

Speaking notes:

Wellesley Institute presentation to House of Commons HUMA Committee

November 18, 2010

Thank you for the opportunity to make these observations as part of the HUMA Committee's consideration of the importance of Canada's Long Form Census. My name is Michael Shapcott, Director of Affordable Housing and Social Innovation at the Wellesley Institute. The Wellesley Institute is an independent research and policy institute dedicated to advancing population health.

Good evidence is fundamental for good policy and good governance. Good evidence required to:

- understand the scale, scope and complexity of critical challenges facing Canadians
- set realistic targets and timelines
- measure accountability for success

The Wellesley Institute appears today in support of the mandatory Long Form Census. The Long Form Census is an important tool in our national statistical system to provide accurate data at the national level and for small-area needs. The data is collected at a reasonable cost to government and is available at a reasonable price to a variety of users. The privacy of Canadians is fully protected – and that privacy has never been breached. In particular, we:

- urge this committee to use its powers to ensure that the mandatory Long Form Questionnaire is included as part of the 2011 Census of Canada.
- support the government-appointed National Statistical Council, in its August 12, 2010, statement that sets out a series of proposals for the Long Form Census, including:
 - removing the threat of jail from the Long Form Census, and,
 - setting out a regular and transparent process for reviewing current questions and adding new questions for future censuses.
- support the proposal to amend *Canada's Statistics Act* as set out in the letter of September 9, 2010, to Prime Minister Stephen Harper from Ivan Fellegi, Chief Statistician of Canada (Emeritus), and others.

It is not too late for the Government of Canada to ensure that the Long Form Census remains a vital part of Canada's national census.

The proposal to replace the Long Form with a voluntary survey is bad science and will undermine public confidence in our national statistical system and in government policy-making. A voluntary survey will not yield accurate results, especially for small-area needs. A voluntary survey cannot offer proper bench-marking to reflect and represent the broad spectrum of the Canadian population.

The sharpest impact of the proposal to abandon the Long Form Census will be felt at the local level, and among groups that are already vulnerable: Recent immigrants, low-income people, Aboriginal people, diverse racial and cultural groups, people facing physical and mental health challenges and others facing equity challenges. The Wellesley Institute believes that national policy should be built from the community up and be informed by the reality of what is happening in local areas across the country.

We purchase and rely on data from Statistics Canada, including Long Form Census, for a significant amount of our commissioned and internal research and policy work at the Wellesley Institute, ranging from the *Street Health Report* (a comprehensive review of the health status of people without housing) to *Cashing In* (community-based research on payday lending).

Four examples where Long Form material is invaluable:

First, *Poverty Making Us Sick* – the most comprehensive and current national review of the complex links between poverty and poor health, which we released in December of 2008.

Lead researcher and University of Toronto Professor Ernie Lightman and his research colleagues, Andrew Mitchell and Beth Wilson, found that the poorest one-fifth of Canadians, when compared to the richest twenty percent, have:

- more than double the rate of diabetes and heart disease;
- more than three times the rate of bronchitis;
- nearly double the rate of arthritis or rheumatism;
- a staggering 358% higher rate of disability; and,
- 128% more mental and behavioural disorders.

Using sophisticated multivariate analysis, the researchers demonstrated that every \$1,000 increase in income leads to substantial increases in health: nearly 10,000 fewer chronic conditions, and 6,600 fewer disability days every two weeks. The data provides critical evidence of the staggering burden of health inequality facing Canadians and points to the policy solutions, and this evidence is under-pinned by reliable data from Statistics Canada.

Second, *Precarious Housing in Canada 2010* – the most comprehensive and current national review of housing and homelessness issues and solutions, which we released in August of 2010.

We use the metaphor of an iceberg, and draw on detailed numbers from the Long Form Census, other Statistics Canada data and data from Canada Mortgage and Housing Corporation, to reveal the dimensions of a previously hidden group – people who are precariously housed and at risk of homelessness. The numbers show that:

- 705,165 households are overcrowded;
- 1.3 million households living in substandard housing;
- 1.5 million households are in core housing need; and,
- 3 million households are paying 30% or more of their income on housing.

We also use evidence from the Long Form Census to develop practical and pragmatic policy solutions, including a proposal for a national, 10-year housing plan that we call Vision 2020 – which is fully costed in our report. Reliable data helps to set out the scale and dimensions of the nation-wide affordable housing crisis and helps to shape appropriate and effective policy responses. Good and reliable data also allows Canadians to measure accountability for results – to assess whether current initiatives are meeting the real needs of Canadians.

Third, we are in the final stages of developing the Wellesley Urban Health Model, an exciting new initiative that will allow community leaders and policy-makers to move beyond single-issue analysis and understand the interconnectedness of policy issues and policy options.

We have engaged a leading US expert to create a systems dynamic model that maps and mathematically sets out the complex interactions between a number of key social and economic variables. Once developed and populated with data, the Wellesley Urban Health Model will allow policy-makers, and others, to gain deeper insights into complex social and economic systems in our communities and our country, and to identify robust policy solutions.

Finally, the Wellesley Institute is proud to be part of a nation-wide community social research and data consortium that includes a variety of partners in government and community-based organizations.

We know that knowledge comes in a variety of forms – qualitative and quantitative. We know that certain forms of knowledge, including the lived experiences of people seeking equity, are often over-looked. That’s why in our research work, we stress the critical importance of community-based research, peer knowledge and lived experience as critical evidence to inform pragmatic policy-making. We also know that good, reliable statistics have a critical role to play in public policy. The best public policy draws evidence from a variety of appropriate sources.

Without the good, reliable statistics that are drawn from Statistics Canada’s Long Form Census, Canadians are unable to define clear goals and performance targets for vital social, economy and public policy initiatives and we cannot measure success or define accountability for results.

Thank you, once again, for the opportunity to make these comments and we look forward to responding to any questions.

Sincerely,

Michael Shapcott, Director, Affordable Housing and Social Innovation
The Wellesley Institute
45 Charles Street East, #101, Toronto, Ontario, Canada, M4Y 1S2
Telephone – 416-972-1010, x231
E-mail – michael@wellesleyinstitute.com
Web – www.wellesleyinstitute.com