

Introduction to the Social Determinants of Health (SDOHs)

What are the SDOHs?

- The social and economic factors which influence the health of individuals and the distribution of health in our populations; the living and working conditions which shape health outcomes
- They include income and social status, social support networks, education, employment/working conditions, social environments, physical environments, personal health practices and coping skills, healthy child development, gender, race, and culture
- They influence health not only at the individual level but also at the population level, and are the main drivers behind health inequities (the modifiable differences in health that exist between the best-off and worst-off individuals in our communities)
- According to the World Health Organization (see Figure 1 below), macroeconomic and social policies are instrumental in shaping the SDOHs and thus have a large impact on health equity
- Effective action on the SDOH is typically multi-sectoral in nature and addresses public policies affecting the factors below

Income

- May be the most important SDOH as income shapes living conditions and therefore determines the quality of other SDOHs such as food security and housing
- Low income can predispose to material and social deprivation, further worsening food insecurity, poor housing conditions, and/or lack of social support network

Education

- Deeply tied to other SDOHs, such as income, given that higher education typically results in higher income, better employment security, and/or better working conditions
- Education also enhances individual literacy of how one can promote their own health through their own actions

Employment

- Unemployment can lead to material and social deprivation, psychological stress, lack of income, lack of sense of identity, lack of structure/daily routine, lack of social connectedness, lack of self-esteem and increased anxiety

Early Childhood Development

- Early experiences have long lasting effects on health; especially material and social deprivation which are shaped by economic and social resources available to parents

Food Security

- Food insecurity contributes to consuming fewer servings of fruits, vegetables, milk and vitamins and is an excellent predictor of health status
- Dietary deficiencies and childhood malnutrition can increase likelihood of chronic disease and can have long term effects on psychological and physiological development

Housing

- Unsafe, unaffordable, or insecure housing, and conditions of overcrowding, mold, lead, inadequate heating, inadequate ventilation, or dampness can increase risk of many health problems
- High housing costs reduce resources available for other social determinants of health, and low paying or precarious work make it more difficult to afford satisfactory housing conditions

Social Exclusion

- Marginalization and limited access to social, cultural and economic resources can result in living conditions and experiences that negatively impact health
- Individuals experiencing social exclusion are more likely to be unemployed or earn lower wages, have less access to health and social services, have less access to means of furthering their education, and face increased risk of chronic disease

Social Safety Net

- Public policies (i.e. macroeconomic and social policies), programs and supports can protect individuals by mitigating economic insecurity or psychological stress that arise during life changes or events which effect health

Gender

- Women typically carry more responsibility for raising children and taking care of housework, are less likely to be employed full time and receive benefits, and are more likely to be employed in lower paying jobs and face more discrimination

Race

- Racialized Canadians experience a range of adverse living circumstances that impact their health that result from 3 levels of racism: internalized, personally-mediated and institutionalized (societal structures codify practices, laws and governmental inaction)
- Canadians of color generally experience higher unemployment rates and lower income; and recent non-European immigrants are twice as likely to report deterioration in health

Indigenous Status

- The history of colonization has resulted in adverse health outcomes for Indigenous individuals; rates of food insecurity, crowded housing conditions, chronic disease and suicide are all higher among Indigenous populations
- Average income and average education level for Indigenous men and women living both on and off reserve are well below those of non-Indigenous men and women

Disability Status

- Living conditions for persons with disabilities are greatly impacted by low employment rates and Canadian benefit levels and supports for integration that are lower than the OECD averages

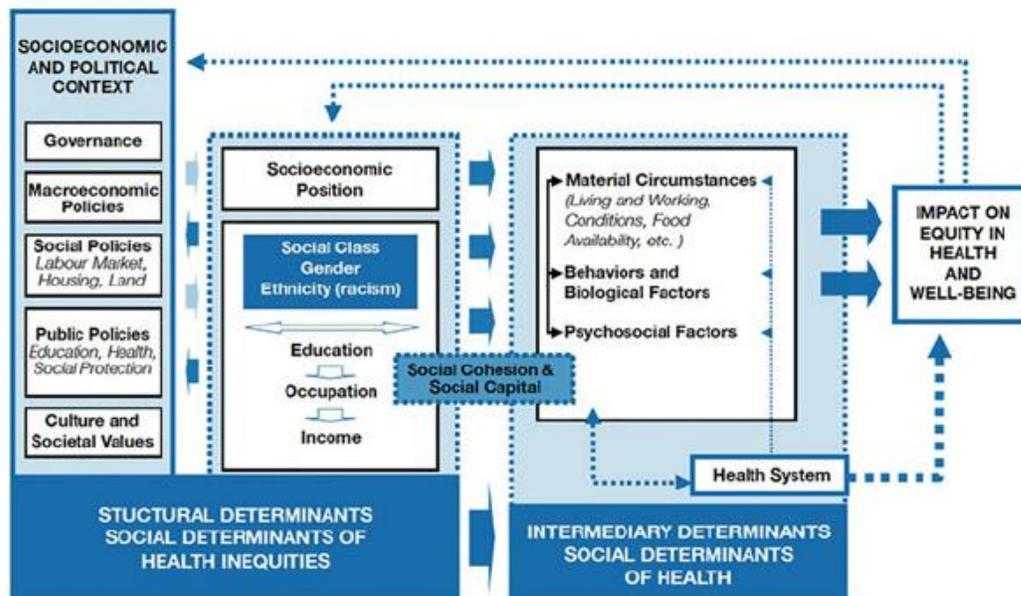


Figure 1: The WHO's conceptual framework on the SDOHs. The figure illustrates the influence of the structural determinants of health on the SDOHs, e.g., governance, social policies, public policies, etc., shape access to those SDOHs listed above (and more.)

References 1. Mikkonen, J., & Raphael, D. (2010). *Social Determinants of Health: The Canadian Facts*. Toronto: York University School of Health Policy and Management. 2. Government of Canada. *Social determinants of health and health inequalities*. Retrieved from: <https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html> Updated: 2018-09-25. 3. Solar O, Irwin A. A conceptual framework for action on the social determinants of health. *Social Determinants of Health Discussion Paper 2 (Policy and Practice)*.