

Primer to Action: Social Determinants of Health

A resource for health professionals, lay workers, volunteers and activists to explore how the social determinants of health impact chronic disease.



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Primer to Action: Social Determinants of Health

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Primer to Action: Social Determinants of Health

Primer to Action: Social Determinants of Health is a resource to for health professionals, lay workers, volunteers and activists to explore how the social determinants of health impact chronic disease. It is intended to help you navigate through barriers in your organization or group and offer concrete 'primers' to get you going with action to increase access to the social determinants of health for yourself, your family, and those with whom you work. We will regularly update the information, and listen closely to your feedback.

Primer to Action: Social Determinants of Health is a collaborative project of the Ontario Prevention Clearinghouse, the Ontario Chronic Disease Prevention Alliance and the Canadian Cancer Society Ontario Division. It draws upon the skill and expertise of numerous health, social, and education professionals and organizations. Find out more about our organizations at:

- The Ontario Prevention Clearinghouse – <http://www.opc.on.ca>
- The Ontario Chronic Disease Prevention Alliance – <http://www.ocdpa.on.ca/>
- The Canadian Cancer Society Ontario Region – <http://www.cancer.ca>

A special thanks goes to our project consultant Michael Fay and Associates for an excellent job refining the resource concept and format, writing the text, and selecting the linked resources. Our designer was Neglia Design.

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This resource has been prepared with financial and in kind contributions from the three partners. Contributing staff were:

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This project also received financial support from the Public Health Agency of Canada- Ontario and Nunavut Region. The views expressed herein are solely those of the authors and do not necessarily represent the official policy of the Public Health Agency of Canada.

We encourage readers and users of this electronic-resource to send suggested resources and case examples, notice about errors or updates regarding links we've integrated, and other ideas to improve the resource to us c/o ocdpa@opha.on.ca.

March 2007

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This project received financial support from the Public Health Agency of Canada – Ontario Region.

Primer to Action: Social Determinants of Health

Over the last fifty years, a change has emerged in the way health researchers and practitioners understand the factors that prevent chronic disease and lead to good health. Before that, it was largely considered a matter of bio-medical cause and effect, coupled with negative life style choices. Health professionals began to see that good health and disease prevention is a lot more than that.

In 1948, the [World Health Organization](#) declared that, more than the absence of disease, health is “a state of complete physical, mental and social well being and not merely the absence of disease or infirmity.” And later in 1986, the [Ottawa Charter for Health Promotion](#) declared that health is “created and lived by people within the settings of their everyday life; where they learn, work, play and love.”

As you see from these declarations, a large number of social factors and conditions, including income, employment, education, and others lead to healthy people and communities.

In 1998, Health Canada developed a comprehensive list of those factors, calling them the [Determinants of Health](#): income, social support, education and literacy, employment and working conditions, social environments, physical environments, personal health practices and coping skills, healthy child development, biology and genetic endowment, health services, gender, and culture.

These factors come together like streams to form a flowing river to help us reach a state of complete physical, mental, and social well being.

But we realize that many people in our society cannot exploit the determinants of health in their everyday lives. They may lack access because of poverty, homelessness, distance, or related reasons. They may be denied access because of racism, discrimination, or related reasons. This can create health inequities, leaving those who are left out not as well equipped to achieve their full health. Because of that, we promote inclusion, so that everyone can gain access to the ‘streams’ that lead to health.

Primer to Action is for health professionals, lay workers, volunteers and activists. It’s for you and your organization, but also for your family, and your community. We will focus on six key determinants of health: income, education, employment, housing, food, and inclusion.

Primer to Action will show you 1) where you can find more information about each of the determinants, 2) how you can work on the determinants in your agency, 3) who you can learn from, with examples and models; and 4) what you can do in your community to bring everyone into the flowing river of health.

Social Determinants of Health & Chronic Disease Prevention

The relationship between the social factors that lead to health or to chronic disease was noted in a very powerful way in industrial Britain in the second half of the nineteenth century. London, Glasgow, Liverpool, and other cities were swelling with people drawn into the new industrial economy, but often those people were faced with little income, insecure employment, appalling housing, lack of food, no chance of further education, and social exclusion. Public Health physicians were emerging at the same time, identifying the cause and effect relationship between poor social conditions and chronic disease. This was happening in North America as well, and in cities like Toronto, medical officers of health were leading social campaigns to alleviate poverty and the miserable social conditions faced by the poor in cities and underdeveloped rural communities.

What is the relationship between the social determinants of health and chronic disease?

According to "[The Tides of Change: Addressing Inequity and Chronic Disease in Atlantic Canada](#)," A discussion paper commissioned by the Population and Public Health Branch, Atlantic Region, Health Canada:

"Statistics Canada's National Population Health Surveys (1994/95 and 1996/97) show that the incidence rate of all chronic diseases studied was higher for people in the two lowest-income groups than for those in the three upper-income groups."

Dr. David McKeown, Toronto's Chief Medical Officer of Health in December 2006, said, "Toronto has some of the healthiest and least healthy communities in Canada. The incidence of common health problems can vary twofold from one neighborhood to another as a result of the basic determiners of health, such as income, housing, employment, and education."

Although there has been much emphasis on the contributions of bio-medical and lifestyle factors to the incidence of chronic disease, Dennis Raphael, in his Introduction to [Social Determinants of Health: Canadian Perspectives](#), notes that recent research serves to downplay these factors, indicating instead that negative socio-economic conditions accumulate to produce negative health outcomes. Negative socio-economic conditions influence the quality of life and development, may lead to severe stress, and be followed by adopting health-threatening behaviors. As noted by Dr. McKeown, when there are large gaps in positive/negative exposure, the negative health outcomes are more severe.

Primer to Action will point you to the evidence linking chronic disease with lack of access to socio-economic opportunities generally, and, in the six 'streams' in our focus, will point to more specific evidence. We also direct you to models and best practices. But, before moving ahead, we want to look at how you fit into the world around you.

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Where Do I Fit In?

Health professionals, lay workers, volunteers and activists live and work in any number of settings, and act as staff or volunteers. Although they may understand the impact of the social determinants of health on chronic disease prevention, their agency or organization may not have fully embraced this way of looking at health.

Over the last few years, a number of key people in public health in Ontario have been developing a solid line of thinking that explains the role of the social determinants of health, but also suggests patterns of action that might be taken. This group, led by the Sudbury and District Health Unit, also arranged for a special stream in the joint annual meeting of the Ontario Public Health Association (OPHA) and the Association of Local Public Health Agencies (alPha) in 2005 to consider ways in which action on the social determinants might be included in the mandatory programs delivered by local health units.

The *Determinants of Health: developing an action plan for public health* conference stream drew over 100 public health representatives to share their experiences and guidance. Motions supporting an explicit public health role in addressing social and economic determinants of health were also carried at the respective 2005 annual general meetings of alPha and OPHA. Building on the momentum of the conference and the motions, the Sudbury & District Health Unit benefited from a small grant from the Public Health Agency of Canada through the Ontario Prevention Clearinghouse to draft a more detailed discussion paper, [A framework to integrate social and economic determinants of health into the Ontario public health mandate, March 2006. Submitted to the Chief Medical Officer of Health in April 2006](#), it was hoped that this document and related discussions would inform the imminent Public Health Mandatory Health Programs and Services review process.

These developments indicate that the social determinants of health are moving from a subject of debate to a way of working in communities. Likely, this movement will ripple out to all of the sectors involved with the social determinants, such as education, social planning, community living, and certainly to the voluntary organizations directly engaged in chronic disease prevention.

However, there are still challenges, and even barriers, in agencies and organizations in convincing co-workers, management, boards and the community to work to create access to the social determinants of health.

To meet the challenge, you must be aware of where you fit in. This involves understanding the nature and structure of your organization or group, including your relationship with co-workers, management, the board, and the community. With this understanding, you will be better prepared to take up the suggested actions in the **Primer to Action**.

[The Change Management Toolkit](#) is a portal leading to many resources to help you understand where you fit in. The chart that follows gives you an easy to use checklist to help you initiate action on the social determinants of health in your organization or group and begin to engage your community in the process of change.

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	Co-Workers	Management	Board	Community
How do you let your agency know that creating access to the Social Determinants of Health (SDOH) might help it meet its mission and mandate?	<p>Clip and post articles about SDOH</p> <p>Bring SDOH up at staff meetings</p> <p>Suggest a Lunch & Learn</p>	<p>Indicate interest found in the community and among staff about SDOH</p> <p><u>Agency statistics, e. g. Access Alliance</u></p> <p>Ask about agency policy on SDOH</p>	<p>Check the Mission and Mandate of the Agency/Health Unit/Department</p> <p>Check the priorities of the funders.</p> <p>Attend Board of Health/Council/Annual General Meetings</p> <p><u>Annual Reports, e. g. United Way of Windsor Essex County</u></p>	<p>Find out what organizations or coalitions are working on the SDOH</p> <p>Link those organizations/coalitions to your agency through networking</p> <p><u>Census information</u></p> <p><u>Epidemiology, e. g. Sudbury District Health Unit</u></p>
How do you involve groups and coalitions in your community in your agency's decision-making and programming to encourage work on SDOH?	<p><u>Map the groups in your community with co-workers, using Asset Mapping strategies</u></p> <p><u>Use community development strategies to mobilize community</u></p>	<p>Present Community Mapping results to Managers and Management Team</p> <p>Seek support for greater participation by community groups</p>	<p>Invite members of community groups and coalitions to attend your Board meetings</p> <p>Encourage community members to volunteer for Board committees and task forces</p>	<p>Join and become active in community groups and coalitions</p> <p>Link the groups and coalitions with others through networking</p> <p>Write letters to the newspapers</p>

Adequate Income

We need money to help us secure housing, food, clothing, transportation, cultural and recreational opportunities and all the other things we need for a healthy life in society. When we have a decent income, we also have respect in our community, and that makes us feel good. We also need just taxation and transfer policies to close the gap between the rich and the poor. And we need strong advocacy groups in society to work towards adequate income for all.

Over the years, studies have shown that there is a strong link between income and health, and that societies with a great distance between the rich and the poor are not healthy societies. The small percentage of the population at the top of the income and wealth scale is healthier and lives longer than the larger percentage of the population at the bottom. And the gap is growing.

A recent study by the [World Institute for Development Economics Research of the United Nations](#) indicates that, in the world, the richest

- 2% of adults own more than 50% of global household wealth
- 10% of adults accounted for 85% of the global household wealth

In contrast, the bottom half of the world adult population owned barely 1% of global wealth. "The inequality in the distribution of household wealth, or assets, is very high - in fact it's significantly higher than inequality in the distribution of income," said Jim Davies, author of the study and professor of economics at the University of Western Ontario in London "Of course, this is a concern."

The United States ranked first among the world's wealthiest nations with one-quarter of the world's wealth. Japan stood at 9.8%, China had 8.7%, the United Kingdom 4.7%, and Germany 4.6% to round out the top five.

Canada ranked 11th, with a 1.7% share of the world's wealth.

"Canada is certainly among some of the wealthiest countries in the world," said Davies.

In fact, 2.5% of Canadians found themselves in the top one per cent of the world's wealthiest people. In the U.S., that number rises to 36.8%.

And Canada has a growing gap between the rich and the poor.

"After increasing between 1984 and 1999, the gap between families in the top and bottom 20% of the wealth distribution continued to widen between 1999 and 2005. The wealthiest 20% of families held 75% of total household wealth in 2005, compared with 73% in 1999 and 69% in 1984." [Perspectives on Labour & Income](#), released by Statistics Canada in December 2006, details the growing gap.

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Find out more

- [Statistics Canada](#) publishes comprehensive information and studies about income, income inequality, and the relationship of income to other factors. Although current information is based on the 2001 Census, it is useful in detailing the situation in every region of the country. Census 2006 information will be available in the near future.
- The Public Health Agency of Canada has an excellent summary of the relationship between income and health, called [Income Inequality as a Determinant of Health](#). They cite a study in Montreal that examined the relationship between neighbourhood income, place of residence on the island of Montreal and health status. Montreal ranked worse than most major Canadian cities in all aspects of health status. The study concluded that health status would only be improved by balancing the income inequality.
- Income, Income Distribution, and Health are covered in two chapters of [The Social Determinants of Health: Canadian Perspectives](#). “Income and Income Distribution” by Ann Curry-Stevens traces the development of income inequality in Canada, with a particular reference to the taxation policies, influenced by neo-conservative ideas, which have further imbalanced income among Canadians. “Income and Health in Canada” by Nathalie Auger, et. al. examines in depth the Montreal study cited by the Public Health Agency of Canada.
- British evidence of the income and health relationship appears in [“Income inequality and mortality: importance to health of individual income, psychosocial environment, or material conditions.”](#) This examines the income and health issue through various interpretations: the individual income interpretation, the psychosocial environment interpretation, and the neo-material interpretation which looks at the accumulation of negative exposures and experiences resulting from low income.
- [“Health, Income, and Inequality by Angus Deaton”](#) is a brief but thorough look at the issue from a number of perspectives, using data from the United States, Britain, South Africa, among other countries.
- The [Canadian Index of Well Being](#) project, housed at the Atkinson Foundation, will use income, along with other factors, to present a comprehensive view of the well being of Canadians. They are drawing on experts from across the country to establish factors in the Index. It will be available in the near future.
- The World Health Organization has established a [Commission on the Social Determinants of Health](#) that will support research, investigation, and publication on the SDOH, including income. They are working on [case studies of best practice](#) among groups focused on SDOH.

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Learn from them

- [Health and Income Options](#) is a British Columbia grass roots organization, dedicated to advocacy for adequate income. There are local advocacy groups like this across the country. They can help you advocate for your own income entitlements, but they also advocate for adequate income for all.
- [The Association of Ontario Food Banks](#) is launching a campaign to draw attention to income disparities as a threat to health. Although the Association supports the work of dozens of local food banks, making them more efficient and effective, it has become a major advocate for adequate income, with a regular set of policy papers urging government to take action.
- Coalitions Against Poverty are working in [Ontario](#), [Peterborough](#), [Halifax](#), and [British Columbia](#), with multiple approaches to advocacy for adequate income. These local groups, organized by advocates and activists, mount campaigns to focus public attention on the needs created by low income, and the government policies and programs necessary to provide those needs.
- [Lets Keep Kids out of Hospital](#) of the Childrens Hospital of Eastern Ontario created print and video resources to explore the relationship of income and health, especially as it applies to children. This is a great example of a major health institution creating resources for activists to understanding the negative health impact of low income, with suggestions for action.
- The [Coalition of Community Health and Resource Centres in Ottawa](#) develops advocacy positions on the SDOH, including work with income equity. They produce fact sheets, question and answers on issues, and ways for people to get involved.
- The [National Anti-Poverty Organization](#) has launched a campaign to involve young people in advocacy to prevent and alleviate poverty among youth. They continue to campaign for a raise in the minimum wage across the country, to cap and reduce the cost of post-secondary tuition, and to ease access to employment insurance.
- [Kairos: Canadian Ecumenical Justice Initiatives](#) provides funds for low income groups who promote social justice by actions that attack and seek to overcome the causes of poverty, encourage community participation to help low income people to gain more control over their lives, facilitate awareness of social justice causes, and support alternate economic development strategies, such as co-ops.
- [PovNet](#) provides a comprehensive list of community-based advocates working to reduce poverty in Ontario.

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What you can do in your community

The Federal, Provincial, and Local Governments, provide income entitlements to Canadians. Non-governmental organizations develop advocacy positions to ensure that everyone has an adequate income. You can take action in your community. **Primer to Action** will help get you started.

	Federal	Provincial	Local	Organizations
What role does each play in ensuring that you and everyone in society have an adequate income?	<u>Income Assistance for All Canadians</u> <u>Old Age Security</u> <u>Guaranteed Income Supplement</u> <u>Canada Pension Plan</u> <u>Other Canada Benefits Programs</u>	<u>Ontario Works</u> <u>Ontario Disability Support Program</u>	<u>Municipal Social Services in your City or Township, e. g. Toronto Social Services</u>	<u>Income Security Advocacy Centre</u> <u>Advocacy Centre for the Elderly</u> <u>Campaign 2000 to End Child Poverty in Canada</u> <u>Centre for Social Justice</u>
Who needs to be influenced to make sure you and everyone in society have an adequate income?	<u>Senators and your Member of Parliament</u>	<u>Members of the Ontario Legislature, with links to their political parties and the Standing Committee on Social Policy</u>	<u>Municipal Councilors and Committee on Social Services, e. g. Toronto</u>	<u>Churches, e. g., The United Church of Canada</u> <u>Kairos Anti-Poverty Program</u>
Who can be your allies in reaching those you need to influence?	<u>Service Clubs in your area, e. g. Rotary Club of London</u> <u>Local Newspapers, e. g. Haliburton Echo</u>	<u>Citizen Engagement with Local Health Integration Networks</u> <u>Ontario Public Health Association</u>	<u>Local Health Units</u> <u>Local Boards of Health</u>	<u>Social Planning groups</u> <u>Ontario Healthy Communities Coalition</u>

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What you can do in your community (Continued)

	Federal	Provincial	Local	Organizations
<p>What actions can you take to help ensure that you and everyone in society have an adequate income?</p>	<p>Find out if you're receiving all of your Federal entitlements by searching the websites and talking to Advocacy Centres</p> <p>Write Senators and your Member of Parliament to indicate your concern about the relationship between adequate income and health</p> <p>Sign one of the many petitions about income and health, e. g. Campaign 2000</p>	<p>Find out if you're receiving all of your Provincial entitlements by searching the websites and talking to Advocacy Centres</p> <p>Write Members of the Ontario Legislature to indicate your concern about the relationship between adequate income and health</p>	<p>Find out if you're receiving all of your Municipal entitlements by searching the websites and talking to Advocacy Centres</p> <p>Write your Municipal Councillor to indicate your concern about the relationship between adequate income and health</p>	<p>Does your agency or organization have a policy to advocate for adequate income? Ask your supervisor or manager and indicate your support.</p> <p>Do the church, social, and community groups you belong to have policies to advocate for adequate income? Ask the officials and indicate your support.</p> <p>Join and support national, provincial, and local advocacy groups.</p>

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Education

Life is very complicated these days. We need to know so many things to help our families, our communities, and ourselves. First, we need to be able to read and understand the information that has an impact on our lives and our futures. And then, we need to have the best education possible for our circumstances to help us reach our full potential.

Parents need information to support their children through all the levels of school. Parents need to ensure that their youngsters are ready for school, and know enough about the education system to support their children's decisions through the various learning transitions, from elementary, secondary, to post-secondary. Education now, more than ever, is a life long task.

Elementary schools welcome [parents as educational partners](#) who can support their children's learning by reinforcing academic skills, encouraging their particular interests and advocating for their specific needs. When parents are better informed about the special programs their local schools and district school boards offer, they can help their children make [wise choices](#) as they move into high school and then select post secondary training opportunities.

Education has never been more important in shaping young people's life chances, according to [Cracking the Good Job Barrier](#). Young people with lower educational qualifications run a higher risk of long-term unemployment, or unstable and unfulfilling jobs

Getting a high school diploma does not automatically improve chances of finding a skilled job. High school dropouts are more likely to be unemployed or underemployed, according to "[Canada's young drop-outs: what needs to be done?](#)". Dropouts will be paid more poorly and may fail to find opportunities for additional training and advancement.

Adults need education too. Adults return to school for many reasons: to complete a high school diploma, improve basic skills, or acquire new ones that enable them to pursue better employment opportunities. New immigrants may attend classes to polish their English skills and acquire Canadian job search skills. Seniors may take classes to learn something new and enrich their lives. [Adult or continuing education](#) is designed for adult needs.

Health and learning are closely intertwined and the interaction between health and learning is evident at all ages, from early childhood through to the later stages in life.

Results of international tests of adult literacy show that 42% of Canadians aged 16 to 65 years have literacy skills below the level considered necessary to live and work in today's society. [Adult literacy](#) is a serious issue in Ontario as well. [The International Adult Literacy and Skills Survey](#) found that 16% of adults do not have basic literacy skills; an additional 26% would benefit from literacy upgrading.

Low literacy is linked to poverty, disadvantage, and exclusion, and ultimately poor health. A key finding from the [Adult Learning and Life Skills survey](#) reveals that the healthiest individuals also have higher average literacy and numeracy scores than those classified as the least healthy. This pattern was consistent in all the countries studied. This survey also reported that Canadian participation rates for adult education and training among 16 to 65 year olds increased from 36% in 1994 to 49.3% in 2008.

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Find out more

- Parents need help when their children enter school to ensure a successful transition. Children may have behavioural, communication, intellectual, physical or multiple exceptionalities. Their educational needs cannot be met through regular instructional and assessment practices. These needs may be met through special programs. Such students may be formally identified as “[exceptional pupils](#).” School boards in Ontario must use the Ministry’s definitions of exceptionalities to determine needs.
- Before taking courses or skills training, newcomers to Canada will need to have their academic documents evaluated. [Settlement.org](#) has an excellent website which will supply you with the information you need and direct you to a source to have your documents evaluated for work or additional study at a secondary school, community college or university.
- Many recognized Canadian community colleges or universities offer [distance education](#) opportunities. These Internet courses provide you with the opportunity to study at home, at a time that is convenient to you.
- High schools currently offer a wide selection of courses that will enable all students to obtain a high school diploma. Some courses offer job related experiences called “[Co-op](#)” that permit students to earn credits through work experience while they are still in school full time.
- [Apprenticeship](#) is practical training that may begin in high school. Many occupations in the skilled trades, construction, auto sector and service sector require training and licensing that combines classroom courses with on the job training. Apprentices are paid while they learn and their wages increase with experience.
- [The Ontario Youth Apprenticeship Program](#) allows secondary students in grade 11, who are at least 16 years of age, to begin to work toward a skilled trade while they complete their high school diploma.
- Adults who want to complete their high school diploma have various opportunities. [General Educational Development](#) testing allows adults to show that they have the skills and knowledge equivalent to a high school diploma. GED Tests are available in all Canadian provinces and territories, in all of the United States, and in several other countries. In 2002, more than 1,000,000 adults worldwide completed the GED Tests.
- [Independent Learning Centre \(ILC\)](#) provides opportunities for home study. Ontario residents can earn secondary school diploma credits, upgrade basic skills, or study for personal development. ILC also offers an elementary program for children temporarily living outside Canada
- [ILCs](#) are independent businesses that provide postsecondary training and courses as an alternative for the community colleges or apprenticeship training. These courses provide opportunities for those individuals who require specific work skills to enter the labour market as quickly as possible.

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Learn from them

- Some youngsters adjust to school easily, for others it is more difficult. [The Kindergarten Intervention Project](#) of the Peel District School board (KIP) helps these students and their parents to make a successful transition to school.
- Libraries can provide early reading programs and help parents support their children's developing literacy skills. The Brampton Public library offers [Babies in Playland](#) in partnership with the Ontario Early Years Centre.
- Selecting appropriate high school courses is important. [People for Education](#) has a tip sheet to assist parents and students in planning their secondary program.
- While some students flourish in elementary school they need support in adjusting to high school. A lack of confidence may result in poor attendance and diminished academic progress. They become potential dropouts. [Pathways to Education](#) in Toronto's Regent Park works to keep these kids in school.
- The traditional high school environment is not for everyone because of specialized needs or schedules. [The Ottawa Carlton E-School](#) is an Internet based flexible alternative that allows completion of high school courses online.
- The [Ministry of Training, Colleges and Universities' Literacy and Basic Skills \(LBS\) Program](#) provides literacy, numeracy and essential skills services that help learners achieve their goals related to further education or training, employment or independence.

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What you can do in your community

In Canada there is no national government body responsible for education. The Provinces and Territories have constitutional jurisdiction over education; the Federal role provides transfer payments to support them and assists with individual savings plans specific to education and training. **Primer to Action** will get you started.

	Federal	Provincial	Local	Organizations
What role does each play in ensuring that <u>your child</u> will have an appropriate education?	Registered Education Savings Plans (RESP) Canada Education Savings Grant (CESG) Canada Learning Bond (CLB)	Elementary and secondary curriculum Apprenticeship The Loans for Tools Program Ontario Colleges Program Locator The Ontario Student Assistance Program (OSAP)	The District School board Your local school principal and teachers	School Councils The Learning Disabilities Association of Ontario
What role does each play to ensure that <u>you</u> have an appropriate education?	The Lifelong Learning Plan Workplace Essential Skills Training	Literacy and Basic Skills	Skilled Trades Apprenticeship Training	Infusion Angels and Microsoft
Who can be your allies in reaching those you need to influence?	Job Start Mentor	The Provincial Parent Board	Find an Interpreter The board's Special Education Advisory Committee (SEAC)	Immigrant services, Kingston & Area People for Education

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What you can do in your community (Continued)

	Federal	Provincial	Local	Organizations
<p>What actions can you take to help ensure that everyone in society has an appropriate education?</p>	<p>Become involved in national educational issues through the Canadian Home and School Federation</p>	<p>Stay informed about school issues by requesting e-mail communications from the Ontario Association of Parents in Catholic Education</p> <p>Join the Ontario Federation of Home and School Associations</p>	<p>Make early and positive contact with your child's teacher. Visit the school or phone the teacher with any questions or concerns</p> <p>Remain informed about local issues by attending school council or board meetings.</p>	<p>Join the Ontario Provincial Education Network</p>

Employment

We get more than money from the work we do in the world. We also get a sense of accomplishment, belonging, satisfaction, and fulfillment, if society honours and respects the paid and unpaid work we do. We need to feel safe and secure in our workplace, and paid an appropriate amount for the value we contribute. We need to be recognized for the unpaid work we do in our families, and communities. While housework and community volunteer work are typically unpaid and under-appreciated, they remain essential for our survival and quality of life.

Everyone has the right to work, to free choice of employment, to just and favorable conditions of work and to protection against unemployment, as stated in [The United Nations Declaration of Human Rights](#), Article XXIII.

Work contributes to material well being by providing an adequate income to live on. It is the great social connector by breaking down the barriers to inclusion and generating the social cohesion necessary for an equitable society. Work contributes to personal health in many important ways, according to the [Goodwill Community Works Report, June 2006](#).

Unemployment, precarious work and employment insecurity produce financial hardships, increased health risks and greater social isolation (D. Raphael "Social Determinants of Health", 2006).

Various [labour market factors](#) impact on individual health:

- rapid technological change in the workplace
- a growing trend toward globalization that produces greater competition
- the negative consequences of unemployment, job insecurity, overtime work, shift work, and under-employment
- the effects of non-standard employment arrangements such as contract work

Job loss contributes significantly to depression, anxiety, panic and increased substance abuse, according to [W. Avison, cited in Goodwill Community Works Report](#). These effects can be relatively long lasting, not immediately regained by finding work. Since unemployed people tend to experience more health problems, long-term [unemployment](#) could extend ones' susceptibility to poor health.

Underemployment and [Work stress](#) are linked with poorer health. Sources of workplace stress include poor support from colleagues or supervisors, job insecurity and demanding work. The more highly educated report lower levels of stressors than less-educated workers, as noted by the [Institute for Work and Health in Ontario](#).

[Contingent work arrangements](#) may negatively affect workers' health. More than one-third of the employed labour force in Canada now work part time, under short-term contract, or in other "non-standard" working arrangements.

Individuals enter the workforce at various times. Young people usually begin to work after completing formal education. However, workforce re-entry occurs after job layoffs, parental leaves and immigration relocation, creating the possibility of stress leading to poor health. Occasionally retirees return to the workforce. Each approach requires slightly different strategies.

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Find out more

- Success and satisfaction in the workplace requires continual renewal. People may change jobs several times in their lives and need to acquire new skills. The Ontario Literacy Coalition notes in [Workforce Literacy](#) that the demand for higher literacy skills has increased even in jobs where these skills don't seem vital
- The [Ontario Literacy Coalition](#) says that beyond reading, writing, and math activities, the workplace requires oral communication, using technology, critical thinking and solving problems. [The Conference Board of Canada](#) notes that employees and the self-employed need positive attitudes and behaviours, adaptability, working with others and social skills.
- Service Canada notes that employers are clear about [the key skills and values](#) they are looking for in new employees, including personal values, problem-solving and decision-making, and eight others.
- While Canadians have never been better educated, skill levels among older workers sometimes fail to keep up with increased demands. When older workers either discontinue or fail to upgrade certain work related skills, 'skill loss' occurs, according to the [Canadian Council on Learning](#).
- The [Adult Education and Training Survey, \(2003\)](#) found that one out of every three adult workers, participated in some type of formal job-related training in 2002, accessing opportunities to continue learning and to upgrade their skills
- A British report, developed by the [Tamkin Institute for Employment Studies, 2005](#), notes that when less-educated individuals participate in training, they are almost twice as likely to report positive outcomes, such as increased income, a promotion or a job change as their more educated peers. Workplace training opportunities in Canada still lag behind other countries. [Moving Forward on Workplace Learning](#) noted that fewer than 30% of Canadian adult workers participate in job-related education compared to almost 35% in the UK and 45% in the United States.
- Growing numbers of retiring workers may create [Labour Shortages in the Skilled Trades](#). And further, [Labour Force Ageing and Skill Shortages in Canada and Ontario](#), a 2004 study, concludes future skill shortages will likely impact specific industries, occupations, and locations and depend on a wide variety of economic, demographic and workplace-specific factors.
- [Moving Forward on Workplace Learning](#) states that the demands and rapid transformation of the knowledge economy require frequent changes in skills requirements on the job.
- In [Competing for Tomorrow](#), the Councils of Ministers of Education cite the American Society for Training and Development and note that Canadian employers spend about US \$560 per employee annually on workplace training. This is considerably less than other OECD countries including the US, Japan and other European countries.

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Learn from them

- The [Ontario Skills Passport](#) gives you practical information about workplace skills, habits, tasks, and opportunities, with easy to follow directions to develop a work plan.
- Sometimes working as a [youth](#) or [senior](#) volunteer can provide useful experiences to help in an employment search or renewed energy at a particular time of life.
- Individuals uncertain about the education, training or work they want to commit to can explore the graduation and employment rates of [universities](#), [community colleges](#), and [other educational institutions](#).
- The [Youth Business Centre](#) in Toronto offers business skills development and the completion of a business plan to youthful entrepreneurs. Others can decide if [self-employment](#) is in their future.
- Searching for work can be a full time occupation. [Career coach](#) is a 37 foot mobile unit that makes scheduled stops at malls, recreation centres, libraries, and community agencies in Peel and Halton to provide career counseling and job search assistance to youth (aged 16-30) and to Canadian newcomers.
- The [Job Bank](#) provides online searches for jobs available all across Canada. It also permits employers to post available jobs.
- [The Career Bridge Program](#) operates in the Greater Toronto Area (GTA) and Hamilton. It provides internships within the Ontario Public Service for qualified, experienced newcomers who are internationally trained professionals.
- [Durham College in Uxbridge](#) provides a three-part walk-in community service that includes an Information and Resource Service, Employment Planning and Preparation, and Job Development and Placement Support for those older than 16 who are out of school, out of work and not receiving Employment Insurance Benefits.
- [Doorways](#) offers upgrading in math and reading skills for the trades at the Burlington Centre for Skills and Development. There is an open-enrolment policy and potential transportation assistance.
- [Skills for Change](#) offers sector specific language training, computer training and job search skills to Canadian newcomers.
- [Skills Work for Women](#) is a series of networking dinners offered to students between grades 9 and 12 to provide them with networking opportunities with women working in skilled trades and technologies.

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What you can do in your community

The Federal, Provincial, and Local Governments, along with non-governmental organizations, play roles in ensuring that everyone has access to the workforce and through safe work has the right to a legislated minimum wage. Advocacy groups protect that access and right, and also urge that employment yield an adequate income. **Primer to Action** will get you started.

	Federal	Provincial	Local	Organizations
What role does each play in ensuring that youth have meaningful and decent employment?	Social Insurance Number application Insurance benefits online Summer work experience Young Canada Works Youth Employment Strategy	Employment Standards Act Employment Ontario Services for Employees Young workers safety	Apprenticeships Job Connect Business Education Councils Skills Work for Youth JobConnect	OCASI Business & Education Partnership, Waterloo Apprentice Search (Peel, Halton, Dufferin)
What role does each play in ensuring that adults returning to work have meaningful and decent employment?	Working while on maternity, parental, sickness benefits Work permits for newcomers	Guide to small business Adjustment advisory program Services for Employers	North Superior Training Board	Mentoring Programs Career Edge Internships Skills International
Who can be your allies in reaching those you need to influence?	Canadian Labour Congress	Job Start Mentor	YMCA Employment Services	Peel Poverty Action Group

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What you can do in your community (Continued)

	Federal	Provincial	Local	Organizations
<p>What actions can you take to help ensure that you and everyone in society have meaningful and decent employment?</p>	<p>Write Senators and your Member of Parliament to indicate your concern about the relationship between adequate employment and health</p>	<p>Write Members of the Ontario Legislature to indicate your support for the Council of Ministers' recommendations for increased investment in apprenticeship programs, literacy, and workplace training</p>	<p>Talk to your Municipal Councilors about employment opportunities in the area, especially for marginalized people</p> <p>Support local organizations that create workplace training opportunities</p> <p>Participate in workplace professional development programs</p>	<p>Join your local Social Planning Council or Community Development Association</p> <p>Write Letters to the Editor</p> <p>Make you workplace more accessible to employees</p>

Affordable Housing

We need shelter from the wind, the rain, and the snow. We need clean and safe homes for our families, in communities that create the feeling and reality of belonging. We need housing that is permanent, affordable, decent, and accessible for all. We need to bring everyone who is on the street into the warmth of a home for their health and well being, to realize their potential in our society. Housing, particularly in a country with Canada's climate, is essential to a [healthy life](#). Housing must be given priority, even if it means taking money for housing from other essentials, such as food and clothing, a contemporary tragedy for many families.

Historically, the Canadian government has stepped in to provide resources to the provinces and municipalities to deal with housing crises, according to [The Social Determinants of Health: Canadian Perspectives](#). This was true in the early 1900's, the Great Depression, the post war period, in the massive investments in large scale public housing in the 1960's, and later the creation of co-operative and non-profit housing options in the 1970's and 1980's. However, the Canadian government retreated in 1993, as part of a movement to privatize responsibility for housing. This was one of the negative impacts of emerging neo-conservative thinking. This thinking also led to a pattern of downloading responsibilities for various functions, and housing became one of those functions. The squabbling over who was responsible for social housing was compounded by the NIMBY factor in cities and towns. The [Wellesley Institute](#) has a complete set of reports describing the long and interesting history of attempts to solve the social housing problems of Toronto, from 1918 to 2006.

The theory that private industry would build housing to meet need was ill thought, given that business is driven by profit and the profit margin in family housing is modest. Instead, a housing crisis of monumental proportions was created across the country, especially for renters. In the later part of the 20th century, housing insecurity and homelessness became a feature of all of our cities and towns. As the country entered the 21st century, it was challenged by Toronto Disaster Relief Committee to embrace the '[1% solution](#)', i.e., increasing housing investment from the current 1% of budget to 2%. Although the [Government of Ontario](#) has responded to the crisis with renewed approaches, the need remains greater than the supply.

As with food security, there has been a surge of community and charitable responses to the housing crisis. In some cases, the programs are variations of those that have worked in developing countries. [Habitat for Humanity](#) is a perfect example. However, because of the cost of serviced land and the need to build with sweat equity, these strategies seem to work best for the mid-level working poor, not those mired in deep poverty and the hard-to-house who have physical and/or mental health problems are often unable to qualify as reliable tenants.

The shortage of housing supply contributes to decline of quality: the tenant has little leverage to make a landlord bring a unit up to standard. Poor quality housing leads directly to poor health. It also encourages the creation of illegal units to which no standards apply, as they are 'under the radar'. A tenant cannot afford to 'annoy' his landlord without risking eviction, loss of a positive referral to a subsequent landlord, and the possibility of actual homelessness rather than sub-standard environment.

The cost of heating further challenges low-income renters, and the possibility of upgrades is limited by the lack of capital for improvements. Housing remains the central crisis point in the struggle for people seeking the determinants of health.

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Find out more

- [Statistics Canada](#) publishes useful information and studies on families, households, and housing. This includes information on household characteristics, housing and dwelling characteristics, and living arrangements of individuals, families, and common law unions.
- [Perspectives on Labour and Income](#) published a comprehensive report on housing and income issues in 2002. The report indicated, among other things, that 20% of tenants spend 40% or more of their income on housing and; and that one in four tenants, lone-parent families, and lowest-income households were housed below the norms, yet they spent approximately one-third of their income on housing.
- Michael Shapcott presents an analysis of support for affordable housing by the Ontario government in "[Fourteen Cents a Day Won't Build Many Homes.](#)" "Study author Michael Shapcott says the Liberal government is spending \$669-million on affordable housing compared with \$1.4-billion that Ontario spent in 2000," according to the Globe and Mail. Shapcott indicates that this spending is only a fraction of what was promised by the Liberal government in its policy book.
- The Government of Ontario has a [guide](#) to help people who are looking for affordable housing, including information about pilot projects offered under the new Canada-Ontario Affordable Housing Program Agreement.
- The City of Toronto has produced dozens of reports on homelessness over the last ten years, and produces a [Housing and Homeless Report Card](#) to track changes. The [Golden Report](#), released in 1999, was a dramatic and far reaching investigation of in the impact of homelessness on the health and well being of people.
- [Canada Mortgage and Housing Corporation](#) is the federal agency responsible for housing. They provide grants and loans, forgivable loans or non-repayable contributions to fund repairs, renovations, accessibility modifications, the creation of low-income rental units, and home adaptations. Programs are available for low-income households, seniors, and persons with disabilities.
- The [Cooperative Housing Association of Eastern Ontario](#) is a support group for housing cooperatives, providing information on how to set up co-operatives, and support for existing co-operatives.
- The [Centre for Urban and Community Studies](#) at the University of Toronto publishes policy papers on local, national, and international housing issues, with a special interest in inclusive communities.
- [Canadian Social Research](#) has links to dozens of studies and policy papers on housing and homelessness.

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Learn from them

- Friends of the Earth and the Ontario Association of Food Banks have teamed up with the Ontario Government, Enbridge Gas Distribution and Union Gas to create a program to help reduce the cost of housing. The [Energy GreenBox](#) contains rolls of insulating foam to seal doors and windows, draft excluders for power outlets, two compact fluorescent light bulbs (CFL) along with energy conservation tips and an offer for a complimentary membership in Friends of the Earth. The entire kit, assembled by Booth Industries and Community Living Toronto, comes in a sturdy reusable box.
- The [YMCA of Toronto](#) has a comprehensive set of resources dealing with women and housing issues, including policy papers and advocacy positions.
- The Advocacy Centre for the Tenants Ontario formed the [Housing and Homeless Network of Ontario](#) as a result of a province wide conference on housing and homelessness in 2002. The [Advocacy Centre](#) works with tenant groups, legal clinics and other groups and individuals concerned about housing issues. They do this through test case litigation, advocacy for law reform, housing policy work, organizing, and community education.
- The [Psychiatric Patient Advocacy Office](#) of Ontario has a useful “infoguide” on the Tenant Protection Act that breaks down the Act in plain language, with further information and links to Legal Aid Clinics and Patient Advocates.
- The [Ontario Non-Profit Housing Association](#) has a set of position papers on social housing issues, including their 2007 Ontario Budget submission. They also have information about [local co-ordinated access groups](#) to help tenants with access to housing.
- [Parkdale Community Legal Services](#) is one of many legal service clinics in Ontario with a special focus on tenants and homelessness. They cite statistics from the Community Partners Program of the Ministry of Municipal Affairs and Housing in 1999 that show how that it is much more expensive for society to “keep” people in the state of homelessness than it is to provide homes.
- The [John Howard Society of Durham Region](#) provides tenant advocacy assistance to their clients if they are unable to find housing, have difficulties as tenants, or face eviction.
- Michael Shapcott has a housing and homeless blog at the [Wellesley Institute](#).

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What you can do in your community

The Federal, Provincial, and Local Governments, along with non-governmental organizations, play roles in ensuring that everyone has affordable housing. **Primer to Action** will get you started.

	Federal	Provincial	Local	Organizations
What role does each play in ensuring that you and everyone in society have affordable housing?	<u>Canada-Ontario Affordable Housing Program</u> works on all three levels of government	<u>Canada-Ontario Affordable Housing Program</u> works on all three levels of government	<u>Canada-Ontario Affordable Housing Program</u> works on all three levels of government	Church groups play a large role in advocacy for affordable housing, e. g., <u>Women’s Inter-Church Council of Canada</u>
Who needs to be influenced to make sure you and everyone in society have affordable housing?	<u>Senators and your Member of Parliament</u>	<u>Members of the Ontario Legislature, with links to their political parties and the Standing Committee on Social Policy</u>	<u>Municipal Councilors and Committee on Social Services, e. g. Toronto</u>	Canadian Advocacy Groups, e. g. <u>Centre for Social Justice</u>
Who can be your allies in reaching those you need to influence?	<u>National Anti-Poverty Organization</u> <u>Canadian Mental Health Association</u>	<u>Ontario Non-Profit Housing Association</u>	<u>Toronto Disaster Relief Committee</u>	Local affiliates of Canadian Advocacy Groups, e. g. <u>Toronto Branch of CMHA</u>
What actions can you take to help ensure that you and everyone in society have affordable housing?	Write to Senators and your Member of Parliament to let them know you support investment in affordable housing	Write to your Member of the Legislature to let him (her) know that you support investment in affordable housing	Talk to your local councilor about support for affordable housing.	Let Service Clubs and Community Organizations in your area know that you support their involvement in affordable housing

Primer to Action: Social Determinants of Health

Food

We need [healthful, nutritious food](#) to lead productive lives and reach our full potential. This is true of everyone, and particularly true of children and youth. Access to healthful, nutritious food is often out of the reach of many people.

Food insecurity is almost exclusively caused by lack of money, which is often due to a large percentage of family income going to housing. The [average price](#) for a home in Ontario grew from \$256,190 in November 2005 to \$280,816 in November 2006, a 9.6% increase, way above the rate of inflation. In Toronto, the average price was \$340,793 in January 2007, a 10% increase. The sharply rising cost of housing has hurt wage earners, pensioners, and people on fixed incomes, leaving less money available for food.

As housing prices rose and governments retreated from funding social housing over the last twenty years, Food Banks began to spread. Although Food Banks fill an immediate need among families across the province, their boards and administrators are the [keenest advocates for adequate income solutions to the food security crisis](#).

Along with food insecurity, changes in lifestyles have dramatically changed eating habits among the population. More women work outside the home, we all spend more time working and commuting, and advertisers aggressively market fast foods. These changes may explain the rapid increase in prevalence of obesity, diabetes and asthma, both among the general population and, even more concerning, among children. The potential cost of early onset of chronic diseases has created a lot of interest in school-based nutrition and physical activity programs.

The role of adequate nutrition in the ability of children to do well at school, both academically and socially, has led to the creation of school-based nutrition programs. Over the last fifteen years, some clear principles have emerged: school-based nutrition programs should be universal, non-stigmatizing, and educative. In best practice, school-based nutrition programs are the means by which entire communities experience raised awareness of good nutrition and the extent of its impact.

Awareness of the importance of good nutrition for children led to concern about the quality of food available to them in the schools. The fast food industry had moved into school by subsidizing budgets in exchange for purchasing exclusive rights to in-school sales. Recently, the Ontario government banned sugar-based drinks and candy from food vending machines in the schools. The government is now involved in all aspects of in-school nutrition, by providing funds and requiring contractors to adhere to strict nutrition guidelines and pricing structures that support healthy food choices. Some school boards are actively investing in and monitoring quality of in-school nutrition programs of all sorts through active partnerships with schools, health unit dietitians, and engaged community members.

There is growing interest in the content and labeling of food products, animated by CBC journalist and breast cancer survivor Wendy Mesley and others. The Government of Canada is now moving on legislation to review and extend its ban on toxic/carcinogenic elements in everyday products, including but not limited to food products.

Nutrition advocates are encouraging the purchase of local produce, farmers' markets, community gardens, grow-a-row campaigns and other take-back-the-earth strategies.

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Find out more

- [Canada's Food Guide](#) has helped generations of Canadians discover healthful, nutritious food. The Guide was recently revised through extensive consultations across the country. It is evidence-based, open, and in line with public health priorities. A committee of twelve experts advised the revision process, with a variety of perspectives, including public health, health policy, nutrition education, disease prevention, industry and communication. The Canadian Disease Prevention Alliance strongly supports the Food Guide's emphasis on eating vegetables and fruit, limiting consumption of saturated and trans fats, and the importance of getting regular physical activity.
- The [Ontario Association of Food Banks](#) has a series of in-depth resources to help individuals and advocates navigate the issue of food security. This includes fact sheets, statistics, research papers, and the annual Ontario Hunger Report. They are strong advocates for income solutions to the problem of food insecurity.
- The [Toronto Food Policy Council](#) has produced 15 discussion papers on food security issues, as well as providing advocacy from a number of different perspectives. The Council is citizen-directed and staffed by the City of Toronto.
- The [Ontario Government](#) is building a Health Schools Strategy, with nutrition playing a key part, along with physical activity, bullying prevention, etc. supports nutrition programs in schools across the province.
- According to the [Canadian Food Inspection Agency](#), nutrition labelling became mandatory for most prepackaged foods on December 12, 2005. Smaller businesses have until December 12, 2007, to make the information available. Canada's nutrition labelling regulations have been designed to provide a system for conveying information about the nutrient content of food in a standardized format, which allows for comparison among foods at the point of purchase. Clear, uniform information should support consumers in making informed food choices toward healthy eating goals.
- [Farmers Market Ontario](#) is an organization that provides comprehensive information about the value, use, and location of farmers' markets in Ontario. They provide current news, information about which fruits and vegetables are in season, and a timely report on food safety.
- [Plant a Row, Grow a Row](#) has spread across Canada, with its simple, compelling method of sharing food with others.
- [Insight on Cancer](#), a publication featuring news and information on nutrition and cancer prevention, has comprehensive information on Ontario's food security and cancer prevention in Vol. 2, Supp. 2 (April 2005).

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Learn from them

- [Child Nutrition Programs: An Evaluation of Best Practices](#) consists of a quantitative evaluation of breakfast and morning snack programs in elementary schools and a research study that explores the attitudes towards Child Nutrition Programs among participants, parents, volunteers, educators, and program coordinators. The report is a rather large PDF file.
- [Trillium Lakelands School Board](#) is one of the many school boards in Ontario that supports school based nutrition programs.
- The [Co\\$t of Health Eating](#) is a convenient guide produced by the Haliburton, Kawartha, Pine Ridge District Health Unit, outlining the costs of a nutritious food basket, and indicating advocacy strategies.
- [The Eat Smart School Cafeteria Program](#), in operation across Ontario, offers: 1) A variety of healthier food choices, on the menu and by request; 2) Exceptional standards in food safety including kitchen staff certified in safe food handling by your local Public Health department. [A coalition of Health Units in central Ontario](#) is negotiating with the major cafeteria service organization and the school board to discuss product placement and prices as well as a promotional campaign to encourage kids to make the healthier food choice.

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What you can do in your community

The Federal, Provincial, and Local Governments, along with non-governmental organizations, play roles in ensuring that everyone has adequate, nutritious food. **Primer to Action** will get you started.

	Federal	Provincial	Local	Organizations
What role does each play in ensuring that you and everyone in society have adequate, nutritious food?	<p>The Canada Food Guide helps make food choices</p> <p>The Canada Food Inspection Agency ensures health foods in the marketplace</p>	<p>The Ontario Ministry of Food, Agriculture, and Rural Affairs point you to resources in your community</p>	<p>Local School Boards support nutrition programs in the schools, e. g. Trillium Lakeshore</p> <p>Municipal Councils provide assistance to food security programs e. g. , City of Toronto</p>	<p>Toronto Food Policy Council is an example of municipal advocacy for food security</p>
Who needs to be influenced to make sure you and everyone in society have adequate, nutritious food?	<p>Food Processors of Canada lobbies government for the industry</p> <p>Senators and your Member of Parliament</p>	<p>Alliance of Ontario Food Processors lobbies the government for the industry</p> <p>Members of the Ontario Legislature, with links to their political parties and the Standing Committee on Social Policy</p>	<p>Association of Municipalities of Ontario takes policy positions on issues</p> <p>Municipalities create social policy frameworks to address poverty issues, including food security, e. g., City of London</p>	<p>Churches take advocacy positions on food security issues, e. g. United Church of Canada</p> <p>Foundations create measures of health and well being, e. g., Atkinson Foundation</p>
Who can be your allies in reaching those you need to influence?	<p>Canadian Association of Food Banks</p>	<p>Ontario Association of Food Banks</p>	<p>Local Health Units facilitate coalitions, e. g., Thunder Bay</p>	<p>Lifestyle writers at newspapers</p>

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What you can do in your community (Continued)

	Federal	Provincial	Local	Organizations
What actions can you take to help ensure that you and everyone in society have adequate nutritious food?	Support national coalitions by signing petitions, giving financial support, e. g., Campaign 2000	Support policy positions of the Ontario Public Health Association and the Association of Local Public Health Agencies	Volunteer at your local food bank, and support their advocacy	Contact your local newspaper about writing of food security issues Write letters to the editor

Primer to Action: Social Determinants of Health

Inclusion

Belonging to a family, a community, a society is one of the most important things in life. It makes us feel good. It makes us healthy. It makes us want to reach out to others. Belonging makes our communities healthy, too. We need to promote the feeling and reality of belonging.

The importance of social and economic inclusion as a way of thinking and planning emerged in the European Union and Britain over the last decade. The Laidlaw Foundation and Health Canada, among others, began to commission papers and animate activity to look at social and economic inclusion in the context of Canada.

Although there are many similarities between Canada and Western Europe, there are also many differences. Canada has an important population of First Nations peoples, bi-lingual and bi-cultural origins, and a multicultural approach to large-scale immigration. How would this way of social and economic inclusion work in Canada?

The [Laidlaw Foundation papers](#) stimulated interest in adapting social and economic inclusion in Canada, leading to two significant initiatives: [Closing the Distance](#), a project of the Social Planning Network of Ontario; and [Inclusive Cities Canada](#), a project of the Federation of Canadian Municipalities. At the same time, Health Canada (now the Public Health Agency of Canada), Atlantic Region was moving inclusion towards health promotion field with [An Inclusion Lens](#) by Malcolm Shookner.

In 2003, Health Canada, Ontario and Nunavut Region, supported a series of projects to move social and economic inclusion directly into the health promotion field, and establish a deep connection to the social determinants of health.

[Count Me In!](#), a project of Ontario Prevention Clearinghouse, created a definition of inclusion that moved the concept directly into health promotion. The project worked with a provincial advisory group of health and social activists and planners and three community sites to field test concepts, language, and a framework for inclusion. The project reflected urban, rural, and diverse populations, as well as cultural, First Nations, and official-language interests. The definition:

A society where everyone belongs creates both the feeling and the reality of belonging and helps each of us reach our full potential.

The feeling of belonging comes through caring, cooperation, and trust. We build the feeling of belonging together.

The reality of belonging comes through equity and fairness, social and economic justice, and cultural as well as spiritual respect. We build the reality of belonging together by engaging our society to ensure it.

A coalition of health, social, and community organizations has formed around the definition to create the [Ontario Inclusion Learning Network](#), a vehicle for greater understanding about the practical applications of inclusive approaches to working with the social streams to health.

Inclusion (Continued)

The simplicity of the definition also lead to an Inclusion Research project of the [Ontario Women's Health Network](#) that worked with marginalized women to investigate their understanding of stroke and stroke prevention. A further project is in development with Cancer Care Ontario. People at risk for chronic disease are often on the margins. Inclusion, with a focus on the feeling and reality of belonging, brings them in to help plan more effective paths to prevention.

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Find out more

- [The Laidlaw papers](#) explore social and economic inclusion from a number of different angles, including issues of importance to Aboriginal Peoples, people with disabilities, people living in poverty, anti-racism applications, early childhood development, and children's rights, among others. A roster of leading figures in sociology, social work, early childhood development, settlement, and anti-racism wrote them.
- [An Inclusion Lens](#) provides background about social and economic inclusion, as well as including useful charts, sets of questions, and workbook papers to help individuals and communities navigate this useful way of thinking. The materials were field-tested in Atlantic Canada and circulated to community groups across the region for evaluation.
- [Count Me In!](#) features background papers, a workbook on inclusion and health, posters that relate inclusion to the social streams to health, and a report on wide ranging consultation with health promoters across Ontario. The papers explore the traditional approach to social and economic inclusion and factors that would move the concept to becoming a useful tool for health promotion in relation to the SDOH. The workbook is simple and practical, with an emphasis on SDOH. The posters are colourful and clear, written in plain language. The report describes the results of community forums with health promoters across Ontario.
- The [Ontario Inclusion Learning Network](#) points you towards resources appropriate for many of the SDOH on the resource page, including diversity management, community engagement, social planning, community living approaches, and a toolkit for inclusive organizations developed by the Ontario Healthy Communities Coalition.
- [Social Inclusion Health Indicators: A Framework for Addressing the Social Determinants of Health](#) is a paper written for Inclusive Cities Canada by Edmonton Health Promoter, Philip O'Hara. The paper sets out indicators of inclusion and suggests strategies for achieving the targets laid out in the indicators.

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Learn from them

- The [Ontario Inclusion Learning Network](#) points you to best practices and models by Community Living Ontario, Ontario Women's Health Network, Social Planning Network of Ontario, Ontario Healthy Communities Coalition, People for Education, and the Ontario Prevention Clearinghouse.
- The [Ontario Women's Health Network](#) is a pioneer in using inclusion strategies to conduct research among marginalized women, with a focus on chronic disease. Their innovative stroke project produced a comprehensive health promotion strategy, called Keys to Health.
- [Community Living Ontario](#) is a leading edge agency in inclusion, with a special focus on building inclusive communities from a base in the schools. They produce easy to use resource materials to initiate work in schools and communities.
- [Closing the Distance](#) is an initiative of the Social Planning Network of Ontario, developing strategies to build inclusive communities in several locations across Ontario.
- [Sudbury: A Community Where All Kids Belong](#) gave voice to children and youth in the diverse communities of the city, drawing them into social planning. The project developed a colourful brochure of children's images of an inclusive Sudbury, a ten-minute videotape, and conference presentations including the participation from school officials and even the Mayor of Sudbury.
- The [Asset Mapping Project of the Toronto Christian Resource Centre](#) has become an innovator in finding, training, and supporting people on the margins to become "inclusion researchers" and to facilitate the process of changing health and social policy.
- The Ontario Healthy Communities Coalition developed a resource package to support diversity and improve inclusion within small to mid-sized, volunteer-based, not-for-profit organizations. [Inclusive Community Organizations: A Tool Kit](#) provided concrete examples to get you started, an assessment tool to check policies, procedures, and programs, and a step-by-step process of developing an action plan.

Primer to Action: Social Determinants of Health

What you can do in your community

The Federal, Provincial, and Local Governments, along with non-governmental organizations, play roles in ensuring that we build inclusive communities in an inclusive society. **Primer to Action** will get you started.

	Federal	Provincial	Local	Organizations
What role does each play in ensuring that everyone is included?	<p>Canadian Charter of Rights and Freedoms creates a national framework</p> <p>Canadian Multiculturalism Act promotes inclusiveness</p>	<p>Ontario Human Rights Code creates a provincial framework</p>	<p>Municipal Councils advocate for inclusive communities, e. g. Sudbury's Children First Charter</p>	<p>Laidlaw Foundation produces papers and provides grants to promote inclusion</p>
Who needs to be influenced to ensure that everyone is included?	<p>Senators and your Member of Parliament</p>	<p>Members of the Ontario Legislature</p>	<p>Municipal councilors, their staff, and officials</p>	<p>Professional associations in the health, social, and education sector, e. g. Health Promotion Ontario</p>
Who can be your allies in reaching those you need to influence?	<p>National Associations that work on inclusion issues, e. g., Inclusive Cities Canada</p>	<p>Provincial Coalitions that work on inclusion issues, e. g., Ontario Inclusion Learning Network</p>	<p>Local coalitions focus on governments and boards of education, e. g. Closing the Distance</p>	<p>Churches, community groups, cultural organizations play a role in advocating for inclusion, e. g. Muslim Educational Network</p>
What actions can you take to help ensure that everyone is included?	<p>Let Senators and your MP know you support the framework for inclusion in the Charter and the Multiculturalism Act</p>	<p>Let your know that you support the work of the Ontario Human Right Commission</p>	<p>Talk to your Councilors about the importance of inclusive cities and towns</p>	<p>Write letters to the Editor of the two National Newspapers</p>