York U health researchers produce public primer on who gets sick and why

TORONTO, April 28, 2010 – A report released today by York University health researchers offers Canadians the opportunity to learn how their living conditions will determine whether they stay healthy or become ill.

Social Determinants of Health: The Canadian Facts shows why these factors are so important for health and documents the state of these living conditions in Canada in an accessible manner for the Canadian public.

“Our key message is that the health of Canadians is much less determined by the health care system than we typically think. Much more important are public policies that influence our living conditions,” says Dennis Raphael, Professor in York’s School of Health Policy & Management and the report’s co-author.

Raphael and visiting scholar Juha Mikkonen explain in everyday language and with compelling graphics how Canadians’ health is shaped by how much income and wealth they have, whether or not they are employed and if so, the working conditions they experience. They pull together a wide range of research to show how health is powerfully influenced by Canadians’ ability to obtain quality education, food and housing, among other factors.

The report finds these conditions are declining with serious ramifications for the quality and longevity of Canadians’ lives, and outlines specific ways that the situation can be improved. The report is free to the public at http://www.thecanadianfacts.org/

Former Minister of Health and Welfare Monique Bégin states in the report’s foreword: “While one of the world’s biggest spenders in health care, we have one of the worst records in providing an effective social safety net. What good does it do to treat people’s illnesses, to then send them back to the conditions that made them sick?”

Contrary to the popular belief that Canada is a caring nation with strong supports for citizens, the report shows that Canada has one of the worse records among wealthy developed nations in providing Canadians with the conditions necessary for health. These supports are eroding with significant effects on Canadians’ health, according to Raphael.

“This is not a storyline that’s familiar to most Canadians,” he says. “We’re still stuck in those glory days where Canada really was one of the best places in the world to live. Sadly, that is no longer the case. What’s frightening is that many of these aspects are completely beyond any one individual’s control.”

For example, new immigrants have difficulty getting accreditation for their skills, and are forced into service jobs where they can barely afford to feed their families. This leads to a host of problems that directly affect health and overall quality of life.

“It’s all interrelated. It’s time to act on these issues,” Raphael says.

A striking example is found in maps that show a clear correspondence between poverty levels, prevalence of adult-onset diabetes, and concentration of visible minorities in Toronto neighbourhoods.

The report provides concrete recommendations for improving this situation. For example, in regard to the increasing occurrence of hunger in Canada, it recommends:
• Increases in minimum wages and social assistance rates to the level where an adequate diet is affordable.

• Governments assuring that healthy foods are affordable (e.g. milk, fruits, and foods high in fiber).

• Provision of affordable housing and childcare that would reduce other family expenses and leave more money for acquiring an adequate diet.

Sobering statistics cited by the report include:

- 15 per cent of Canadian children are living in poverty, putting Canada at a rank of 20th out of 30 of the world’s wealthiest nations as defined by the Organisation for Economic Co-operation and Development (OECD).

- Only 17 percent of Canadian families have access to regulated child care. Canada ranked last among 25 wealthy developed nations in meeting various early childhood development objectives.

- Canada is amongst the lowest in its coverage of total health care costs. Medicare covers only 70 per cent of total health care costs, giving Canada a rank of 22nd of 30 OECD nations for public coverage of health care costs.

- Canada is among the nations with the greatest gap between men’s and women’s earnings. Canada ranks 19th of 22 OECD nations in reducing the earnings gap between men and women.

- Over 40 per cent of Canadians with disabilities are not in the labour force, forcing many of them to rely upon social assistance benefits. Canada ranks 27th of 29 in public spending on disability-related issues.

Raphael, who teaches in York’s Faculty of Health, has researched and written widely on these issues. His recent publications include Poverty and Policy in Canada, Social Determinants of Health: Canadian Perspectives, and Health Promotion and Quality of Life in Canada: Essential Readings.

Mikkonen, a visiting scholar at York University, is a vice-president of the European Anti-Poverty Network Finland (EAPN-Fin), and a member of the executive committee of the European Anti-Poverty Network. He has held positions in decision-making bodies at the University of Helsinki, the Finnish Student Health Services and the Finnish Youth Co-operation Allianssi, which is an umbrella organization for more than 100 Finnish youth NGOs.