

The Quality of Life in Halton – Snapshot of a Decade

Ted Hildebrandt, Senior Planner
Scott Henderson, Consultant

July 2003



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Copies of this report are available from:

Community Development Halton
760 Brant St., Suite 406
Burlington, ON
L7R 4B7
Phone: (905) 632-1975
Fax: (905) 632-0778
Email: office@haltonspcvc.on.ca
Web: www.haltonspcvc.on.ca



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THE QUALITY OF LIFE IN HALTON

INTRODUCTION

The quality of life in Halton, as measured by the Quality of Life Index (QLI), has remained below that of 1990 throughout the course of the decade. We analyze the results of changes in the quality of life by looking at which of the twelve indicators that form the QLI are showing progress and which are showing setbacks over the time period from 1990 to 2000. The QLI score for 2000 (77.4) is one of the lowest during the decade. There has been progress in some areas – lower rates of bankruptcies, fewer toxic spills, fewer low birth weight babies and reduced unemployment. Also, there have been setbacks – poorer air quality, more elderly waiting for long term care placements and continuing high, yet declining, social assistance caseloads. While there is reason for celebrating our progress in certain areas, we must also renew our efforts to address the areas in which we have setbacks in order for the quality of life in Halton to improve and move beyond 1990 levels.

Community Development Halton (CDH) is using the QLI to monitor and measure living conditions that have a significant effect on the quality of life in Halton. CDH is part of a province-wide project, co-sponsored by the Ontario Social Development Council and the Social Planning Network of Ontario, to use the QLI for reporting on how changes in public policies have affected our quality of life.

This report, *The Quality of Life in Halton – A Snapshot of a Decade*, is the fourth in this series. We published our first report in 1997, as did other partners in communities across Ontario, the first local reports of this kind in Ontario or Canada. ***The purpose of this report is to measure and monitor changes in living conditions which affect the quality of community life. It is a snapshot of a decade. It is a tool for community dialogue to contribute to the public discussion about important issues. It is not intended to be a definitive statement.***

Quality of Life - definition

“The product of the interplay among social, health, economic, and environmental conditions which affect human and social development.”

Ontario Social Development Council and Social Planning Network of Ontario, 1997

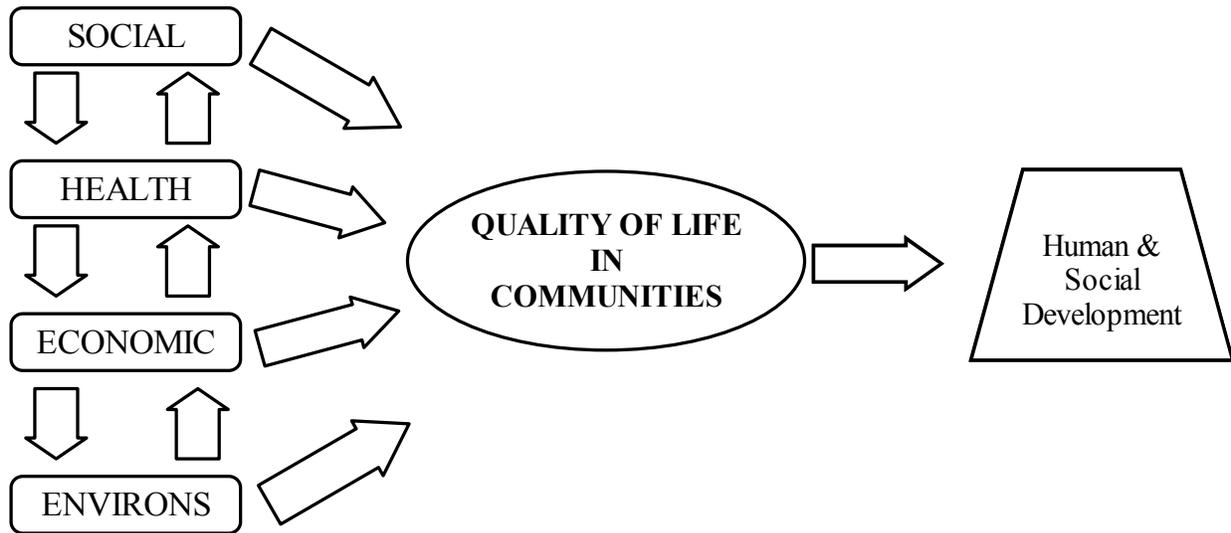
Establishing a consensus on how best to manage sustainable growth and change is the purpose of defining and measuring local quality of life. Each community that seeks to define and measure quality of life will have to build a consensus on what is considered important to preserve, to enhance and to strive for. This should become a regular component of community planning processes. Figure 1, on the following page, illustrates the areas of concern as identified by the Ontario Social Development Council and Social Planning Network of Ontario. As social

development organizations, our goal is to improve the quality of life in our communities by

promoting optimal conditions for human and social development and sustaining them for future generations.

Figure 1

QUALITY OF LIFE INDEX



Ontario Social Development Council and Social Planning Network of Ontario, 1997

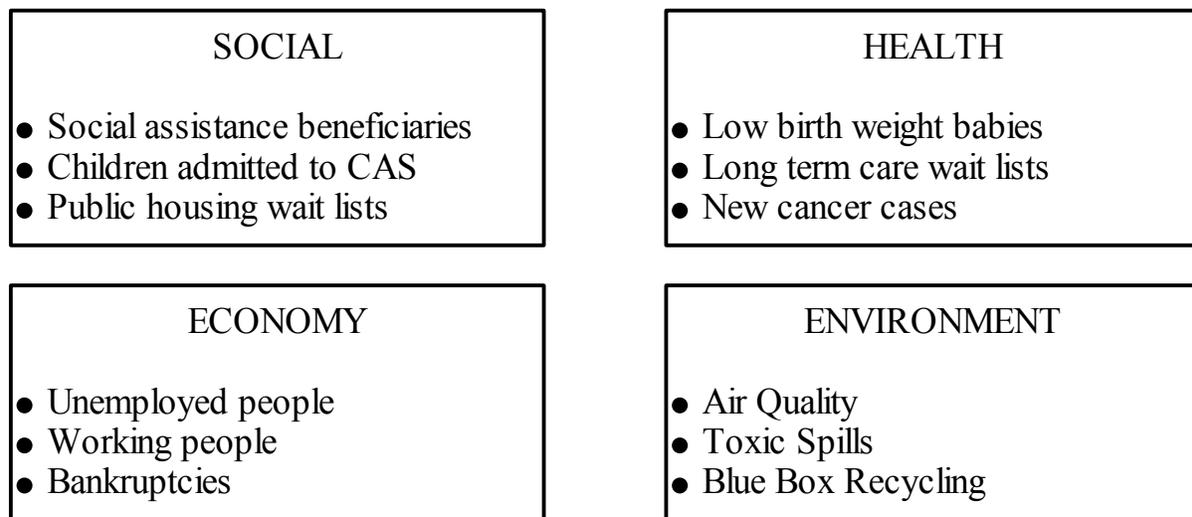
QUALITY OF LIFE INDICATORS

There are many indicators that could be used to measure quality of life. We are using twelve indicators which have been selected as part of a province-wide project for use in communities across Ontario. The criteria for choosing these twelve indicators are:

- < relevance to quality of life;
- < time sensitive, available on a regular basis;
- < readily available;
- < from credible sources.

Figure 2

QUALITY OF LIFE INDICATORS



Ontario Social Development Council and Social Planning Network of Ontario (1997)

Each of these indicators reflects one aspect of an important issue that affects our quality of life. They hold meaning for people and as such, are intended to contribute to public debate. Definitions for the indicators can be found in Appendix 1.

Methodology

As part of the provincial QLI project, we are using the same data set for our local QLI in Halton. We have presented the data from disparate sources as an expression of rate per 10,000 population, to factor out population change as a variable. This also provides a common framework for measuring changes over time.

For the following indicators, a more refined definition of the population has been used. For example, data for low birth weight babies is expressed as a rate per 100 live births. As well, air quality is reported as the number of hours of expressed moderate to poor air quality as a percentage of the total number of “valid hours” measured. Other indicators are being investigated in order to bring further refinement to the QLI.

For more information about the method of calculating the QLI, see the *QLI Methodology Report*, available from Community Development Halton.

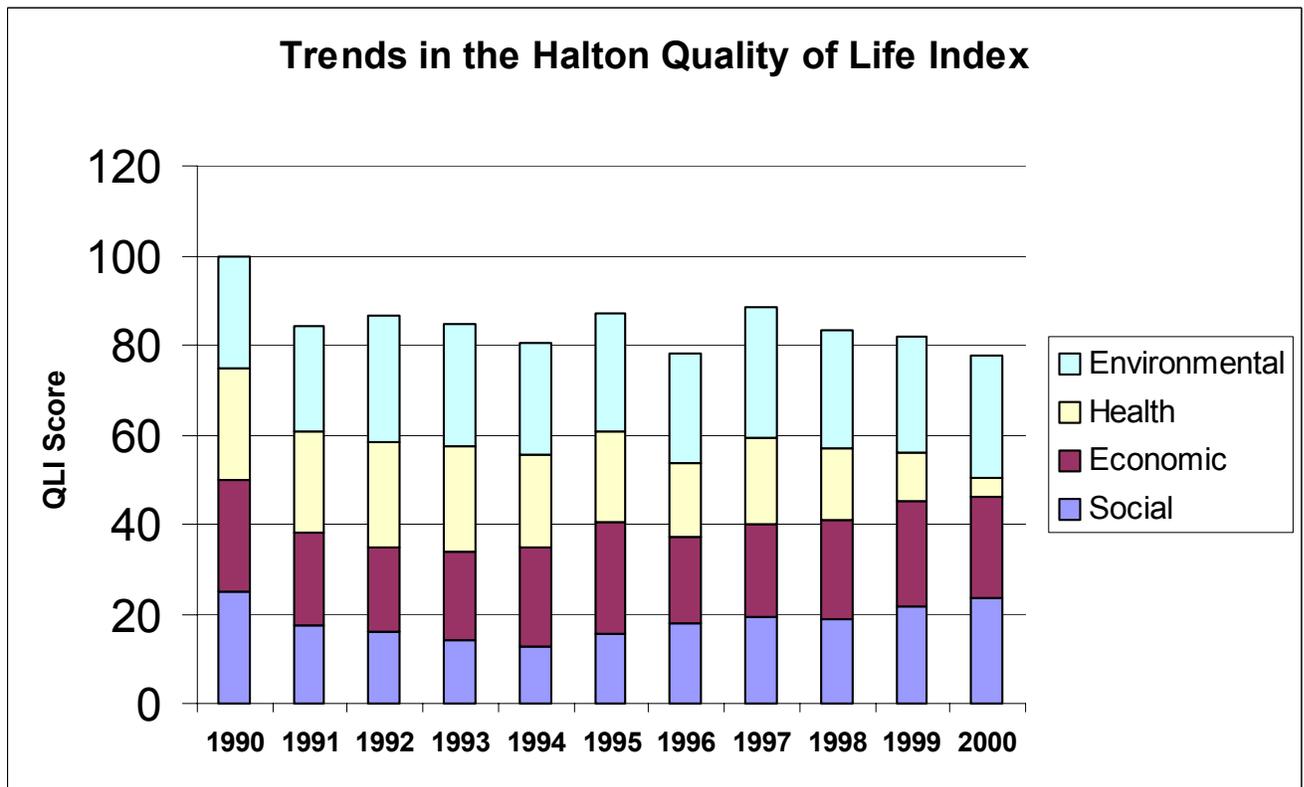
Features of the QLI

- The QLI is pegged at 100 in the base year (1990).
- Each indicator is considered of equal value in the QLI. No weighting factors are used.
- We took into account the growth in population since 1990 by converting the data for each indicator into a rate per 10,000 population.
- Changes in the indicators are calculated based on the percentage increase or decrease from the rate in the base year to the current year.
- The results of the changes have either a positive or negative impact on the quality of life. This is factored into the calculation of the index.

THE QUALITY OF LIFE IN HALTON

We have collected the most current data for each of the twelve indicators and compared them with those of the period 1990-2000. Figure 3 shows the trends in the Halton Quality of Life Index over the last ten years. The chart indicates that the overall QLI has remained below that of 1990 throughout the course of the decade and that the QLI score for 2000 is 77.4. The social and health indicators have not experienced progress in the past few years and have contributed to the lower QLI scores for that time period. The economic indicators have fluctuated and only the environmental indicators have exhibited any consistent progress (see Sectoral Trends and Progress and Setbacks, p. 6-11). Figure 4, on the following page, shows the changes in the twelve indicators for the period 1990-2000.

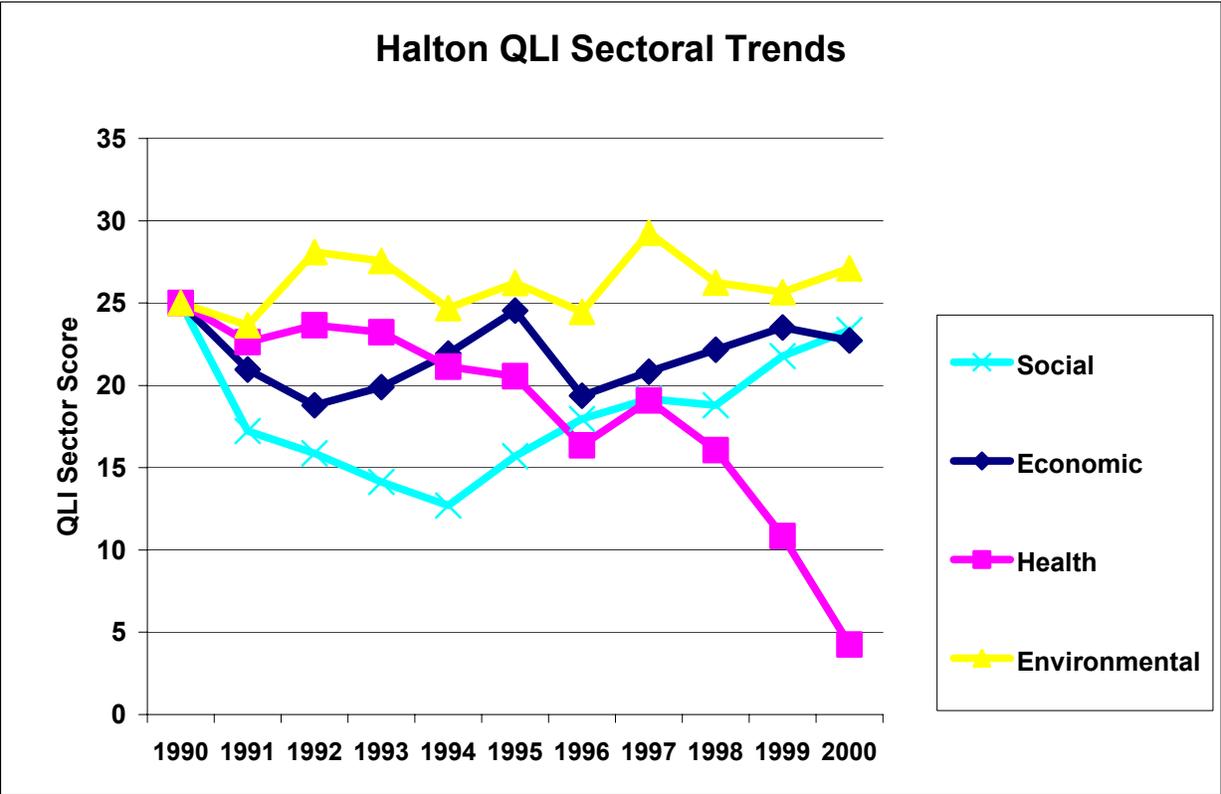
Figure 3



Sectoral Trends in the Quality of Life

Looking at the sectoral trends within the Quality of Life Index, we can see where we are making progress and where problems exist.

Figure 4



The **social** indicators have continued to show steady improvement since 1994. Progress on this indicator is heavily influenced by the decrease in the social assistance caseload in Halton, which has been declining steadily since the mid 1990s. The number of social assistance beneficiaries decreased once again in 2000 after a slight increase in 1999. Changes in eligibility criteria since 1995 have resulted in fewer applicants qualifying for benefits. The public housing wait lists began to level off from 1996 onward, although this only measures part of the social housing picture in Halton. Affordable housing has been identified as an important social concern in this community and with the provincial downloading of social housing to municipalities, the situation will require further monitoring. There has been a decrease in the number of child welfare admissions, which is an improvement. However, in the future, the data will not be comparable as changes in legislation have been introduced that will affect the definition of child abuse, the reporting criteria and the service requirements. These changes will likely start to affect the number of children admitted into care.

The **economic** indicators continue to show improvement. The number of bankruptcies is on the decline again in 2000 after having increased in the previous two years. We have also seen continued decreases in the unemployment rates in this region although we do not have current data for Halton (see Trend Analysis, p. 9). The release of the 2001 Census information over the 2002-2003 period, will allow us to update employment information in order to create an accurate economic profile for this region.

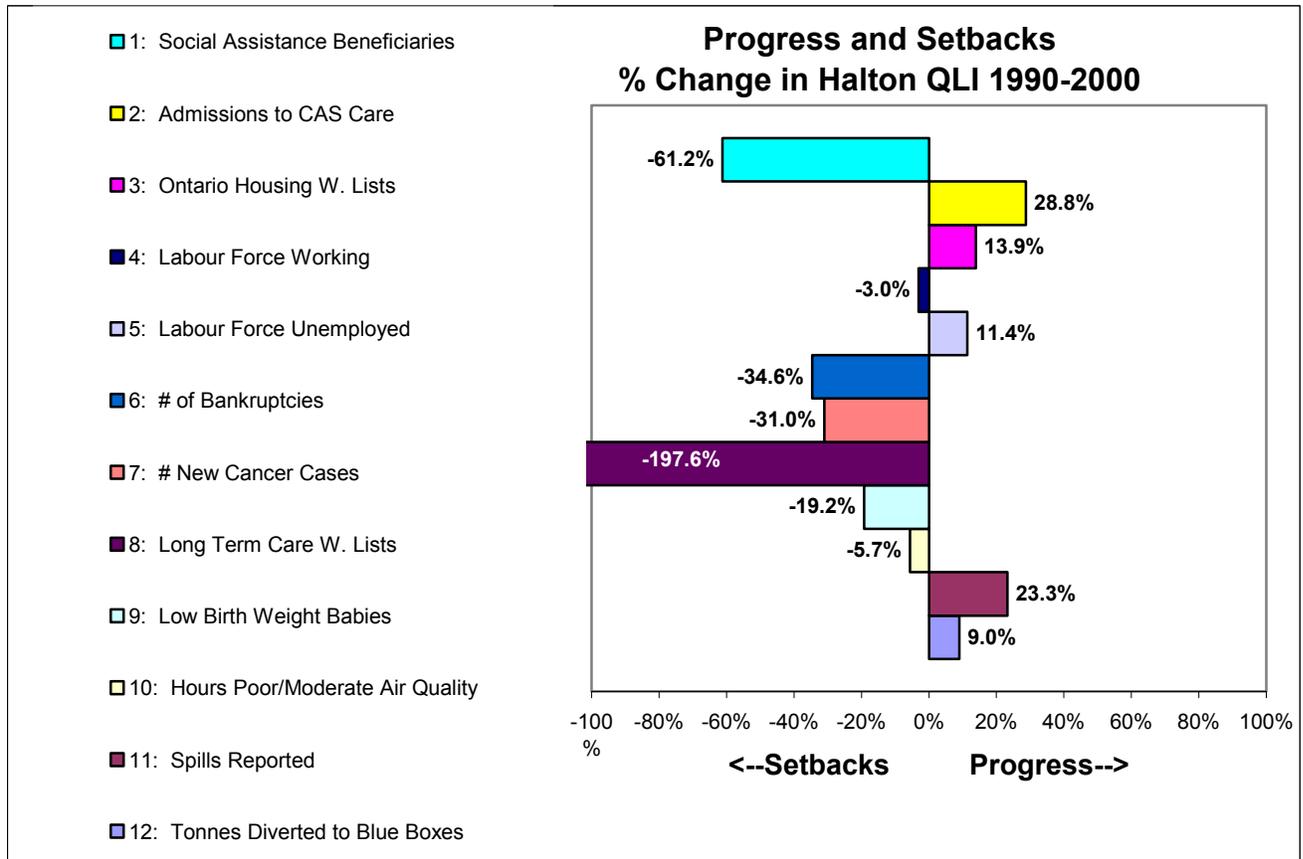
The **health** indicators have shown the least improvement from the 1990 levels. The exception to this is the number of Low Birth Weight babies born in the region. These rates declined significantly in 1998, the year for which the most recent data is available. The number of elderly waiting for Long Term Care (LTC) beds resulted in an overall decline in the Health composite score. In fact, the number of applicants on the LTC Waiting List increased by more than 175% from 1991 to 2000 with a doubling of the number on the list from 1998 to 2000. While money provided by the provincial government for long-term care beds has resulted in more long-term care facilities opening in Halton, we are still faced with an aging population as the recent 2001 Census data illustrates. This will have an effect in the Halton community (see Trend Analysis, p. 10).

The **environmental** indicators continue to be positive in the Halton QLI. The decline in spills reported continued in 2000, although this may be partly due to changes in provincial regulations (see Trend Analysis, p. 9). Blue box recycling continues to keep pace with population growth, and the number of poor air quality hours declined significantly in 2000.

Progress and Setbacks

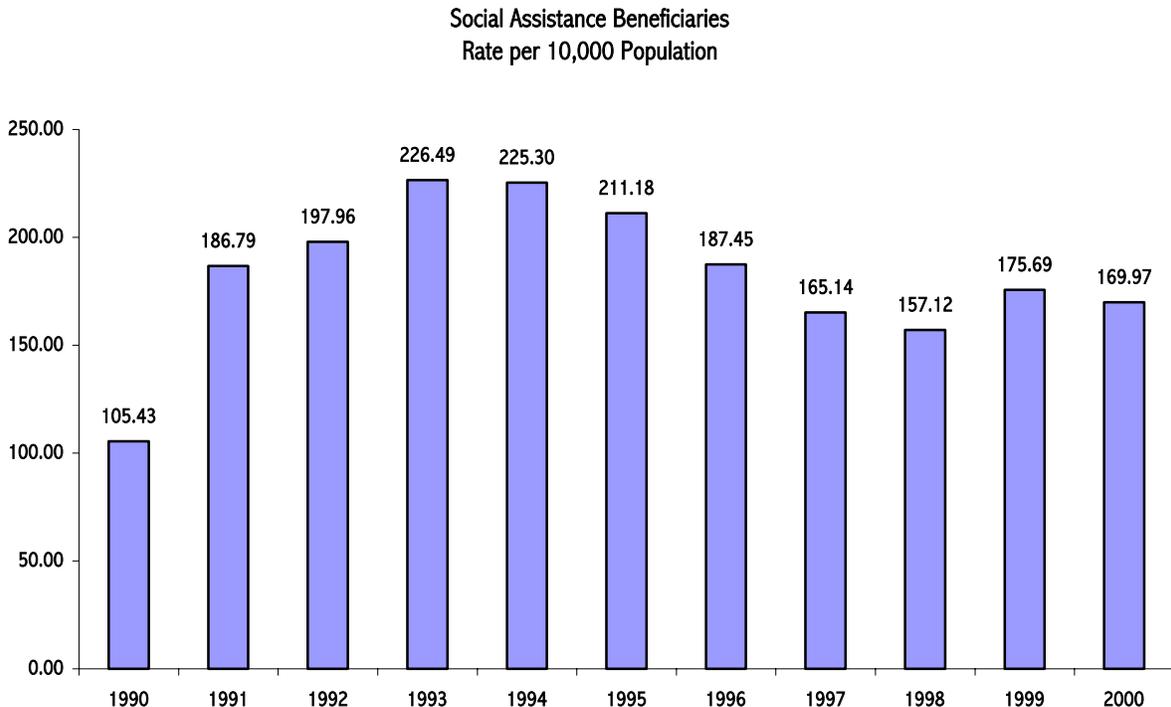
We analyze the results of changes in the quality of life by looking at which of the indicators are showing progress and which are showing setbacks over the time period from 1990 to 2000. Figure 5 shows the progress and setbacks between 1990 and 2000. We comment on the performance of each of the indicators below.

Figure 5



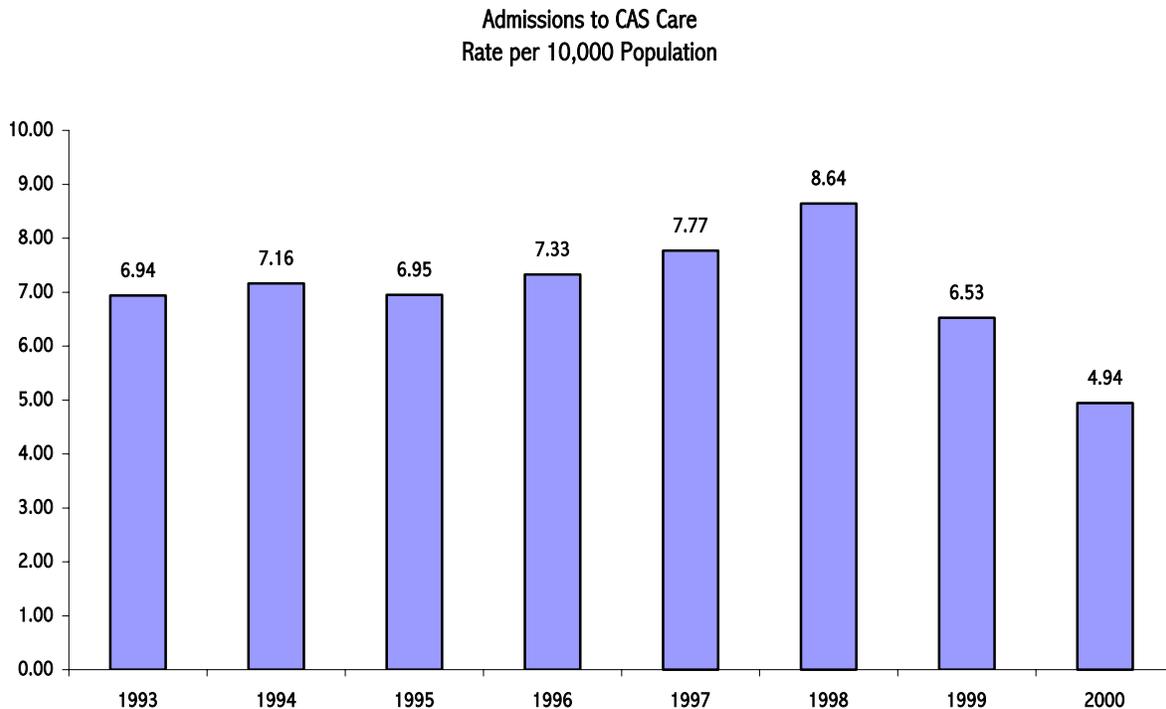
Progress

Social Assistance Beneficiaries – While there has been a steady decrease in the number of social assistance beneficiaries since 1994, the rates still exceed those of 1990 despite changes in eligibility criteria. Recent declines in social assistance statistics are, in part, the result of more people working, as well as the stricter rules of eligibility that have excluded a significant number of people from receiving social assistance. Mandatory drug testing of welfare recipients may decrease the number of social assistance recipients. Falling numbers of people on social assistance stands in contrast to the growth in poverty over this decade, especially among children. This is a warning signal that poverty is a growing phenomenon with long-term implications, even though more people are working and the number of social assistance recipients is declining. Many of these people are finding themselves among the growing homeless population living in emergency shelters.



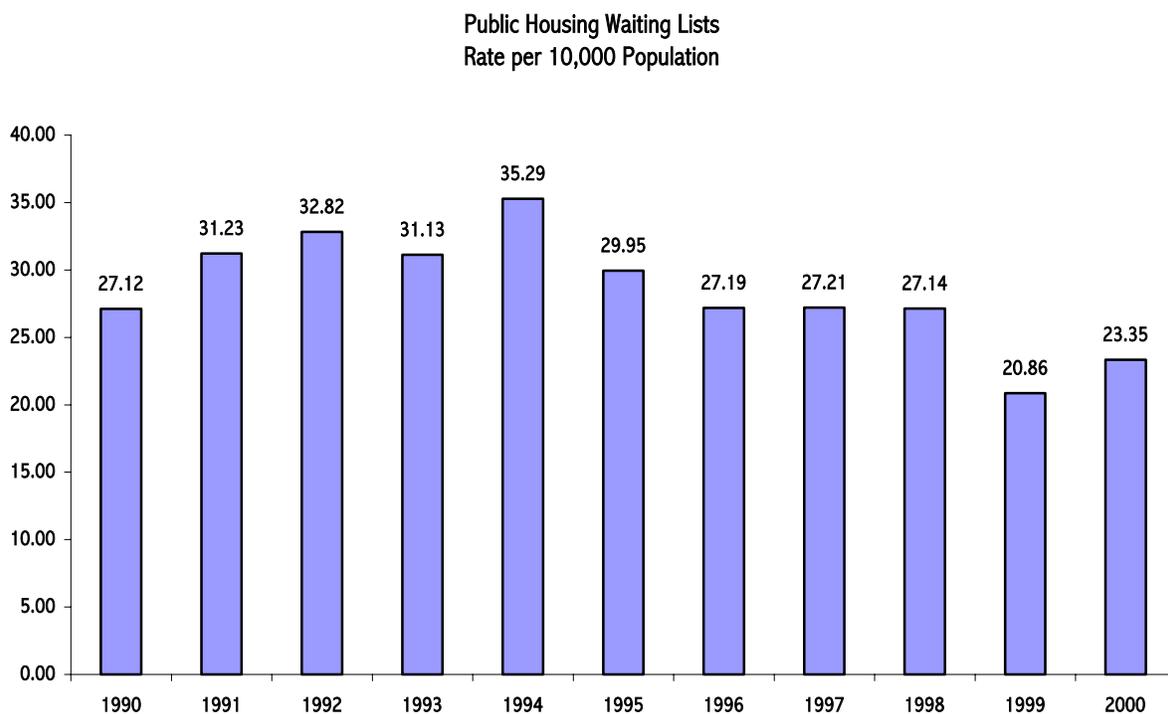
Children Admitted to CAS – This indicator showed an increasing trend during most of the 1990s. Families have found themselves unable to provide the basics for their children or have experienced breakdown under the stresses of life. However, the 1999 data showed an improvement by 22% from 1998 and a further 24% decrease in the number of children admitted to CAS between 1999 and 2000. Child welfare authorities report that more of their admissions are due to problems associated with poverty. Amendments to the Child and Family Services Act, passed in the spring of 1999, changed the criteria for reporting child abuse and neglect, placing a greater emphasis on the best

interests of the child. Community Development Halton anticipates that this could result in an increase in admissions to care in the future. The question is whether child welfare agencies will have adequate resources to work with these children and their families. Across Ontario, the Ontario Association of Children's Aid Societies responded to 210,220 calls across the province from April 1, 2000 to March 31, 2001. Of these, 34%, or 71,475 calls, met the eligibility requirements of a child in need of protection. This is a 27% increase from 1998. Across Ontario, Children's Aid Societies provided substitute care to 26,938 children in 2000-2001. This figure represents a 14% increase since 1998.



Public Housing Waiting Lists – There has been a slight improvement in the statistics regarding this indicator with the number of families and individuals on the waiting list for public housing declining in the past two years after remaining almost constant from 1995 to 2000. The waiting list for public housing offered through the Halton Housing Authority (HHA) has increased slightly between 1999 and 2000 after dipping between 1998 and 1999, but this does not include all social housing options in Halton. For consistency with other provincial partners, we are using statistics for Ontario Housing Corporation units, which the HHA administers locally. This changed in 2001 as the Halton Housing Authority was merged with the Halton Non-Profit Housing Corporation, the largest municipal non-profit, to form the Halton Community Housing Corporation. This was a result of the Social Housing Reform Act 2000 that transferred public housing to municipal control. There are other social housing providers in Halton, such as municipal non-profits, private non-profits and co-ops. However, no new social housing has been built since 1995. In its study of housing needs in Ontario, *Where's Home? A*

Picture of Housing Needs in Ontario (2001 Update), the Ontario Non-Profit Housing Association indicates that the rental housing market in Ontario is getting much worse as tenants are squeezed between a dwindling supply of new rental housing, increasing rents and declining incomes. The crisis of homelessness has become an issue that is galvanizing the public debate about poverty and growing disparities. In response to this, the federal government has implemented the Supporting Communities Partnership Initiative (SCPI), designed to help reduce and prevent absolute homelessness across Canada (see Local Context). Municipalities are now totally responsible for public housing, as a result of federal and provincial downloading of responsibilities for housing. The cost of maintenance of the current public housing stock is becoming prohibitive for cash-strapped local governments. Under these conditions, this indicator may not continue to show improvement in the future.

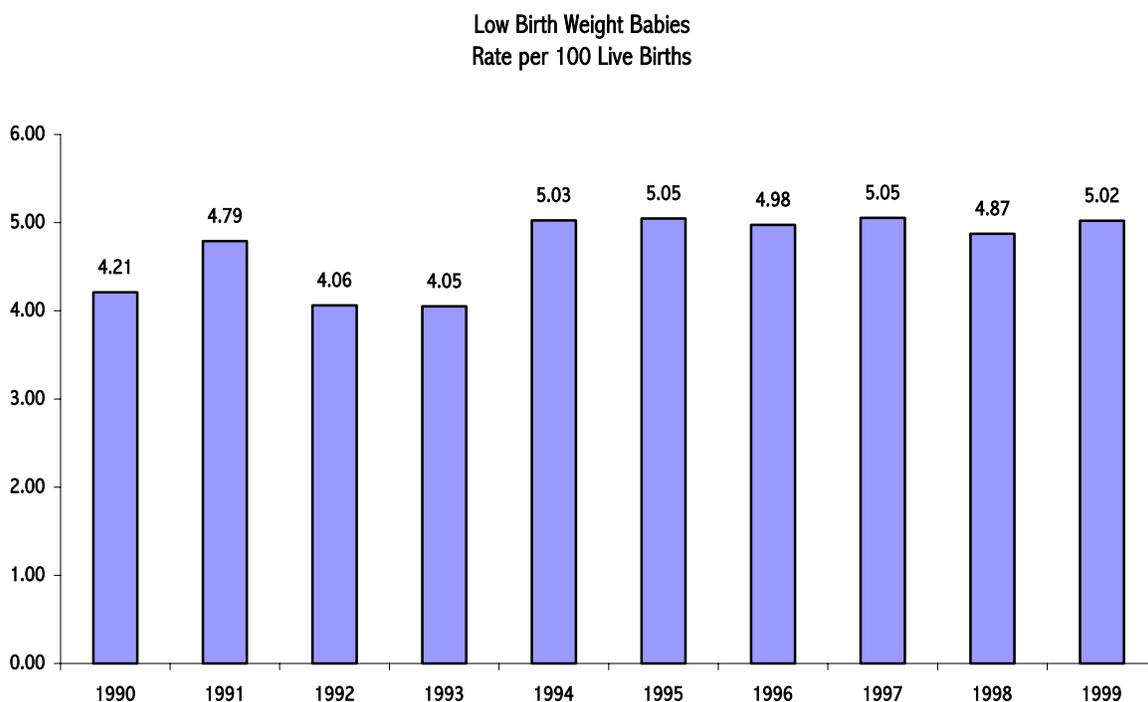


Labour Force Unemployed – The number of people who are unemployed has declined to the point where it has become a positive trend. We are using data from the 1991 and 1996 Census to track labour force participation since the monthly labour force surveys conducted by Statistics Canada do not provide data specific to Halton. Halton falls into two Census Metropolitan Areas (CMAs), Hamilton and Toronto, and as such, we do not receive Halton-based information from the surveys. More current information about unemployment is needed. Local studies suggest that unemployment is higher among youth. We also know that there are many discouraged workers who have given up looking for work and have left the labour force, but documentation is hard to find. Initial 2001

Census information regarding the labour force shows that the unemployment rate in Halton is 4%, down from 5.5% in 1996.

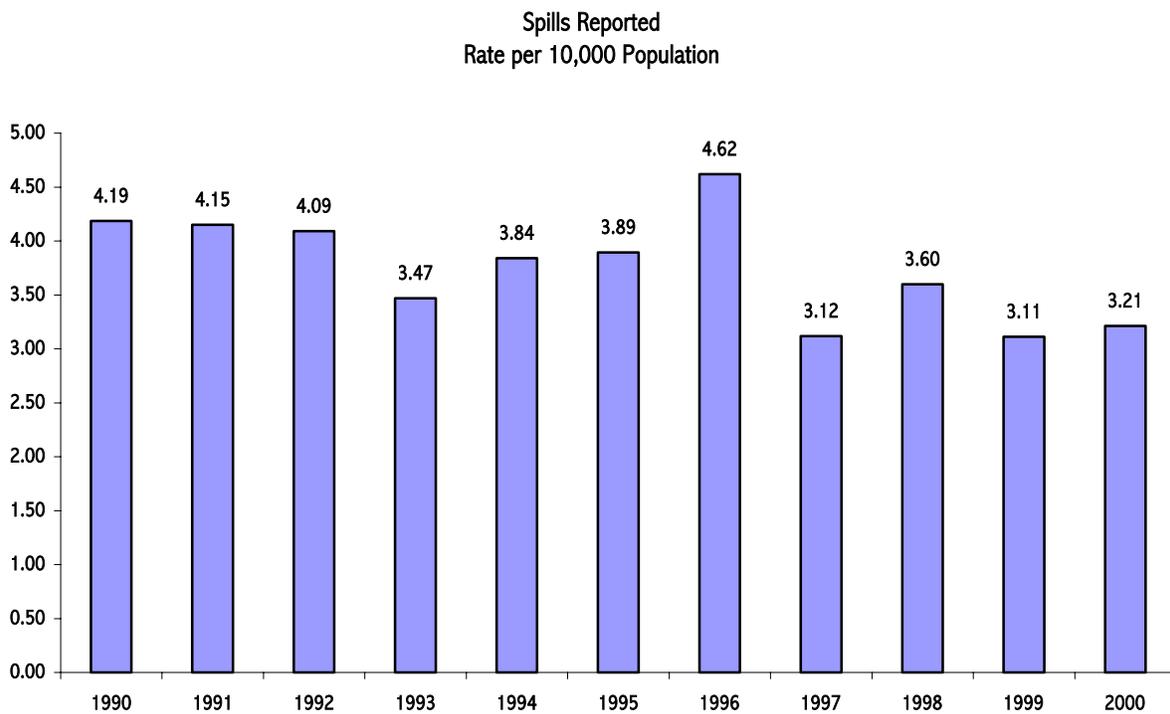
Low Birth Weight Babies¹ – This data indicates that Halton continues to have one of the lowest LBW rates in Ontario. This may be the result of greater public awareness about pre-natal and healthy child development given that Halton’s population generally has higher incomes and higher education levels. However, growing rates of child poverty in Halton are undermining the conditions needed for healthy child and youth development over the long term.

In data received from the Regional Municipality of Halton Health Department, multiple births have nearly tripled as a percentage of all births from 1990 to 1999 (1.8% to 5.1%). Also, multiple births account for 36% of all low birth weight babies in 1999, an increase of 90% from 1990 when they accounted for 19%. This is most likely due to the increased use of fertility drugs by couples wishing to have children. The change in the low birth weight rate between 1990 and 1999 is 19%, with LBW singleton births decreasing 9.3% between 1990 and 1997, while LBW multiple births increased by 117.1%.



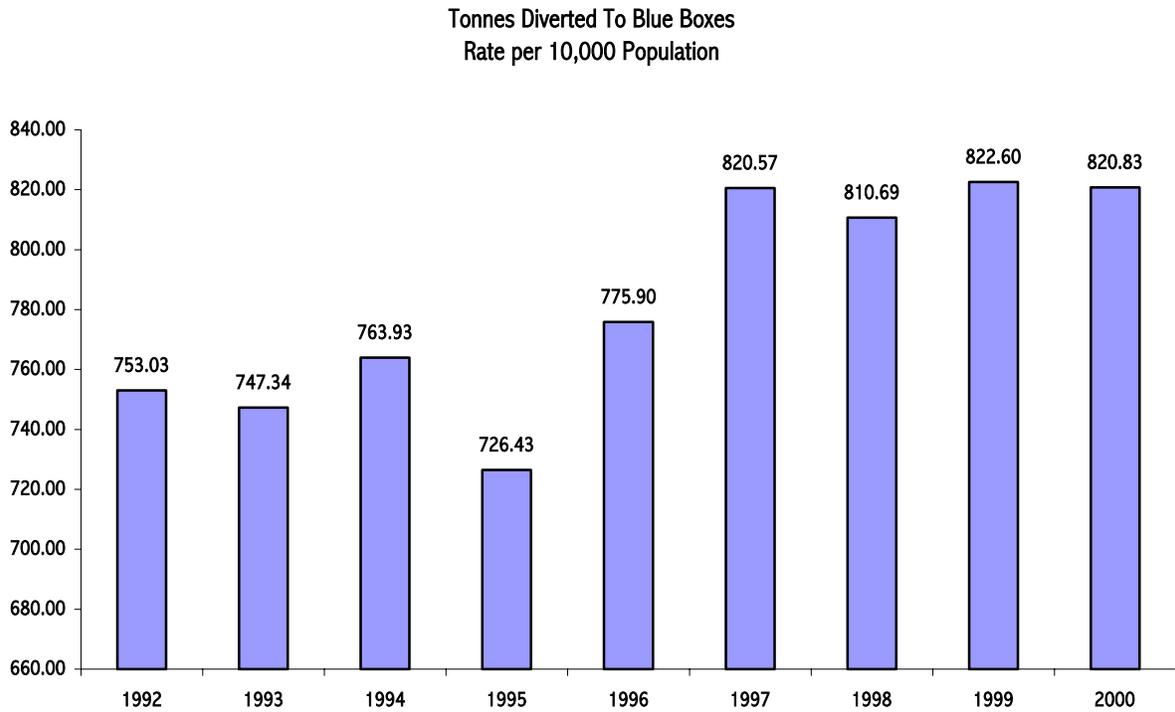
¹ The Council received feedback on our first report about the use of this indicator because it ignored the factor of multiple births that account for a certain number of low birth weight babies. We checked this by removing the multiple births from the sample and recalculating the QLI. This changed the overall QLI score by less than 1 point. For the purpose of compatibility with QLI scores from across the province, the Council continues to employ the total number of low birth weight babies.

Spills Reported – We are using the standard definition of spills, defined by the Ministry of Environment and Energy, as part of the provincial QLI project for comparability with other communities (See Appendix 1). This indicator has shown fair improvement over the past 4 years and the number of spills per year is now less than the 1990 base level. However, recent regulatory change is having an effect on what is reported. This regulation (*Ontario Reg. 675/98*) provides exemption of certain classes of spills from notice requirements under the Environmental Protection Act. The recent water crisis in Walkerton has revealed serious lapses in reporting on environmental pollution, with disastrous consequences. The loss of public trust resulting from deregulation and privatization of environmental protection raises questions about other types of environmental reporting.



Tonnes Diverted to Blue Box – This trend shows that the volume of Blue Box recycling is keeping up with population growth. The total tonnes will be affected by the introduction of lighter packaging materials, such as plastic containers and more lightweight glass products. If tonnes continue to increase, as they have over the past 3 years, then this reflects increased participation. When tonnes increase while packaging material weights decrease, this means more materials are being captured through participation in blue box programs. Still, more could be done to increase the participation of people recycling through the Blue Box program as landfill issues continue to be of concern. The future of the program is uncertain due to the effects of funding cutbacks and downloading onto

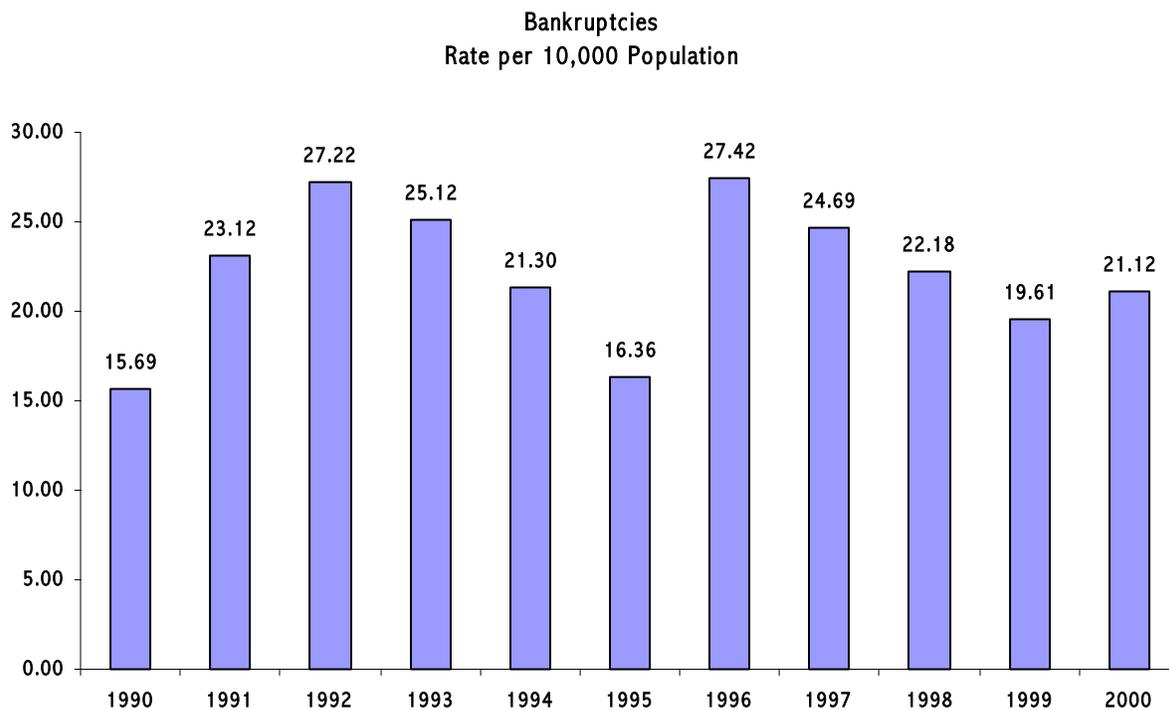
municipal governments. The costs of the program and the market for recyclable materials are also important factors that will influence the future of the program.



Setbacks

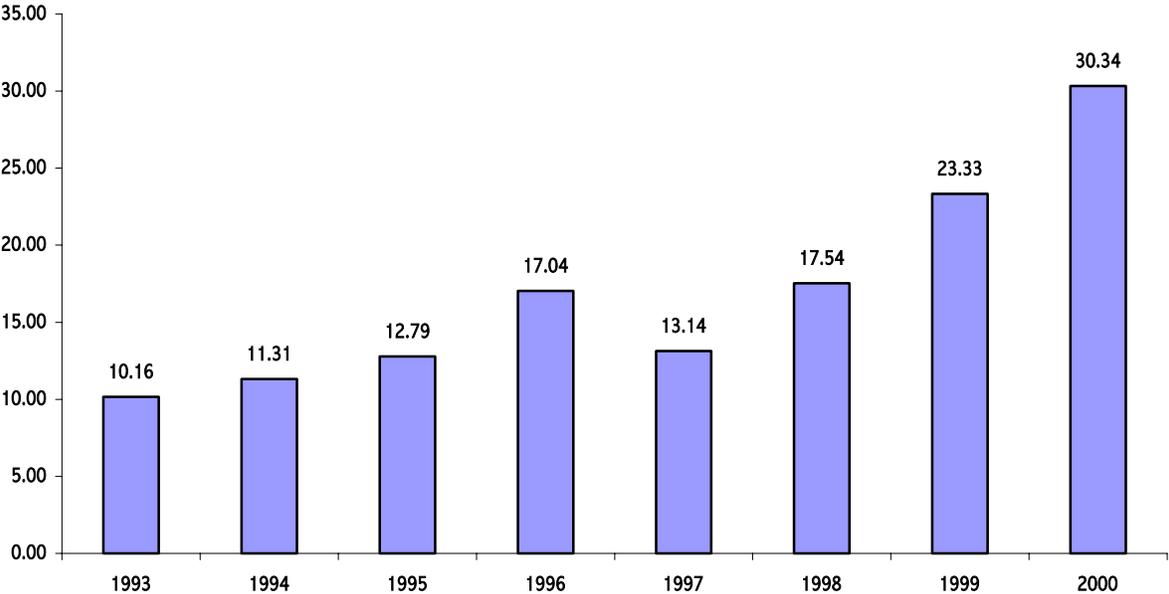
Labour Force Working – The number of jobs created in the current good performing economy is not sufficient to keep up with population growth. The Ontario economy grew at a healthy rate of 6.1% in 1999 and by 5.5% in 2000 (Ministry of Finance, 2001). Although unemployment rates continue to fall, there is still significant underemployment in the labour force. The current economic “boom” is not creating enough jobs to keep pace with Halton’s growing population. It is important to take into consideration another Canadian trend that affects jobs in Ontario and in Halton. Of the jobs added to the Canadian labour market in this decade, over half come from self employment – accounting for 76% of the job growth in 1996 and 83% in 1997 (*The Growing Gap: A Report on Growing Inequality Between the Rich and Poor in Canada*, 1998).

Bankruptcies – The bankruptcy data is showing a slight increase between 1999 and 2000. Bankruptcies peaked in 1996 and declined until 2000. Though still a negative indicator, it is improving as a result of steady economic growth since 1999. If the Ontario government’s estimates of economic growth continue to be realized, this indicator should continue to show improvement. However, bankruptcies are still a measure of economic distress for individuals and businesses that, in turn, result in hardships for families dependent on market income.



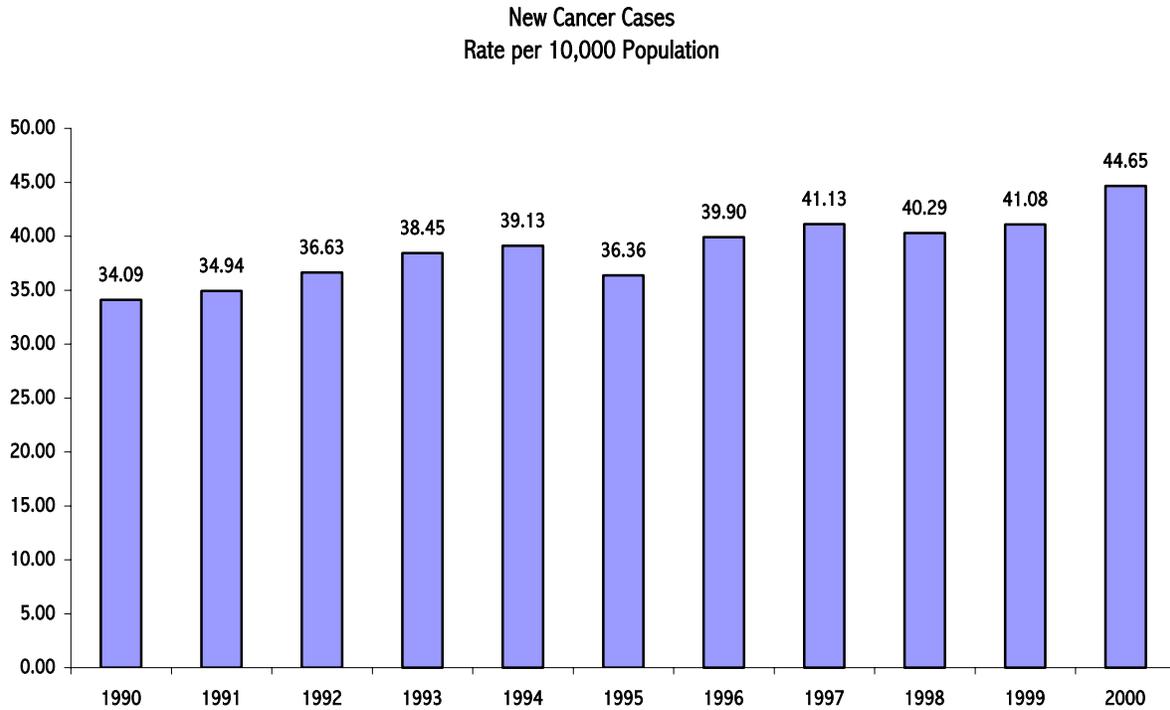
Elderly Long Term Care Waiting Lists – This indicator has performed worse than any other indicator in the Quality of Life Index and impacts significantly on Halton’s QLI. The number of applicants waiting for long term care placements increased by 197.6% from 1990 to 2000 with a doubling of the size of the waiting list in the last three years of the decade. The Ministry of Finance report *Ontario Population Predictions 1999-2028* predicts that by 2028, the number of Halton residents who are 65 or older is expected to increase 186.3% to 128,170 persons. It is expected that 17.5% of Halton’s population will be within this age group by 2021, increasing to 19.9% by 2028. Provincial government announcements about investing funding in new beds have not yet translated into services and older people are suffering. Halton has had the lowest number of Long Term Care beds to population ratio in the province, resulting in a severe shortage for a number of years. The funds for 1,579 new beds in Halton have been committed over a six-year period, which is not likely to keep up with the need or reduce the waiting list. The first allocation of 660 beds was announced in November 1998, with another announcement of 384 beds made in May 2000. These beds allocated in 1998 have now come into the system. However, many of these beds are not affordable for seniors on fixed incomes. This is troubling when the 1996 Census data shows that the majority of seniors (53.2%) have incomes less than \$20,000 a year.

Elderly Waiting For Long Term Care
Rate per 10,000 Population



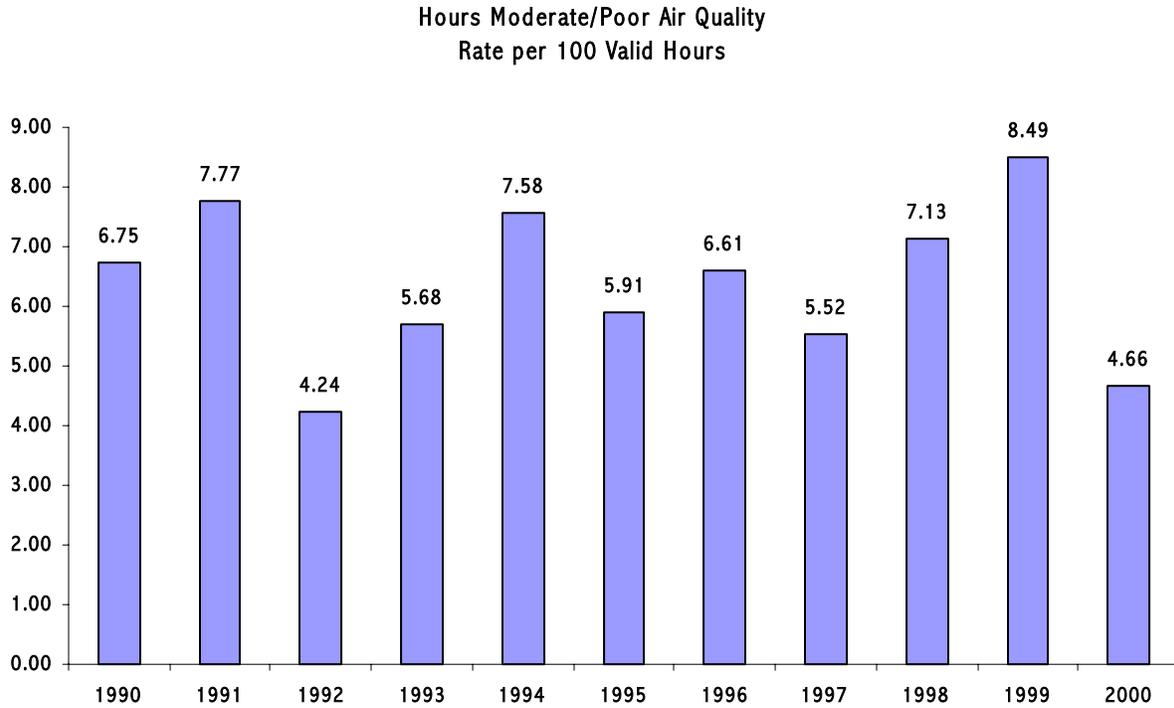
New Cancer Cases – This indicator shows an increasing trend to 2000. A growing number of new cancer cases can be attributed to an aging population and population growth generally. However, the cancer death rate has declined, possibly indicating better treatments. A more detailed analysis has been done by the Halton Regional Health Department in a study entitled, *Cancer Incidence in*

Halton, 1984 to 1998. This report identifies where progress is being made and where setbacks occur for certain types of cancer and among certain populations. Halton has an aging population and this increases the likelihood of increasing cancer rates, as the elderly are at greater risk of being diagnosed with cancer. The study finds that cancer incidence rate for those 65 years of age and over is 130 times that in children and teenagers, 20 times that in adults aged 20 to 44 and more than 3 times that in adults aged 45-64. The study concludes that cancer is a leading cause of morbidity and mortality. “Cancer accounts for one-third of all deaths in Halton. Four out of every ten people will be diagnosed with some form of cancer in their lifetime. However, many types of cancer are preventable.” (p. ii)



Air Quality – We have seen an increase in the number of hours of moderate/poor air quality over the past decade. There was a slight decrease in the number of moderate/poor air quality hours in 2000. Provincial legislation regarding the testing of automobile emissions through the Ontario Drive Clean initiative may lead to some improvement in the AQI. Factors that affect air quality are vehicle emissions, industrial emissions, coal-fired hydro generation, and cross border smog. In the context of deregulation and privatization of environmental protection, problems with air quality will worsen. Also, while air quality is included in the QLI for compatibility with the provincial project, the air quality monitoring sites in Halton are in South Halton (Burlington and Oakville). This means they simply provide a snapshot of air quality conditions in the most urban part of Halton, home to two of Ontario’s major thoroughfares, the QEW and Highway 407. It does not reflect conditions in the northern part of the Region. Meanwhile there are disturbing reports (*Taking Stock 1997, 1997; Ontario’s Environment and the “Common Sense Revolution”: A Four-Year Report, 1999* and *An*

Environmental Agenda for Ontario, 1999) that document the reduction in quality of life because of changes in environmental policies. This includes the negative effect on air quality and the decrease in the number of air quality reporting sites.



Canadian and Ontario Context

Measuring quality of life is a challenge in understanding the interaction of many complex factors. Recent reports provide context to a discussion on quality of life.

Canadians working longer for less pay

A study, *Falling Behind: The State of Working Canada, 2000*, by the Centre for Policy Alternatives concludes that Canadians are now working longer hours at more precarious jobs for less pay than a decade ago. The report notes that recent growth in the economy has driven corporate profits up and helped lower the unemployment rate, but that fundamental problems remain.

This study is the first comprehensive account of how the poor economic performance and government cutbacks of the 1990s have adversely affected most Canadians. Andrew Jackson, senior economist at the Canadian Labour Congress and co-author of the report comments: “The major imbalance in the economy right now is that strong economic growth has not spilled over to working people.”

Co-author David Robinson, public policy director at the Canadian Association of University Teachers, says that cuts to government services have also played a role in eroding the living standards of working Canadians. “Most working people lose out when public services like health care and education are cut back, because they have to purchase those lost services in the marketplace, and often at a higher price. The impact of the cuts of the 1990s is now showing up in household budgets.”

Other highlights of the report:

- Average weekly earnings, adjusted for inflation, grew just 2.8% from 1989 to 1998. And, despite strong economic growth in 1999, there was no increase in real weekly earnings.
- The average after-tax and after transfer income of Canadians fell by 5.6% over the 1990s, with poorer families experiencing a decline of 12%.

Personal security of Canadians increases

Canadians’ personal security, based on hard data, improved for the third year in a row according to the report *Personal Security Index 2002* by the Canadian Council on Social Development (CCSD). But the fourth annual Personal Security Index (PSI) reveals a distinct gap between Canadians’ perceptions of their financial and health security and personal safety and the “reality.” Put simply, it seems Canadians feel less secure than they did in previous years despite improving economic and health data.

The Personal Security Index (PSI) is a tool that measures changes in the economic and physical security of Canadians. The PSI focuses on the basics of living: whether Canadians have enough

money to get by and have resources they can count on in times of need; whether they live in good health and have access to necessary health services; and whether they are safe from crime and accidents.

Not all groups in society consistently rate their security lower than do others: people with lower incomes, those with lower levels of education, and lone-parents. The report concludes that more attention must be paid to make sure that improvements in personal security are extended to all Canadians, regardless of their income, education level, or family situation.

The PSI includes a data index and a perception index, based on a national opinion survey. But even though almost all the hard data showed economic improvements, Canadians did not feel much more secure economically than they had in previous years. In fact, all the perception indicators for economic security fell in 2001. If we define security as a state of mind, then we are moving in the wrong direction.

Bringing Down the Barriers: The Labour Market and Women with Disabilities in Ontario

In Ontario, over half a million adult women have a disability and almost one in three of these women lives in poverty, according to the 2000 report, *Bringing Down the Barriers: The Labour Market and Women with Disabilities in Ontario* from the Canadian Council on Social Development. The best defence against poverty for persons with disabilities is employment, but women with disabilities also have one of the lowest rates of labour force participation of any group of adults in the province.

The rate of disability increased between 1991 and 1996 in Ontario and across Canada. Some of the largest increases in Ontario were among women. This means that an increasing proportion of women are also likely to live in poverty unless they can obtain well-paying jobs.

While women and men with disabilities are typically both affected by the same barriers to employment, they are not always affected to the same degree or in the same way. Because of their gender and their disability, women often face a unique obstacle course when trying to navigate their way through the world of work.

Several strategies are recommended:

- Delinking income programs from disability-related supports and services.
- Creating a stable environment in which persons can move between paid employment and income support programs with ease.
- Improving opportunities for better paying jobs.
- Changing social attitudes about people with disabilities.

Local Context

Recent reports are highlighted which provide further context on local quality of life issues.

Supporting Communities Partnership Initiative (SCPI)

In response to the growing concern about homelessness, the federal government has implemented the Supporting Communities Partnership Initiative (SCPI), designed to help reduce and prevent absolute homelessness in local communities across Canada. In Halton, this has resulted in the development of a community plan entitled *A Journey Home*.

Identified Priorities

Based on the research noted above, a continuum of supports, comprised of prevention, instrumental supports, intake/assessment, emergency shelter, transition housing, personal supports and supportive housing has been established. As a result, five common themes were identified as priorities for the Halton Community:

- The need for emergency housing beds
- The need for transition housing with supports as required
- The need for client support and advocacy resources in the housing and emergency housing systems
- Expansion of community awareness of homelessness, the need for affordable housing and support for strategies to address these issues
- Enhancement of cross sectoral (e.g. church, community group, service clubs) capacities in the areas of partnership, collaboration and coalition effectiveness so as to ensure the development of effective housing alternatives and the necessary supporting policies and programs.

Projects addressing the priorities identified in the community plan have accessed just over \$1 million to address issues of homelessness and those at risk of homelessness. The funded projects have recently been completed and a second round of funding is expected to be announced in the summer of 2003.

Growing Old in Burlington: A Report on Seniors Trends and Issues (2002)

The purpose of this report, commissioned by the United Way of Burlington and Greater Hamilton, is to provide the community with a profile of Burlington seniors (persons aged 65 years of age and over) along with an overview of the issues that affect this group of people. The report outlines factors that seniors face that affect the quality of their lives and their participation in the Burlington community. The report is based on traditional social-economic indicators as well as information from study participants. The aim of the report is to inform discussion on the issues affecting this important segment of Burlington's population. Some of the highlights of the report follow.

According to The Ministry of Finance report *Ontario Population Predictions 1999-2028*:

- By 2028, the number of Halton residents who are 65 or older is expected to increase 186.3% to 128,170 persons.
- It is expected that 17.5% of Halton's population will be within this age group by 2021, increasing to 19.9% by 2028.

According to Statistics Canada 1996 Census data:

- The majority of seniors (53.2%) have incomes of less than \$20,000 a year and 17.7% (2,970 seniors) live below the low-income cut-off. Poverty is higher in Burlington for older seniors with 23.2% of seniors aged over 74 years of age with low incomes.

According to Statistics Canada 2001 Census data:

- Twelve percent of the Halton population or 44,770 persons are seniors (65 years of age or older).
- Compared to the other municipalities within Halton, Burlington has the highest percentage of seniors in its population at 14.1% (21,235 persons).

Some issues highlighted by study participants:

- People are living longer and the population is ageing, the 65 and over age group is increasing within the population. The need for all services for seniors particularly for health services will increase dramatically over the next few decades.
- Issues concerning elderly women, such as adequate income and widowhood will also become increasingly important since the majority of seniors are female.
- As the growing Burlington population becomes more diverse, providing services for the multicultural community will become more of an issue. Multicultural seniors have specific issues such as language barriers that must be addressed by our community in order to build an inclusive city.
- Despite most seniors receiving government incomes, poverty among seniors is an issue. Burlington has a higher poverty rate than the provincial poverty rate for seniors. One in five Burlington seniors live in poverty and the rate of poverty increases with age.
- Housing for seniors is an issue. Housing providers need to be aware and increase efforts to plan for the housing needs of senior residents. The need for more subsidized housing for seniors is clearly identified.
- The need for adequate funding of home care and home support services for seniors are clearly identified, as well as increased availability and planning for hospital release of elderly patients. The lack of such services is stressful for seniors, families and caregivers.
- Health related costs for prescriptions and dental care are identified as an issue that is creating hardship for Burlington seniors.

The Hidden Faces of Poverty (2001)

The Hidden Faces of Poverty is the name of the aptly titled report that documents the facts about poverty in Halton as well as the testimonies of fifteen people living in poverty in Halton.

Issues brought forward in the report include:

- Income Security – Gillian’s story: “I make \$400.00 a month working. Social Assistance gives me \$740.00 per month... My family’s needs are not being met. I have to say ‘no’ to my kids... We have used food banks and you feel degraded going into one... My kids have not done anything to deserve this.”
- Affordable housing – Anna’s story: “Affordable housing in Halton is the big issue for us... We have had to live in places that are in bad condition... I pay \$890 a month for rent. We have difficulty paying for a lot of things, just meeting the basic needs...”
- Child care – Helen’s story: “I’m on the waiting list for a child care subsidy. I can’t even get day care right now... I want to get a good job... I need my day care.”

Mary, one participant in the study explains: “I think what we are doing right now [giving our testimonies] is a positive step because to share our stories is getting the real facts out. The government is very good at distorting the picture, so we really need to work hard to let people know about the reality.”

A Profile of Literacy Skills and Needs for Halton (2002)

Community Development Halton and the Peel-Halton-Dufferin Adult Learning Network released the study, *A Profile of Literacy Skills and Needs for Halton*. This study provides a description of literacy skills as measured by the International Adult Literacy Survey (IALS), provides a demographic and socio-economic profile of the different geographical areas using 1996 Census data and provides an information base necessary for the planning and development of a system of literacy services that addresses the changing needs of learners in Halton Region.

This study clearly establishes that the region of Halton follows trends documented in the research on literacy. Strong relationships exist between: literacy skills and age; literacy skills and education; literacy skills and income; literacy skills and employment. The findings show that 1 in 5 Halton adults (18 years of age and over) do not have a high school diploma. This particularly affects the population groups aged 45 and over. Also, according to the International Adult Literacy Survey, approximately 50% of those working in different occupations and industries within Halton do so using low literacy skills (IALS Levels 1 and 2). This means that they have serious difficulty dealing with printed materials and most likely identify themselves as people who have difficulties reading (Level 1) or they can deal only with material that is simple and clearly laid out, and material in which the tasks involved are not too complex. They read, but not well. (Level 2)

"People today need more advanced literacy skills than ever before to cope with the changing pace of society both at home and at work," said Sue McCormack, (former) Executive Director of the Peel-Halton-Dufferin Adult Learning Network. "This report will help to raise awareness about literacy

skills and needs in Halton, and will assist local literacy providers in their outreach and planning activities."

Ted Hildebrandt of Community Development Halton concurred, stating that, "Literacy is an essential skill in building a competitive labour force in a changing world based on information and knowledge. This report establishes the important link between literacy and economic and human development." This report will contribute to the deliberations throughout our community as we work together to create informed citizens and build a labour force relevant for the future.

APPENDIX 1 DEFINITIONS OF INDICATORS

SOCIAL INDICATORS

Social Assistance Caseload

The number of beneficiaries during a given month is used, rather than caseload size, as a more accurate method of measuring the dimensions of those who depend on government assistance. The categories of assistance were changed in 1998. Prior to 1998, they were General Welfare Assistance (GWA) and Family Benefits Allowance (FBA). Since 1998, they are called Ontario Works and the Ontario Disability Support Program.

Sources – Ontario Ministry of Community & Social Services, Social Assistance and Programs Branch, collected through the area offices of the Ministry; municipal social services departments.

Children Admitted to Care of Child Welfare Authorities

The number of children who are admitted to care by child welfare authorities (Children's Aid Societies) as mandated by the Child and Family Services Act.

Sources – The Ontario Association of Children's Aid Societies (OACAS); Children's Services Branch, Ontario Ministry of Community & Social Services; local Children's Aid Societies or Family and Children's Services Agencies.

Waiting Lists for Public Housing

The average number of people on waiting lists for public housing (OHC) over a given year.

Sources – Ontario Ministry of Municipal Affairs and Housing, Ontario Housing Corporation (OHC); local housing authorities.

ECONOMIC INDICATORS

People Working in the Labour Force

The number of people working during a specified month.

Source – Census Data, Statistics Canada. National and provincial data available on Statistic Canada's website:

<http://www.statcan.ca/english/Pgdb/People/labour>

People Unemployed in the Labour Force

The number of people unemployed and looking for work during a specified month.

Source – Census Data, Statistics Canada. National and provincial data available on Statistic Canada's website:

<http://www.statcan.ca/english/Pgdb/People/labour>

Bankruptcies

The number of individuals and companies declaring bankruptcy in a specified month, as reported to the Ontario Ministry of Consumer and Commercial Relations.

Sources – Industry Canada, Bankruptcies Branch, Office of the Superintendent of Bankruptcy; Ontario Ministry of Consumer and Commercial Relations. Complete report for Ontario by postal code is provided to Ontario Social Development Council for distribution to community partners in the QLI Project. It is also available on the Internet through the QLI website: <http://www.qli-ont.org>

HEALTH INDICATORS

Elderly Waiting for Long Term Care Placements

The number of people over 65 years of age waiting for placement in long-term care facilities through Placement Coordination Services/Community Care Access Centres during a specified month. A small number of people under 65 years of age also live in long-term care facilities and are counted in the wait list statistics.

Sources – Placement Coordination Service Statistics: Long Term Care Facility, Section A1 and Long Term Care, Section A2, Ontario Ministry of Health; Local Placement Coordination Services; Community Care Access Centre.

Low Birth Weight Babies

The number of low birth weight babies born in a month or a year. Low birth weight is defined as less than 2500 grams or 5 pounds 8 ounces.

Sources – Vital Statistics Branch, Ontario Ministry of Health; Public Health Unit; District Health Council.

New Cancer Cases

The number of new cases of all types of cancer in a year.

Source – Ontario Cancer Registry. Provincial and local data provided to Ontario Social Development Council for community partners.

ENVIRONMENTAL INDICATORS

Air Quality

The accumulated number of hours of moderate to poor air quality, reported daily by 27 sites around the province, when the amount of particulates in the air reaches a threshold which affects health, as defined by the Ontario Ministry of Environment and Energy. Air quality is measured as the number of hours of Moderate (32-49) or Poor (50-99) air quality per month.

Sources – Ontario Ministry of the Environment and Energy. Also available through the QLI website: <http://www.qli-ont.org>

Spills of Toxic Substances

The accumulated number of toxic spills reported during the year as reported to the Ministry of Environment and Energy under the Environmental Protection Act.

Sources – Spills Action Centre, Ontario Ministry of the Environment and Energy. Statistics can be found for most major municipalities on the Ministry's website: <http://www.ene.gov.on.ca>. Also available through the QLI website: <http://www.qli-ont.org>. The Ministry provides data directly to Ontario Social Development Council for distribution to community partners in the QLI Project.

Tonnes of Waste Diverted to Blue Boxes

Metric tonnes of waste diverted from landfills and recycled through Blue Boxes.

Source – Recycling Council of Ontario; Ontario Ministry of Environment and Energy; local waste management offices; municipal recycling boards. Also available through the QLI website: <http://www.qli-ont.org>

APPENDIX 2 – 1990-2000 HALTON QLI SPREADSHEET

INDICATORS	1990 QLI	1991 QLI	1992 QLI	1993 QLI	1994 QLI	1995 QLI	1996 QLI	1997 QLI	1998 QLI	1999 QLI	2000 QLI
SOCIAL INDICATORS											
1: Social Assistance Beneficiaries	8.3	1.9	1.0	-1.2	-1.1	0.0	1.8	3.6	4.2	2.8	3.2
2: Admissions to CAS Care	8.3	8.3	8.3	8.3	8.0	8.3	7.8	7.3	6.3	8.8	10.7
3: Ontario Housing W. Lists	8.3	7.0	6.6	7.1	5.8	7.4	8.3	8.3	8.3	10.2	9.5
SOCIAL COMPOSITE	25	17.2	15.9	14.1	12.7	15.7	18.0	19.2	18.8	21.8	23.4
ECONOMIC INDICATORS											
4: Labour Force Working	8.3	8.3	8.3	8.3	8.3	8.3	8.0	8.0	8.0	8.0	8.0
5: Labour Force Unemployed	8.3	8.3	8.3	8.3	8.3	8.3	9.2	9.2	9.2	9.2	9.2
6: # of Bankruptcies	8.3	4.4	2.2	3.3	5.3	7.9	2.1	3.5	4.9	6.2	5.4
ECONOMIC COMPOSITE	25	21.0	18.8	19.9	21.9	24.5	19.4	20.8	22.2	23.5	22.7
HEALTH INDICATORS											
7: # New Cancer Cases	8.3	8.1	7.7	7.2	7.1	7.7	6.9	6.6	6.8	6.6	5.7
8: Long Term Care W. Lists	8.3	7.4	7.4	7.4	7.4	6.2	2.7	5.9	2.3	-2.5	-8.2
9: Low Birth Weight Babies	8.3	7.2	8.6	8.6	6.7	6.6	6.8	6.6	7.0	6.7	6.7
HEALTH COMPOSITE	25	22.6	23.6	23.2	21.1	20.5	16.4	19.1	16.1	10.8	4.2
ENVIRONMENTAL INDICATORS											
10: Hours Poor/Moderate Air Quality	8.3	7.0	11.4	9.6	7.3	9.3	8.5	9.8	7.8	6.2	10.9
11: Spills Reported	8.3	8.4	8.5	9.7	9.0	8.9	7.4	10.4	9.5	10.4	10.2
12: Tonnes Diverted to Blue Boxes	8.3	8.2	8.2	8.2	8.4	8.0	8.6	9.0	8.9	9.1	9.0
ENVIRONMENTAL COMPOSITE	25	23.6	28.1	27.6	24.7	26.2	24.5	29.3	26.2	25.7	27.1
QLI COMPOSITE INDEX	100	84.5	86.4	84.8	80.4	87.0	78.2	88.4	83.2	81.8	77.4