

# A Holistic Approach to the Social Determinants of Health

## Objective

To develop an approach for bringing awareness to the importance of the social determinants of health (SDH) and integrating the SDH into health and social system policy and delivery.

## Practice Points

1. The SDH are responsible for 60% of our health, with the health system comprising only 25% and ones biology and genetics comprising only 15%.
  2. Health spending has seen dramatic increases over the years, while investments in the SDH have been minimal.
  3. Life expectancy in Newfoundland and Labrador (NL) is lower than the Canadian average.
  4. NL is among the most food insecure provinces in Canada, with the children of low income families experiencing the highest rates of food insecurity.
  5. Government of NL has accepted the idea of well-being as central to its goal and has integrated well-being into various initiatives, plans, reviews, and evaluations.
  6. Integrating the SDH into the health and social systems is essential.
- Leveraging the work that has already been completed to develop Canada’s Quality of Life Framework domains and indicators, NL is well-positioned to engage across government and sectors to adapt the framework to develop NL’s first well-being framework.
  - Placing well-being at the center of the framework enables the integration of measures in each of the five domains – society, environment, good governance, prosperity, and health. Each domain plays a role in the well-being of the people of the province. Measuring each will provide insight to Government of NL as to whether or not investments, policies, and actions are improving the well-being of the population.
  - Implementation of a well-being framework for NL has potential to become the measure by which we gauge our health as a province and the potential to position NL as a leader in rebalancing health and well-being.

## Data

Canada’s Quality of Life Framework domains and indicators.

## Results

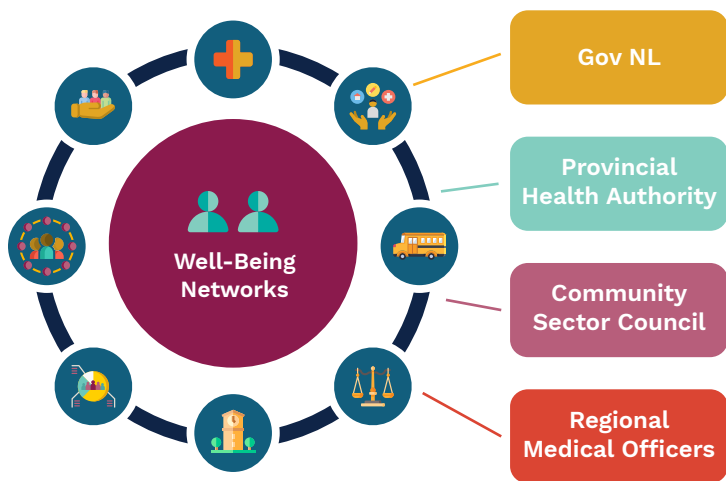


Figure 1. Collating the Evidence – A Well-Being Framework for NL



Figure 2. Engaging the Regions – Regional Well-Being Networks

- It is critical to engage with people, including Indigenous groups, who deliver and receive services such as health, social, education, justice, private sector, community sector, etc.
- Regional needs vary based on geography, demographics, sustainability of services, and much more.
- Well-being networks provide opportunities to focus on region-specific priorities, issues and solutions by facilitating collaboration with stakeholders with a vested interest in the impacts of the SDH.
- Networks are new to Canada providing NL the opportunity to lead an innovative approach to social and health community integration.
- Network members are identified by leadership positions they hold as part of their day jobs.
- Networks are supported by regional data integrating social, economic, and environmental metrics with health system information to help focus discussions.
- Each well-being network is supported by field catalysts, dedicated staff that facilitate effective community integration and discussion and collate solutions for consideration by decision-makers.



**Figure 3. Supporting Decision-Makers – A Proposed Structure to Implement a Well-Being Approach in NL**

- For networks to be most effective, they must be connected to decision-makers that influence policy and delivery – Government of NL, the provincial health authority, the community sector, and regional medical officers
- Structures that enable good two-way communication with the networks should reduce silos and improve integration.

### Government of NL

- Various departments in Government NL have mandates that intersect with the SDH.
- Coordinating and aligning individual efforts into an overarching strategy is required.
- To do this, interdepartmental committees will be established.
- The health transformation team will support the committees to achieve the following objectives:
  1. Increase **awareness** of the importance of social, economic, environmental, and lifestyle factors that determine health in NL.
  2. Create **sustainable and integrated structures** within government and in the regions that implement improvement in the SDH and disease prevention.
  3. Create an **evaluation** well-being framework that facilitates change in an iterative manner.
- To achieve these objectives, the health transformation team will support the committees to lead the development of the well-being framework, and lead the establishment of regional well-being networks.
- Evidence from the well-being framework and discussions from the regional well-being networks will feed into the interdepartmental committees to inform strategy and policy development.

## Provincial Health Authority (PHA)

- The creation of a PHA is well underway.
- The new governance structure for the PHA will assign a vice president of well-being the responsibility of integrating the SDH and community care into health system delivery.
- Evidence from the well-being framework and discussions from the regional well-being networks will link to the vice president of well-being to help inform service delivery in the region.

## The Community Sector

- The community sector plays a critical role in the delivery of programs and services related to the SDH.
- Partnering with the community sector to identify needs within regions will help determine the investments that will have the most impact for those that are most in need.
- The Community Sector Council of NL is well positioned as a partner in coordinating the work of the community sector.
- Evidence from the well-being framework and discussions from the regional well-being networks will link to the Community Sector Council to help inform service delivery in the region.

## Conclusions

1. The regional medical officers of health and public health have a responsibility for population health. Linking the networks of the regional medical officers and through them to the chief medical officer will integrate public health with structures created to improve the SDH and lifestyle factors predisposing to disease.
2. A holistic approach to prioritizing the SDH as a way of improving health outcomes in NL is essential.
3. Changing the culture of all stakeholders – the public, government, the community sector, the private sector – will be required.
4. A cross-departmental, cross-sectoral approach will leverage partnerships to affect real change.
5. Investing in programs and services that target the SDH must be a priority.
6. Using data to inform decision-making for policy, delivery, and investment will ensure those most in need remain in focus.
7. Opportunities for partnership in building support for improving the SDH and lifestyle factors should be evolved over time.