

## OPHA's Pre-Budget Presentation to the Minister of Finance

**January 31, 2020** 



Good evening Minster. Thank you for this opportunity. My name is Phat Ha. I am a volunteer with the Ontario Public Health Association and Co-chair of its Alcohol Workgroup.

OPHA is pleased to offer three cost-effective strategies to promote health, contain healthcare costs and reduce hallway healthcare.

## First, we urge your government to invest in a provincial alcohol strategy.

Since 2016, a number of provincial changes have increased access to alcohol, reduced its cost, and loosened marketing guidelines. These changes are expected to increase alcohol use and related harms and healthcare costs. Recent studies have shown an 18% increase in alcohol-related emergency room visits in Ontario between 2014 and 2017. [1] In 2014, Ontario spent \$2.8 billion on alcohol-related healthcare and criminal justice issues [2]; these costs are likely higher today given the increase in ER visits.

The evidence is clear that alcohol-related harms increase with expanded alcohol access. Therefore, OPHA does not support further expansion, for example, to convenience stores.

Recognizing these harms, the Ontario Chamber of Commerce has called on the Province to partner with organizations like OPHA to develop comprehensive public education campaigns. A provincial alcohol strategy could complement public education with harm-reduction strategies, enforcement of regulations and marketing guidelines, and monitoring of alcohol-related harms [3].

Secondly, we call on your government to invest in a chronic disease prevention strategy as recommended by Ontario's Auditor General and recently by the Standing Committee on Public Accounts. [4]

Chronic diseases, such as cancer, cardiovascular disease and diabetes are the leading causes of death and disability in Ontario. Their cost to the province is extensive (about \$10.5 billion a year [5]) and with a growing and aging population, this cost will likely increase. However, chronic diseases are highly preventable and now is the time to act.

Strategies that target risk factors such as tobacco use, unhealthy eating, physical inactivity, and alcohol use, have the greatest potential to reduce the burden of chronic diseases and their costs. Some groups are more affected by these risks than others, for example, Indigenous populations and those with lower socio-economic status. By investing in chronic disease prevention, your government can help reduce these types of health inequities and the related healthcare costs.



The reduction of risk factors, through programs such as Smoke-Free Ontario, has saved the province close to \$5 billion in healthcare costs [6]. Likewise, an US-based study found that every \$1 invested to promote healthy eating and physical activity, saved an average of \$6 in the treatment of chronic disease, later in life [7]. The evidence is clear that investing in chronic disease prevention can help end hallway health care in Ontario.

OPHA urges your government to safeguard investments in health promotion strategies and public health agency budgets and to embed prevention across the healthcare system.

Lastly, we call on your government to maintain the current level of funding for public health agencies, the existing provincial-municipal cost-shared funding formula, and make strategic investments in disease prevention.

Ontario is facing a number of public health challenges which may limit its future prosperity: viruses can quickly spread across the world, vaccine preventable outbreaks are occurring, and the opioid crisis continues. At the same time, provincial funding for public health is decreasing and prevention is undervalued. For instance, in the last Ontario budget, \$58B was allocated for healthcare, of which only \$1.2B was for population and public health, or about 2% [8]. In addition, funding to public health agencies has not kept up with inflation, thus, potentially affecting frontline services such as injury prevention, food safety, and work on substance use and school health.

In conclusion, it's commonly said that an ounce of prevention is worth a pound of cure. For a real world example, years of investment in public health has allowed our province to quickly respond to the current coronavirus threat. Although, this crisis is in an early phase, we hope that the return on investment is clear. Investments in public health save lives, reduce healthcare costs, and help ensure that Ontario will continue to prosper. Our members and partners have cost-effective ideas to offer and are ready to assist.

Thank you for considering our recommendations.

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## **About OPHA**

Created in 1949, the Ontario Public Health Association (OPHA) is a non-partisan, non-profit organization that brings together a broad spectrum of groups and individuals concerned about people's health. OPHA's members come from various backgrounds and sectors - from the various disciplines in public health, health care, academic, non-profit to the private sector. They are united by OPHA's mission of providing leadership on issues affecting the public's health and strengthening the impact of people, who are active in public and community health throughout Ontario. This mission is achieved through professional development, information and analysis on issues effecting community and public health, access to multidisciplinary networks, advocacy on health public policy and the provision of expertise and consultation.

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