

# Social Determinants of Health

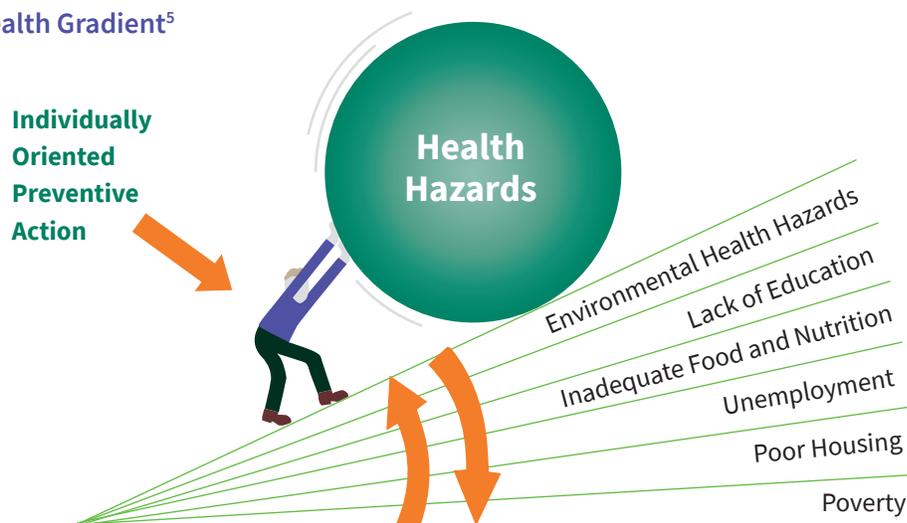
Population health is about measuring health outcomes and recognizing the determinants that impact health.

## The Social Determinants of Health (SDH)

The SDH are the non-medical factors that influence health outcomes. They are the conditions in the environments where people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, and political systems<sup>1</sup>.

It is important to note that the SDH affect everyone. They are not things that a person “has” or “does not have” and they are not positive or negative. SDH shape health for better or worse. For example, higher income is correlated with better health, and lower income with worse health<sup>2</sup>.

## The Health Gradient<sup>5</sup>



Source: *Making Partners: Intersectional Action for Health* 1988 Proceedings and outcome of a WHO Joint Working Group on Intersectional Action for Health, the Netherlands.

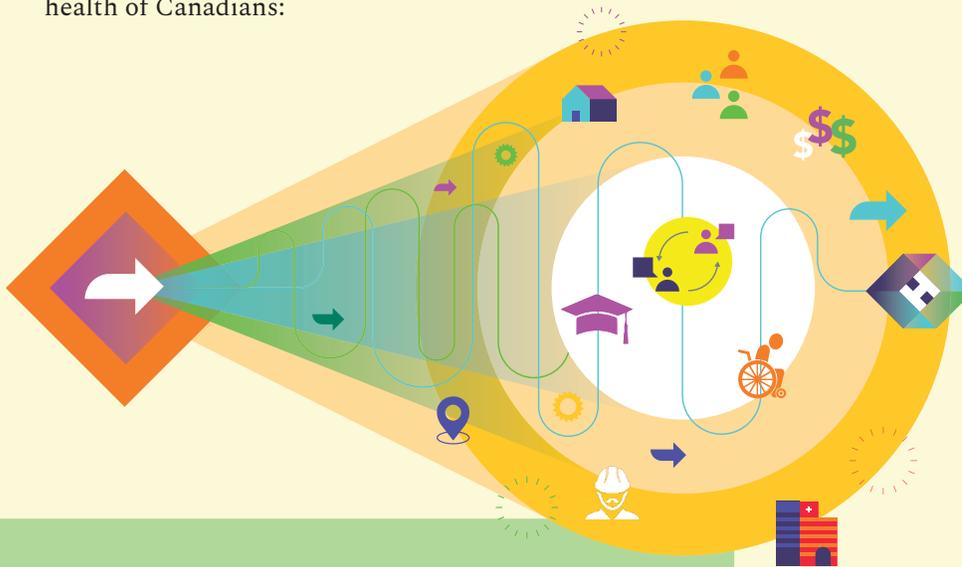
This **Population Health** series explores the concept of population health and the role a hospital can play in producing population health. The series also offers local and international examples of health systems that have reached beyond their walls to improve the health of their communities.

## A social gradient to health

It is well known that there is a social gradient to health, meaning that people in lower socioeconomic positions are more likely to experience chronic ill health and die earlier in comparison to those who are in high socioeconomic groups. The better the conditions in which you are born, grow, work, live, and age, the more likely you are to experience better health and a longer life<sup>3</sup>.

In December 2019, an IC/ES report showed that people who live in Ontario’s poorest neighbourhoods are more likely to suffer avoidable deaths than those who live in the richest neighbourhoods. Between 1993-2014, there were 124,000 avoidable deaths in the most materially deprived areas in comparison to 66,000 avoidable deaths in the most well-off neighbourhoods<sup>4</sup>.

Social Determinants of Health: The Canadian Facts considers 17 SDH to be the primary factors that shape the health of Canadians:



1. Income and Income Distribution
2. Education
3. Unemployment and Job Security
4. Employment and Working Conditions
5. Early Child Development
6. Food Insecurity
7. Housing
8. Social Exclusion
9. Social Safety Net
10. Health Services
11. Geography
12. Disability
13. Indigenous Ancestry
14. Gender
15. Immigration
16. Race
17. Globalization

## Social Determinants of Health: An Example

“Why is Jason in the hospital?  
 Because he has a bad infection in his leg.  
 But why does he have an infection?  
 Because he has a cut on his leg and it got infected.  
 But why does he have a cut on his leg?  
 Because he was playing in the junkyard next to his apartment building and there was some sharp, jagged steel there that he fell on.  
 But why was he playing in a junkyard?  
 Because this neighbourhood is kind of run down. A lot of kids play there and there is no one to supervise them.  
 But why does he live in that neighbourhood?  
 Because his parents can’t afford a nicer place to live.  
 But why can’t his parents afford a nicer place to live?  
 Because his Dad is unemployed and his Mom is sick  
 But why is his Dad unemployed?  
 Because he doesn’t have much education and he can’t find a job  
 But why...?”<sup>6</sup>

This seemingly simple story reveals the complex set of factors that determine the level of a person’s health.

## Did You Know?

- The Lalonde Report, *A New Perspective on the Health of Canadians*, written in 1974 by Marc Lalonde, Canada’s then Minister of National Health and Welfare, changed the way the world thinks about health<sup>7</sup>. It emphasized the need to look beyond the traditional health care system in order to improve the health of the public. Since this report was published there has been increasing evidence from around the world that spending more on health care will not lead to substantial improvements in population health. Instead, improvements in the SDH are crucial for a healthy population.
- In 2012, *Canada*, along with other WHO Member States, endorsed the *Rio Political Declaration on Social Determinants of Health*, pledging to take action to promote health equity by improving SDH.

## Additional Resources

The information above provides a high-level overview of the SDH. The following resources may be helpful for exploring these topics in more depth.

- The [Social Determinants of Health: The Canadian Facts- 2nd edition \(2020\)](#) offers an introduction to the SDH and what Canadians can do to improve the quality of the SDH.
- [Think Upstream](#): A newsroom for the SDH, a project of the Canadian Centre for Policy Alternatives (CCPA).
- The [Upstream Lab](#) develops and evaluates interventions to address social factors that impact health in collaboration with patients, health care workers, community organizations and policymakers. The lab also trains people to become “upstream” change agents.
- The Institute for Healthcare Improvement (IHI) asks whether it is possible to achieve the Triple Aim without addressing the SDH. Rishi Manchanda, MD, MPH, Founder and CEO of [HealthBegins](#) answers the question in this [four-minute video](#).
- The Canadian Council on Social Determinants of Health produced a communication tool to assist with developing effective messages related to the SDH: [Communicating the Social Determinants of Health: Guidelines for Common Messaging](#) (2013).
- The University of Toronto’s Dalla Lana School of Public Health hosted a four-part [Virtual Symposium on Population Health’s Past, Present, and Future](#).
- The Ontario Hospital Association’s resource page on the [SDH as it relates to COVID-19](#).
- Book: [The Health Gap: The Challenge of an Unequal World](#) by Michael Marmot (2015)

## References

- 1 World Health Organization (WHO) (n.d). *Social determinants of health*. [https://www.who.int/health-topics/social-determinants-of-health#tab=tab\\_1](https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1)
- 2 Health Quality Ontario (2016). *Income and health: Opportunities to achieve health equity in Ontario*. <http://www.hqontario.ca/portals/0/documents/system-performance/health-equity-report-en.pdf>
- 3 Marmot, M. (2015). *The health gap: The challenge of an unequal world*. Bloomsbury Publishing, USA.
- 4 Zygmunt, A., Tanuseputro, P., James, P., Lima, I., Tuna, M. & Kendall, C.E. (2020). Neighbourhood-level marginalization and avoidable mortality in Ontario, Canada: a population-based study. *Can J Public Health*, 111, 169-181
- 5 Taket, A.R. (1990). *Making partners: Intersectoral action for health: Proceedings and outcome of a joint working group on intersectoral action for health, Utrecht, the Netherlands, 30 November- 2 December 1988*. World Health Organization, Regional Office for Europe. <https://www.worldcat.org/title/making-partners-intersectoral-action-for-health-proceedings-and-outcome-of-a-joint-working-group-on-intersectoral-action-for-health-utrecht-the-netherlands-30-november-2-december-1988/oclc/28221215>
- 6 Federal Provincial and Territorial Advisory Committee on Population Health (1999). *Toward a healthy future: second report on the health of Canadians*. Ottawa, ON: Minister of Public Works and Government Services Canada. <https://nccdh.ca/resources/entry/toward-a-healthy-future>
- 7 National Collaborating Centre for Determinants of Health (2020). *Resource library: A new perspective on the health of Canadians*. <https://nccdh.ca/resources/entry/new-perspective-on-the-health-of-canadians>