# Engaging Civil Society in Advancing the Social Determinants of Health: What We Heard

One of the priorities of the Canadian Reference Group on Social Determinants of Health (CRG) is to engage civil society actors in raising awareness of the importance of addressing determinants of health and informing and monitoring public policy to address determinants of health.

The CRG will be developing a civil society engagement and communications plan. As it develops and unfolds, the group will optimize emerging opportunities to engage stakeholders at relevant public events. The following document summarizes what we have heard from the events that have taken place since the establishment of the Canadian Reference Group in September 2005, working backwards from most recent to the earliest.

| Integrated Chronic Disease Prevention:<br>Building It Together Conference |   |
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| Date  | November 6, 2006 – Ottawa, Ontario  |
| Discussion<br>Topic   | Engaging Civil Society to Support Canada's Response to the WHO Commission on Social Determinants of Health  |
| Panellists  | <ul> <li>Honorable Monique Bégin, Commissioner, WHO Commission on Social<br/>Determinants of Health.</li> <li>Ron Labonte, Canada Research Chair in Globalization/Health Equity, Institute of<br/>Population Health, University of Ottawa.</li> <li>Bernice Downey, Aboriginal health consultant and former Chief Executive Officer of<br/>the National Aboriginal Health Organization.</li> <li>Jim Ball, Director, Strategic Policy Directorate, Public Health Agency of Canada.</li> </ul> |

#### Background

The annual national conference of the Chronic Disease Prevention Alliance of Canada (CDPAC) is designed to enable participants to increase their knowledge of integrated approaches to issues surrounding integrated chronic disease prevention, focusing on community, education and health.

The Public Health Agency of Canada and the Canadian Reference Group to the WHO Commission on Social Determinants of Health hosted this symposium at the Conference. The objective was to share information on the work of the Commission and to invite feedback on considerations to inform development of the Reference Group's strategy to engage NGOs and community non-profit sector organizations in addressing the social determinants of health.

## What We Heard

### Suggestions for Government

- Develop clear measurable indicators of progress on reducing inequalities, establish a civil society watch dog group to monitor and report on progress.
- Speak using a unified voice/language with clear messages which can be adapted for use in different cultural contexts.
- In light of current trends of government downsizing and contracting out, there is a risk of NGO resentment toward government. There is a need to remain united if this cause is to be advanced.
- Consider addressing poverty in terms of families and do not focus exclusively on women, since the difference in poverty rates between men and women is marginal and among seniors most of the poor are men.
- Consider linking with school networks as they have a role to play in mitigating problems of poverty.

| • | Ensure that the Blue Ribbon panel on Grants & Contributions considers the social |
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|   | determinants of health in decision making about programs.                        |

|                     | Journées annuelles de santé publique (JASP)   |
|---------------------|---|
| Date                | October 25, 2006 – Montréal, Québec   |
| Discussion<br>Topic | WHO Commission on Social Determinants of Health: Current and Future Roles for Public Health Professionals in Promoting Healthy Public Policy  |
| Panellists          | <ul> <li>Honorable Monique Bégin, Commissioner, WHO Commission on Social<br/>Determinants of Health (via video).</li> <li>Dr. Elinor Wilson, Chief Executive Officer, Canadian Public Health Association.</li> <li>Phillip O'Hara Research Manager, Edmonton Social Planning Council.</li> <li>Stephen Samis, Vice President External Issues, Sandy Hill Community Health<br/>Centre, Ottawa.</li> <li>Dr. Richard Massé, Director, Institut national de santé publique du Québec.</li> <li><i>Presentations will be posted on the JASP website at http://www.inspq.qc.ca/jasp</i></li> </ul> |

#### Background

JASP is an annual continuing education and training event that brings together close to 2000 public health professionals from Québec and around the world to share information on issues relevant to public health practice.

The Public Health Agency of Canada sponsored a symposium to examine current and potential roles for the sector in advancing determinants of health through healthy public policy, from the perspectives of national non-governmental organizations, provincial governments, social planning councils, and community based health centre.

## What We Heard

## A. Barriers to action

- Perception of co-option of voluntary sector by governments A question was raised about whether governments co-opt the mandate/workplan of civil society organizations (CSOs). It was suggested that one of the roles of CSOs was to remain flexible and able to respond to changing priorities – including the priorities of governments. This interdependence is useful when interests are shared and when CSOs can provide expertise and capacity while governments provide funds.
- Time and resources constrain participation of local CSOs in anything not directly mandated – Participation in coalitions and broad initiatives is very limited in local organizations by time and resources. Likewise, capacity to respond to and advance provincial and federal mandates on top of current service delivery, is a challenge.
- Evidence of effectiveness of interventions to address determinants of health The lack of evidence about which interventions are the most effective in addressing determinants is a significant barrier to action.
- Mis-match of mandate and accountability structures Ontario's Community Health Centres are mandated to address determinants of health, but funding allocation and accountability/monitoring required by the government do not reflect the responsibility.
- B. Facilitators
- Regionalization (in Ontario) One of the roles of the local health integration networks is to unite different stakeholders in addressing the health of communities in a more integrated manner. This may provide an opportunity for discussions of broader determinants of health.
- C. Suggestions for Moving Forward: Key Messages for Government
- Reorient public policy towards collective good from individual good.
- Develop receptor capacity for knowledge that is generated at the local level.
- Open doors for community organizations looking to engage other sectors.
- Focus on roles specific to the health sector and work together with other sectors towards a shared agenda (rather than a health agenda) i.e. sustainable development.
- Change research paradigms and methodology in order to capture local experience and engage citizens more.
- Avoid overwhelming community organizations with the roles of governments.
- All players (government and non-government) need to identify and play a role in knowledge translation.

| Reducing Health Disparities:<br>Interdisciplinary Research and Policy Sympoisum |   |  |
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| Date  | March 10, 2006 – Toronto, Canada  |  |
| Discussion<br>Topic   | Global and National Perspectives on Reducing Health Disparities   |  |
| Keynote<br>Speakers   | <ul> <li>Sir Michael Marmot, Chair, WHO Commission on Social Determinants of Health</li> <li>Hon. Monique Bégin, Commissioner, WHO Commission on Social Determinants of<br/>Health</li> <li>Dr. Margaret Whitehead, Head, Department of Public Health, University of Liverpool</li> <li>Dr. Pierre-Gerlier Forest, Chieft Scientist, Health Canada</li> </ul>   |  |
| Panellists/<br>Discussants  | <ul> <li>Elizabeth Gyorfi-Dyke, Canadian Population Health Initiative</li> <li>Jim Ball, Public Health Agency of Canada</li> <li>Bernice Downey, National Aboriginal Health Organization</li> <li>Robert Choinière, Institut national de santé publique</li> <li>Eleanor Wilson, Canadian Public Health Association</li> <li>Ian Potter, Health Canada</li> <li>Michael Hayes, Simon Fraser University</li> </ul> |  |

## <u>Background</u>

This full day event was co-hosted by the Reducing Health Disparities Initiative of the Canadian Institutes for Health Research and the Public Health Agency of Canada. The objective of the symposium was to develop awareness of and learnings from the WHO Commission on Social Determinants of Health and other key global initiatives and to consider national and international perspectives to move forward on Canada's action.

#### What We Heard

Suggestions to Guide Future Action in Canada

- Find a common language and look for points of common interest with other sectors, instead of asking them to speak to health.
- At the same time, better understand impact of health sector policy and initiatives on health inequalities.
- Focus attention on articulation of solutions rather than problems.
- Quantify potential savings to health care service provision from the reduction of gaps in socio-economic status.
- There are some key areas which require additional knowledge development, but action should not be held up while the evidence base is being built.

- More applied policy research is needed to examine effectiveness of interventions (including policy interventions).
- Further collaborative efforts are needed to improve the health of Aboriginal people.
- Move further along the action spectrum on health inequalities policy, advancing away from "pilot projects" towards more systemic approaches.
- Package what is known in a way that is useable by policy makers and the public.
- Bring society into the picture by increasing understanding of "the causes of the causes".
- Measure, monitor and report on health inequalities.
- Work with like-minded countries such as England and Nordic countries.
- Articulate a compelling vision backed up by strategy built upon the National Health Goals.