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Constituent Societies

ANDSOOHA - Public Health Nursing
Management in Ontario

Association of Ontario
Health Centres

Association of Public Health
Epidemiologists in Ontario

Association of Supervisors of Public
Health Inspectors of Ontario

Canadian Institute of Public Health
Inspectors (Ontario Branch)

Community Health Nurses' Initiatives
Group (RNAO)

Health Promotion Ontario:
Public Health

Ontario Association of Public Health
Dentistry

Ontario Society of Nutrition
Professionals in Public Health

Public Health Research, Education and
Development (PHRED) Program

Charitable Registration
Number 11924 8771 RR0001

September 15, 2005

Public Health Goals Secretariat
% Public Health Agency of Canada
130 Colonnade Road
Ottawa, Ontario K1A 0K9

To: The Honourable Carolyn Bennett, Minister of State (Public Health)

Re: Public Health Goals for Canada

Dear Minister Bennett:

On behalf of the Ontario Public Health Association (OPHA), I am writing to applaud your work to date on the Public Health Goals for Canada. Thank you for the opportunity to present our position on the six identified themes.

Representing the collective advocacy interests of approximately 3,000 individuals in public and community health, OPHA is a voluntary, charitable, non-profit association providing leadership in public health since 1949. OPHA is an organization of individuals and Constituent Societies from various sectors and disciplines that have an interest in improving the health of the people of Ontario.

Our mission is achieved by providing educational opportunities and up-to-date information in community and public health, access to local, provincial and multi-disciplinary community health networks, mechanisms to seek and discuss issues and views of members, issue identification and advocacy with a province-wide perspective, and expertise and consultation in public and community health.

Our submission is a compilation of an extensive consultation, including review of the current research, with OPHA staff, Constituent Societies and workgroups. These groups held discussions, generated responses to the questions, and submitted their responses to OPHA for collation and incorporation into a response. To focus the response to the public health goals, OPHA has adopted the essential functions of public health as those identified by national working group¹:

- Population health assessment
- Health surveillance
- Health promotion
- Disease and injury protection
- Health Protection

¹ The Future of Public Health in Canada: Developing a Public Health System for the 21st Century, CHIR-Institute of Population and Public Health, June 2003

Please find below our goal statements for the six themes. As well, we have attached a more detailed document, with specific factors to consider under each of the six themes.

Goal Statement - Opportunities for healthy development and learning throughout life: All Canadians will have opportunities for life-long learning to support their optimal health, growth and development, and prevent disease and injury. Learning opportunities should be dynamic, collaborative, and multisectoral, focusing on primary prevention and health promotion.

Goal Statement - Supportive communities and healthy working environments: All Canadians will live in communities, and be employed in workplaces, that are supportive of health and healthy choices. Policies, programs and services will be in place to support communities and workplaces to achieve.

Goal Statement - Sustainable, diverse and safe environments: The natural and man-made physical environments in which all Canadians live will be safe, healthy and sustainable. This will be achieved through partnerships, legislation, healthy public policy, and good governance.

Goal Statement - Vulnerable populations: The vulnerability of populations will be minimized through inclusive and meaningful integration into Canadian society. Policies, programs and services will be in place to support vulnerable populations to achieve health.

Goal Statement - Support for personal choices: All Canadians will live and work in environments and under policies that are supportive of healthy choices. Programs and services will be in place to build skills and capacities that enhance health.

Goal Statement - An integrated, supportive health system: All Canadians will benefit from a coordinated and collaborative approach to health. Public health partners will create strong and effective partnerships, considering the entire continuum of care, to plan for the future health of Canadians and clearly understand their role in the health care system.

While it is beneficial to have general goal statements for each of the theme areas, it is imperative that a further definition of goals be developed, ones with specific, measurable outcomes. As you will note in the additional comments section of this letter, examples of more specific goals in the areas of alcohol policy and violence prevention are given.

Additional Comments

- Consider changing the name of the third theme to, “*Healthy sustainable, diverse and safe physical environment,*” as this theme relates specifically to the physical environment and is defined through two distinct aspects: the natural environment including air, water and soil, and the man-made or built environment, including physical structures, and community physical infrastructure.
- The role of healthy public policy should be considered as an additional theme. The current economic/financial climate is to de-regulate, and in the process, the impact of public policy on the health of communities and populations is neglected or negated.
- There seems to be an emphasis in the health goals workbook on the individual. Each individual is influenced by the systems, which he/she encounters, and the context in which he/she lives. A set of health goals for Canada must de-emphasize the focus on the micro level and instead pay more attention to the macro or system level.
- In order to be “healthy”, people require an environment, which supports healthy choices. Education alone does not change behaviour, and yet, society continues to rely on education and information as the prime, or only, strategy to effect positive behaviour change.
- To improve the health of Canadians, it should be a requirement to conduct a health impact assessment prior to the implementation of any public policy or legislation change.
- In our opinion, private sector interests (i.e., business lobbies) can, in some cases, have too much influence on government decision-making. The health of communities and the environment should take precedence over business interests (e.g., the alcohol industry should not be involved in developing a substance abuse strategy for Canada). Vested interests should not have a place in health goals or health planning for Canada or the provinces.
- It is important to keep in mind the critical foundational components of the public health system infrastructure - Organizational Capacity, Sufficient and Competent Workforce and Information and Knowledge System - required for the achievement of the public health goals.
- We are strongly supportive of Sweden’s Public Health Goal #11, which deals with substance abuse (alcohol and drugs), tobacco, and gambling. Given the costs to society, and particularly the contribution of alcohol to the burden of illness (factor #3, next after tobacco according to the World Health Organization), it is critical that there be a goal on substance abuse. However,

implicit in this goal must be an acknowledgement of the enormous and costly contribution of alcohol to injuries.

- We strongly support the need for violence prevention as one of the public health goals for Canada. The World Health Organization has clearly documented the fact that violence is a major public health issue and outlines steps required by all countries to address this important issue.

We would like to bring to your attention what we feel needs to be considered in order for the goals to really serve their purpose. There is a danger that unless the goals are integrated directly into the planning, policy frameworks, decision-making, and accountability mechanisms to any significant extent, the goals will not achieve what they are intended to achieve. It is very important that goals are developed with high public and professional participation and be combined with the strengthening of the public health systems on all levels. Also, because the goals currently being developed for Canada are public health goals only, and address a small proportion of the health budget in Canada, they will need more political support to be implemented. It would be disappointing to see the goals disappear when governments change on provincial and national levels.

We are very willing to actively participate in this consultation. We look forward to the next steps in this important process.

Sincerely,



Dr. Garry Aslanyan
President

Cc: Dr. David Butler-Jones
Public Health Agency of Canada

Opportunities for healthy development and learning throughout life

Enablers to Achieving Goals	Hindrances to Achieving Goals
<p>To enable children, youth and adults to experience opportunities for healthy development and learning throughout life, OPHA believes there needs to be:</p> <p><u>Education</u></p> <ul style="list-style-type: none"> • Universal access to education in both urban and rural settings • Development of skills with regards to life skills such as nutrition • Caregiver education programs • Provision of a diverse number of opportunities to develop the “whole child” ranging from academic learning, exposure to the arts, in addition to daily physical activity and healthy food choices in schools • Active community role in the development of social responsibility curriculum, making it relevant to the diverse needs of students and enabling opportunities to act on what is learned (e.g., exposure to issues from other cultures) • Provision of affordable post-secondary vocational and educational opportunities for young adults (e.g., universal, or at least reduced, tuition; increased number of bursaries) <p><u>Environment</u></p> <ul style="list-style-type: none"> • Healthy, safe homes and playgrounds • Environments that are physically safe from air, water and land toxins at the community and household level 	<p>OPHA believes that individuals of all ages would be prevented from realizing opportunities for healthy development and learning due to:</p> <ul style="list-style-type: none"> • Corporate influence on food that gets on the table at home and at school • Food service for children that is based on profit instead of health • Marketing influence on children and their caregivers • High tuition fees • Limited access to educational opportunities in remote areas • Insufficient resources, including sustainable funding • Fast-paced lifestyle

<p><u>Lifecycle</u></p> <ul style="list-style-type: none"> • Prenatal/postnatal support (i.e., education, emotional support, resources) for adolescent and adult mothers • Affordable daycare - universal, accessible, and equitable daycare for all pre-school children <p><u>Nutrition</u></p> <ul style="list-style-type: none"> • Access to safe, nutritious, affordable, acceptable and sufficient food (Reference: Individual and Household Food Insecurity in Canada: Position of the Dietitians of Canada, 2005) • Caregivers, including those in daycares and schools, who know how to choose and prepare healthy meals and snacks • Limits on food companies marketing to children and their caregivers • Community nutrition programming that puts food on the table, (e.g., good food box programs or school nourishment programs) (Reference: A Systemic Approach to Community Food Security: A Role for Public Health, OPHA, 2002) <p><u>Policy</u></p> <ul style="list-style-type: none"> • Public policies and funded public health services that actively support breastfeeding, parenting, environmental health, and other aspects of positive child development successes • Healthy public policy that addresses root causes of the determinants of health such as income and social status, literacy and education, and transportation, while addressing immediate policy objectives such as reducing child poverty 	
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Supportive communities and healthy working environments

Enablers to Achieving Goals	Hindrances to Achieving Goals
<p>To enable communities to offer positive and supportive living and working conditions for all people, OPHA believes that there needs to be:</p> <p>Communities</p> <p>Communities, both urban and rural, providing to their members of all age groups and from all economic situations: access to child and senior day (care) centres; community and recreation centres; primary health care (including medical, mental health/social work, nutrition); religious and spiritual organizations; green space (tree-lined streets, parks, etc.) and affordable, competitively priced and well-stocked grocery stores accessible safely by foot, bike, and public transit (Reference: Davey Smith, G., & Brunner, E. (1997). Socio-economic differentials in health: the role of nutrition. <i>Proceedings of the Nutrition Society</i>, 56, 75-90.)</p> <ul style="list-style-type: none"> • Communities providing opportunities for youth to acquire education and work experience; innovative cooperative work/study initiatives and programs to lower the drop-out rate in high schools • Communities working to reduce violence and the number of youth who are affected by it. Strategies could include: good network/community coverage of after-school clubs/boys and girls clubs or peer neighbour mentoring systems (e.g. have children be mentored by youth in their own social group) • Access to affordable housing • Trained leaders who can work with communities to develop common purposes, goals and objectives towards positive, supportive living and working environments • Independence from partisan politics with a focus on long-term plans 	<p>OPHA believes communities are prevented from achieving positive and supportive living and working conditions due to:</p> <ul style="list-style-type: none"> • Not being able to live and work in the same community • Erosion of legislated workers' protection • Low wages, insecure jobs, unaffordable housing, food service based on profit instead of health

<p>with sustained funding for pilot projects, and maintenance of proven effective and efficient interventions</p> <p><u>Workplace</u></p> <ul style="list-style-type: none"> • Legislated working conditions that take into account work-life balance, (e.g., family-friendly workplace policies such as a minimum of four week's vacation) • Healthy workplaces with cafeterias that promote healthy eating, physical activity on site (e.g., accessible, safe and attractive stairwells), adequate income (livable minimum wage), affordable housing to enable families to purchase healthy foods, community nutrition programs • Equal and respectful treatment of citizens and newcomers of all religious, cultural, ethnic backgrounds and sexual orientation with the recognition by workplaces of religious holidays and other religious and cultural practices • Supportive workplace culture that values and empowers employees to maintain a work-life balance including flexible work hours and work weeks, access to opportunities for physical activity, support for commuters and access to child care • Federal and provincial governments working with workplaces to address income inequities in the workplace in order to reduce the inequities that exist between workers, management and executive incomes (Reference: Marmot, M. G., Davey Smith, G., Stansfield, S., Patel, C., North, F., Head, J., White, I., Brunner, E., & Feeney, A. (1991). Health inequalities among British civil servants: The Whitehall II Study. <i>Lancet</i>, 337, 1387-94.) • Federal and provincial governments working with workplaces to support a workplace culture that addresses autonomy and empowerment at all levels in the workplace so that workers are able to experience greater job satisfaction and more meaningful work • Protection of employees of large and small, private and public 	
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employers by provincial health and safety acts amended to reflect the importance, through access standards, to healthy and safe food choices and regular physical activity. This goal could be met through collaboration with local governments and other employers in the same geographic location

Societal

- Provincial legislation amended to include a greater provincial control of rent increases, ensuring through an independent review body that safe rented housing remains an affordable option for Canadians
- Minimum wages, social assistance, disability pensions and old age pension incomes are adequate and secure in order to support safe and quality housing, education, health practices and positive self-esteem. This will include a sound assessment of the poverty line (Reference: North, F. M., Syme, L.S., Feeney, A., Shipley, M., & Marmot, M. (1996). Psychosocial work environment and sickness absence among British civil servants: The Whitehall II Study. *Am J Public Health*, 86, 332-340.)
- Parents and legal guardians from all economic situations are able to seek and hold meaningful employment opportunities secure in the knowledge that their children are well cared for in universal, standardized, regulated, and permanently funded child day care programs
- Respect and affirmation of diversity that includes differences in class, gender, sexual orientation, gender identity, culture, religion, age, ability/disability, education, language, race, and ethnicity
- Advocacy for the inclusion of the rights for all citizens and newcomers in our Canadian Charter of Rights and Freedom including: the right to safe, nutritious and affordable food to attain and maintain optimal growth, development and health; the right to safe, adequate and affordable housing; the right to take part in designing and voting in referendums that decide the use, protection and governance of our

land, water air and other natural resources including the animal kingdom; the right to formal and informal education regardless of economic status; the right to access safe, appropriate regular physical activity opportunities	
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Sustainable, diverse and safe environments

Enablers to Achieving Goals	Hindrances to Achieving Goals
<p>To create and maintain sustainable, diverse and safe environments, OPHA believes that there needs to be:</p> <p><u>Healthy Indoor and Outdoor Air Quality</u></p> <ul style="list-style-type: none"> • Develop, monitor, and enforce high standards for indoor and outdoor air quality including eliminating exposure to environmental tobacco smoke (ETS) and other airborne contaminants, as well as protecting the public from radiation exposure <p><u>Safe, Accessible, and Sustainable Water, Soil and Farm Land</u></p> <ul style="list-style-type: none"> • Set standards and monitor the quality of Canadian water and soil to sustain health for future generations • Protection of a sustainable, safe, high-quality food system that maximizes community self-reliance and social justice • Biodiverse plants and animals • Regulation of genetically modified agriculture <p><u>Sustainable and Safe Green Areas</u></p> <ul style="list-style-type: none"> • Ensure that quiet and safe green areas are accessible, safe, maintained and sustainable wherever people live such as residential areas, long-term care facilities etc. • Protect and expand conservation areas and parklands • Sun safety policies through urban planning, which include the creation of shade from trees i.e., school yards and downtown architecture 	<p>OPHA believe communities are prevented from creating and maintaining sustainable, diverse and safe environments due to:</p> <ul style="list-style-type: none"> • Legislation that favours the corporatization of our food supply, (e.g. law that allows companies to patent seeds) • Current agricultural policies that are not based on human health and a sustainable agricultural system • Urban development/sprawl and low-density housing • Disproportionate amount of public funds going to highways instead of public transit • Loss of farmland

<p><u>Safe Consumer Products</u></p> <ul style="list-style-type: none">• Ensure reduced use of products hazardous to health and those causing allergies, especially as it relates to industrial and commercial and farming practices <p><u>A Healthy and Safe Working Environment</u></p> <ul style="list-style-type: none">• Develop and sustain safe working conditions, including appropriate procedures, equipment, lighting, and building design• Ensure a safe working environment through the appropriate training of employees in order to prevent and protect them from exposure to potential hazards	
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Vulnerable populations

Enablers to Achieving Goals	Hindrances to Achieving Goals
<p>OPHA believes the actions that would contribute to improving the overall health of Canada's most vulnerable populations include:</p> <p><u>Childcare</u></p> <ul style="list-style-type: none"> • National Day Care <p><u>Community</u></p> <p>Decrease the gap between those with high socio-economic status (SES) and those with low SES through actions such as Integrative Community Planning which would include:</p> <ul style="list-style-type: none"> ○ Enhance integration of all “classes” (don't just create supportive housing in isolation) ○ Offering integrated after-school programs for youth and children in vulnerable communities ○ Create supportive/mentoring opportunities (e.g., with provincial police) ○ Increase opportunities to engage in meaningful activities (i.e., having a role for youth such as volunteering, jobs) ○ Create opportunities for after school sports, recreation, art expression (music, art) at religious organizations or community centres <p><u>Education</u></p> <ul style="list-style-type: none"> • Access to alternative education opportunities <p><u>Employment</u></p> <ul style="list-style-type: none"> • Ensure job opportunities and supports through: re-skilling/re- 	<p>OPHA believes the major factors preventing the health, safety and well-being of vulnerable populations are that:</p> <ul style="list-style-type: none"> • Those who move out of a vulnerable situation do not receive the recognition needed when they are successful to provide hope for those still experiencing poor social, economic, or environmental situations • Many programs to support vulnerable populations exist in isolation and are often not sustainable • Agendas change with new political leaders and ministers which limit the sustainability of the issue and thus threatens the sustainability of the programs • Information needed by vulnerable populations is not disseminated to those individuals who need it (gatekeepers) • Language barriers • Programs are often provided only in French and English, excluding Aboriginal populations • Public services are not thought of from a multi-lingual perspective

<p>educating and adequate access to education/trades training</p> <p><u>Housing</u></p> <ul style="list-style-type: none"> Affordable housing with assistance where necessary <p><u>Income</u></p> <ul style="list-style-type: none"> Decrease the gap between those with high socio-economic status (SES) and those with low SES through actions such as: <ul style="list-style-type: none"> Taxation policies Income support (Guaranteed Minimum Income) Minimum wage that allows one to save not just “get by” Improve disability and welfare - mechanisms need to be <u>enabling</u> and to help break the poverty cycle <p><u>Nutrition</u></p> <ul style="list-style-type: none"> Safe, culturally acceptable, nutritionally adequate food as a right not a privilege (Reference: Individual and Household Food Insecurity in Canada: Position of the Dietitians of Canada, 2005) Food outlets accessible by foot or public transit with a variety of nourishing food in all neighbourhoods A food system that encourages accountable stewardship of the land and use of local foods (Reference: A Systemic Approach to Community Food Security: A Role for Public Health, OPHA, 2002) <p><u>Societal</u></p> <ul style="list-style-type: none"> Anti-racism and anti-sexism training at least for service providers Support for new immigrants to Canada by providing: language training (e.g. English as a Second Language) and education about rights (e.g. access to health care, freedom of speech) and responsibilities (the laws) as a Canadian 	
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Support for personal choices

Enablers to Achieving Goals	Hindrances to Achieving goals
<p>OPHA believes that supports to make informed personal choices and build skills and capacities that enhance health should consider:</p> <ul style="list-style-type: none"> • Skill development through schools, (e.g., cooking classes, home economics courses). These life skills have been devalued and need to be revived and expanded to include such topics as environmental issues, food security and responsible parenting • A regulatory policy environment that supports healthy options by rewarding healthy choices (e.g., subsidized mass transit, investment in recreational facilities) and provides disincentives for harmful behaviours (e.g., non-smoking bylaws, taxes on tobacco, alcohol, and gasoline, helmet and seatbelt legislation) • A supportive cultural environment that celebrates and respects diversity • A nurturing community that recognizes and strengthens individual, family, and community assets • Supporting and upholding those who do “enable” students and employees to have a healthy balance in life, as cultural champions and leaders • Personal knowledge and skills that enable individuals to be able to weigh benefits and risks of various behaviors as well as practical assistance with making desired lifestyle changes • Health agencies, health professional, pharmaceutical companies, and health and life insurers should be required to meet clear language and literacy-sensitive standards for all materials provided to the public. 	<p>OPHA believes people are prevented from having or strengthening personal choices, skills and capacities that enhance health due to:</p> <ul style="list-style-type: none"> • Food marketing to children • Poverty, violence, alienation, injustice, and despair being major barriers to health • Unhealthy behaviours that function to meet other needs and thus are exceptionally difficult to change • Limited access to program support by those most in need of the support to change behaviours • A Western culture that does not support a healthy work/life balance – requires cultural shift from commercial, competitive paradigm to more family-centered ideals that encompass health and the time and environmental supports necessary to support good health • Lack of knowledge on the sources, processes and end results of the manufacturing of goods and the growing of food, both animal and plant-based • The more quantitative measures and

	values of success in our schools and workplaces do not account for more qualitative measures of success in life and health. To do so requires a redefining of personal and collective achievements
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An integrated, supportive health system

Enablers to Achieving Goals	Hindrances to Achieving Goals
<p>To create links among public health players to ensure a coordinated and collaborative approach to public health, OPHA recommends:</p> <p><u>Worker Competency</u></p> <ul style="list-style-type: none"> • Create a national public health human resource strategy to ensure a sufficient, competent and appropriately distributed workforce within the health sector, including the expansion of the public health workforce to enhance public health practices that focus on promotion, prevention and protection, and, as such, reduce the pressure on the health care system • Increase the quality, consistency and portability of training for public health professionals by focusing on the knowledge, skills, and abilities required to perform the five core public health functions • Improve the capacity of public health professionals to respond to new and emerging needs. (Reference: Prelim. Logic Model for Core Competencies in Ontario Public Health System) • Valuable contributions to promoting good health, while preventing and treating ill health may be made by multidisciplinary approaches to addressing health issues that encompass everything from macroeconomic determinants of health in the global economy to microscopic analysis of infectious agents • Primary health care reform initiatives that make full use of the competencies of all health care team members in order to provide comprehensive, integrated health care 	<p>To prevent merging public health threats, OPHA believes:</p> <ul style="list-style-type: none"> • A global perspective that understands that challenges to health can come from anywhere on the planet—microbes, arms, and ideologies are now borderless • A strong public health infrastructure that promotes health as it controls disease is essential for building resiliency to meet any health challenges • A coherent health human resources strategy that supports a vibrant workforce to staff public health, primary care, and tertiary structures • A steadfast commitment to a publicly funded, not-for-profit healthcare system would best ensure timely and equitable care for all

Organizational Competency

- Provide the resources (financial, human and material) necessary for adequate public health organizational capacity to fully implement, evaluate and sustain the five public health functions
- Health agencies, health professional, pharmaceutical companies, and health and life insurers should be required to meet clear language and literacy-sensitive standards for all materials provided to the public.
- Leveraging the OPHA workgroups to create links among players to ensure a coordinated and collaborative approach to public health
- Public health will be responsible for training leaders who can work with communities to develop common purposes, goals and objectives towards positive, supportive living and working environments.

Information and Knowledge Systems

- Review and restructure the Health System to consolidate and collapse the different levels of federal, provincial and territorial governments planning and delivering health
- Maintain and strengthen the five pillars of the Canada Health Act through the efficient planning and delivery of a coordinated and publicly funded health system that addresses the full continuum of health. The goals of the Canada Health Act are public administration, comprehensiveness, universality, portability and accessibility
- Strengthen the connection between public health and the clinical care system (including rehabilitation and community services) to improve access across the continuum of care leading to an integrated health system (reference: Ontario Stroke Strategy Vision)
- increase the understanding of the nature and role of public health within all levels of government and the general population in order to sustain support to adequately resource the public health system
- Ensure that Information and Knowledge Exchange Systems are in

<p>place and adequately resourced to support a full implementation of the public health functions</p> <ul style="list-style-type: none">• Strong commitment to and enforcement of the Canada Health Act• Build capacity in research of health determinants, health promotion, disease and injury prevention, health protection and other aspects of public health	
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