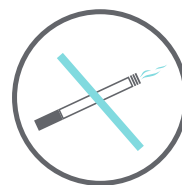


# HEALTH MATTERS



**No one should be at risk of poor health because of their social and economic situations.**

Members of Provincial Parliament play an important role in shaping policies that impact all aspects of our lives, including our health. Public Health Sudbury & Districts looks to these leaders to take action in improving opportunities for health by building a sustainable path forward to optimally support the health of all Ontarians.



**Public Health  
Santé publique**  
SUDBURY & DISTRICTS

## Access to health care and health care system sustainability are

seen as the number one issue determining how people will vote. Did you know that investing in health promotion and preventive measures are less costly and keep us out of hospitals and clinics in the first place? Addressing income, social status and supports, education, and literacy are important factors that impact our health.

Public Health Sudbury & Districts encourages that the following issues are prioritized when developing health platforms. These priorities were informed by those prepared by the Association of Local Public Health Agencies<sup>i</sup> and can be found on their website.

## Issues and recommendations on key public health priority areas



### Opioids

- » Ontario has one of the highest prescription rates in Canada for opioids, a class of drugs which includes fentanyl, morphine and OxyContin. Crime and suffering occurs when these medications are misused and sold on the street.
- » Drug misuse has serious impacts on our communities. There were 1,053 opioid-related deaths in Ontario from January to October 2017, a 52% increase over the previous year. Further, there were 7,658 emergency department visits related to opioid overdoses, a 72% increase over the previous year.

### Key recommendation

Support a proactive, comprehensive and multi-stakeholder plan for opioids that includes education, harm reduction, treatment, and enforcement.



### Prescription Coverage for all Ontarians - Universal Pharmacare

- » People use prescriptions to get healthy and manage diseases. Increasing costs of consumer goods and housing makes it difficult for families to pay for medication. Right now, people over the age of 65 or under the age of 24, and people utilizing the Ontario Drug Benefit program have basic drug coverage. Everyone else aged 25–64 without workplace benefits has to pay out of their own pocket for prescriptions.
- » A universal pharmacare system would provide prescription coverage to people that need it. Universal pharmacare would use bulk purchasing power to reduce the cost of drugs. Costly physician visits and hospitalizations are reduced when people can get the medication they need to stay well.

### Key recommendation

Support a universal pharmacare system that promotes health and reduces acute health care costs.

# Issues and recommendations on key public health priority areas



## Income Security

- » Food insecurity—not having enough money to buy food—affects 1 in 8 households in Ontario. When income is too low, people do not have enough money for rent, bills and food. One in 6 children in Ontario lives in households that are food insecure.
- » Social assistance rates are not enough – 64% of Ontario households that rely on social assistance do not have enough money for food.
- » Incomes are not enough for many working people. Almost 60% of households in Ontario that are food insecure obtain their income from employment, yet they still have difficulty having enough money for food.
- » Lacking sufficient money for food takes a serious toll on people’s health. Adults in food insecure households are more likely to suffer from chronic conditions such as diabetes, high blood pressure, and anxiety; their children are more likely to suffer from mental health problems and teenagers are at greater risk of depression, social anxiety and suicide. Being food insecure is strongly associated with being a higher user of healthcare.

### Key recommendation

Support income security approaches such as a basic income guarantee, a living wage, and social assistance rates that are geared to the real cost of living so that everyone has the money they need for basic needs, including food.<sup>ii</sup>



## Smoking

- » Smoking is responsible for lung and heart diseases and cancers, costing billions in Ontario in direct healthcare costs. This expense is borne by all tax payers, whether they smoke or not. There is growing support in Canada for an endgame – a strategy to create a future that is free from commercial tobacco.
- » The modernized Smoke-Free Ontario Strategy was released in 2018 with recommendations aimed at reducing the health burden of tobacco and vapour products in Ontario.
- » Recommendations of the strategy are intended to achieve a drastic reduction in tobacco use by 2035 that will produce benefits to health and reduce healthcare costs.

### Key recommendation

Support the implementation of the modernized Smoke-Free Ontario Strategy, announced May 2018, to achieve the lowest smoking rates in Canada and support the end game goal by 2035.

# Issues and recommendations on key public health priority areas



## Cannabis

- » Cannabis is expected to be legalized in Ontario beginning July 1, 2018. Individuals aged 19 years and older will have the freedom to buy and use cannabis.
- » The brain is still developing until the mid-20's. Frequent cannabis use is related to deficits in learning, impulse control and mental health.<sup>iii</sup> Cannabis has different effects on the developing brain than alcohol and should have a different legal age.

### Key recommendation

Support that the legal age to buy cannabis be increased to 21 or include a mitigation strategy if it remains at 19 years of age.



## Dental Care for Lower-Income Adults

- » One-third of Ontario workers do not have employee health benefits. Many adults cannot afford to see a hygienist or dentist. People who don't have regular dental cleanings, fillings and extractions can end up in the emergency department. This was the case for approximately 60,000 patients in Ontario in 2014, with a cost of \$30 million to the health care system.<sup>iv</sup>
- » Ontario already has programs that extend dental care to children in lower-income families, but many adults still can't afford dental care.

### Key recommendation

Support that dental care should be provided for everyone who cannot afford it.

## References

- <sup>i</sup> [https://c.ymcdn.com/sites/alphaweb.site-ym.com/resource/collection/822EC60D-0D03-413E-B590-AFE1AA8620A9/ALPHa\\_Key\\_Messages\\_2018\\_Provincial\\_Election.pdf](https://c.ymcdn.com/sites/alphaweb.site-ym.com/resource/collection/822EC60D-0D03-413E-B590-AFE1AA8620A9/ALPHa_Key_Messages_2018_Provincial_Election.pdf)
- <sup>ii</sup> <https://www.odph.ca/centsless>
- <sup>iii</sup> Centre for Addiction and Mental Health. Evidence Brief: Canada's Lower-Risk Cannabis Use Guidelines. 2017. [http://www.camh.ca/en/research/news\\_and\\_publications/reports\\_and\\_books/Documents/LRCUG.KT.Professional.15June2017.pdf](http://www.camh.ca/en/research/news_and_publications/reports_and_books/Documents/LRCUG.KT.Professional.15June2017.pdf)
- <sup>iv</sup> <http://www.cbc.ca/news/canada/ottawa/dental-emergency-report-1.3308355>