

Healthier communities mean healthier Canadians

Public health and the health of Canadians

Presented by the Canadian Council on Integrated Healthcare (CCIH), December 2009

H1N1 vaccines and the wider public policy response around pandemic planning have made public health a top news story. But “public health” remains a poorly understood concept. Generally, Canada ranks well on most measures of public health. Outbreaks of disease, clean water advisories and other public health news are rightly viewed as exceptions, not the norm.

But are we doing enough to ensure that public health measures will remain strong in Canada? What about disparities in public health that are masked by overall or general population measures? For instance, are we doing enough to protect vulnerable communities and groups? How well prepared are we to respond to public health crises? What role do employers play in protecting public health? We also need to work harder to gain a better understanding of the relationship between public health, health system reform and the broader public health agenda — Canadians, the private sector and governments at all levels have a role to play.

At its October 2009 session, the Canadian Council on Integrated Healthcare (CCIH) reviewed the issue of public health in Canada. This is a large and complex topic, and one that can be tackled from a wide variety of perspectives. The Council considered issues such as:

- Defining public health
- Public health disparities
- Public health and the environment
- Public health immunization
- Public health and antimicrobial stewardship to avoid inappropriate antibiotic use
- Public health and pandemic planning
- Public health and First Nations
- Public health and integration

What needs to happen to improve public health in Canada? The CCIH argues that integration will increase the capacity of public health agencies to improve the health of Canadians. Because public health is a vast area, CCIH narrowed its focus to three key public health topics: obesity, communicable diseases and mental illness. The CCIH examined these three topics using four focus questions.

1. What are the gaps in public health strategy as they relate to obesity, communicable diseases and mental illness through various life stages?

Obesity

CCIH reached the conclusion there is too much focus on body image and too little on activity. Changing this misplaced focus is especially important for reaching younger Canadians. The public health debate does not put enough emphasis on environmental factors (e.g., the need for bike-friendly cities). Our public policies also tend to be accommodative of obesity, underemphasizing the need to consider disincentives and stronger support for positive behavior at all life stages.

Communicable diseases

We need to move from crisis management to proactive management. Information is still uneven, poorly targeted and frequently misinterpreted, especially with regard to probabilities and risk, which leads to misperceptions (e.g., thinking the flu shot is risky). Further, communication strategies and tactics in public health need a stronger focus on schools and workplaces, than is currently the case.

Mental illness

Canadians need better early detection and treatment of mental illness at multiple stages of life. Self-management resources need to be more readily available. There also needs to be parity in funding for mental illness across Canada.

2. What are the integration opportunities in public health as they relate to obesity, communicable diseases and mental illness?

Obesity

To tackle obesity in an integrated way Canadians need to be exposed to more consistent and frequent messages that make a clear link between obesity and all major diseases. Obesity is very difficult to reverse in a sustained way, so the emphasis needs to be on actions that address obesity at all life stages. We also need to create a sense of urgency to promote active living. And we need to integrate obesity programs with urban planning to produce more active lifestyles that encourage walking and cycling.

Communicable diseases

We need to balance the need for evidence-based activities with a strong focus on common sense. Vaccination policies appear arbitrary; we need more consistency across jurisdictions. Communication strategies and tactics in this area of public health need to be better integrated. Vaccinations have led to the greatest improvements in public health but this is poorly understood by the public at large.

Mental illness

Canada needs to bring together an integrated system to screen, identify and manage mental illness at various stages of life. This system needs an integrated pathway so Canadians can more easily navigate it and get the best outcomes.

3. What are the key messages in public health as they relate to obesity, communicable diseases and mental illness?

Obesity

- Obesity is a risk factor for many chronic diseases
- Obesity is at a pandemic level and getting worse — doing nothing is not an option
- Obesity touches all life stages and populations
- With coordination public health agencies can mobilize existing resources and address and reverse obesity trends

Communicable diseases

- On-the-whole public health agencies are doing a good job but as new public health challenges confront us we will need new systems, skills and strategies
- The role and importance of public health needs to be made clearer to Canadians
- Canadians are motivated to support public health objectives but they need enablers
- Canadians expect greater levels of inter-jurisdiction cooperation and accountability on public health matters

Mental illness

- Early detection, tracking and self-identification is difficult because of stigma
- The public doesn't understand the spectrum of mental health
- Variations in mental health status aren't normalized, so people can't access services early enough
- Media representations of mental illness often feed biases
- Insurance coverage for mental illness tends to lag coverage for other conditions

4. What are the key recommendations in public health as they relate to obesity, communicable diseases and mental illness?

Obesity

- Give public health the power to create a sense of urgency
- Move from raising awareness to modifying obesity-related behaviors and enablers in society
- Build on successful examples, in Canada and elsewhere internationally
- Ban, or reduce, junk food in publicly funded venues
- Expand, update, and place more clearly food service information and warnings
- Set measurable population obesity targets with specific actions
- Increase mandatory physical activity in schools
- Expand ambient messaging across all life stages
- Consider sin taxes for individuals and employer tax incentives

Communicable diseases

- Establish a credible, collaborative leadership presence for the ongoing management of communicable diseases and public health measures in general — not just crisis management
- Ensure services are delivered in convenient access points
- Coordinate intra- and inter-governmental strategies and tactics
- Engage other stakeholders in delivery and implementation of services
- Implement communication strategies that focus on behavior change

Mental illness

- Redesign benefit programs to increase emphasis on support for mental illness
- Build an integrated pathway for the continued advocacy, identification and treatment of mental illness
- Establish a permanent e-health record
- Give financial incentives to employers to develop and maintain a psychologically healthy workplace
- Mandate and incentivize curricula in schools to include mental health education and skills as part of life science education

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The CCIH will release a paper on Public Health and the health of Canadians later in 2010. To receive a copy, please contact Ginette David (Ginette.David@sanofi-aventis.com) and ask to be added to the CCIH distribution list.

The Canadian Council on Integrated Healthcare

The Canadian Council on Integrated Healthcare is an independent, non-aligned think-tank whose mandate is to influence and catalyze change and to build bridges between sectors in the healthcare system. Founded in 1997, we are dedicated to helping Canadians understand emerging health issues.

Our vision is for an integrated healthcare system that balances quality, access and cost and that creates better health for all Canadians. Our membership includes key opinion leaders from the private health sector, consumer groups and health professions. The activities of the CCIH are funded through an arm's-length, unrestricted educational grant from sanofi-aventis. The CCIH also acknowledges the support it receives in time and assistance from its members and their employers.

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