

# *Housing & Income as Social Determinants of Women's Health in Canadian Cities*

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*Health policy is increasingly conceptualized as concerned with broader issues that influence health rather than simply focused on health care. One such concern is with the social determinants of health which are the conditions in which people live and work. Social determinants provide the context for understanding population health and women's health in particular. Especially important to health are the social determinants of income and housing. This article examines how income and housing policies interact with gender to influence these social determinants of Canadian women's health. It compares income and housing data for unattached men and women of working age (18 to 64 years), couples with children, and female and male lone-parents in the Montreal, Toronto, and Vancouver Census Metropolitan Areas (CMAs). The study found that although the incomes of female lone-parents increased slightly in Montreal and Toronto, female lone-parents and unattached females without children continue to show higher rates of poverty than other groups. Female lone-parents are the most socially and economically disadvantaged. Women's lower incomes provide the context in which health-related effects of housing and income policies can be understood.*

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Health policy is increasingly being conceptualized as concerned with broader societal issues that influence population health rather than simply focused on health care. Related to this concept is the belief that developing appropriate health policy has the capacity to both improve population health and reduce the health inequalities that exist within populations. Health policy should address the social determinants of health, that is, the living conditions that include income, housing, food, and employment security. Particularly important to health are the social determinants of housing and income (Bryant, 2008). These specific social determinants provide a key context for understanding the living

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conditions of the population in general but may have special relevance for understanding the health of women (Armstrong, 2004).

Research has examined the specific health effects of housing conditions (e.g., the relationships between mould and the development of respiratory conditions, and between overcrowding and poor mental health) (Bryant, 2008). But more thoughtful research has demonstrated that housing conditions are closely related to low income, insecure and low wage employment, and food insecurity suggesting that it is a clustering of disadvantage in living conditions that contribute to poor health (Shaw et al., 1999). As one example, Canadian women with low incomes have serious housing needs and greater risk of living in unsafe and unhealthy environments (McCracken & Watson, 2004). More specifically, research has shown that urban housing conditions are closely associated with violence against women (DeKeseredy & Schwartz, 2002). One Canadian study found that 19.3% of women who participated in the study public housing survey in eastern Ontario reported experiencing one or more types of physical violence (DeKeseredy et al., 2003).

Hulchanski's study on Toronto neighbourhoods reveals increasing neighbourhood polarization since 1970 (Hulchanski, 2007). The polarization has resulted from changes in the economy, increasing part-time and short-term jobs, and declining government income transfers. The study found that three distinct cities within Toronto – the wealthy, the middle, and the disadvantaged – primarily defined by income had developed. Women are especially likely to be affected by such developments (Davies et al., 2001). These adverse living conditions and declining incomes – and their clustering – result from public policy decisions (Bryant, 2008). Moreover, it appears that women are especially susceptible to these adverse public policy decisions (Davies et al., 2001).

For example, some provinces such as Alberta, British Columbia and Ontario have removed rent control which had protected middle and modest income households from high rents and helped maintain an affordable rental housing market. In addition, federal and provincial governments have withdrawn from social housing production and provision (Bryant, 2008). More recently, the Ontario provincial budget released in March 2009 reduced spending to the Ontario Ministry of Municipal Affairs and Housing (Shapcott, 2009). Women, due to their generally lower incomes – as compared to men – and caregiving responsibilities within their families, are especially susceptible to these adverse public policy decisions (Davies et al., 2001).

This study examined the housing and income situations of Canadian women in three major urban areas. The objective is to aid analysis of how these social determinants are shaped by gender and

public policy. To accomplish this task, the study compared income and housing indicators for men and women among different family types living in Canada's three largest Census Metropolitan Areas (CMAs): Vancouver, Toronto and Montreal. The study was carried out within a feminist political economy perspective.

### *Feminist Political Economy*

Political economy is concerned with the cluster of institutions and social relations that form political and economic systems (Armstrong, 2008; Coburn, 2001, 2006). It considers how the organization, production, and distribution of economic and social resources – such as employment, health care, and housing, lead to different exposures, i.e. different types of housing and environmental conditions – that result in inequalities in health outcomes in a population.

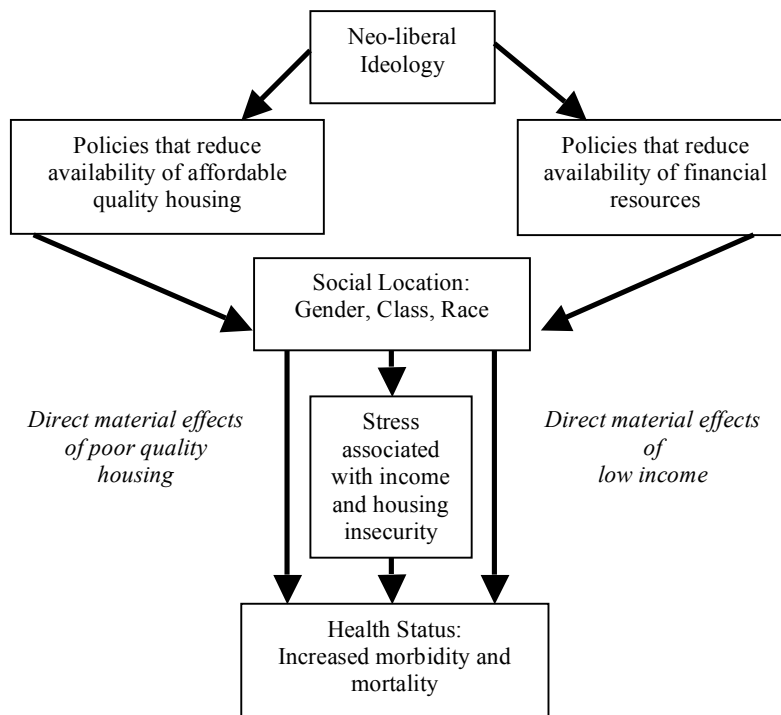
Feminist political economy adds a gender lens to this analysis. It is a theoretical approach that, in addition to seeing political, economic, social and ideological features of society as integrally connected, also sees these features as being strongly gendered (Armstrong & Armstrong, 2003). Feminist political economy is concerned with the dominant societal ideas about women and men and how these ideas are translated into inequalities between women and men in power, influence, resources, and health (Armstrong, 2006; Armstrong, 2008). Feminist political economy applies its gender lens to focus on class, value, power and political ideology as key factors that structure women's access to employment and financial resources within a society (Armstrong, 2001).

Feminist political economy is also a materialist approach because it is concerned with women's access to social and economic resources such as income and housing (Doyal, 1995). It therefore provides an excellent analytical approach for considering the social determinants of health and the clustering of disadvantage associated with the social determinants of health (Shaw et al., 1999). Feminist political economy represents an under-utilized approach in the health inequalities field. This is evidenced by the dearth of research that considers gender and how it interacts with the social determinants of health to increase the risk of adverse health outcomes (Bryant, 2005).

By applying a feminist political economy approach to analysis of the social determinants of health, the multiple disadvantages experienced by women becomes a focus. This study therefore examines the multiple disadvantages experienced by women with a specific focus on income and housing issues and how these are shaped by public policy.

Figure 1 shows how a feminist political economy analysis can be applied to a social determinants of health perspective. The figure does so

by suggesting that political ideology – specifically neo-liberalism – influences public policies and hence the distribution of economic and social resources such as income and housing within a population. It outlines the role of political ideology, politics, and economics and how gender interacts with each of these. The figure calls attention to public policies that affect housing affordability, and government income transfers (i.e. pensions, social assistance, Employment Insurance) spending on health and social programs which lead to citizens spending more of their incomes on housing and other social determinants. These public policy decisions in turn interact with social location (i.e. gender, social class, race) to produce adverse quality social determinants of health as a function of gender (women), social class (low-income populations) and race (people of colour) that result in poor health outcomes for these populations.



**Figure 1: Political Ideology, Public Policy, and the Social Determinants of Health of Housing & Income**

This analysis suggests that these populations will be more vulnerable to regressive public policies that threaten the quality of these social determinants of health. This perspective directs attention to the

relationship between health and the economic, political, and social life of different people, geographic areas, or societies (Coburn, 2006). In Canada, these key social determinants of health have been profoundly influenced by changing policy environments that have increased income and housing inequalities (Curry-Stevens, 2008).

### *Income Policy*

The Organization for Economic Development and Cooperation reports that Canada has had the greatest recent increases in income inequality and poverty among developed nations (Organisation for Economic Cooperation and Development, 2008). Several Canadian studies have documented how the gap between high and low income groups has come about (Curry-Stevens, 2008; Yalnizyan, 2007). In recent years the federal government has offered numerous tax cuts which disproportionately benefit high income groups. It has also ratcheted back the welfare state by reducing public spending on support programs that had previously allowed many families and individuals with low income to live above the poverty line.

The reduction of the welfare state has been justified as enhancing Canada's economic competitiveness in the new global economy (Bakker, 1996; Scarth, 2004). The most notable aspect of this has been generally stagnating wages among the lower 80% of Canadians (Yalnizyan, 2007). Of particular note is the lack of any increase among the most vulnerable – the lowest 20% of income earners. Much of this has to do with minimum wages not keeping up with inflation, declining union membership, and increasing casualization of labour in all sectors of the Canadian economy (Tremblay, 2008).

These developments reflect the failure of income transfer programs to distribute income and wealth more equitably across the population as is the case in many other developed nations. As Yalnizyan argues, the tax and transfer system in Canada had helped low-income households stay out of poverty (Yalnizyan, 2007). The effect of reducing income transfer programs has been to weaken the ability of many families with children to live above the poverty line (Innocenti Research Centre, 2005; Rainwater & Smeeding, 2003; Raphael, 2007a). The income effects on poverty – strongly related to income inequality – and health are well established (Auger & Alix, 2008).

### *Housing Policy*

There have been significant changes in housing policy in recent years. Most notable is the withdrawal of the federal and provincial governments from social housing provision in the early 1990s (Shapcott, 2008). The provincial governments of British Columbia, Alberta and

Ontario all removed rent control. The provincial government in Alberta changed rent control to protect only seniors' rental accommodation. Non-elderly individuals and families with children therefore have no protection from high rents. In the mid 1990s the Ontario government replaced rent control with vacancy decontrol which removes rent control one rental unit at a time (Bryant, 2004a; Bryant, 2008). As a rental unit becomes vacant, landlords are free to increase rent without restriction. The removal of rent control served to turn low-income renters into disadvantaged consumers exposing them to the private rental market. This has been associated with an explosion of evictions in major metropolitan areas in Canada (Shapcott, 2008). The United Nation's special rapporteur on the right to adequate housing commented on 'Canada's nation-wide housing crisis' as violating the international human rights agreements that recognize housing as a human right (Kothari, 2007). These agreements oblige governments that sign them to initiate efforts to address problems. Canada signed these agreements and has failed to take appropriate action to reduce the housing crisis that affects many Canadians.

The ideology driving such policy changes – neo-liberalism – considers rent control and social housing to be artificial barriers to the proper functioning of the market (Bryant, 2004b). In short, the federal and provincial governments have increasingly shifted to market strategies in housing and other public policy areas. Governments have justified these changes as necessary to allow the private sector to build housing. There is concern that these changes have exacerbated the housing crisis and the extent of homelessness in Canada (Bryant, 2008; Shapcott, 2008).

### *Present Study*

Income and housing may be especially important issues for women. This is the case since women generally have lower incomes than men and are more likely to be influenced by decaying public policy environments concerned with income and housing issues (Davies et al., 2001). Women's economic vulnerability therefore makes them especially susceptible to regressive changes in public policy. Women are not only more likely to be poor than men, but in their role as caregivers of both their children and other family members, women are most likely to be affected by changes in policies on social assistance, employment insurance, housing and health and social service provision (Agbayewa et al., 1998; Armstrong, 2004; Cote, 1998; Townson & Hayes, 2007).

This hypothesis would be consistent with Fast and Keating's analysis of four key changes in the Canadian policy environment during the 90s (and the present) (Fast & Keating, 2000):

- Declining government expenditure on health, income security, and social services;
- Thrust towards the privatization of health and continuing care;
- Change from institutional to community-based health and community care; and
- Growing geographic inequity in health and social service delivery across Canada.

These policy changes have had particularly adverse implications for primary caregivers in families, the majority of whom are women. The authors emphasize how these interact with women's domestic responsibilities.

The broad implications of these changes for women have been considered in recent analyses of Canadian public policy directions (Armstrong, 2004; Armstrong et al., 2002; Armstrong & Armstrong, 2002). Yet to be done is examination of the impacts of housing and income policies on women's housing situations. This is critical for identifying means to improve the situation of women with low incomes, thereby improving the determinants of their health.

This study therefore examines the vulnerability of Canadian women to public policy changes by comparing the income and housing situations of men and women in the three largest CMAs in Canada. More specifically, it compares the incidence of low income and living in poverty among men and women in two-parent families, lone-parent families, and those who are unattached and aged 18 to 64 years. It also examines the incidence of core housing need (see below) and the proportion of income being allocated to housing by members of these groups.

### *Methodology*

Data were obtained from two sources. Canada Mortgage and Housing Corporation (CMHC) provided national and Census Metropolitan Area (CMA) indicators of housing expenditures and core housing need of owners and renters in Vancouver, Toronto and Montreal – the largest and most densely populated urban centres in Canada – for 1998-2001, the years for which these data were available (Canada Mortgage and Housing Corporation, 2001). This three-year period was chosen for study because CMHC had undertaken a comprehensive analysis of this period and was able to provide a breakdown of data on the housing situations of women in various types of households. They also provided data on the numbers of households led by women living in adverse housing conditions, or core housing need.

Core housing need refers to households experiencing housing difficulties. It exists when one or more of the following conditions is present (Engeland et al., 2005):

- Affordability: tenants pay more than 30% of their gross income on their housing.
- Suitability: tenants live in overcrowded conditions, whereby household size exceeds recommended actual space.
- Adequacy: tenants' homes lack full bathroom facilities, or require significant repairs.

CMHC also calculates a shelter-to-income ratio (STIR) to assess how much of household income is spent on housing (Engeland et al., 2005). CMHC has earlier reported that renter households experienced a larger increase in the average STIR growing from 27% to 30% compared to owner households whose average STIR increased from 18% to 19% between 1991 and 1996 (Canadian Mortgage and Housing Corporation, 2001). For this study, a special data run provided these indicators as a function of gender for Canadians under 65 years of age for two-parent households, female and male lone-parent households, and unattached men and women.

Statistics Canada provided Census data on income for these same population groups for 1998 to 2002 (Statistics Canada, 2005). These data enabled comparisons among the groups of interest in the three CMAs to determine the extent of women's financial vulnerability with respect to housing. These data facilitated analysis of how housing and income policies interact with gender to affect women's living conditions in general and their housing situation in particular.

## FINDINGS

### *The Current State of Women's & Men's Incomes*

Income determines one's ability to access housing, food and other necessities of life (Auger & Alix, 2008). Historically, Canadian women have earned one-half to two-thirds of men's incomes and have been more likely to live in poverty (Hadley, 2001). Women also represent 85% of all lone-parent families – an especially poverty-stricken group – in Canada and more than 90% of poor lone-parent families (National Council of Welfare, 2002b).

Table I shows the before-tax median incomes of unattached males and females in 1998 to 2002 in Canada as a whole and in the three CMAs. The national figures suggest that the gap during this period between men's and women's was not as high as previously seen but still significant. For unattached individuals, women's incomes were almost 82% of men's incomes in 1998 and increased to 88% of men's incomes by 2002. The CMAs showed a mixed pattern.



**Table I: Median Incomes of Unattached Working-aged Women & Men in Montreal, Toronto & Vancouver CMAs, 1998 to 2002**

CMA/ Family Type	1998	1999	2000	2001	2002
Canada					
Male	31,700	32,400	34,200	34,800	34,800
Female	25,900	28,700	27,800	28,800	30,500
Montreal					
Male	27,800	27,500	32,300	35,400	33,700
Female	28,600	30,300	30,500	29,600	32,300
Toronto					
Male	43,300	41,600	44,800	46,100	41,600
Female	32,300	45,300	39,600	39,700	43,700
Vancouver					
Male	37,300	39,100	39,100	37,600	35,900
Female	29,300	28,000	29,900	33,100	36,100

Source: Statistics Canada. (2005). *Before-tax incomes by household type and CMA, 1980 to 2002*. Hull: CANSIM

Of the three CMAs, Montreal had the lowest median incomes for all groups, and well below the national medians. Women's incomes in this CMA exceeded those of men from 1998 to 2000, falling by 2001 and remaining slightly lower than men's in 2002. Toronto had the highest average incomes among the CMAs, and also showed the largest gap between men's and women's median incomes with women's incomes tending to be less than those of men in 1998. However, the gap reversed by 2002 when women's median incomes exceeded those of men from 1999, but then fell again in 2000 and 2001. In Vancouver, women's incomes were less than men's from 1998 to 2001, and then exceeded those of men in 2002.

Table II shows median incomes of two-parent and lone-parent families led by men and lone-parent families led by women for 1998 to 2002. Data for male lone-parent families were only available at the national level. For Canada as a whole, median incomes of two-parent families vastly exceeded those of lone-parent families. At both the national and CMA levels two-parent families showed increases in their relatively high median incomes throughout the period, lone-parent households maintained their relatively low incomes.

Lone-parent families – of which female-led families constitute the great majority – earned rather less than two-parent families. The median incomes of these female lone-parents are consistently about 40% to 45% of the median incomes of two-parent families across the three CMAs between 1998 and 2002. Over the five years, the median incomes

of female lone-parents increased modestly in Montreal and Toronto and actually declined in constant dollars in Vancouver.

**Table II: Before-tax Median Incomes of Families with Children by Census Metropolitan Area, 1998 to 2002**

CMA / Family type	1998	1999	2000	2001	2002
Canada					
2-parent Families w/ children	77,000	78,200	81,000	82,800	83,000
Male Lone-Parent, one-earner	49,500	48,300	52,400	49,500	49,900
Female Lone-Parent, one earner	30,600	31,100	33,900	35,600	33,800
Montreal					
2-parent Families w/ children	75,500	74,900	80,200	80,800	86,800
Male Lone-Parent	N/A	N/A	N/A	N/A	N/A
Female Lone-Parent	29,900	29,300	32,600	35,500	32,400
Toronto					
2-Parent Families w/ children	91,100	94,100	99,800	103,000	95,400
Male Lone-Parent	N/A	N/A	N/A	N/A	N/A
Female Lone-Parent	38,600	38,700	45,900	47,600	41,200
Vancouver					
2-Parent Families w/ Children	85,800	86,400	87,400	88,900	84,700
Male Lone-Parent	N/A	N/A	N/A	N/A	N/A
Female Lone-Parent	37,000	30,100	35,700	31,700	36,900

Source: Statistics Canada. (2005). *Before-tax median incomes by household type and CMA, 1980 to 2002*. Hull: CANSIM.

These data report median incomes and suggest that the situations of unattached females showed significant improvement over this time period. But increasing median incomes may reflect increases for those at the top of the income distribution and stagnate at the lower ends of the income distribution. Examination of the proportion of these groups living at the lower end of the distribution may provide a more sensitive measure of the income situations of the most vulnerable households.

*Incidence of Low Income*

Statistics Canada's low-income cut-offs (LICO) show the incidence of low-income – i.e., relative poverty (although the LICOs in reality are a curious blend of both absolute and relative poverty) – among individuals and families (Statistics Canada, 2005b). The before-tax LICOs reflect the situation where people spend significantly larger proportions (>20%) of their incomes on food, shelter and clothing as compared to higher income Canadians. Although Statistics Canada states that LICOs are not poverty lines, many advocacy groups in Canada use them in this way as they are consistent with international measures of poverty (Raphael, 2007b). Table III shows the incidence of low income (i.e. relative poverty) among two-parent families with children, female lone-parent families (low income rates were not available for male lone-parent families), and unattached males and females (Statistics Canada, 2005).

**Table III: Incidence of Low Income (Pre-tax) of Unattached Men and Women, Two-parent & Lone-parent Families by City, 1998 to 2002**

Geography/Family Type	1998	1999	2000	2001	2002
Canada					
Unattached Male	33.9	35.3	30.3	29.0	28.2
Unattached Female	43.7	42.4	41.7	39.4	35.0
Two-Parent Families	12.3	12.0	11.2	10.3	10.1
Female Lone-Parent	55.1	51.9	47.6	44.9	51.6
Montreal					
Unattached Male	44.1	43.2	33.1	26.8	24.7
Unattached Female	43.9	40.0	39.8	40.3	30.0
Two-Parent Families	27.2	20.1	17.3	15.9	11.5
Female Lone-Parent	62.6	62.6	54.9	47.2	57.6
Toronto					
Unattached Male	25.5	30.6	21.4	23.3	20.0
Unattached Female	29.8	31.2	28.6	24.5	25.7
Two-Parent Families	12.7	14.7	15.0	10.2	13.7
Female Lone-Parent	56.3	46.9	41.6	32.6	50.8
Vancouver					
Unattached Male	27.7	33.1	26.7	25.8	31.3
Unattached Female	43.7	48.8	40.0	44.2	24.7
Two-Parent Families	10.6	14.5	12.7	11.4	16.0
Female Lone-Parent	40.3	49.2	36.0	49.2	53.4

Source: Statistics Canada (2005). *Low-income cut-offs, 1998 to 2002*. Ottawa: Statistics Canada.

Overall, these data show lower poverty rates for unattached males and two-parent families at the national level. A different picture emerges in the CMAs. Poverty rates in the CMAs increased quite markedly over the period, particularly for unattached females and female lone-parent families. Unattached females continue to show markedly higher rates of poverty than unattached males, particularly in Montreal and Vancouver. The income situations of female-led families continue to show strikingly high poverty rates across all three CMAs. These poverty rates for female lone-parents were four to five times higher compared to those for two-parent families, unattached males and unattached females.

In 2002 Montreal and Vancouver had the highest incidence of poverty for unattached females and female lone-parent families. The incidence of low income among female lone-parents in Canada as a whole was over 50% during the entire 1998 through 2002 time period. The housing situation of this group mirrors these findings.

### *The State of Housing*

As noted, one-third of all Canadian households live in the three largest metropolitan areas of Montreal, Toronto, and Vancouver (Canada Mortgage and Housing Corporation, 2001). The housing situation of these key groups of Canadians – unattached males and females and lone-parent male and lone-parent female households < 65 years of age – is explored in a set of three key indicators.

The first indicator is that of core housing need. Overall in Canada, 12.5% of total households < age 65 years have core housing need (Engeland et al., 2005). The respective figures are 17.6% for Montreal, for Toronto, 17.3%, and for Vancouver 16.2%. In Montreal, the percentage of each group in core housing need is as follows: unattached males (22% are in core housing need); unattached females (23% are in need); female-led families (29% are in need) and male-led families (14% are in need). To provide some indication of the magnitude of this problem, unattached males constitute 13% of all Montreal households, unattached females (12%); female-led families (10%) and male-led families (2%).

Similar findings were seen in Toronto and Vancouver. In Toronto, 21% of unattached males are in core housing need; 23% of unattached females; 42% of female-led families, and 27% male-led families have core housing need. The proportion of these groups in the population are as follows: unattached males constitute 9% of all households, unattached females (8.5%); female-led families (9%) and male-led families (2%).

And in Vancouver, 24% of unattached males are in core housing need; 22% of unattached females; 38% of female-led families and 23%

male-led families are in need. Unattached males constitute 12% of all households, unattached females (11%); female-led families (8%) and male-led families (1.7%).

What are the income and income to housing costs of individuals in core housing need in these CMAs? What role does renter versus owner status play? In Montreal, 52% of households are owners versus 48% of renters. In Toronto 65% are owners vs. 35% renters. In Vancouver 63% of households are owners and 37% are renters. Table IV shows the income and housing cost situation of these groups in the three CMAs. The average shelter-to-income ratio (STIR) provides an indication of the extent to which housing costs dominate household budgets. Spending more than 30% of income is seen as problematic by the Canadian Mortgage and Housing Corporation and spending more than 50% is an extremely serious situation.

**Table IV: Incidence of Core Housing Need of One-person (18 to 64 years) & Lone-parent Households, by tenure in Montreal, Toronto, and Vancouver, 2001**

City & Family Type	Owners				Renters			
	# of Households	Avg. Income	Mthly. Shelter Cost	Avg. Shelter-to-income ratio	# of Households	Avg. Income	Mthly. Shelter Cost	Avg Shelter-to-income ratio
Montreal								
Male 1-person <65 yrs	3,800	12,902	560	57.3	27,480	9,804	419	55.3
Female one-person	3,400	11,801	531	55.4	27,035	10,468	448	355.3
Female lone-parents	3,365	17,381	741	53.9	27,885	14,932	538	47.9
Male lone-parents	540	17,325	778	56.9	2,650	15,246	531	46.6
Toronto								
Male one-person	3,370	17,653	837	57.5	19,260	16,732	671	51.3
Female one-person	5,330	17,325	763	54.5	18,925	17,017	669	50.3
Female lone-parents	11,485	31,091	1,208	49.7	35,840	24,162	775	43.7
Male lone-parents	1,800	33,024	1,214	47.0	3,690	28,143	837	40.7
Vancouver								
Male one-person	1,950	14,910	696	56.9	14,305	13,002	539	53.5
Female one-person	3,080	14,954	630	52.5	9,780	14,516	603	53.7
Female lone-parents	4,330	25,373	1,008	49.8	12,365	21,294	772	48.2
Male lone-parents	725	23,754	1,073	55.9	1,390	22,706	818	48.0

Source: Canada Mortgage and Housing Corporation. (2005). *Census-based housing indicators and data*. Ottawa: Canada Mortgage and Housing Corporation.

All household types in core housing need have significant housing affordability issues. Table IV shows that households in core housing need spend – on average – at least 40% to 50% of their incomes on housing. In Montreal for example, the median income of unattached female households who are homeowners living in core housing need – of which there are 3,400 – is \$11,801. Of this sum, 55.4% goes towards shelter costs. For unattached female renters in Montreal of which there are very many more – 27,037 – their median income of \$10,468 leads to their spending 55% of income on shelter.

Focusing on female lone-parent households, Table IV indicates that in Montreal there are 27,885 households whose median income is \$14,932 per annum. These figures show that these households allocate a whopping 48% of income to housing costs. In Toronto, there are 35,840 female-led families living in core housing need whose median income is less than \$24,162 per annum. These families spend over 43.7% on their shelter costs alone. A similar situation is seen in Vancouver. These figures indicate an extremely serious housing affordability issue in Canadian cities.

The households identified in Table IV are faced with very low income and high housing costs. This suggests living circumstances of poor quality social determinants of health of which income and housing are the most obvious. These data also probably indicate greater likelihood of precarious work situations, issues of food insecurity and the presence of stress and anxiety about their housing conditions (Bryant, 2008).

## DISCUSSION

These findings indicate that while unattached Canadian women and female-led families are vulnerable in the current economic environment, their situation is not much different than that of their male counterparts. There are, however, relatively few male-led families in Canada indicating that the precarious income and housing situations of lone-parent families in Canada is primarily a women's issue. Many Canadian women – and their children – are living in rather adverse living conditions. The findings are consistent with other research on women's economic and housing situation in Canada: women are especially at risk for experiencing poor quality income and housing situations (CERA, 2002; McCracken & Watson, 2004; Rude & Thompson, 2001).

Some of the differences in income among women observed in the CMAs may be attributable to different employment rates in each of the provinces. For example, women in Ontario and British Columbia are generally more likely to be working in paid employment than women in

Montreal (Canada Mortgage and Housing Corporation, 2001). These employment patterns may explain the higher incidence of low income and core housing need among women in Montreal CMA compared to Toronto and Vancouver CMAs.

Nationally, more women than men live in poverty. The National Council of Welfare attributes the differences in income between women and men to the disadvantaged position of women in the paid labour force (National Council of Welfare, 2002a, 2004). Women's earnings are usually lower compared with the earnings of men. They are also more likely to have part-time jobs than men (Jackson, 2005). In 2003, 28% of all women in the labour force, worked less than 30 hours per week at their main job, compared to 11% of employed men (Jackson, 2005; Statistics Canada, 2004). Seven in ten part-time employees are women. Part-time workers are less likely to have benefits such as retirement benefits and may also have lower job security compared to full-time workers. Most of these part-time jobs are likely to be non-standard or precarious employment (Jackson, 2005). Precarious employment is characterized as having low remuneration, few or no benefits, and low job security.

These adverse income and housing situations experienced by women have developed as a result of changing public policies that directly affect the distribution of income and housing affordability for women and other vulnerable populations. Government income transfers to households provide additional income in the form of pensions, welfare and unemployment benefits (Curry-Stevens, 2008). Government transfers such as these equalize incomes as they increase the incomes of those at the boom of the income distribution. Federal and provincial governments have reduced income transfers which have resulted in increasing income polarization as illustrated by Hulchanski's study on Toronto neighbourhoods and Yalnizyan's work on changing incomes in Canada (Hulchanski, 2007; Yalnizyan, 2007).

With respect to housing, as stated earlier, the federal and some provincial governments withdrew from social housing provision during the 1990s. In addition, the removal of rent control in some provinces allowed significant increases in rents which contribute to affordability issues for many medium- and low-income households. Although the federal government advocates housing in international forums, back in Canada it has enacted policies that contribute to increasing homelessness in large urban centres in Canada in particular (Shapcott, 2008).

Research has also shown that Canada has one of the most private-sector dominated market-based housing systems of any western industrialized nation (Freeman, Holmans & Whitehead, 1996). It also has the smallest social housing sector among western nations with the exception of the United States (Hulchanski, 2002). Federal and provincial

governments' policy decisions have contributed to the growing polarization in income and housing in Canada.

In addition, women's sanctioned role as primary caregivers within their families may also contribute to their economic vulnerability. This role renders them more economically dependent on their families as caregiving interferes with employment (Armstrong, 2008). Additionally, federal and provincial governments have changed eligibility criteria and support levels for income support programs such as social assistance and Employment Insurance that particularly disadvantage women. Stringent work requirements in terms of hours worked for Employment Insurance fail to take into account the nature of women's relationship with the labour market (Townson & Hayes, 2007).

Women are more likely to have frequent interruptions in their employment to accommodate education, and child and other family care responsibilities. Although they pay into the program while they are employed, many are not eligible to receive benefits when they become unemployed (Townson & Hayes, 2007). These policies can affect both men and women, but women may be more at risk of having low income and being in core housing need.

### *Policy Responses*

A national housing strategy is needed to address the housing needs of low income households (Shapcott, 2008). Public policies that would protect incomes such as the federal and provincial governments raising minimum wages to levels where living in poverty would not be the outcome of full-time employment are also required. Canadian governments could also devise strategies to reduce the number of non-standard jobs in the Canadian economy (Curry-Stevens, 2008). In addition to these policies, a universal affordable childcare program would enable female lone-parents in particular to pursue education and employment.

Governments should introduce measures that would protect women's incomes if they leave the labour force involuntarily or choose to carry out caregiving roles. Related to this, Canada needs stronger active labour market policies that would ensure that laid-off workers receive training for alternative employment that provides a living wage (Tremblay, 2008).

### *Implications for the Health of Canadian Women*

Few studies consider gender in analyses of the impact of the social determinants of health on women's health (Armstrong, 2008). The current field of women's health is dominated by medically-oriented investigations of issues such as access to care, risk factors for a variety of



physical and mental illness – usually reproductive-based – and the prevalence of these conditions among marginalized populations (Bryant, 2005). The role public policy plays in shaping the social determinants of women's health is less advanced.

While women live longer than men, they report higher incidence of most chronic diseases even after accounting for age (Pederson & Raphael, 2006). Among women, most studies on health outcomes show that women who are economically and socially marginalized have poor health status and higher premature mortality than women with higher income (Auger & Alix, 2008).

As one example, women with lower income have a higher incidence of type 2 diabetes and higher mortality rates from this disease as compared to higher income women (Hux, Booth & Laupacis, 2002; Wilkins et al., 2002). The incidence of diabetes among low-income or poor women (the lowest quintile) is almost four times that of the highest income quintile women (Hux, Booth & Laupacis, 2002). And mortality rates resulting from complications related to diabetes for poor women are 57% higher for the lowest quintile women as compared to the wealthiest quintile women (Wilkins, Berthelot & Ng, 2002).

## CONCLUSIONS

The findings of this study show that housing and income policies interact with gender to create especially adverse conditions for unattached individuals and lone-parent families. This study has identified a concrete situation where over tens of thousands of households in Canada's largest cities are living in material deprivation. Women show greater disadvantage as indicated by higher poverty rates and their much greater likelihood of leading lone-parent families. Canadian public policies have done little to address these issues (Yalnizyan, 2007).

These findings support the validity of the hypotheses suggested by Figure 1. Political ideology is seen as influencing housing and income policies. Ascendant neo-liberal approaches lead to reduced governmental interventions in the economy. These policies serve to reduce the availability of affordable housing and financial resources of households to provide basic material needs. These policy decisions interact with gender to lead to particularly poor quality social determinants of health for women as compared to men.

To state the obvious, the least desirable action to improve the social determinants of women's health is to create situations of disadvantage through housing and income policies that reduce the affordability of housing and increase material deprivation. Implementation of such policies may require the building of social

movements that will force policymakers to implement these policies (Wright, 1994).

This study focused on gender. Race is also an important consideration when examining income and housing issues among Canadian women and this is especially the case in the large urban areas studied here. Although the data to examine the income and housing situation of women of Aboriginal and diverse ethno-racialized communities were not available, research suggests it is likely that women in these communities also experience the kinds of income and housing insecurity presented here (Wallis & Kwok, 2008).

Future research can monitor the incomes and housing situations of women with a focus on Aboriginal women and women of colour to understand how gender, race and social class interact to affect the social determinants of health of these groups. Such research can inform policy debates on how to redress the inequities experienced by women in general and specifically the inequities experienced by women of diverse ethno-racial backgrounds living under conditions of low income.

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