

Addressing Chronic Diseases: A Social Determinants of Health Focus

Community Health Nurses of Canada
Conference 2012

Agenda

- Welcome and introductions
- Goal and objectives
- Setting the stage – Chronic Diseases
- Social determinants of health
- Role of nurses – group work and plenary discussion
- Concluding remarks



Learning Objectives

- Understand the epidemiology of chronic disease across Canada
- Explore concepts of social determinants of health
- Link the effects of social determinant of health and chronic disease
- Explore the role and opportunities of the community nurse to address chronic diseases with a social determinants of health approach



The Canadian Nurses Association

CNA is the national professional voice of registered nurses in Canada. A federation of 11 provincial and territorial nursing associations and colleges representing 146,788 registered nurses, CNA advances the practice and profession of nursing to improve health outcomes and strengthen Canada's publicly funded, not-for-profit health system.



The Registered Nurses' Association of Ontario

RNAO is the professional association representing registered nurses wherever they practise in Ontario. Since 1925, RNAO has lobbied for healthy public policy, promoted excellence in nursing practice, increased nurses' contribution to shaping the health-care system, and influenced decisions that affect nurses and the public they serve.



Who is in the audience?

- Public health
- Home health
- Community health
- Students
- Academic
- Policy practice
- Researchers
- Management



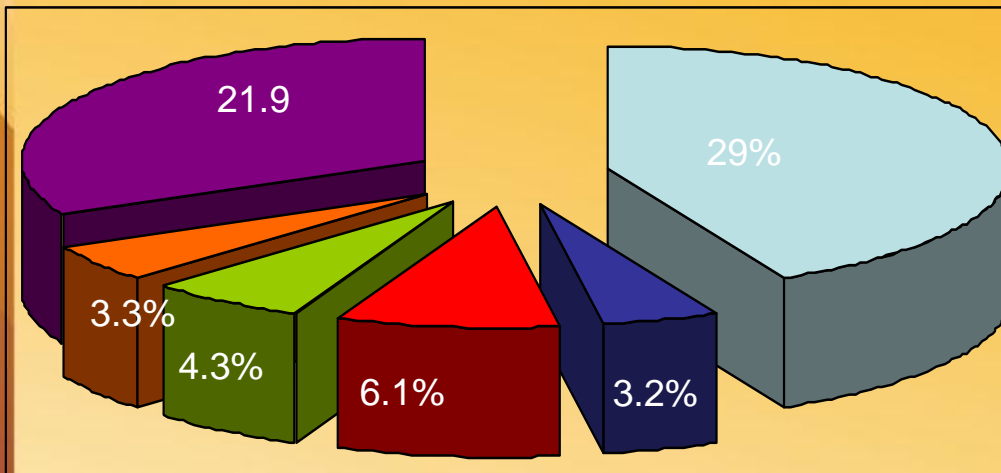
Definition of chronic disease

- “Illnesses that are prolonged, do not resolve spontaneously and are rarely cured completely.”*
- Communicable and non-communicable

*J.S.Marks *The burden of chronic disease and future of public health.*
National Center for Chronic Disease Prevention & Health
Promotion, January 13, 2003.



Chronic Disease in Canada

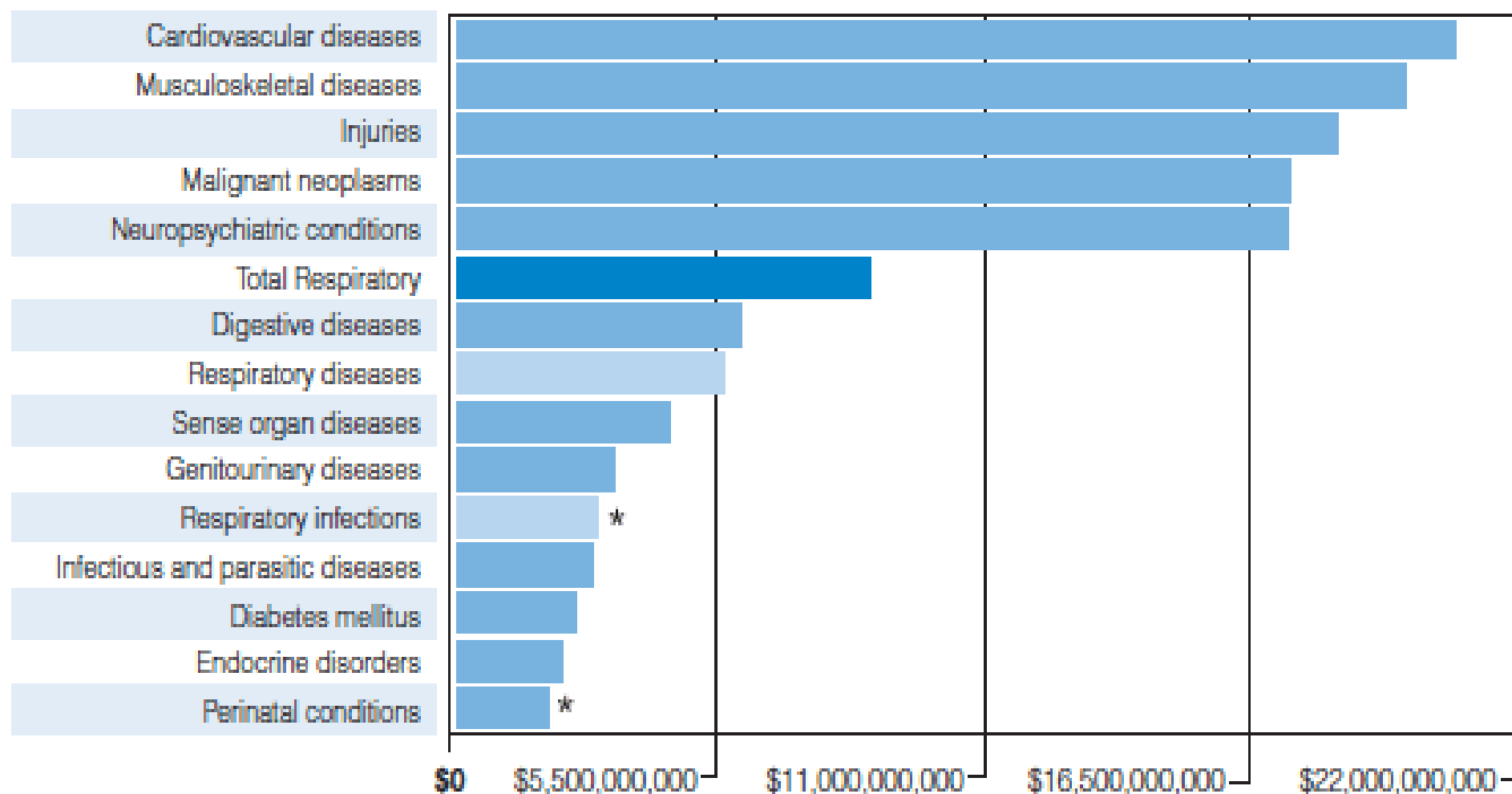


- Malignant Neoplasms
- Diabetes
- Cerebrovascular Disease
- Accidents and Adverse Effects
- All Respiratory Disease
- Heart Disease

Source: Death of by Selected Causes in Canada (Stats Can 2010)



Figure 1-11 Total health care costs of disease by diagnostic category, Canada, 2000.



* Long term disability cost estimate component has high level of variability

Note: Respiratory infections include lower and upper respiratory infections, otitis media and tuberculosis, Respiratory disease includes asthma, COPD and other diseases of the respiratory system (excluding lower and upper respiratory infections, lung cancer and tuberculosis), Total Respiratory is a sum of Respiratory infections and Respiratory disease (excludes lung cancer).

Source: Economic Burden of Illness in Canada, 2000 (preliminary estimates)

Models

- Primary Prevention of Chronic Diseases in Canada: A Framework for Action

<http://www.cdpac.ca/media.php?mid=832>

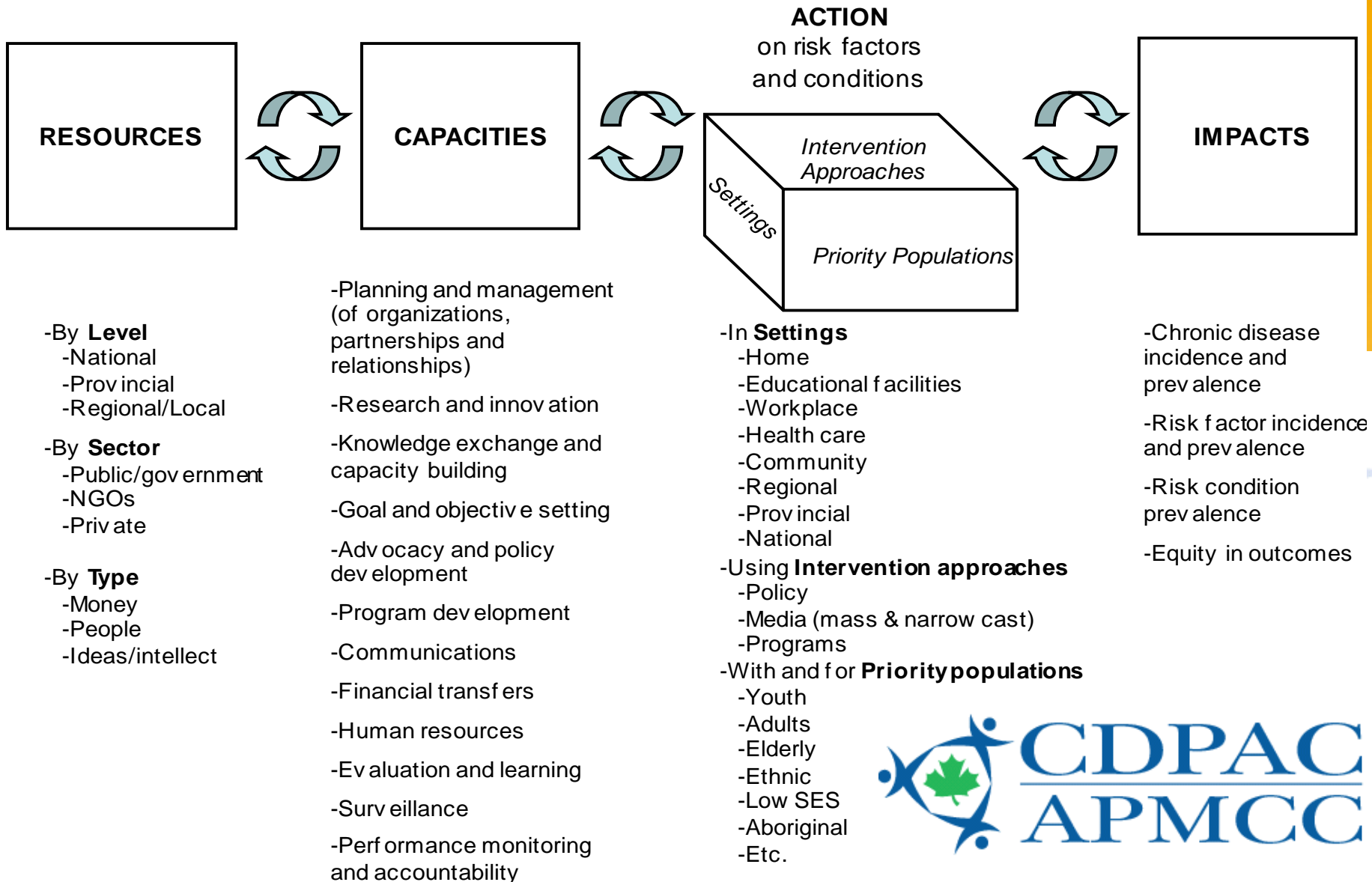
- The Expanded Chronic Care Model: Integrating Population Health Promotion (BC, AB)

http://www.primaryhealthcarebc.ca/pdf/eccm_article.pdf

- Ontario's Chronic Disease Prevention and Management Framework

http://www.health.gov.on.ca/english/providers/program/cdpm/pdf/logic_model.pdf

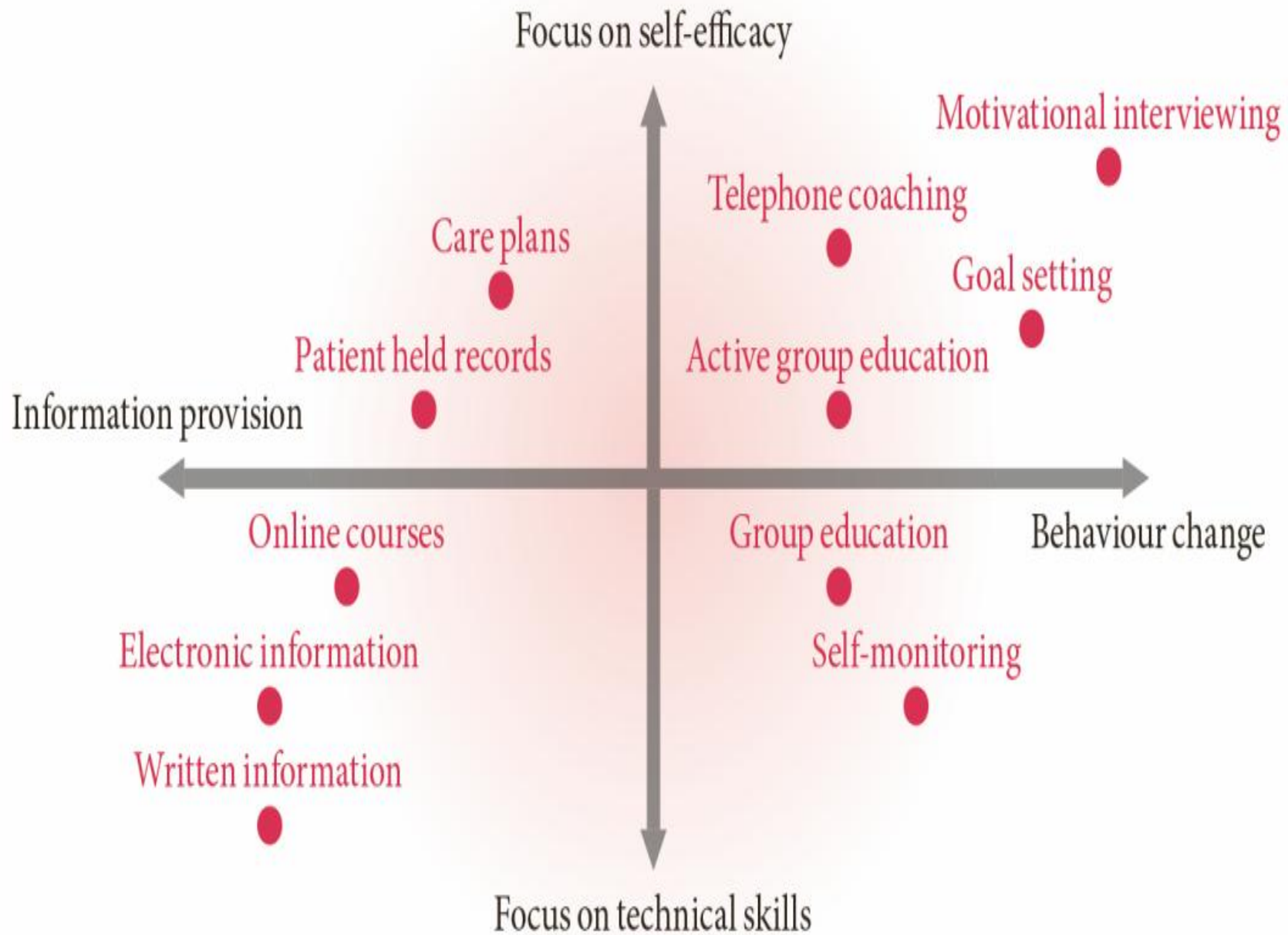




Self-care management

- RNs and NPs make a unique contribution in supporting effective chronic disease self-management across the continuum of care as a key part of Canadian health-care solutions





Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases

http://ncdalliance.org/sites/default/files/rfiles/UN%20HLM%20Political%20Declaration%20English_0.pdf



Q and A



Social Determinants of Health

The conditions in which people are born, grow, live, work and age.

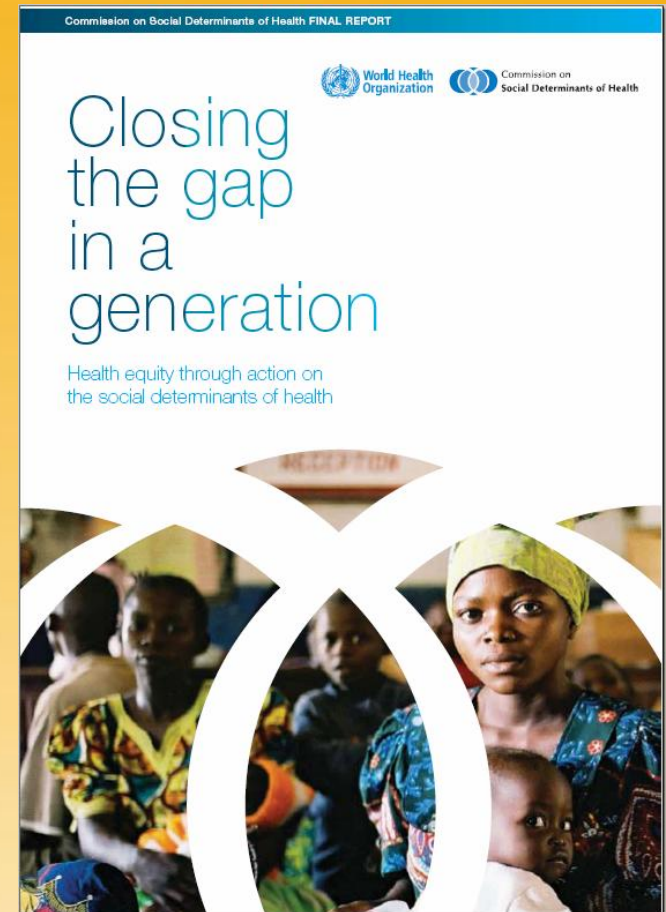
These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices.



Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health.

WHO, 2008

“Social justice – or the lack thereof – has a greater impact on the health of the world’s population than medical treatment.”



Health Equity

- **When everyone can attain their full health potential and are not disadvantaged due to their social position or other socially determined circumstances.**

•
Brennan, R, Baker EA, Metzler M. (2008)

- **Health inequality vs Health inequity**
(the unfair and avoidable differences in health status)



Examples of social determinants:

- Income
- Employment / unemployment
- Housing
- Food security
- Education
- Social Inclusion
- Race / gender / ethnicity
- Early child development
- Environment



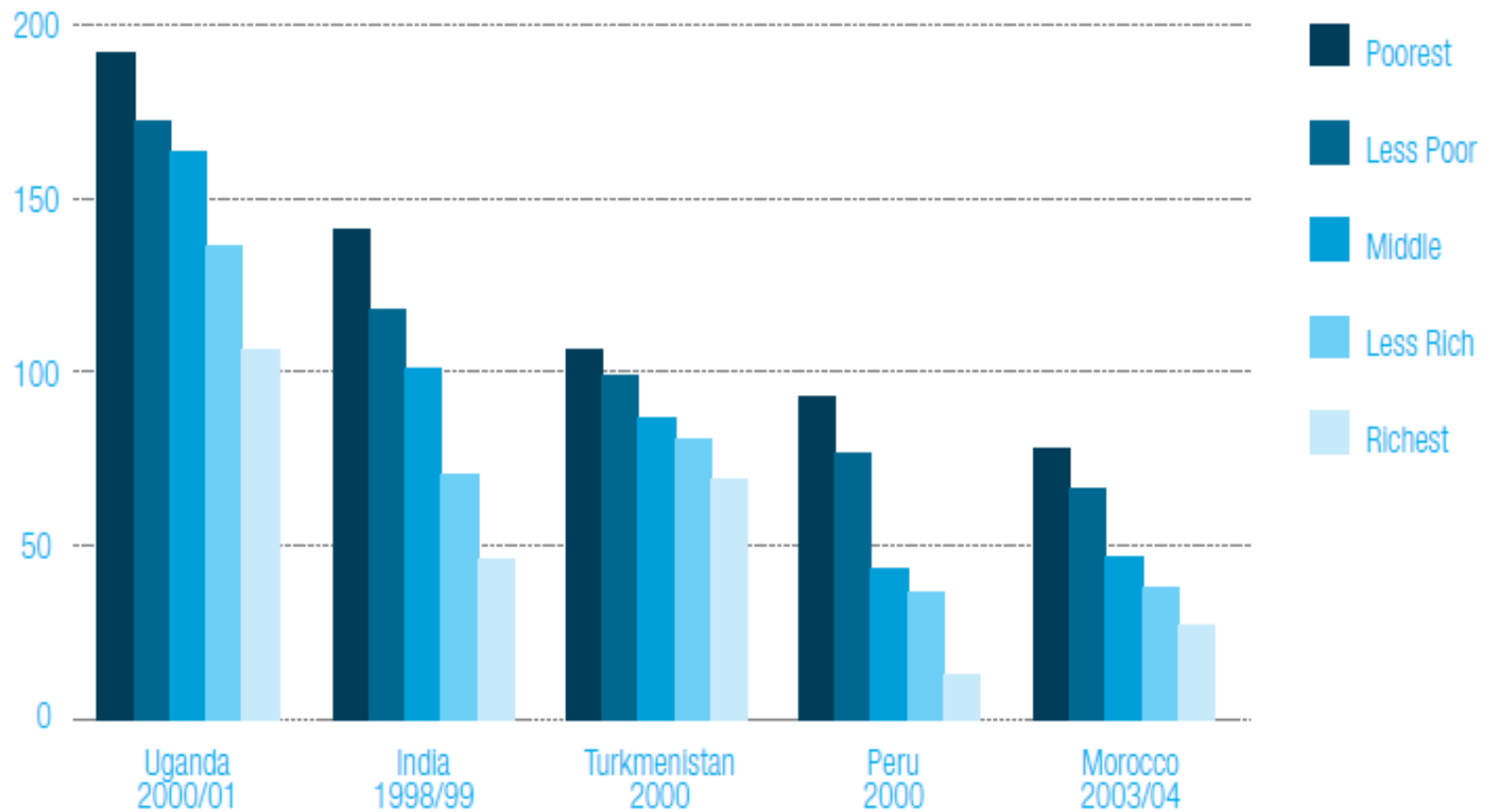
% PROBABILITY OF DYING BETWEEN AGES 15 AND 60 (males)

LESOTHO	90.2
RUSSIA	46.9
BOLIVIA	26
SRI LANKA	23.8
COLOMBIA	23.6
PAKISTAN	22.7
SWEDEN	8.3

SOURCE: THE WORLD HEALTH REPORT 2004, WHO



Figure 2.2: Under-5 mortality rate per 1000 live births by level of household wealth.

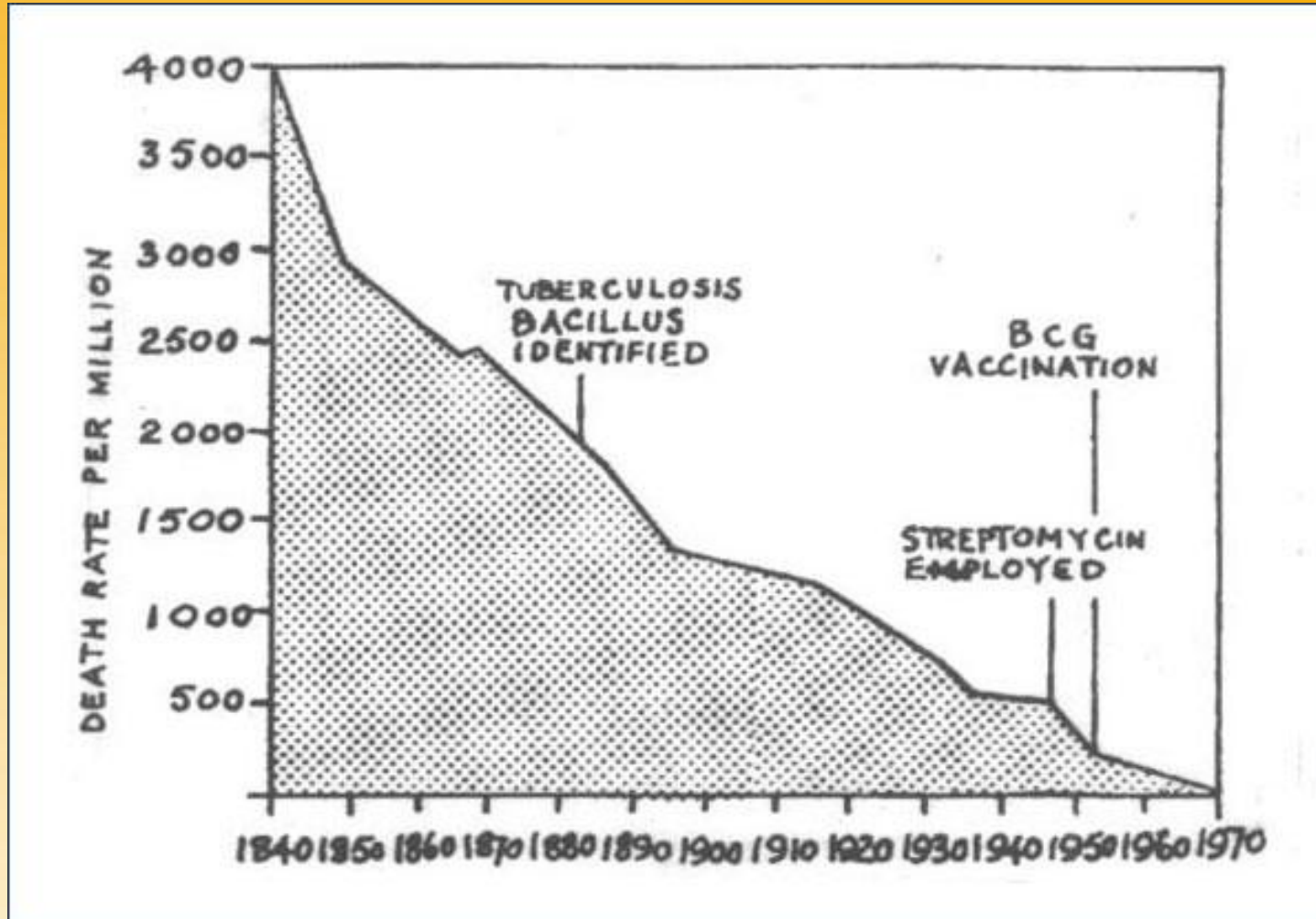


Source: Gwatkin et al. (2007), using DHS data.

Source: Closing the Gap in a Generation. WHO, 2008



Tuberculosis Trends (England)



Source: <http://www.locallocalhistory.co.uk/schools/islington/history1/index.htm>



- 20th century - Shift to biomedical and behavioral approaches to public health
- Emphasis on individual responsibility for health, regardless of the circumstances in which people live (personal choice?)
- Implications for health care, with focus on education and social marketing



Frameworks for causal explanations of heart disease:

Clinical, biomedical focus:

- hypertension, family history, build up of arterial plaque

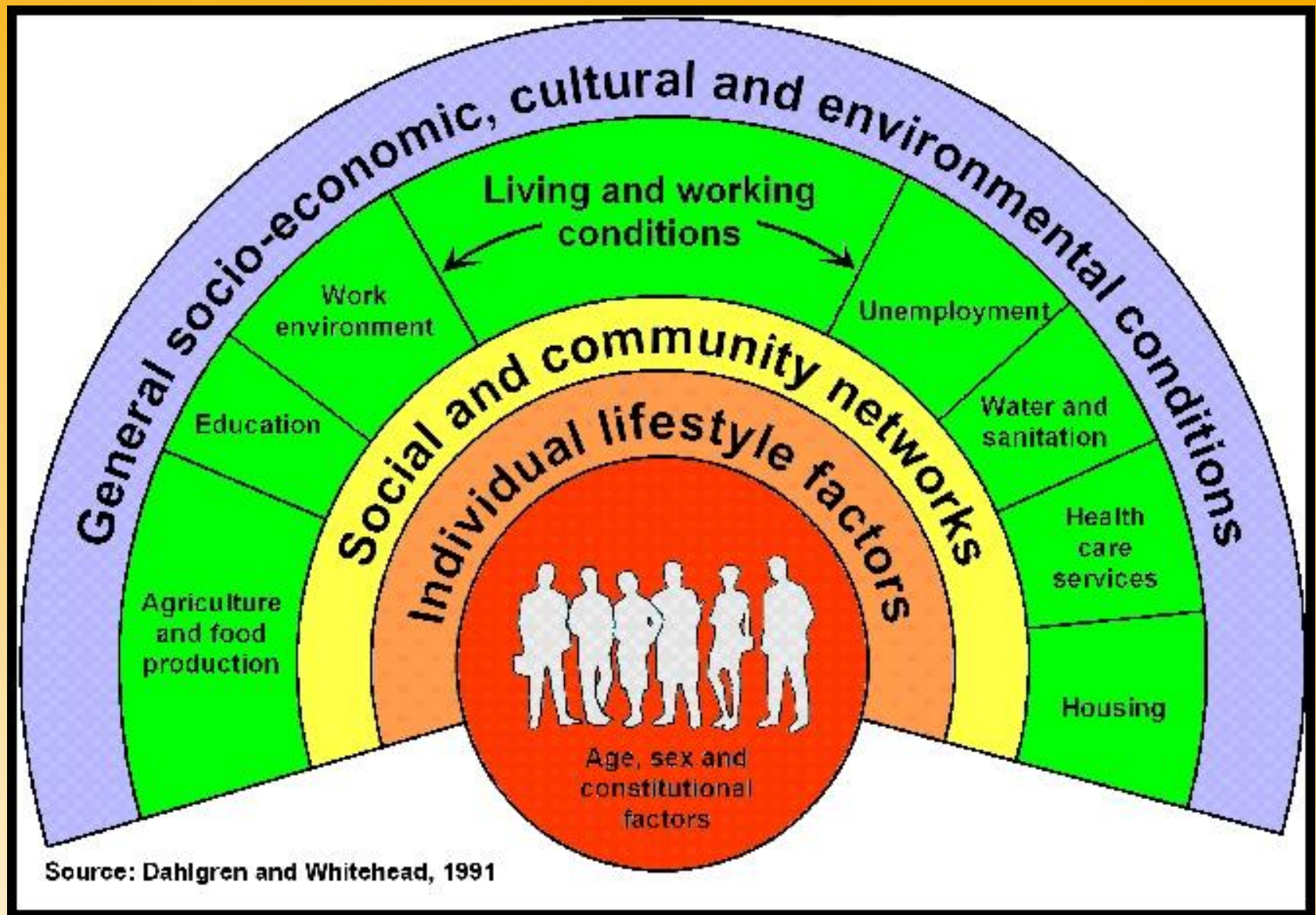
Lifestyle focus:

- smoking, physical inactivity, high fat diet, excess alcohol

Determinants focus:

- stress, poverty, unemployment, social isolation



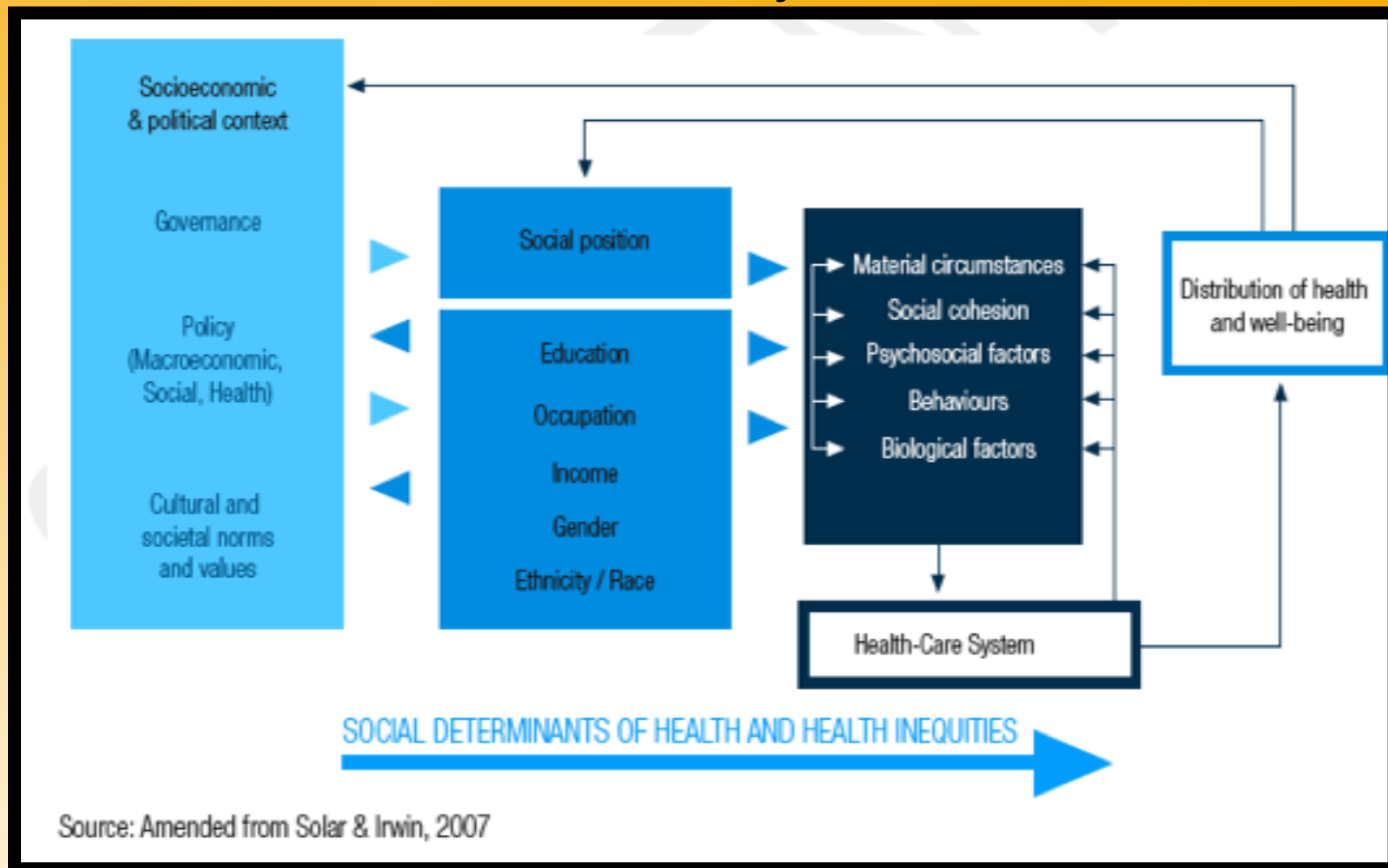


Source: Dahlgren and Whitehead, 1991



CSDH Conceptual Framework

Structural vs Intermediary Determinants



Source: Amended from Solar & Irwin, 2007



Example - How does poverty affect health?

Income directly shapes:

- Neighborhood conditions
- Housing quality
- School resources
- Social networks & support
- Nutrition & physical activity options
- Stress due to inadequate resources to face daily challenges

Parents' income shapes the next generation's:

- Education, which shapes their
- Working conditions (physical & psychosocial) &
- Income



Three overarching recommendations from the WHO Commission on SDH:

1. Improve daily living conditions
2. Tackle the inequitable distribution of power, money and resources
3. Measure and understand the problem and assess the impact of action



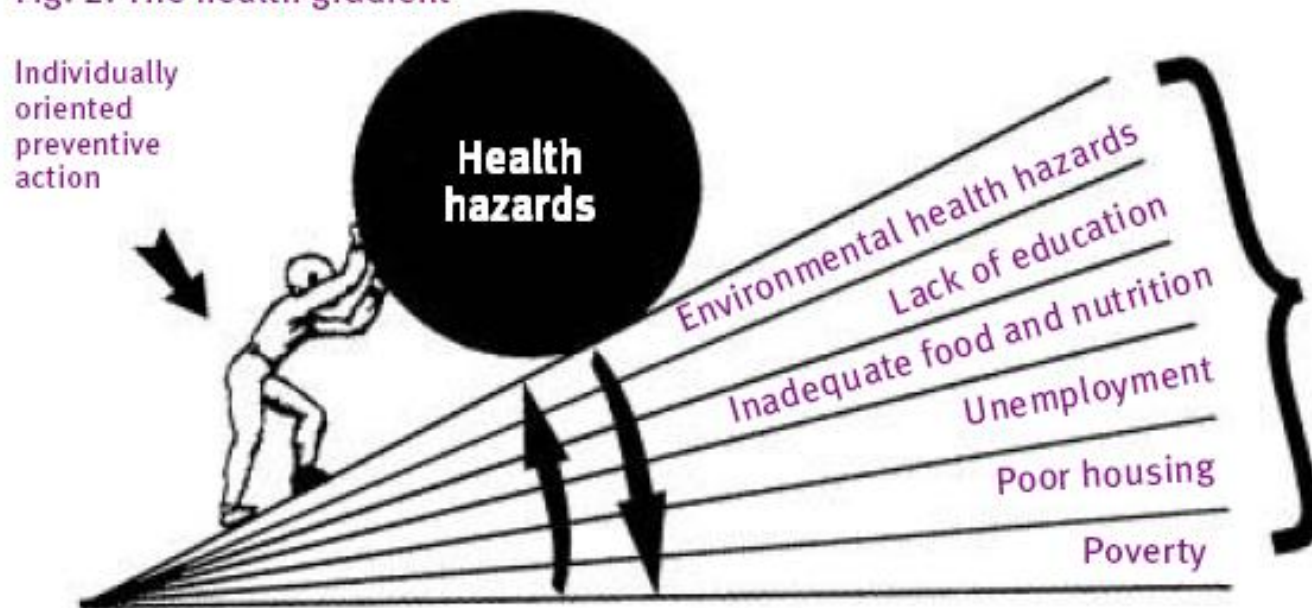
Chronic disease prevention strategies

- Biomedical
 - Medication, surgery, etc.
- Lifestyle
 - Changing unhealthy behaviours
- Social Determinants
 - Policy change to create supportive environments



Social Determinants of Health

Fig. 2. The health gradient



Source: adapted from *Making partners: intersectoral action for health* (13)



- Lifestyle interventions cannot alleviate deeper influences of poverty and social disadvantage
- No simple causation – behaviours are symptoms of deeper underlying causes
- Lifestyle programs have low participation rates among more vulnerable



- The most effective interventions of the past came about as a result of social reforms and changes in public health practices.



Q and A



Role of Nurses – Group Work



Group work – Case study format

1. How would a nurse work with this client / community taking into account the social determinants of health?
2. What system changes can a nurse participate in advocacy around to influence similar situations?
3. What challenges would there be in this case?

What challenges have you faced in public health, home care or other settings when supporting individuals with chronic diseases?



Report Back in Plenary Discussion



Relooking at our Learning Objectives

- Understand the epidemiology of chronic disease across Canada
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Concluding Remarks

- Nursing education programs incorporate chronic disease in curriculum with an emphasis on primary health care and the social determinants of health.
- Health-care organizations provide interprofessional teams with frameworks and strategic support for chronic disease incorporating the social determinants of health.



RNAO Clinical Practice Guidelines:

- Adult Asthma Care Guidelines for Nurses: Prompting Control of Asthma
- Promoting Asthma Control in Children
- Best Practice Guideline for the Subcutaneous Administration of Insulin in Adults with Type 2 Diabetes
- Nursing Management of Hypertension
- Stroke Assessment Across the Continuum of Care
- Integrating Smoking Cessation into Daily Nursing Practice



INTERNATIONAL AFFAIRS & BEST PRACTICE GUIDELINES

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Framework for Chronic Disease Management Institute

Resources - Social Determinants of Health

- Canadian Nurses Association (2010). *Social Justice: A means to an end; an end in itself*. CNA.
- Commission on Social Determinants of Health (2008). *Closing the gap in a generation: Health equity through action on the social determinants of health*. Final report on the Commission on Social Determinants of Health. Geneva: World Health Organization.
http://www.who.int/social_determinants/en
- Health Equity Clicks: Organizations Taking Action on the Social Determinants of Health. www.healthequityclicks.ca
- Providers Against Poverty: www.healthprovidersagainstpoverity.ca
- Mikkonen, J. & Raphael, D. (2010). *Social Determinants of Health: The Canadian Facts*. Toronto: York University.
<http://www.thecanadianfacts.org>
- Raphael, D. ed. (2009c). *Social Determinants of Health: Canadian Perspectives*. Toronto: Canadian Scholars' Press.
- Sudbury District Health Unit *Let's Start a Conversation about health... and not talk about health care at all*. www.sdhu.com



Resources – Social Determinants of Health and Chronic Diseases

- Bierman A.S. et al. (2012) Social Determinants of Health and Populations at Risk In: Bierman AS, editor. Project for an Ontario Women's Health Evidence-Based Report: Volume 2: Toronto.
- Bloch, G. et al. (2011). Barriers to primary care responsiveness to poverty as a risk factor for health. *BioMed Central*, 62(12)
- Chronic Disease Prevention Alliance of Canada (2008). *Poverty and chronic disease: recommendations for action*. CDPAC.
- Hayward, K. & Colman, R. (2003) *The tides of change: addressing inequity and chronic disease in Atlantic Canada: a discussion paper*. Health Canada.
- Ontario Chronic Disease Prevention Alliance & Health Nexus (2008) *Primer to Action: Social Determinants of Health*. Toronto.
<http://www.healthnexus.ca/projects/primer.pdf>
- Pilkington, F.P. et al. (2010). The experience of living with diabetes for low-income Canadians. *Canadian Journal of Diabetes*, 34(2), 119-126.



CNA - Resources

NurseONE Weblibliographies

- Chronic Disease Management: Self-management
- Chronic Disease Management: The Nurses' Role
- Chronic Disease Management: Prevention
- Determinants of Health
- Childhood Obesity
- The Obesity Epidemic
- Halt the Salt



CNA Resources

NurseONE Features

- [Chronic Disease Prevention and Management: Making Canadians Healthier](#)
- [Halt the Salt – Dietary Sodium](#)
- [Mental Health: Partnering to Improve the Health of Canadians](#)



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