
SOCIAL DETERMINANTS OF HEALTH

The **social determinants of health** are the interrelated social, political and economic factors that create the conditions in which people live, learn, work, play and age.

The **intersection of social determinants of health** means these determinants shift and change in different settings and over time, impacting the health of individuals, groups and communities in different ways.

Source: National Collaborating Centre for Determinants of Health, *Glossary of Essential Health Equity Terms*, 2015.

Community Health Boards are committed to addressing the social determinants of health in order to create better conditions for good health. Some sub-populations (e.g., people living with low incomes, people with disabilities, members of visible minority groups) have fewer resources to support their health, and may require additional resources and supports to reach the level of health enjoyed by more advantaged segments of the population.

The following are critical determinants of health for individuals, families and communities:

Income and Social Status: There is a gradient in health across the income spectrum. Lower income populations often experience economic and social exclusion, and tend to have poorer health and shorter lives than higher income populations.

Social Support Networks: People who have the support of family, friends and communities feel more connected to others and have better health.

Education and Literacy: Education is tied to income, to social networks, and to the resources needed to meet basic needs and to feel included in the economic, social and political life of the community.

Employment/Working Conditions: Employment provides income, a sense of personal identity, and the means to acquire the resources needed for health. Unemployment or precarious employment can contribute to stress and exclusion.

Social Environments: Feeling included and psychologically safe from harm in social settings (community, school, work) contributes to health and wellness.

Physical Environments: Clean air and water, adequate housing, safe neighbourhoods and adequate transportation are needed for health, and for engagement in education, employment and community life.

Personal Health Practices and Coping Skills: Adopting healthy practices and having skills to cope with life circumstances help people to stay healthy and safe.

Healthy Child Development: Early life experiences lay the foundation for lifelong health. These experiences impact brain development, school readiness and the ability to cope with life stresses.

Biology and Genetic Endowment: Some people have health advantages or disadvantages due to their biological make-up, but even people with disadvantages live full and healthy lives when their environments support their growth and development.

Health and Social Services: Everyone needs access to services that can support prevention of illness and injury, and provide timely and appropriate treatment and other supports when needed.

Persons belonging to Sexual Orientation and/or Gender Identity (SOGI) groups: LGBTIQ2+ populations can experience discrimination that has adverse health effects. Society places different demands and expectations on people of various genders, including transgendered people. Gender intersects with other health determinants to create circumstances that either support or challenge health and wellness

Culture: Language, social norms, and gender roles vary across cultures. Culture can be a source of strength and inclusion, but also a source of discrimination and exclusion.

Aboriginal Ancestry: First Nations and Aboriginal people have higher rates of food insecurity, lower levels of education and employment, and higher rates of illness and injury, all tied to their history of colonization and discrimination.

Race/Racism: Racialized populations (immigrants, members of visible minorities) experience higher rates of unemployment and under-employment, and both economic and social discrimination. New immigrants tend to experience deterioration of their health over time, known as the “immigrant health effect”.

Adapted from: J. Mikkonen & D. Raphael. (2010) *The Canadian Facts*.