everyone you meet with compassion and understanding, not judgment or distance.

REFERENCES

1. IWK Health Centre, (NSHA) NSHA. Provincial Diversity and Inclusion Framework. Halifax, NS; 2017.
2. Frank L, Saulnier C. 2017 Report Card on Child and Family Poverty in Nova Scotia. Halifax, NS; 2017. <https://www.policyalternatives.ca/publications/reports/2017-report-card-child-and-family-poverty-nova-scotia>. Accessed November 28, 2017.
3. Azoulay A. What are human rights? *Comp Stud South Asia, Africa Middle East*. 2015;35(1):8-20. doi:10.1215/1089201X-2876056.
4. Canadian Human Rights Act. Canada; 1985. <http://laws-lois.justice.gc.ca/PDF/H-6.pdf>. Accessed December 5, 2017.
5. Canadian Charter of Rights and Freedoms. <http://laws-lois.justice.gc.ca/eng/Const/page-15.html>. Accessed December 5, 2017.
6. United Nations - Committee on the Rights of the Child. Convention on the Rights of the Child. Vol 8. United Nations; 1989. www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.10.pdf.
7. United Nations. Convention on the Rights of Persons with Disabilities. Vol 2515. United Nations; 2006:3. <http://www.un.org/disabilities/>.
8. MacEwen A, Saulnier C. The Cost of Poverty in Nova Scotia. Halifax, NS; 2010.
9. Canada Without Poverty. How is expensive is poverty in Canada? <http://www.cwp-csp.ca/poverty/the-cost-of-poverty/>. Published 2017. Accessed December 7, 2017.
10. MQO Research, Halifax Partnership, Halifax Chamber of Commerce, United Way Halifax, City Matters Survey, Halifax, NS; 2017.
11. United Way Halifax. Poverty solutions survey - Shape Your City. 2017. <https://www.shapeyourcityhalifax.ca/Poverty-Solutions>.
12. EKOS Politics. At the Crossroads of Hope and Fear.; 2011. doi:10.14208/eer.2013.03.02.004.
13. Lillard DR, Burkhauser R V., Hahn MH, Wilkins R. Does early-life income inequality predict self-reported health in later life? Evidence from the United States. *Soc Sci Med*. 2015;128:347-355. doi:10.1016/j.socscimed.2014.12.026.
14. Raphael D, Mikkonen J. Social Determinants of Health: The Canadian Facts. Toronto, ON; 2010. http://www.thecanadianfacts.org/the_canadian_facts.pdf. Accessed October 13, 2016.
15. The Nova Scotia Home for Colored Children - Restorative Inquiry. <https://restorativeinquiry.ca/>. Published 2018. Accessed February 16, 2018.
16. Statistics Canada. 2016 Halifax Regional Municipality MBM Prevalence Rates: Statistics Canada Catalogue no. 98-400-X2016148. 2017.
17. Dennis Pilkey. UW Census 2016 Snapshot December 2017. Dartmouth, NS; 2017.
18. Statistics Canada. 0717_10 Table 1 - Labour force survey estimates (LFS), employees by wage range and selected characteristics, for Nova Scotia, 12-month average (April 2012 to March 2017) and 3-month moving average (June 2017) (persons unless otherwise noted). 2016.
19. Saulnier C, Johnson C, Johnston M-D. Working for a Living, Not Living for Work Living Wages for 2016. Canadian Centre for Policy Alternatives Nova Scotia; 2016.
20. MacAdam JK. HALIFAX INDEX 2017. 2017.
21. Brigoli C. Report of the Working Group of Experts on People of African Descent on Its Mission to Canada.; 2017.
22. Alexander C, Beckman K, Macdonald A, Renner C. Ready for Life: A Socio-Economic Analysis of Early Childhood Education and Care.; 2017. <http://www.conferenceboard.ca/e-library/abstract.aspx?did=9231&AspxAutoDetectCookieSupport=1>.

23. Gypen L, Vanderfaeillie J, De Maeyer S, Belenger L, Van Hoken F. Outcomes of children who grew up in foster care: Systematic-review. *Child Youth Serv Rev*. 2017;76(Supplement C):74-83. doi:<https://doi.org/10.1016/j.chilyouth.2017.02.035>.
24. Barker B, Kerr T, Alfred GT, et al. High prevalence of exposure to the child welfare system among street-involved youth in a Canadian setting: Implications for policy and practice. *BMC Public Health*. 2014;14(1):1-7. doi:10.1186/1471-2458-14-197.
25. Nichols N, Schwan K, Gaetz S, et al. *Child Welfare and Youth Homelessness in Canada: A Proposal for Action.*; 2017.
26. Statistics Canada. Canadian Survey on Disability, 2012. <http://www5.statcan.gc.ca/olc-cel/olc.action?objId=89-654-X&objType=2&lang=en&limit=0>. Published 2016. Accessed October 20, 2016.
27. Accessibility Directorate. Poverty and disability in Halifax Regional Municipality data sheet. 2017.
28. Squires B. Language, Literacy and Classroom Participation of Students who are Deaf or Hard of Hearing in Nova Scotia and New Brunswick. June 2014.
29. Burlock A. Women with disabilities. <http://www.statcan.gc.ca/pub/89-503-x/2015001/article/14695-eng.htm>. Published 2016. Accessed December 6, 2017.
30. Hutchinson P, Bryson S, Harvey V, LeBlanc D, MacRae A, McFadyen S. *Creating Respite Solutions for Nova Scotia Families of Children and Adult Children with Chronically High Needs*. Halifax, NS; 2010
31. Canadian Association of the Deaf. Employment and Employability - Canadian Association of the Deaf - Association Des Sourds Du Canada.; 2015. <http://cad.ca/issues-positions/employment-and-employability/>. Accessed February 8, 2018
32. Statistics Canada. Study: Women in Canada: Women with Disabilities. 2017:2. <http://www.statcan.gc.ca/daily-quotidien/170529/dq170529a-eng.htm>.
33. Truth and Reconciliation Commission. Truth and Reconciliation Commission: Calls to Action. Winnipeg, MB; 2015. http://www.trc.ca/websites/trcinstitution/File/2015/Findings/Calls_to_Action_English2.pdf.
34. Upshaw T, Sheffield S. *Public Safety Strategy 2018 - 2022*. Halifax, NS; 2017. <https://www.halifax.ca/sites/default/files/documents/city-hall/regional-council/171031rc1415.pdf>.
35. Kukushkin V. *Immigrant-Friendly Communities: Making Immigration Work for Employers and Other Stakeholders in Small-Town Canada.*; 2009.
36. Akbari AH. *Socioeconomic and Demographic Profiles of Immigrants in Nova Scotia*. Halifax, NS; 2012.
37. BC Poverty Reduction Coalition. *Poverty Is a Queer & Trans Issue*. Vancouver: British Columbia http://bcpovertyreduction.ca/wp-content/uploads/2014/08/2013_prc-lgbqt-poverty-factsheet.pdf.
38. Statistics Canada. Canadian Community Health Survey (CCHS), Public Use Microdata File 2011/2012. 2014. <http://www23.statcan.gc.ca/imdb/p2SV.pl?Function=getSurvey&SDDS=3226>.
39. Nova Scotia Department of Health and Wellness. *Nova Scotia Health Profile 2015.*; 2015. <http://novascotia.ca/dhw/publichealth/documents/Population-Health-Profile-Nova-Scotia.pdf>.
40. Lived Experience Advisory Council. *Nothing about Us without Us: Seven Principles for Leadership & Inclusion of Homelessness.*; 2014. <http://www.homelesshub.ca/>
41. Halifax Regional Municipality. *HRM Strategic Plan 2017 - 2020.*; 2017. [osf.io/x2w9h](https://www.halifax.ca/sites/default/files/documents/city-hall/regional-council/171031rc1415.pdf).

42. Federation of Canadian Municipalities. FCM Board of Directors map out nation-building priorities of the year ahead. <https://fcm.ca/home/media/news-and-commentary/2017/fcm-board-of-directors-map-out-nation-building-priorities-for-the-year-ahead.htm>. Published 2017. Accessed December 1, 2017.
43. City of Toronto. TO Prosperity: Toronto Poverty Reduction Strategy. Toronto, ON; 2015.
44. PEPSO. The Precarity Penalty: The Impact of Employment Precarity on Individuals, Households and Communities - and What to Do about It.; 2015. doi:978-0-921669-37-1.
45. FoodARC, Voices for Food Security in Nova Scotia. Can Nova Scotians Afford to Eat Healthy? Report on 2015 Participatory Food Costing. Halifax, NS; 2017. https://foodarc.ca/wp-content/uploads/2017/03/2016_Food_Costing_Report_LR_SPREADS.pdf.
46. Colley SB. Income assistance recipients in Halifax to receive free bus passes. CBC Nova Scotia. <http://www.cbc.ca/news/canada/nova-scotia/poverty-reduction-free-bus-passes-income-assistance-government-1.4447378>. Published December 13, 2018. Accessed January 10, 2018.
47. Halifax Regional Municipality. Integrated Mobility Plan. Vol 229. Halifax, NS; 2017. <https://www.halifax.ca/sites/default/files/documents/city-hall/regional-council/171205cow3.pdf>.
48. Feed Nova Scotia. Feed Nova Scotia HRM Client Registry. Halifax, NS; 2017.
49. Couzos S, Theile DD. The International Covenant on Economic, Social and Cultural Rights and the right to health: Is Australia meeting its obligations to Aboriginal peoples? *Med J Aust.* 2007;186(10):522-524. doi:10.1177/096701067700800312.
50. Employment and Social Development Canada. 2016 Community Progress Indicators Report : Halifax.; 2016.
51. Canadian Mortgage and Housing Corporation. Rental Market Report -Halifax CMA.; 2017. <https://www03.cmhc-schl.gc.ca/catalog/productDetail>.
52. Gaetz S, Donaldson J, Richter T, Gulliver T. A HOMELESS HUB RESEARCH PAPER THE STATE OF The State of Homelessness in Canada 2013.; 2013. www.homelesshub.ca.
53. Government of Canada. Canada's National Housing Strategy.; 2017. <https://www.placetocallhome.ca/pdfs/Canada-National-Housing-Strategy.pdf>.
54. Johnston M-D, Saulnier Halifax C. Working for a Living, Not Living for Work The Halifax Living Wage 2015. 2015. https://www.policyalternatives.ca/sites/default/files/uploads/publications/Nova_Scotia_Office/2015/06/CCPA-NS_Halifax_Living_Wage2015.pdf. Accessed December 6, 2017.
55. Government of Nova Scotia. Affordable, Quality Child Care: A Great Place to Grow! Halifax, NS; 2016. <https://www.ednet.ns.ca/docs/affordablechildcare.pdf>.
56. Doucette K. Nova Scotia to dramatically expand subsidize child care after \$35M federal deal. <http://www.metronews.ca/news/halifax/2018/01/10/nova-scotia-to-dramatically-expand-subsidize-child-care-after-35m-federal-deal.html>. Published January 10, 2018.

APPENDIX A

SUMMARY OF COMMUNITY CONSULTATIONS

CONSULTATION	DESCRIPTION	DATE	# OF PARTICIPANTS
United to Reduce Poverty	United Way and its community partners (iMove, Chebucto Connections, and HANDUP) hosted community conversations as part of a national engagement initiative led by United Ways across the country to influence the development of Canada's Poverty Reduction Strategy. Conversations were multi-sector and engaged people with lived experience, service providers, government, private sector, and community residents.	April 21 – 28, 2017	117
Agency Gathering	37 of United Way's 49 funded partners attended an overview of the structure of the consultation. They discussed their expectations, and how they wanted to be involved with the work. Funded partners also explored the barriers their clients experience, and possible solutions/calls to action.	June 19, 2017	37
Poverty Solutions Advisory Committee	The Poverty Solutions Advisory Committee stewarded the development of the Poverty Solutions. The Committee was a sounding board for community-developed solutions, seeking to connect this work across sectors and communities.	July – December 2017	22
Business Alliance	The purpose of the Business Alliance Group is to engage business leaders across HRM in creating awareness of the local experience of poverty and contributing to the development of short and long term poverty solutions.	September 2017 – present	18

CONSULTATION	DESCRIPTION	DATE	# OF PARTICIPANTS
Poverty Solutions Task Teams (x6)	6 multi-sector task teams were formed to identify priority solutions/calls to action around theme areas identified in the early consultations – homelessness and housing; education and early childhood development; income security; food security; health and well-being; and access and equity.	September – November 2017	48
Shape Your City Online Engagement	Online platform engaging HRM residents. Paper copies of the questionnaire were also printed off and distributed to service providers throughout HRM to ensure that computer access was not a barrier for people.	October – November 9, 2017	621
Community Health Boards	Community Health Board Education Day – Central Zone	October 28, 2017	15
Focus Group hosted by Accessibility Directorate	Participants included people with lived experience and service providers, and represented the blind and visually impaired, deaf and hard of hearing, and mobility disabilities communities, as well as the autistic community.	September 14, 2017	12
Family and Caregivers hosted by The Club	Family and care givers of children and adults living with disability(ies) gathered to inform the calls to action.	October 17, 2017	15
Community Advocates Network	Anti-poverty group active in Halifax's North End.	October 26, 2017	11
Fairview Action	The Action for Neighbourhood Change, Fairview Coordinator, hosted conversations with food banks users in the neighbourhood.	October 2017	20
CSEP Working Group on ESIA Transformation	Employment Support and Income Assistance Working Group hosted a focus group on the ESIA system transformation proposals.	October 20th, 2017	12
East Preston Day Care	East Preston Day Care hosted a community conversation with clients.	November 2, 2017	10

CONSULTATION	DESCRIPTION	DATE	# OF PARTICIPANTS
Phoenix Youth	Youth clients of Phoenix Youth between the ages of 16 to 25 gathered to inform both the calls to action, and the development of the Canadian Children's Charter.	November 2, 2017	10
Dutch Settlement	Hosted by Dutch Settlement Elementary, Dutch Settlement, Upper Musquodoboit Consolidated and Musquodoboit Rural High school advisory council (SAC) members.	November 7, 2017	5
Lakefront Consolidated	SAC members for Lakefront Consolidated.	November 7, 2017	6
East St. Margarets Consolidated	SAC members for East St. Margarets Consolidated.	November 8, 2017	7
Spencer House	Clients of Spencer House.	November 8, 2017	12
ISANS	Clients of ISANS.	November 9, 2017	7
Ideas for Action Open House	An all day open house to review the ideas for action generated by the consultation to date	November 9, 2017	n/a
Partner hosted conversations – Policy Forum on Federal Poverty Reduction Strategy	Community Society to End Poverty, the Canadian Centre for Policy Alternatives, Faces of Poverty, and United Way Halifax co-hosted a policy forum on the federal Poverty Reduction Strategy.	November 15, 2017	42

CONSULTATION	DESCRIPTION	DATE	# OF PARTICIPANTS
Partner hosted conversations with Indigenous Community	Indigenous community members hosted sharing circles every Thursday throughout February 2018. United Way Halifax is working with the Mi'kmaw Friendship Centre and other Indigenous community groups to establish a longer term relationship and ongoing engagement and collaboration with the community.	Ongoing	
Individual Meetings	One on one meetings were held with some individuals who were unable to participate on task teams or in focus groups.	September - October, 2017	3
Housing and Homelessness Symposium	A forum for practitioners, leaders, and policy makers in Nova Scotia's housing sector, hosted by the Housing and Homelessness Partnership. An online survey was sent out with event reminder, and United Way staff consulted during the lunch hour.	November 20, 2017	10
United Way and HRM Poverty Solutions Public Gallery - Taking Action on Poverty	Report back to the community on the Poverty Solutions work, gathering feedback on the draft calls to action.	November 23, 2017	~80 in person 1391 views of the Facebook feed

