





National Collaborating Centre
for Determinants of Health
Centre de collaboration nationale
des déterminants de la santé



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LET'S TALK
**DETERMINANTS
OF HEALTH**

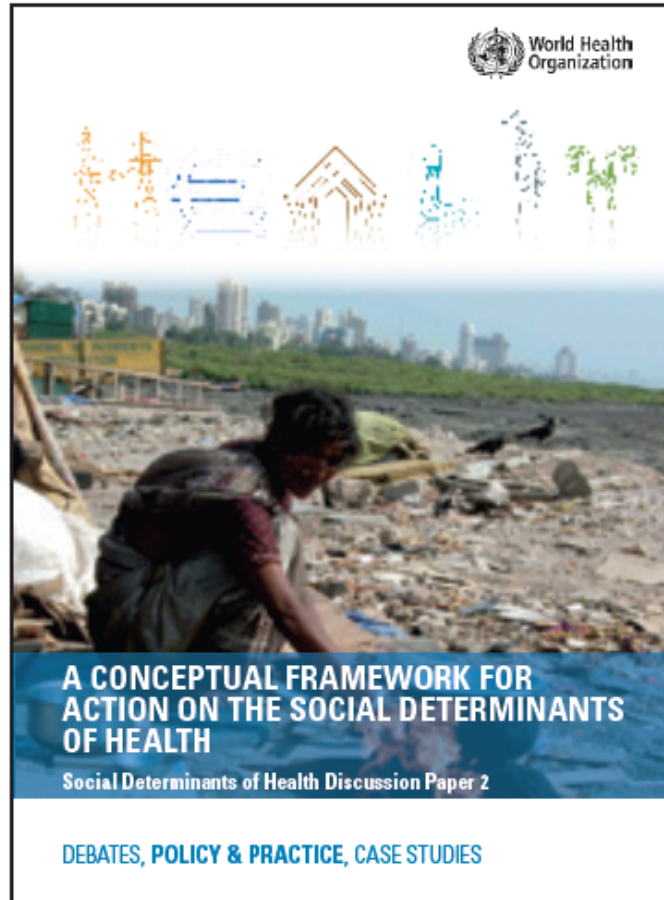
PART OF THE LET'S TALK SERIES



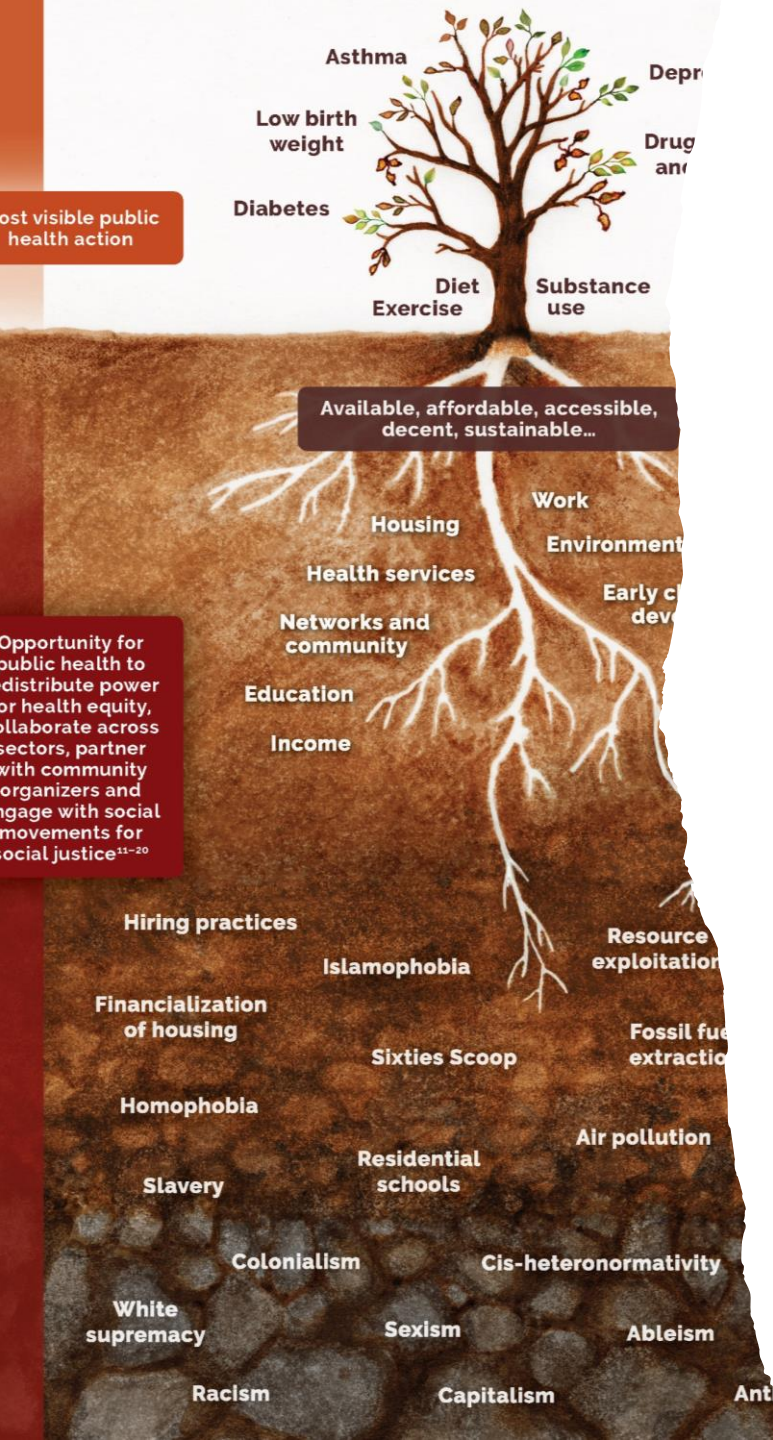
Social Determinants

WHO (2008): “The non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.

These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.”



“Conflating the social determinants of health and the social processes that shape these determinants’ unequal distribution can seriously mislead policy.”^{2(p5)}



Structural Determinants of Health

“the **written and unwritten rules** that create, maintain, or eliminate durable and hierarchical patterns of advantage among socially constructed groups” and

“The manifestation of **power relations** in that people and groups with more power based on current social structures work to maintain their advantage by reinforcing or modifying these rules” (Heller et al, 2024, p1)



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REFLECTING ON THE CAUSES OF HEALTH INEQUITIES



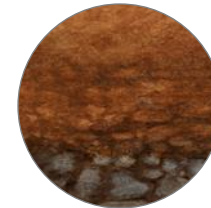
LEAVES: examples of the physical and mental health outcomes in communities and populations



TRUNK: examples of individual behaviours that contribute to health, often the focus of public health interventions



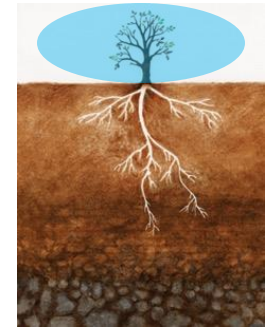
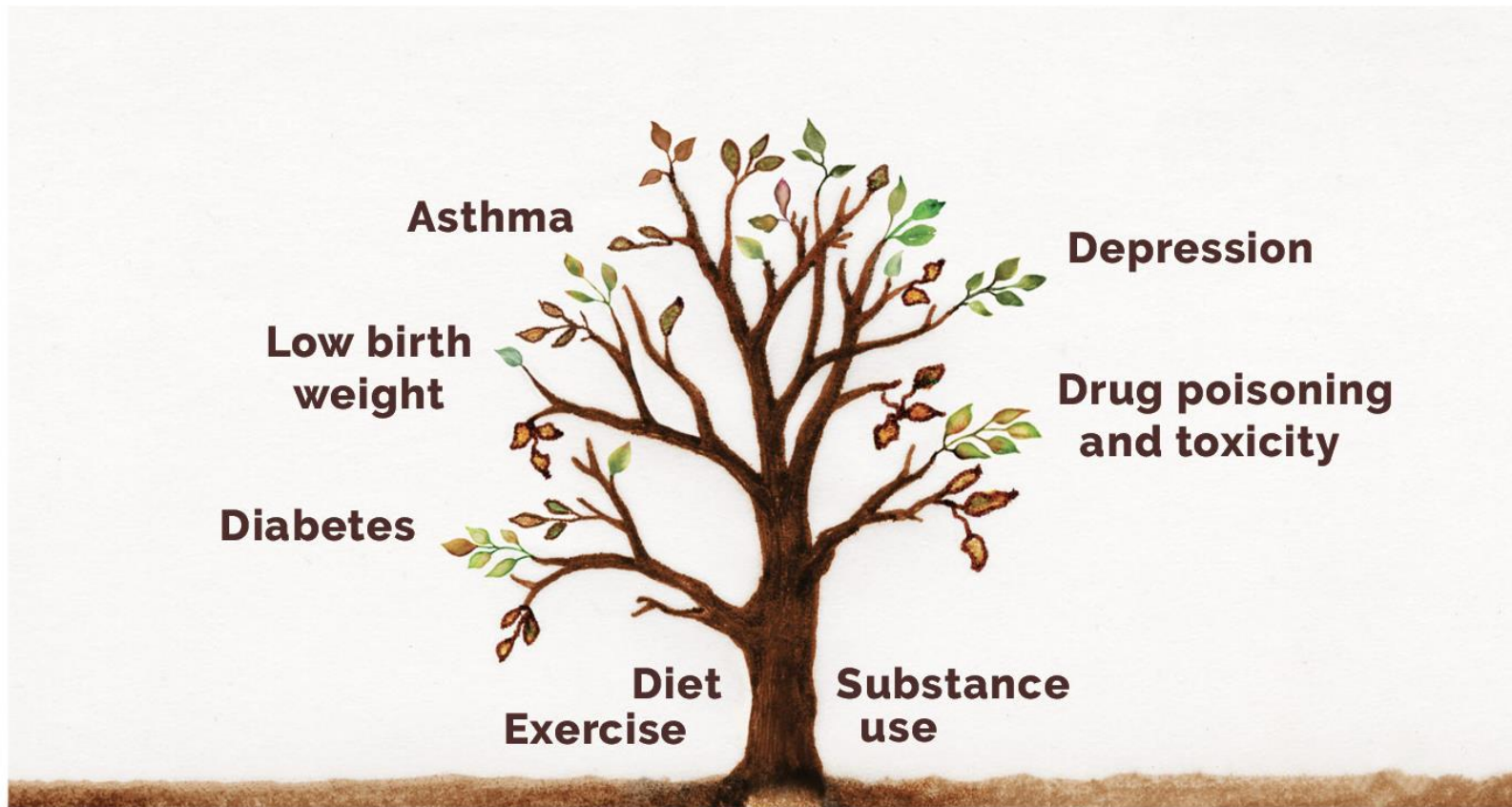
ROOTS: examples of the conditions of daily life that can directly or indirectly influence health outcomes



SOIL: examples of the underlying values, world views, policies and practices that shape the conditions of daily life and pattern health outcomes (e.g., by race, ability, gender, sexual orientation)



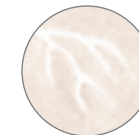
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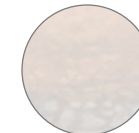
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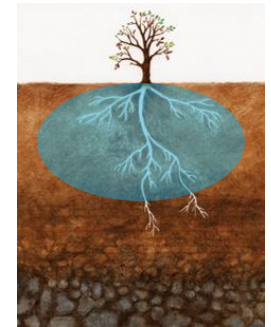
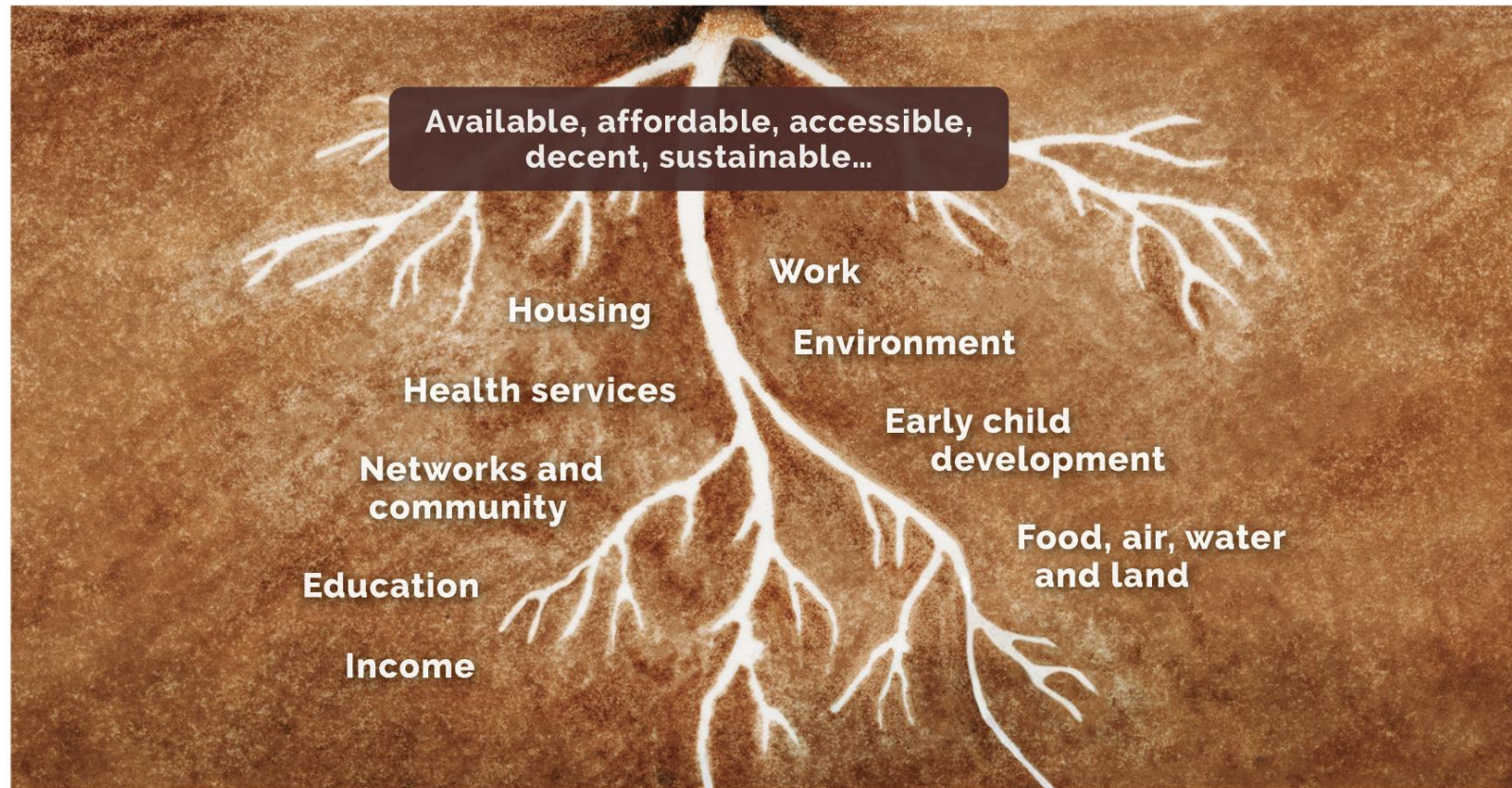
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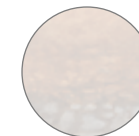
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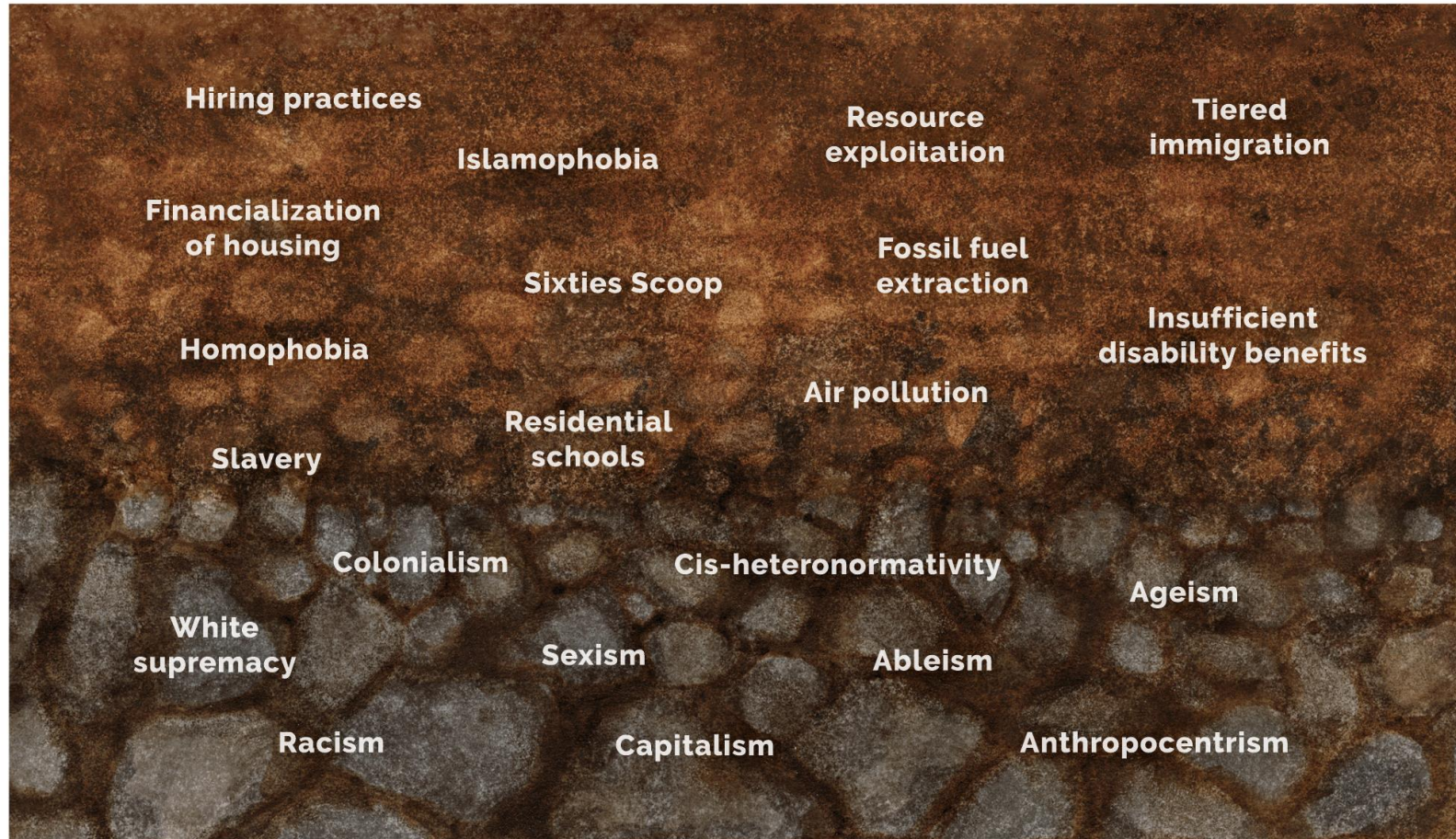


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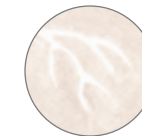
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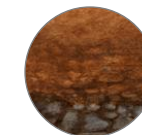
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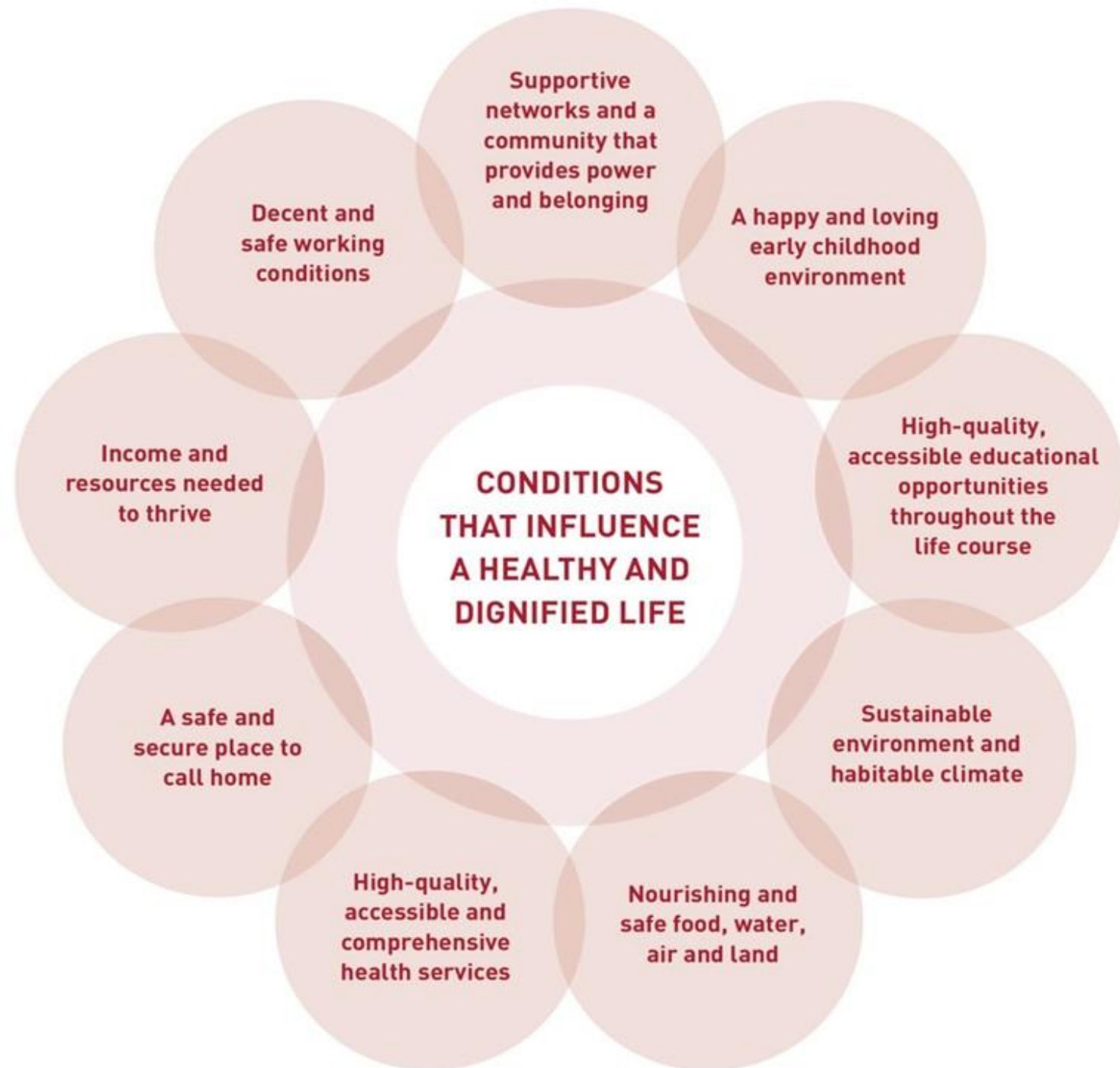
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**Belonging is
implicit in every
condition of
daily life**





Mind the Disruption
Podcast



kamilah: It has been strategically made over time through policy, through law, through social engineering that poor populations, black populations, queer populations, trans populations, women, etc. have been very specifically and particularly excluded through systematic creation.

It wasn't just a coincidence that these communities are equity seeking or deserve equity, because of a very particular agenda to leave populations out of being able to access power.

And so I use that to try and speak to that history in a more concise way.



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Mind the Disruption
Podcast



Diana: I often look at public parks, for example, it's public land. Public land should exist for the public good. But when we look at what a park is used for, look at the infrastructure. You've got playgrounds, you've got picnic tables, community gardens, baseball diamonds. All of these things are for recreation or, in the case of a community garden, you're growing food and you're going to cook it at home. That means you have housing.

This infrastructure indicates who is welcome in that park.

But why can't a public park be more?

Why can't we talk to people who have to live in parks because we don't have the housing — and won't have it, importantly, for a very long time — about what it is they need to survive?



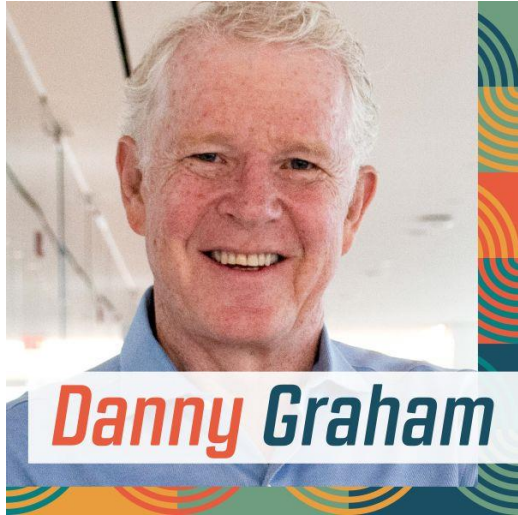
Mind the Disruption
Podcast



Bernice: A closer look at what happened with Hurricane Katrina reveals that the evacuation plans for the area relied on several assumptions, like that residents would have access to a car, would be able to take time off work, would have the financial resources to sustain themselves while evacuating, and would have supportive networks and people to stay with out of town. This was not the case for many low-income residents, the majority of whom were Black. Because of these barriers, many stayed behind and were more exposed to the rising floodwaters than their wealthier white counterparts.

Black residents were actively blamed by decision makers for not evacuating and efforts to rescue survivors were deprioritized and delayed. Black residents were therefore more susceptible to the effects of the storm, unable to access basic needs like food, clean water and health care for an extended period of time.

The hurricane affected several public housing projects that specifically served the low-income Black community. Instead of rebuilding these projects, the City closed them and opened the door to private development. This meant that Black residents were unable to return to their communities, unable to afford housing and unable to recover from the hurricane.



Mind the Disruption
Podcast



Danny: We can fix health care, we can fix education, justice, community services, housing, we can fix those systems potentially and still not arrive at momentum towards stronger, healthier communities because we failed to address really fundamental issues about the nature of our relationships with each other, the connections we have and our connections to the natural world without recognizing that we need to measure and improve the water itself and not just move rocks upstream. The healthy, strong society that we're all striving for may be unachievable and we may be on a fool's errand trying to fix them in silos instead of actually addressing something more fundamental.

Thanks!



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