

Women and Girls in Hamilton

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Introduction:

Women and girls comprise more than half of Hamilton's population but face unique challenges that often go unnoticed and unaddressed. This paper aims to provide a concise overview of the demographics of this population and to identify some gender-specific challenges and issues. It relies on quantitative as well as qualitative sources, including interviews with individuals working in various sectors of our city.

The paper is divided into these sections:

- Population Demographics
- Moving through the Life Cycle
 - o Girls of Preschool and Primary School Age
 - Adolescents
 - o Motherhood and Family Life
 - Working Age Women
 - \circ Seniors
- Issues cutting across the Life Cycle
 - Health and Well-Being
 - o Domestic Violence
 - \circ Representation
- Opportunities to Influence Change

Population Demographics:

Just over 266,000 females live in the City of Hamilton, Ontario, and they made up 51.2 percent of the city's population in 2011¹. Females have a slightly older age profile than males². Among Senior women, immigrants are over-represented, an indication that Hamilton's immigrant population is aging.

Between 2006 and 2011, the Hamilton Census Metropolitan Area (CMA – Hamilton, Burlington and Grimsby) annually received roughly 3,900 *permanent resident* immigrants³. In 2010, just over half (51.3%) of these immigrants were female. Almost half (46.4%) of female permanent resident immigrants were between the ages of 25 and 44, and 20.5 percent were under the age of 15. Very few (3.4%) were 65 years of age or older. Roughly one-fourth of female permanent resident immigrants entered Canada under the *Refugee* class; some came directly from refugee camps in other parts of the world and some used their own resources to come to Canada where their refugee claims were successful.

Moving through the Life Cycle:

A life cycle approach to understanding the needs of women recognizes that women's needs change over the course of their lifetimes. The challenges faced by a young girl are obviously different from those of her grandmother, though each will benefit from having access to a library, living in safe neighbourhoods, and the like. This section presents some of the findings that pertain to points in the life cycle.

Girls of Preschool and Primary School Age

In general, boys lag behind girls developmentally during this age. Male vulnerability has dominated the early years developmental sector more so than female, creating a knowledge gap pertaining to the early years with respect to females. In Hamilton, girls on the whole outperform boys academically through secondary school and even beyond in terms of post-secondary enrollment.

Among children from single-parent households, developmental outcomes generally correlate positively with the parent's (usually a mother's) level of educational achievement.

The higher the education, the better the outcome for the child even when poverty is equated into the situation.

In general, the literature argues that interpersonal relationships have a stronger impact on girls compared to boys. Relevant research on girls has predominantly focused on academic underachievement in sciences and math, and also on the extent to which females are maturing earlier than they have historically in the past, with first menstruation happening at an earlier age.

A three-year survey is underway that compares immigrant and non-immigrant students in grades 5 to 8 across 36 mostly lowerincome Hamilton schools. The focus is on psychosocial issues such as achievement, bullying, levels of anxiety, and loneliness. Some gender-based analysis will be possible once the dataset is complete.

Half of all mental disorders begin by age 14, and 75% by age 24. Approximately 12% of female youth, age 12 to 19, have experienced a major depressive episode. This is more than double the rate for male youth of the same ages.

According to the Canadian Mental Health Association, only 1 in 5 children in need of mental health services actually receives them⁴, yet half of all mental disorders begin by age 14, and 75 percent begin by age 24⁵. (No gender-based data was found.) Today, approximately 12 percent of female youth, age 12 to 19, have experienced a major depressive episode. This is more than double the rate for male youth of the same ages⁶.

Child sexual abuse is much more prevalent among girls than boys, with more than 4 in 5 reported offences by child victims of sexual offences being female. Females under the age of 18 experience the most incidences of sexual victimization during their teenage years, peaking at ages 13 through 15⁷. Sexual abuse can have long-term psychological, social, sexual and physical impacts on its victims.

In terms of best practices, universal access to early childhood education and supports makes a host of difference for all children, male or female.

Adolescents

During adolescence, girls mature physically and emotionally and are in need of positive influences in terms of both peer relationships and role models. Adolescent activities, such as academic achievement, extracurricular involvement and work experience, and personal

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On the whole, young women do better academically than young men, but they have higher levels of stress and, despite their academic achievements, are out-earned by men in the labour market. Teenage girls reported being much more stressed than their male peers: 23.2 percent of young women aged 15 to 19 years reported high levels of stress compared to only 13.7 percent of young men⁸.

Income-related challenges. In Hamilton, many high school age girls face challenges related to poverty, abuse, and lack of

positive role models/mentors. Some youth leave home for a variety of reasons and rely on social assistance, leaving them barely able to support themselves on a daily basis, much less plan for their futures.

Secondary schools traditionally supported students in need, but budget cutbacks are affecting their ability to care for their most vulnerable. Many schools lack the extra funds to cover extracurricular activities or even to provide the work-appropriate clothing and bus passes needed by co-op students living in low income situations. Many of those who show academic promise lack the financial resources to pursue post-secondary education. Teachers often identify young women as having a chance of success given the right supports, but they lack the resources to assist them adequately.

Helping their families. Recent research identified youth as increasingly assuming caregiving roles within their families. A study of high school students in Vancouver found that 12 percent of youth aged 12 to 17 filled caregiving gaps and help meet the needs of

family members recovering from illness or injury, managing a chronic, episodic or progressive health condition or mental illness, or at the end of life⁹.

Young mothers. There are higher incidences of teen pregnancies in Hamilton compared to Ontario as a whole: 4.7 percent of all Hamilton pregnancies were among teens aged 15 to 19 in 2008, compared to the Ontario average of 3.6 percent. This rate ranged from a low of 1.1 percent in some areas of the city to 11.9 percent in other areas between 2006 and 2009¹⁰. Balancing parenthood, school and work can be challenging, to say the least.

Healthcare and social and economic supports (such as prenatal counselling, childcare subsidies, and affordable housing), and access to personal, parenting and career mentoring, coaching and guidance can each help young mothers build confidence and acquire skills and knowledge regarding child development and parenting so they and their children can thrive¹¹.

Current research in Hamilton on adolescent mothers (aged 15-20) is focusing on mental health problems and service utilization. There is not much data on this population at present, other than that the incidence of teen mothers varies widely across census tracts and is concentrated in lower income areas of the city.

Services and supports for youth. There is a perceived lack of programming or services aimed at youth specifically. One exception is the "Be the One" campaign at the YWCA that aims to reduce violence against women and girls by creating groups that are safe spaces for young men and women to discuss issues of bullying, sexual harassment and the like. The project includes a youth-led awareness campaign and the creation of a tool kit for community action.

Motherhood and Family Life

Daily pressures and stress. Family dynamics and demographic trends are putting more familial pressures on women. Women carry the bulk of responsibility for household

work and childcare. In 2010, Canadian mothers spent an average of 4.6 hours daily on unpaid work, roughly 25 percent more time than men. Also, regardless of their children's ages, women spent more than twice as much time on their care as did men¹². Many women find themselves in the "sandwich generation," simultaneously caring for older and younger generations of family members. The growth of lone-parent families (mainly headed by women) means that many women are

In 2006 in Canada, 80% of lone parent families were headed by women.

stretched financially as well as time-wise. For many women, achieving work-life balance can be a challenge.

Indeed, research indicates that women are more stressed than men across all age groups. Among Canadians aged 15 and older, 24.9 percent of women reported that most days were extremely stressful, compared to 22.0 percent of men.¹³

Marriage and divorce. Approximately 4 of every 10 marriages end in divorce. Though the rate of divorce has remained fairly stable over the past 15 years in Canada, "[d]ealing with family change can be very difficult and existing supports are often inadequate to support those involved navigate the personal and legal challenges involved."¹⁴

Single parenting. In 2006 in Canada, 80 percent of lone-parent families were headed by women. As will be shown below, this has a dramatic impact on the economic well-being of women.

A Hamilton study of single mothers with multiple risk factors asked them to identify issues of importance. Responses focused on social isolation, managing housing, children, and managing without many resources. Visual communication technology such as Skype was used to assist women in accessing supports and making connections without having to leave their homes.

Working Age Women

Women in the labour force. In 2011, the total size of the female labour force in the Hamilton CMA was slightly smaller than the male labour force (199,400 vs. 205,900), as was the labour force participation rate (62.0% compared to 69.4%). However, the unemployment rate for females was lower than it was for males (5.4% vs. 7.4%). Among those who were employed, females were much less likely to be employed on a full-time basis than were males; 70.9 percent of employed females had full-time employment, while 88.3 percent of males had full-time employment. Female immigrants in 2011 had a much lower labour force participation rate than Canadian-born females (51.2% vs. 65.7%). Visible minority women were 40 percent more likely to be unemployed than were their counterparts who were not visible minorities¹⁵.

In Canada, the proportion of two-parent families with both parents in the paid labour market grew from 25 percent in 1971 to 78 percent in 2006. The bulk of this growth occurred among modest- and middle-income families¹⁶.

Women's labour force participation rates have been on an upward trend, but women continue to face glass ceilings in terms of responsibilities and wage rates. Though they are increasingly likely to enter non-traditional occupations (such as in the trades) there are still barriers that prevent full access. **Income.**¹⁷ The median earnings of all employed females in Hamilton CMA in 2010 was \$26,500, or 81 percent of the median earnings of employed males (\$32,700). For full-time workers, the female-male difference was even greater, with median earnings at \$42,800 and \$67,200 respectively. In other words, full-time female workers earned 64 percent of what was earned by their male counterparts.

In terms of total income, females are more reliant than males on government transfers (such as Employment Insurance, Canada Pension Plan, Ontario Works, and Ontario Disability Support Program). For example, the median income received by females from government transfers was \$2,100, while for males it was \$900. These differences are greatest between the ages of 25 to 44, when females are likely to be under-employed and in lower paying jobs.

Poverty rates. Differences in income and sources of income are reflected in poverty rates. While there are a number of low income measures available, all indicate that females are more likely than males to live in low income. For example, using an after-tax measure of low-income cut-offs (LICO)¹⁸, 16 percent of people in families in the Hamilton CMA whose major income earner was a female lived in low income, but only 5.1 percent of persons in households where the major income was a male lived in low income. The difference is also apparent when using a market-based measure (MBM), revealing that 12.3 percent of people in households where the major income earner is female live in low income earner.

Low income is especially prevalent among people living in female, lone-parent families. For example, in Ontario (data are not available at the Hamilton CMA or city level), using the MBM measure for 2010, 21.5 percent of persons living in female, lone-parent families living in low income. This compares to 12.7 percent of persons living in male, lone-parent families who live in low income.

Among adults in receipt of Ontario Works (OW) in Hamilton in July 2012, 54 percent were women. Just fewer than 25 percent of women on OW had post-secondary education, compared to 20 percent of men.

Housing. Preliminary data on social housing in Hamilton indicates that more heads of households in social housing are women than men, and that a disproportionate number of female headed lone-parent families are in social housing.

Seníors

Challenges facing older women in Hamilton include issues related to poverty, social isolation (including language barriers), and lack of awareness of existing services.

Poverty. Whereas during working age years, women are more likely to rely on government assistance, within the 65+ age group males receive greater government assistance income than females. This is because males receive larger Canada Pension Plan benefits, a reflection of their greater earnings over their working life. Not surprisingly, older women are more likely to live in poverty. According to the 2010 *Women in Poverty* report by the Social Planning and Research Council of Hamilton, "older women are more than twice as likely to be living in poverty (22%) as older men Challenges facing older women in Hamilton include issues related to poverty, social isolation (including language barriers), and lack of awareness of existing services.

(10%)." Among women who are unattached (e.g., widowed) or age 75 or older, the incidence of poverty is considerably higher.

Social isolation. The high incidence of unattached senior women and those living alone, many of whom are renters or widows, can lead to instances of social isolation in which women are more likely to lack mental stimulation, exercise, and healthy relationships, sometimes resulting in depression. This is also the case for immigrant seniors who often lack financial resources and face language barriers within the larger community. Many of these women live with their children where they may provide unpaid childcare and lack the resources to make broader community connections.

Lack of awareness of resources. Hamilton-based research found that many older adults were unaware of services to meet common problems they might have. When presented with various case study vignettes of situations facing other seniors (such as abuse, isolation, and dementia), only 20 percent of the 1,000 individuals interviewed could name any appropriate community support services.

Making Hamilton age friendly. The Hamilton Council on Aging has been working with the City of Hamilton to help make our city "age friendly," including accessible buildings, support services, social and recreational activities, and adequate housing across neighbourhoods. Although the focus is on older adults, this initiative would result in a city that is more accessible to all age groups.

Issues that Cut Across the Life Cycle:

In addition to the above issues that affect women at particular stages of their lives, many other issues are not limited to a certain time of life. Some of these are identified in this section.

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Smoking. While females in the City of Hamilton have lower rates of smoking than males (16.1% vs. 21.8%), the rate for females in Hamilton is slightly higher than it is for all females in Ontario (15.5%). Females are also more likely to be exposed to second-hand smoke at home (7.2%) than are males (4.8%), but females are much less likely than males to report being heavy drinkers (10.2% vs. 21.8%).

Diet and physical activity. In terms of physical activity, females are less likely than males to be either moderately active or active (50.8% vs. 56.1%). In addition, they are also slightly less likely than males to self-report being in either good or full functional health (77.7% vs. 80.4%), or to have very good or excellent mental health (72.9% vs. 76.5%). The self-reported dietary habits of females are better than males, with 43.9 percent of females indicating that they have at least 5 daily servings of fruits and vegetables. Only 34.6 percent of males, by contrast, report having 5 daily servings of fruits and vegetables. This may relate to the lower levels of obesity or overweight for females. For example, 32.9 percent of females in Hamilton were overweight, while 46.5 percent of males were overweight, but the rate for females in Hamilton is higher than it is for females in all of Ontario (27.5%).

Mortality rates. Females have lower mortality rates than do males for three major causes of death (cancers, circulatory diseases, and respiratory diseases). For example, the respective death rates (per 100,000 population) for females were 146.4, 121.0, and 36.8, while for males they were 208.5, 202.7, and 52.2. The cancer mortality rate is noticeably higher for Hamilton females than it is for all females in Ontario (135.9).

Domestic Violence

Violence against women can have a devastating impact on women and isolate them from their communities. Moreover, it affects not only the female victim but also her children and partners, other family members, and the community at large. The Canadian Women's Foundation estimates that the costs of violence against women amount to \$4.2 million annually in healthcare, criminal justice, social services, and lost wages and productivity.²⁰

The lack of solid data in this area is one challenge as domestic violence and sexual assault are under reported crimes. Domestic violence occurrences reported to Hamilton Police

Services increased by 70 percent from 2007 to 2010, from 2,189 to 3,798. In 2011, charges were laid in 1,090 of the 6,430 domestic violence occurrences (direct comparison with previous years not possible due to new method of keeping records). With experts estimating that fewer than one in four incidents of domestic violence are reported to police, it is very likely that the actual incident figures are much higher. Other types of violence against women include sexual violence and other forms of abuse.²¹

Connection to housing and homelessness. In Hamilton, women of all socioeconomic classes experience inter-partner violence and abuse, but women in poverty have fewer resources to improve their situations and are more likely to end up in shelters or social housing. Each of the four women's shelters in Hamilton operates at full capacity most of the time, yet there are fewer beds for women in the shelter system. It is believed that women have different strategies for facing homelessness than do men, including more "couch surfing" (staying with friends) and more living in unhealthy or unsafe relationships. For women, housing vulnerability and homelessness appear to be closely linked to violence and abuse.

Consequences. The many consequences of abuse and violence include substance abuse, difficulty maintaining intimate relationships with a spouse/partner or even with their own children, and delinquent and criminal behaviour. Female offenders are more likely than their male counterparts to have experienced sexual abuse, and the problems related to this abuse make it particularly challenging to treat female offenders in the juvenile and criminal justice systems.

Representation

Women are under represented among Hamilton's elected officials. At present, women comprise one of five Members of Parliament for the Hamilton area, two of five Members of Provincial Parliament (including Andrea Horwath, leader of the New Democratic Party), and 3 of 15 city councillors. Hamilton has never had a female mayor.

Women are also underrepresented at the highest levels of local public sector institutions (universities, hospitals, boards of education), as well as in the private sector, yet women exhibit a stronger sense of belonging to their community in Hamilton than men do, and many are active volunteers in local organizations and causes.²²

Opportunities to Influence Change:

This paper has presented a brief yet wide-ranging overview of women and girls in Hamilton, revealing demographic diversity and a wide range of challenges and issues. In summary, girls are surpassing boys in terms of academic achievement and have higher levels of enrollment in post-secondary education, yet this doesn't translate into "success" in terms of earnings and holding leadership positions in business, government, and community life. For better or worse, women experience higher levels of stress than men, are more involved in day-to-day household activities, and are better connected with their communities.

It may be helpful to consider how these various issues intersect to create situations of particular need in our city – especially situations that might be addressed with strategic philanthropy. Following are three potential opportunities where Women 4 Change could focus to influence change:

Supporting Adolescent Transition

Teen years are the critical time when girls transition into women. Evidence shows that girls do well in school overall, but they experience much higher levels of stress than their male peers and they also face more consequences if they are sexually active, namely pregnancy and teen parenting. Single mothers with low levels of education are not only likely to live in poverty for the long term, but their situation adversely impacts the developmental prospects of their child or children. Among high-achieving young women, many show promise of breaking the cycle of poverty but lack resources to pursue post-secondary education and training.

Potential areas of investment could include: providing "wraparound" supports to a small number of individuals; programs and services at key points or transition times (e.g. middle school, high school to post-graduate; mentoring).

Supporting Victims of Domestic Violence

Women who face inter-partner violence may be trapped in their situations due to lack of financial resources, social isolation and perhaps cultural constraints such as language barriers.

Potential areas of investment could include: prevention, awareness, and counselling; practical support to help women transition and maintain an independent life.

Supports for Elderly Women

For many seniors in Hamilton, the "golden years" are not characterized by comfortable living and stable community connections. In fact, older women are more likely to live in low income situations, with many experiencing social isolation and unaware of supports that could benefit them. Potential areas of investment could include: raising awareness and promoting access to existing services, financial entitlements and appropriate programs.

Knowledge building is a crucial step toward making any meaningful investment of philanthropic resources. It is hoped that this paper improves our knowledge and can serve as a first step towards bettering the lives of women and girls in Hamilton.

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Endnotes:

³ Citizenship and Immigration Canada, *Facts and Figures: Digital Library 2010.* Data presented here is for the CMA level, as city data is only available through the purchase of a custom tabulation. *Permanent residents* are people who have country and have been granted permanent resident status in Canada. *Refugee class* permanent residents "...include government-assisted refugees, privately sponsored refugees, refugees landed in Canada and refugee dependents (i.e., dependents of refugees landed in Canada, including spouses and partners living abroad or in Canada)." *Temporary residents* are "Foreign nationals who are lawfully in Canada on a temporary basis under the authority of a valid document (i.e., a work permit, study permit, temporary resident permit, or a visitor record) issued for the purpose of entering Canada and individuals who seek asylum upon or after their arrival in Canada and remain in the country pending the outcome of processes relative to their claim. Temporary residents include foreign workers, foreign students, the humanitarian population and other temporary residents." The *humanitarian* population is comprised of "Temporary residents who are primarily refugee claimants, but also includes other foreign nationals allowed to remain in Canada on humanitarian or compassionate grounds under "special considerations."" Definitions

taken from: http://www.cic.gc.ca/english/resources/statistics/facts2010/glossary.asp

In terms of the temporary resident population, between 2006 and 2010 there were on average almost 9,400 people residing in the Hamilton CMA each year. Females comprise just under half (45.0%) of the temporary resident population. The largest category of the temporary resident population is comprised of foreign students, at 48.0% in 2010. 44.8% of the Humanitarian temporary resident population is female; over half (56.2%) of these females are between the ages of 25-44.

⁴ Canadian Mental Health Association, *Fast Facts about Mental Illness*, no date.

http://www.cmha.ca/bins/content_page.asp?cid=6-20-23-44, accessed September 26, 2012.

⁵ Mental Health Commission of Canada, *News from MHCC, Child and Youth Special Edition*, September 2011, p. 4.

http://www.mentalhealthcommission.ca/SiteCollectionDocuments/Newsletters/MHHC_Newsletter_Sept2011_ ENG.pdf, accessed September 26, 2012.

⁶ Canadian Mental Health Association, *Fast Facts about Mental Illness*, no date.

⁷ Lucie Ogrodnik, *Child and Youth Victims of Police-reported Violent Crime, 2008*, Canadian Centre for Justice Statistics Profile Series (Statistics Canada, 2010),

http://www.statcan.gc.ca/pub/85f0033m/85f0033m2010023-eng.htm, accessed September 26, 2012; Harriet L. Macmillan, Jan E. Fleming, Nico Trocmé, Michael H. Boyle, Maria Wong, Yvonne A. Racine, William R. Beardslee, David R. Offord, Prevalence of Child Physical and Sexual Abuse in the Community, JAMA: Journal of the American Medical Association, 1997, 278(2): 131-35.

⁸ 2010 Canadian Community Health Survey, Statistics Canada, CANSIM 105-0501, 2010. Cited in Vanier Institute for the Family, Stress: A Family Matter, *Fascinating Families* Brief, January 16, 2012, issue 43.

⁹ Grant Charles, Tim Stainton and Sheila Marshall, Young Carers in Canada: The Hidden Costs and Benefits of Young Caregiving (Ottawa: Vanier Institute for the Family, 2012).

¹⁰ Cited in Hamilton Vital Signs 2011.

¹¹ Vanier Institute for the Family, Teen Pregnancy: Supporting Young Parents, *Fascinating Families* Brief, May 23, 2012, issue 46.

¹² Statistics Canada, General Social Survey - 2010 Overview of the Time Use of Canadians, cat. 89-647-X.
¹³ Statistics Canada, 2010 Canadian Community Health Survey, CANSIM 105-0501, 2010. Cited in Vanier

Institute for the Family, Stress: A Family Matter, *Fascinating Families* Brief, January 16, 2012, issue 43. ¹⁴ This figure is based on the dissolution of legal marriages and does not include common-law unions. Vanier

Institute for the Family, Four in Ten Marriages End in Divorce, *Fascinating Families* Brief, October 26, 2011, issue 41).

¹ The long form of the Canadian Census was replaced by the voluntary National Household Survey in 2011. Most data will not be released until 2013.

² For example, 17.3% of females are aged 65 or older (and 9.1% are 75 or older), while 14% of males are 65 or older (and 6.3% are 75 or older). There are relatively fewer young females in Hamilton (15.6% are less than 15 years old) than males (17.4% are under 15 years of age).

¹⁵ Based on 2006 Census figures, cited in Sarah Wayland, Gerald Bierling, and Amal Abdullahi, *Hamilton Community Foundation Diversity Scan* (Hamilton: Hamilton Community Foundation, 2008), p. 56.

¹⁶ Vanier Institute for the Family, Families, Work and Time: Running Hard to Stand Still, *Fascinating Families* Brief, March 15, 2011 issue 36.

¹⁷ Income data taken from Statistics Canada, *Survey of Labour and Income Dynamics*. Data was not available at the City level, which is why CMA values are reported. Median values are reported as the median (which is the value at which 50% of cases fall above and 50% fall below) is less sensitive to extreme values (i.e., relatively few very high incomes).

¹⁸ After-tax low income cut-offs (LICO) were determined from an analysis of the 1992 Family Expenditure Survey data. These income limits were selected on the basis that families with incomes below these limits usually spent 63.6% or more of their income. The *Market Basket Measure* (MBM) attempts to measure a standard of living that is a compromise between subsistence and social inclusion. It also reflects differences in living costs across regions. The MBM represents the cost of a basket that includes: a nutritious diet, clothing and footwear, shelter, transportation, and other necessary goods and services (such as personal care items or household supplies). The cost of the basket is compared to disposable income for each family to determine low income rates. Definitions taken from: <u>http://www5.statcan.gc.ca/cansim/pick-choisir?lang=eng&p2=33&id=2020803#F7</u>

¹⁹ Statistics Canada, 2012. *Health Profile*. <u>http://www12.statcan.gc.ca/health-sante/82-</u> 228/index.cfm?Lang=E

²⁰ from Hamilton Community Foundation, Vital Signs 2012 not yet released

²¹ from Hamilton Community Foundation, Vital Signs 2012 not yet released

²² Peter Kitchen, Allison Williams and James Chowhan, Sense of Belonging and Mental Health in Hamilton, Ontario: An Intra-Urban Analysis. *Social Indicators Research: Quality of Life in Quality Hamilton, Ontario, Canada: Perspectives from a Re-Emerging City* 2012, 108 (2) 2: 277-297.