



Social Determinants Of Health

Economic and social conditions influence the extent to which a person has the resources to meet basic living requirements, satisfy personal aspirations and cope with the environment.¹

Income, employment status, type of employment, education, food security, and housing are all socioeconomic factors that contribute to the health of individuals and communities. A useful approach to understanding the complex interaction and impact of social factors on health and well-being is by using the board game “Snakes and Ladders” as a metaphor for health.²

The goal of Snakes and Ladders is to reach the top of the board by climbing the ladders and avoiding the snakes. Applying this concept to the pursuit of good health, we try to achieve optimum wellness by using the resources available to us (the ladders), while trying to avoid obstacles that will result in set-backs and other negative consequences (the snakes). Education, employment, access to health services and community support act as ladders in achieving good health, while low income, poor environments and low social status act as snakes. Having a board with more ladders than snakes makes optimum wellness easier to achieve. For example, a child born into a high-income family is more likely to have access to nutritious food and recreational activities than a child born into a low-income family. However, like the game, with a roll of a die anyone can face the chance of encountering more snakes than ladders.

Rural communities can face additional snakes or barriers on the path to wellness when compared to urban environments.³ These barriers include fewer people, which can translate into less employment opportunities, fewer educational or training programs and a lack of affordable transportation without access to a public transportation system. In rural communities, there are also fewer social supports and services and of those available, some families are hesitant to access them for fear of “exposing” their financial hardships in

a community where everyone knows everyone. Given the impact of these factors on health, rural communities face particular barriers which must be addressed when planning and implementing health programs and support.

Several social determinants of health are described in this chapter, including income and cost of living in Huron County, education, employment, affordable housing, food security and social networks.

Income and Cost of Living in Huron County

Many Canadian studies have shown that health increases with increasing income.⁴ Income impacts the health of families and individuals by affecting access to resources required for healthy lifestyles. In Huron County, the average household income was \$54,496 in 2000, with a median income of \$45,885. This income level is approximately \$10,000 lower than the Ontario average of \$66,836. Lower average and median income levels in Huron County can primarily be attributed to having almost half as many households earning over \$100,000/year, as shown in **Figure 1**.

When comparing incomes across populations, variations in the cost of living must also be considered. One way this is done is by using Low Income Cut-offs (LICOs) to calculate the incidence of low income in a population. LICOs are income levels at which a family or individual will likely devote a larger share of its income to the necessities of food, shelter and clothing than the average family.⁵ The cost of living, family size and place of residence (urban or rural) are all used to calculate LICOs.

The incidence of low income in Huron County and Ontario is shown in **Table 1**. Huron County

has lower proportions of households, families and individuals that are living in low-income situations when compared to Ontario. As average income levels in Huron County are lower than Ontario, Huron County may also experience a lower cost of living. Within Huron County, Goderich has the highest percentage of persons with low income (11.58%), almost double that of

Bluewater. In both Huron County and Ontario, female-led lone-parent families continue to be the most economically disadvantaged, with approximately one third of all female-led lone parent families living in low income. In Huron County, 10% of economic families are lone parent families and of those, 77% are female-led.⁶

Figure 1. Household income of all private households in both Huron County and Ontario in 2000. A private household is referred to as a person or a group of persons (other than foreign residents) who occupy the same private dwelling and do not have a usual place of residence elsewhere in Canada. Source: Statistics Canada,

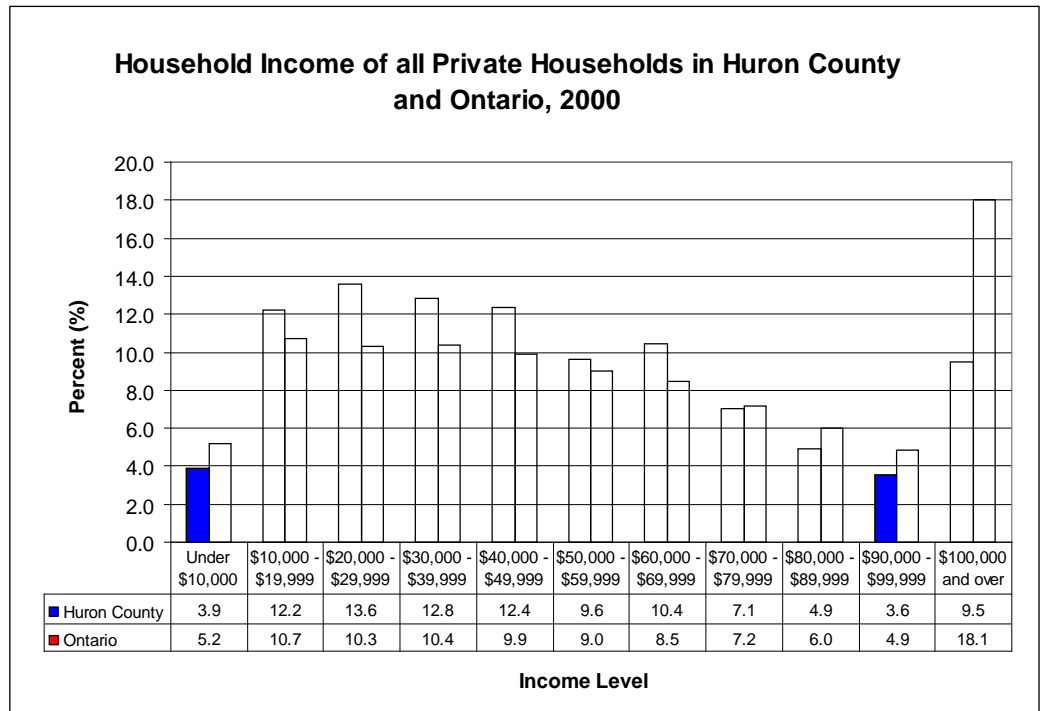


Table 1. Incidence of low income, by private household, economic family and unattached individuals over 15 years. An economic family refers to a group of two or more persons who live in the same dwelling and are related to each other by blood, marriage, common-law or adoption. Source: Statistics Canada, Census 2001.

Category	Huron County %	Ontario %
All People in Private Households	8.94	14.39
<i>By municipality</i>		
South Huron	7.54	--
Bluewater	6.55	--
Central Huron	9.87	--
Goderich	11.58	--
Huron East	9.81	--
Morris-Turnberry	7.92	--
North Huron	8.97	--
Ashfield-Colborne-Wawanosh	7.80	--
Howick	10.01	--
Economic Family	6.73	11.68
<i>By family type</i>		
Couple with no children	4.34	7.34
Couple with children	5.39	9.26
Lone Parent, male-led	16.13	16.29
Lone Parent, female-led	29.61	35.21
Unattached Individuals (≥15 years old)	25.90	34.00

Employment

Employment insecurity and job quality are known to be associated with physical and mental health.¹ In addition, individuals who have more control over their work circumstances and have fewer stress-related demands of the job are healthier. The unemployment rate for 2005 in Huron County for persons aged 15 years and over remains at 5.0%, below the provincial rate of 6.6%.⁷ Since 2001, unemployment rates have been increasing in Huron County, while decreasing in Ontario. In addition, Huron County sees a seasonal increase in unemployment because of strong reliance of resource-based industry.⁸

The division of the labour force population by industry is shown in **Figure 2** for both Huron County and Ontario. Huron County has a substantially higher proportion of persons employed in agriculture and other resource-based industries than Ontario (17.5% versus 3.2%), yet a much lower participation in the business services sector (11.1% versus 19.1%).

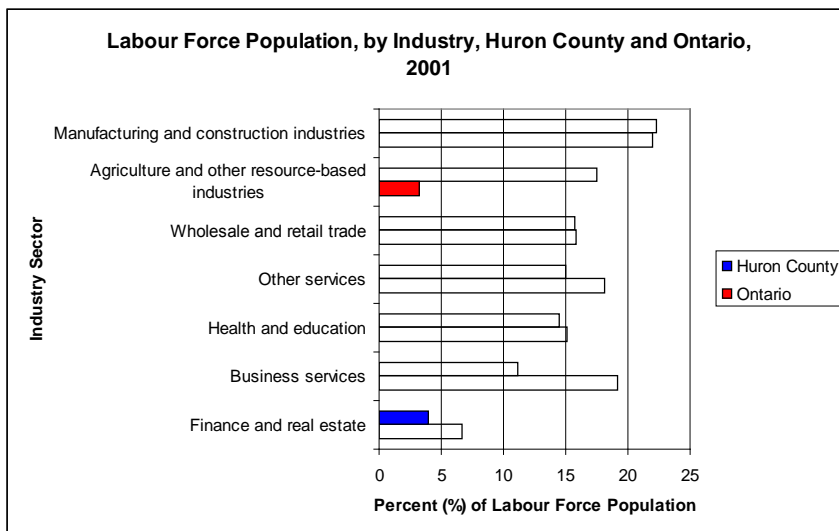
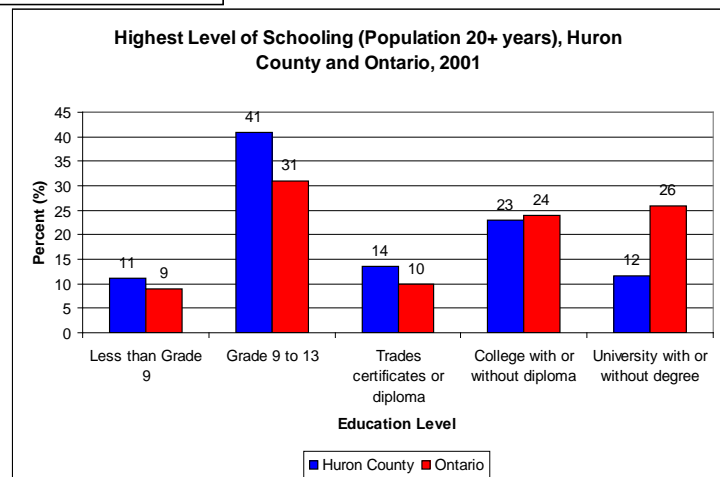


Figure 2. The percentage of individuals employed within each industry out of the entire labour force population, both in Huron County and in Ontario for 2001. Source: Statistics Canada, Census 2001.

Figure 3. Education levels of Huron County and Ontario among individuals aged 20 years and older in 2001. Source: Statistics Canada, Census 2001



Housing

Inadequate housing affects health in many ways. High housing costs impact available monetary resources necessary for living, while poor living conditions and stress induced by housing insecurity increases risk of morbidity and mortality.¹ In Huron County, adequate, affordable housing is a major issue. There are 627 social housing units in Huron County, all of which are occupied. As of October 31, 2006, 251 households were on the waiting list for rent-geared-to-income units. Over half of applicants are adults without children who are requesting one-bedroom housing units (**Table 2**).

In mid-October 2006, provincial and federal governments announced funding for 15 affordable housing units in Huron County which could house 15 households. Three of the 15 units have been allocated for supportive housing for people with mental health disabilities and two for victims of domestic violence. In addition, money has been made available to make homeownership affordable for low-income households.

Provision of emergency shelters help ensure safe places for women and families in crisis. For the 2005/2006 fiscal year, the emergency women's shelter housed 81 women and 45 children, giving an average occupancy rate of 89.3%.⁹ In addition, rent-geared-to-income housing was provided for 41 women, with an average occupancy rate of 79.9%.⁹

Household Type and Housing Need	Number of Applicants
Adult (without children) - 1 bedroom	138
Seniors - 1 bedroom	39
Family - 3 bedroom	35
Family - 2 bedroom	29
Family - 4 bedroom	10
Total	251

Table 2. Number of households on the waiting list for rent-geared-to-income accommodation, by household type and housing need as of October 31, 2006. Source: Housing Services, Social Services Department, County of Huron.

Food Security

Food insecurity is the inability or uncertainty of having adequate diet quality and quantity.¹ Families or households that experience food insecurity are more likely to report poor or fair self-rated health and chronic health conditions.¹ Food insecurity is most prevalent among single parent families, families with high number of siblings or families with poor maternal health. In 2005, 96.1% (95% CI 94.1-98.2) of persons in Huron County indicated that members of their household showed no or minimal evidence of food insecurity.¹⁰ Therefore, less than 4% indicated food insecurity with or without hunger.

Income also impacts food security, in the same survey, only 15% (95% CI 33.6-16.0) of persons with household incomes of less than \$20,000/year indicated evidence of food insecurity¹⁰ compared to only 3.2% (95% CI 3.1-3.5) of persons with household income above \$20,000/year. It is possible, however, that the sensitive nature of the question may have caused respondents to feel uncomfortable disclosing information relating food security and thus would under estimate the proportion experiencing food insecurity.

This finding is supported by high attendance to the eight food banks in Huron County, where an estimated 6,500 to 7,100 families or individuals visited in 2005.

In 2000, focus groups were conducted (n=45) among low income families in Huron County to determine barriers rural families faced surrounding food access.¹¹ Participants felt that social assistance cutbacks and unexpected expenses left them with little money to put towards food after housing and other essential costs. Several participants also responded they were unable to give their children essentials because of lack of money.

Other identified barriers to accessing food included:

- high grocery costs in small towns;
- lack of appropriate food at the food banks (i.e. fresh fruit and vegetables, milk and meat);
- lack of transportation to access grocery stores or food banks; and

- stigma affecting participants' comfort in acquiring food through the food bank in a small-town environment.

Therefore, many barriers exist to accessing the quantity and quality of food desired in rural families which must be addressed, especially among households with low income and young children.

Social Networks

Strong social connections promote a sense of belonging and well-being. They also provide support and a sense of control in times of adversity.¹² There is an established causal link between social relationships and health, with those who are strongly connected to the community being less likely to be involved in risky health behaviours.¹² In Huron County, a quarter of the population (25.0%, 95% CI 20.6-29.5) report a very strong sense of belonging to their local community.¹⁶ This is significantly higher than the Ontario average.

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