Access to a Basic Income: Exploring a Matricentric Feminist Approach to Poverty Alleviation for Mothers in Ontario

While the literature on the nexus of poverty and motherhood is substantial, there is a dearth of scholarship exploring the intersection of basic income, poverty, and mothering. This article explores a matricentric feminist approach to poverty alleviation by means of access to a basic income. Such an approach recognizes that women, and mothers specifically, tend to be disadvantaged under current patriarchal, social and economic relations. Within this article, we consider the implications of basic income for mothers by exploring the merits and limitations of this approach to income security in several different domains. As such, we explore the impacts of basic income on mothers in relation to safe and affordable housing, quality childcare, and the overall health and wellbeing of mothers and their children.

Introduction

Notwithstanding the dramatic economic gains realized in the lives of Canadian lone mothers over the past few decades, the relative disadvantage of this population remains unchanged (Evans, “Lone Mothers”); lone mothers continue to be among those most likely to experience poverty in Canada (Yeo et al.). This phenomenon is not new but rather reflects the deeply embedded oppressive social structures and processes that privilege certain groups while disadvantaging others (Smith-Carrier). Scholars have long recognized the vast ill effects of poverty, including poor health, increased stressors, food insecurity (Raphael, Social Determinants), a lack of safety, an increased likelihood of homelessness, and a lower life expectancy (Mikkonen and Raphael). In fact, poverty, according to the World Health Organization, is the single most important determinant of health and wellbeing. Researchers have also identified that the experience of poverty among mothers is unique.
(Benbow et al., “OPRS”). However, many proposed and enacted strategies for poverty reduction for mothers, among other groups, have been largely unsuccessful (Benbow et al., “OPRS”; Smith-Carrier; Smith-Carrier and Lawlor), largely because they fail to tackle the root causes of poverty—namely, a lack of income due to precarious work, rising costs of housing and material goods, and dwindling social supports (Smith-Carrier et al., “Food Is A Right”). Poverty reduction strategies introduced provincially across Canada have tended to focus primarily on employment readiness and training initiatives—under the dubious assumption that incentives are needed to compel people to work (Pasma)—although these typically only prepare women for the low-wage labour force, where precarious, contractual, seasonal, and unemployment or underemployment are the norm (Vosko). There is no guarantee that the work (even in full-time positions) will render a livable wage. The majority of minimum wage workers are women (MacEwen), yet they remain in poverty. Thus, most women experiencing poverty in Canada are, in fact, working (Fleury and Fortin). A poverty reduction strategy aimed principally at promoting paid employment alone, without recognizing the nature and quality of the precarious Canadian labour market, does little to address the financial insufficiency of the working poor. This reality is particularly true for lone mothers, who have additional costs associated with the “second shift” (Hochschild and Machung) of their care work—for example, the high cost of childcare (Macdonald and Friendly).

A more dignified form of poverty alleviation has been proposed throughout the ages by a litany of leaders (e.g., Martin Luther King Jr., Thomas Paine, and Franklin Roosevelt): a basic income (BI) guarantee. This article explores the intersection of basic income, poverty, and mothering in Canada, and outlines the potential implications of a BI for mothers by exploring the merits and limitations of adopting this approach in several different domains (i.e., safe and affordable housing, childcare, and health and wellbeing). Drawing from a matricentric feminist lens, we recognize that mothers, and lone mothers specifically, tend to be disadvantaged under current patriarchal, social and economic relations.

Theoretical Lens

Women, mothers, and lone mothers specifically have historically been over-represented among those living in poverty in Canada (although this has fluctuated somewhat according to the prevailing economic and labour conditions of the day (Evans, “(Not) Taking Account”). Although an individual explanation of poverty would attribute it to faults within the individual (i.e., the lone mother), evidence suggests that a systemic understanding may be more helpful (Reuter et al.). The overrepresentation of
lone mothers in poverty derives from various systemic factors (Smith-Carrier et al., “Food Is a Right”), including their social location as well as the corollary of occupying axes of identity (based on gender, age, race/ethnicity, newcomer status, disability, Indigeneity, and so forth); they are recurrently subjected to oppression in an inherently patriarchal neoliberal society (reflecting a penchant for free-market capitalism). This clustering of disadvantages (Raphael, Poverty in Canada) exposes lone mothers to increasingly harmful health, social, and economic outcomes (Smith-Carrier).

Drawing from the work of Andrea O’Reilly, we adopt the theoretical lens of matricentric feminism to guide our analysis. Such a lens recognizes that although feminism has evolved over time to consider the specific experiences and intersections of women, attention to mothering and motherhood has remained largely peripheral within women’s studies and variants of feminist theorizing. Likely associated with the discomfort with all matters maternal—an assumed site of women’s oppression and source of patriarchy—prevailing feminist scholarship has actively disavowed motherhood, negating it as a central locus of women’s empowerment and agency. Yet significant difference remains between the institution of motherhood and women’s experiences of mothering (O’Reilly). As O’Reilly succinctly argues, “The term ‘motherhood’ refers to the patriarchal institution of motherhood, which is male defined and controlled and is deeply oppressive to women, whereas the word ‘mothering’ refers to women’s experiences of mothering, and is female defined and potentially empowering to women” (201). Moreover, whereas motherhood is understood to be socially and historically constituted, mothering is positioned as a practice, not an identity. Thus, matricentric feminism is “a feminism developed from and for the specific experiences and concerns of mothers” (O’Reilly 185). It is a fitting extension of intersectional theory (Crenshaw), recognizing the multiple and compounding structures of privilege and oppression that shape social positioning and life experiences (Knudsen). In this way, matricentric feminism recognizes how the practice and experience of mothering intersects with axes of identities, such as those pertaining to, inter alia, gender, race, and class. As such, the exploration of a BI for mothers living in poverty is well suited to a matricentric feminist analysis.

What Is a BI?

Everyone should have the right to an adequate standard of living (United Nations). Aligning with this fundamental human right, a BI is a payment made to individuals to ensure that everyone in society has income security. The principles of BI, according to its proponents, include (a) adequacy—the monetary payment should be sufficient to have one’s basic needs met; (b) autonomy—the provision of BI should offer people more opportunities in life
and the ability to make their own choices; (c) dignity—a BI should be a nonstigmatized form of income security; (d) nonconditionality—a BI should have few to no conditions for determining eligibility; and (e) universality of access—a BI should be allocated to any individual in society who requires it in order for their basic needs to be met. A BI should also be provided in regular, reliable payments, offering individuals and families predictability and security. Providing a BI through the extant tax system would ensure confidentiality, assuring that benefit receipt would not be susceptible to stigma (Smith-Carrier and Green). Importantly for mothers in general, and lone mothers specifically, a BI would “loosen the earnings-income link by providing an income to each individual that is not conditional upon fulfilling employment-related obligations” (Evans “Lone Mothers” 46).

Successful Examples of BI

The implementation of a BI could be realized through a variety of mechanisms using the existing tax structure in Canada. It could be provided through the current constellation of income security programs by expanding eligibility criteria—for example, by lowering the age requirements for pension programs, such as Old Age Security (OAS) or Guaranteed Income Supplement (GIS), making an income test, not age, the key criterion for eligibility (Emery et al.), or providing a new benefit to replace existing social assistance programs and boutique tax benefits, aimed primarily at those in the upper income rungs (Smith-Carrier and Green). Some have argued that a BI has already been extended to certain populations—for example, to seniors through a myriad of pension-related programs. Recent data from Statistics Canada indicate that poverty in Canada has declined. One of the reasons cited for this decrease is the bolstering of the Canada Child Benefit (CCB), a key feature of the federal Poverty Reduction Strategy introduced in 2018. The enhanced CCB is a form of BI for families, providing some with income sufficient to lift them above the poverty line (Smith-Carrier and Knezevic). This approach is consistent with research conducted by Bill Jordan in the UK about the viability of tax credits in providing necessary income provisions to address poverty. Increases to the CCB could be further expanded to provide a fully adequate BI for families while also recognizing that lone mothers bear a disproportionate burden of costs relative to sole individual or dual-income households, particularly in instances where childcare is necessary.

Some of the contention surrounding the provision of a BI in the mainstream milieu is derived from a lack of clarity related to how to effectively structure and implement it. A number of models have been described in the literature, yet three mechanisms appear most prominent. The first is a negative income tax (NIT) or income-tested BI, whereby a BI is offered only to those whose
income falls below a given threshold, using a sliding scale to determine eligibility (i.e., as one’s income rises, their benefit decreases). The GIS is an example of an income-tested benefit program. The second is a universal BI, or demogrant, in which all individuals within a given population receive the same flat-rate payment at established regular intervals. An earlier version of OAS is an example of a demogrant program, although changes made in 1989 introduced claw backs for high income earners (Young). And the third is a BI provided as a refundable tax credit, similar to the Goods and Services Tax/Harmonized Sales Tax (GST/HST), which provides, typically quarterly, payments to eligible individuals in the form of a tax refund (Smith-Carrier and Green). In whatever form a BI is adopted, it should aim to recognize the principle of adequacy; it must be sufficient to meet one’s basic needs. Canada has recently introduced its first official poverty line, the Market Basket Measure (MBM), as part of its newly released poverty reduction strategy (Government of Canada). Thus, to reflect this principle, the benefit level should aim to meet, if not exceed, this measure of low income. This is particularly important for lone mothers who have additional financial needs associated with raising children, which may be overlooked should a BI take the form of a demogrant—an argument similarly made for disabled people (Smith-Carrier et al., “Disability Support Program”).

There is now a substantial literature base supporting BI internationally. Evidence from conditional and unconditional cash transfer programs and various pilot projects on NIT/BI experiments is massive and growing (e.g., Canada, US, Mexico, India, as well as many Latin American and African countries). Many studies document positive (health, social, education, etc.) outcomes associated with the income security provided through a BI (Davala et al.; Forget, “No Poverty”). Indeed, as a result of the BI-related programs introduced through the OAS and GIS, Canada has seen poverty among older adults decrease from 36.9 percent in 1971 to 3.9 percent in 1995 (Conference Board of Canada), virtually wiping out poverty for this population at that time, although the minor increases to these programs over time have not adequately kept pace with the rising cost of living (Smith-Carrier and Green).

The Case of Ontario’s BI Pilot

In 2016, the Ontario Government, led by then-Premier Kathleen Wynne, implemented a Basic Income Pilot Project to test the effectiveness of a BI to reduce poverty in the province. Four thousand people, across multiple city sites, were enrolled in the pilot treatment group and were slated to receive a BI for three years, with evaluations conducted periodically throughout the period. Midway into the implementation of the project, the newly elected premier, Doug Ford, leader of the Progressive Conservative party, abruptly cancelled
the project. While some in the Ford camp argued that the pilot was “failing” (Jeffords), one of the reasons cited directly by Ford was that if the program were to be scaled across the province, the cost would be astronomical (see CBC News). This reasoning suggests that the government was less motivated by fears of its potential failure as its demonstrated success, and what that would mean for the government should it be pressured by the public to implement the program province wide.

An evaluation conducted by the Basic Income Canada Network (BICN) shows that the pilot was, in fact, working. Of the four hundred respondents surveyed by BICN, 45 percent indicated they experienced fewer health problems; 32 percent were able to access dental work; 41 percent bought medications they had not been able to afford previously; 17 percent saw the number of medications they needed decrease; 88 percent stated that the BI reduced their stress and anxiety; and 73 percent said it reduced their depression. In addition, 28 percent indicated they had stopped needing to visit the food bank because of the pilot; 32 percent went back to school; and 20 percent launched or expanded their own business (BICN; Paling).

**BI and Mothers**

Using a matricentric feminist lens, informed by O’Reilly, we explore the implications of mothers’ access to a BI as an effective poverty alleviation strategy. Specifically, we examine its potential impact as it relates to: (a) the promotion of safe and affordable housing, and the ability to leave an abusive partner; (b) the expansion of childcare options; and (c) improved health and wellbeing for mothers and their children living in poverty.

**Safe and Affordable Housing**

Housing is recognized as a basic human right (United Nations), yet mothers living in poverty face myriad barriers in accessing adequate, secure, and affordable housing. Across Canada, the ability to obtain affordable housing generally ensues after a lengthy wait on subsidized (rent-geared-to-income [RGI]) waitlists, which in some areas, has an expected wait time of twenty years. Waitlists for similar units within the same complex rented at market value (i.e., not RGI) are much shorter or are nonexistent (Centre for Equality Rights in Accommodation, 2013). Thus, the protracted wait time for subsidized housing demonstrates the magnitude of the low-income housing crisis and the fundamental need for affordable housing in Canada. The plight of mothers in acquiring adequate affordable housing is also reflected in homeless shelter statistics, in which families, most often headed by lone mothers, are a significant and growing population of homeless persons (Human Resources and Skills Development Canada).
Furthermore, even when RGI housing is accessed in a timely manner, it is often associated with other barriers, such as those related to social housing projects, or more specifically, the ghettoization of neighbourhoods. These housing options raise serious safety concerns, as reported by mothers (Benbow, “Mothers”; Benbow et al., “Spaces of Exclusion”). In fact, in a study exploring social exclusion and homelessness in Southwestern Ontario, one young mother expressed the following: “Living in any hood is not safe, not somewhere you want to live or be. How can you raise your children in housing projects? ... It sucks because people go into these housing projects because they want their life to be better, but they are putting their life at risk. Do I want to die? ... No!” (Benbow et al., “Spaces of Exclusion” 5). Social housing accommodation has been associated with an increased exposure to the drug and sex trades, violence, gang culture, and higher criminal activity (Davis and Appleby) relative to nonsocial housing options. The provision of a BI would ensure that mothers have the necessary financial resources to not only increase their housing choices within and beyond current subsidized options but to also potentially decrease the need for social housing units, with their cognate issues, for mothers and their families.

While waitlisted for affordable housing, mothers typically seek housing in the private market and are often forced to settle for inadequate housing (e.g., housing in dilapidated conditions and in need of repairs), unsuitable housing (e.g., insufficient space or bedrooms for their families), and unaffordable housing (e.g., shelter costs greater than 30 percent of the household’s pretax income (Canada Mortgage Housing Corporation). A BI would ensure mothers’ access to adequate housing options and would equip them with the financial wherewithal to improve their housing prospects. This is of particular importance to mothers, as they are not only responsible for their own safety but also that of their children. Natasha Jategoonkari and Pamela Ponic document the deplorable conditions associated with private market rentals for mothers living poverty, such as exposure to asbestos or the absence of locks on doors and windows—conditions that place mothers’ and their children’s health and safety at risk. Moreover, a BI would engender more housing choices that meet families’ bedroom and space requirements. Many mothers experiencing poverty live in overcrowded accommodations, where they are forced to get creative to construct their family sleeping arrangements, such as having family members regularly sleep in closets or on couches (Jategoonkari and Ponic). Such overcrowding has been identified as having short- and long-term negative effects on children’s wellbeing (Solari and Mare) and mothers’ mental health (Benbow et al., “Spaces of Exclusion”). A BI may also provide increased choice in neighbourhood selection and offer accommodation closer to important amenities (e.g., schools, health services, child resources, and so forth).
Access to finances (income) is one of the most significant factors determining whether a woman stays or leaves an abusive relationship (Wendt and Hornosty). With access to a BI, mothers would have more choice if and when fleeing intimate partner violence as well as in choosing a housing neighbourhood that ensures the family’s access to safety. Thus, a BI would equip mothers with the finances necessary to leave an abusive partner.

**Childcare**

In 2017, the cost of childcare in the vast majority of Canadian cities, urban and rural alike, rose faster than the rate of inflation; many reported lengthy waitlists and fees that were “far too expensive for many” (Macdonald and Friendly 5). Currently, only 20 percent of Canadian children have access to licensed daycares, leaving large swathes of babies and toddlers in unlicensed private facilities with little regulatory oversight (CBC News). In the absence of accessible and affordable childcare options, children are placed in less than ideal care arrangements (Hennessy), and women’s labour force mobility is restrained (White). With quality childcare, both children and their mothers are better able to thrive socially, physically, and economically (McCain et al.). Consequently, the provision of a BI for mothers would invariably provide them more childcare choices. With adequate financial resources, mothers could contemplate different employment options (i.e., to stay at home for a time or work full-time and/or part-time) and possibly have more flexibility in their determining their hours of work, including both standard and non-standard work arrangements, with resources to pay public and/or private childcare providers (e.g., other family members or trusted neighbours). Some debate in the BI/NIT literature has ensued regarding the possibility of BI creating a disincentive for mothers to work, under the assumption that they would simply stay at home with their children and not pursue paid employment opportunities. This proposition, however, is not borne out from the current evidence. Evelyn Forget (*Basic Income*) argues the following:

The only women for whom basic income may create an incentive to leave the labour market are the low-waged. Some will be better off financially not working than they would be working, especially when they take childcare into consideration. How is the world better off if a woman pays someone else to care for her children while she struggles at a low-paid job? … Low-waged, insecure work will always exist, and when unskilled women re-enter the workforce after their children grow up. (110)
Health and Wellbeing

Income is the single most important determinant of health, as the lack of it results in a multitude of adverse health consequences (Raphael, Social Determinants). The BI experiment tested in Dauphin, Manitoba, in the 1970s resulted in significant improvements in individuals’ health outcomes, including decreasing the hospitalization rate by 8.5 percent in four years alone, which amounted to significant savings in healthcare dollars. BI was also found to encourage security and stability, reduce stress, and improve the mental health of its recipients (Forget, “No Poverty”). This is particularly relevant for mothers; newcomer mothers, racialized mothers, mothers with mental illness, mothers with a disability, and teen moms are among those who experience increased economic vulnerability due to structural inequalities (Benbow, “Mothers”; Jolly). Furthermore, research indicates a strong connection between maternal and child health outcomes (Larson; Fitzsimons et al.; Woolhouse et al.). Thus, when a mother is healthy, she is better able to promote the health of her children. Expanding the financial resources extended to mothers through increases to the CCB or other tax-related programs would promote the health and wellbeing of mother and child, including improving the food security of these families (Emery et al.). This, in turn, would ultimately enhance a mother’s overall quality of life as well as that of her family. Yet a BI, depending on how the program is implemented by the government, could have disparate outcomes for mothers, depending on their intersectional identities. For example, a mother with a disability who because of her impairment is not able to engage in paid work may require more income assistance than a mother without such an impairment. A mother who is working for wages may simply not be making enough income to bring her above the poverty line; a minor increase to her income earnings through even a minimal BI may be sufficient.

Limitations of BI

BI is not a panacea; it would not directly remedy the shortage of quality licensed childcare facilities available to mothers, nor would it expressly address the rising cost of childcare fees across Canada. However, it could indirectly impact the childcare market resulting in greater demand from families with the purchasing power to pay for better quality care, potentially raising the standard of care for all.

Furthermore, although there is potential for long-term transformation, the provision of a BI will not remedy the current shortages in healthcare (Verma et al.) and mental health services (Canada Mental Health Association) that are pervasive across Canada. Demand on the health and mental health sector is immense, and is not likely to change in the near future. Although the
reduction and even elimination of poverty wrought through a BI will invariably improve the health and mental health of recipients over time, demand for related services will continue to be substantial. BI would, however, immediately address the feminization (and, more specifically, the motherization) of poverty that continues to beleaguer women in Canada (Kwok and Wallis).

There is also concern that a BI for mothers promotes the private distribution of wealth, deemed a hallmark of a conservative ideology, which would translate into a diminished role for the state in the provision of care. As funds are distributed to families directly (as they are now through the CCB), efforts towards expanding publicly regulated childcare spaces could be sidelined or jettisoned entirely. BI proponents, however, have never called for the reduction or dissolution of vital health and social care services; BI is meant to supplement existing health and social programs, not negate them (BICN).

Conclusion

Using a matricentric feminist lens, informed by O’Reilly, we explored the implications of a BI as an effective poverty alleviation strategy for mothers living in poverty in Canada. Access to a BI is an effective poverty reduction strategy with its potential benefits and efficacy now well documented (Forget, Basic Income). For lone mothers specifically, who face a myriad of economic vulnerabilities arising from systemic barriers, access to a BI would directly remedy the feminization, and motherization, of poverty they often experience through using a nonstigmatized approach to income security. With an adequate income, mothers would have increased choice, control, and access to fundamental resources, such as safe housing and food security. For some, having access to a BI may also provide the financial means necessary to leave an abusive relationship. Safe neighbourhoods, adequate housing, and increased health and wellbeing are among the many profound implications of providing a BI for mothers and their children. In recognizing that mothers and mothering matter, access to a BI is not only an effective response to the economic, family, health and safety needs of mothers living in poverty in Canada, but a necessary one.

Works Cited


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