



Backgrounder: The Socioeconomic Environment and Health

Toward a Healthy Future: Second Report on the Health of Canadians summarizes the most current information we have on the health of Canadians and the factors that influence or “determine” health. Income, income distribution, education and literacy are key factors in the socioeconomic environment that have a major effect on health.

How Does the Socioeconomic Environment Influence Health?

Numerous studies from around the world have shown that social and economic conditions (often called the socioeconomic environment) affect both individual and collective health. *Toward a Healthy Future* looks at a number of key factors in the socioeconomic environment — employment and unemployment, working conditions, factors in the social environment (such as social support, civic participation and violence), income and income distribution, and education and literacy. The *Report* suggests that the last two factors need to be a priority for action in our long-term efforts to maintain and improve the health of the entire population.

Taking positive action to provide all Canadians with the opportunities they need to obtain a solid education and achieve adequate literacy skills is one of the best ways to foster healthy citizens and a prosperous, competitive nation.

In a free market economy, it is unrealistic to expect that all Canadians will have equal incomes. It is realistic, however, to expect that in a civil country like Canada, no individual or family should be without the basic prerequisites for life, such as personal safety, adequate food and affordable, safe housing. Studies from many industrialized countries show that reducing gaps in income is an important way to improve the health of the population.

Although the links between income, income distribution and health are clear, our understanding of how these links work is still evolving. A number of researchers have shown that small gaps in income in a population give individuals and groups of people a better sense of control, trust and well-being. Large income gaps contribute to increases in crime and violence, deteriorating health and education delivery systems, and other social problems. Thus, middle- and high-income Canadians, as well as low-income Canadians (those who live below the Statistics Canada low-income cut-off), stand to benefit from increases in income equality.

Highlights: Income, Income Distribution and Health

- ◆ Only 47% of Canadians in the lowest income bracket rate their health as very good or excellent, compared with 73% of Canadians in the highest income group.
- ◆ Low-income Canadians are more likely to die earlier and to suffer more illnesses than Canadians with higher incomes, regardless of age, sex, place of residence or cause of death.
- ◆ At each rung up the income ladder, Canadians have less sickness, longer life expectancies and improved health.

- ◆ In 1995, children, youth and unattached seniors (mostly women) were most likely to be living in low-income situations.
- ◆ In 1995, almost 50% of single-parent, mother-led families were in low-income situations. However, poverty was not restricted to single-parent families. From 1990 to 1995, the percentage of married couples with children in low-income situations rose from 9.5% to 13% (a total of almost 460,000 families).
- ◆ In 1996, many Canadians faced housing affordability problems. At this time, some 58% of lone-parent families and 59% of older Canadians living in one-person households were spending more than 30% of their income on housing. There is anecdotal evidence to suggest that an increasing number of Canadians are homeless, including families with children, Aboriginal people, adolescents and people with mental illness.
- ◆ Overall, inequalities in income distribution remained relatively constant in Canada between 1985 and 1995. This was largely due to the effect of redistributive taxes and transfer payments, which helped to offset a growing income gap between the 10% of Canadians with the lowest incomes and the 10% of Canadians with the highest incomes. Trends in income inequality beyond 1995 were not available at the time of writing; they are worth monitoring in future analyses.
- ◆ Changes in income distribution are closely related to changes in employment and wages. In recent years, some workers have been gaining higher income levels, most notably older workers and those who are highly skilled. Others, especially young workers and lower-paid, lower-skilled men have experienced declines.
- ◆ Although women are making progress in the workplace, they still earn less than men, mainly because they hold the majority of the lowest paying jobs.

Highlights: Education, Literacy and Health

Canadians with low literacy skills and low levels of education are more likely than Canadians with high levels of literacy and education to be unemployed and poor and, subsequently, to suffer poorer health and to die earlier.

- ◆ In 1994–95, about 17% of Canadians scored in the lowest prose literacy category. Another 26% achieved the second level, which means that they can read, but not well.
- ◆ In 1995, Canada had twice the proportion of citizens who lacked adequate literacy skills as Sweden, the number one ranked country on this index.
- ◆ People with higher levels of education have better access to healthy physical environments and are better able to prepare their children for school than people with low levels of education. They also tend to smoke less, to be more physically active and to have access to healthier foods.
- ◆ In 1996, more young Canadians (especially women) were gaining advanced degrees than ever before. However, there is a core of young people who leave high school early. Most often, they are young men who are having difficulty in school and have limited emotional and financial support for staying in school. Young women who leave school early tend to do so because of pregnancy or other family problems.
- ◆ Positive stimulation in the first five years of life improves one's ability to learn throughout the life cycle.
- ◆ Lifelong learning opportunities in the later years may be particularly important for maintaining mental health and learning capacity in old age.

The demand for workers with advanced knowledge and skills will continue to increase in the new millennium. Thus, addressing the challenges of literacy and education must be a priority for all parts of society: schools, workplaces, communities, governments and families. Because of the important links between education, literacy and health, the health sector needs to collaborate with other sectors to prevent teen pregnancies, to help young people stay in school, and to support learning opportunities in early childhood and later life, and literacy upgrading programs for people of all ages.

For More Information

Toward a Healthy Future: Second Report on the Health of Canadians was developed by the Federal, Provincial and Territorial Advisory Committee on Population Health in collaboration with Health Canada, Statistics Canada, the Canadian Institute for Health Information and the Centre for Health Promotion, University of Toronto. The full text can be found on the Health Canada Web site: <http://www.hc-sc.gc.ca>. Printed copies of the *Report* are available from Provincial and Territorial Ministries of Health or from:

Publications
Health Canada
Tunney's Pasture (AL 0900C2)
Ottawa, ON K1A 0K9
Telephone: (613) 954-5995
Fax: (613) 941-5366
E-mail: Info@www.hc-sc.gc.ca