



**STAFF REPORT  
ACTION REQUIRED**

**The Unequal City: Income and Health Inequalities in  
Toronto 2008**

<b>Date:</b>	October 16, 2008
<b>To:</b>	Board of Health
<b>From:</b>	Medical Officer of Health
<b>Wards:</b>	All Wards
<b>Reference Number:</b>	

**SUMMARY**

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Toronto Public Health’s mission is to improve the health of the whole population and to reduce health inequalities. The attached report “The Unequal City: Income and Health Inequalities in Toronto 2008” measures health inequalities using Toronto data to describe a number of health indicators by income groups.

The report demonstrates that within Canada’s largest city there are significant health inequalities. Areas of Toronto which have a greater proportion of people living with low income experience greater risk factors for illness, higher rates of disease, and death at an earlier age. For most of the health indicators, the data show that as low income is reduced, health improves. If everyone in Toronto was as healthy as those with the highest income and best health, there would be a significant improvement in the City’s health overall.

Reduction of health inequalities will require inter-sectoral leadership within the City, engagement with community partners and advocacy for provincial and federal action. The information in this report will support efforts to better understand the relationship between income and health and to identify strategies that address inequalities and improve health for all in Toronto.

## RECOMMENDATIONS

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### **The Medical Officer of Health recommends that:**

1. The Medical Officer of Health report regularly to the Board of Health on key health inequality indicators for the City of Toronto;
2. The Medical Officer of Health consult with community partners and the Board of Health to incorporate appropriate strategies to reduce health inequalities in the next Toronto Public Health Strategic Plan (2010-2014) and annual service plans, including measures to monitor progress on reducing health inequalities;
3. The Toronto Board of Health send this report to the Premier of Ontario and strongly urge the government maintain its stated commitment to poverty reduction in Ontario as a public health measure; and
4. The Medical Officer of Health review Toronto Public Health data collection practices and collaborate with partners to strengthen the monitoring of the impact of social determinants on health, including racialization, immigration and settlement status, education and income.

### **Implementation Points**

As part of its 125<sup>th</sup> Anniversary activities, Toronto Public Health is co-hosting a symposium with the new Dalla Lana School of Public Health at the University of Toronto October 30 – 31, 2008 titled *Determinants of Our Health: Toronto in a Global Village*. The Medical Officer of Health will discuss the findings of this report at the symposium.

Toronto Public Health will use the findings in this report to:

- develop health inequality indicators for service planning;
- work with other City divisions and community partners to identify strategies and indicators; and
- inform the development of the 2010 – 2014 Strategic Plan.

Toronto Public Health will include updates on implementation of the recommendations in regular reports on health inequalities to the Board of Health.

### **Financial Impact**

There are no financial impacts arising from the adoption of this report.

## **DECISION HISTORY**

The Board of Health for the City of Toronto has a history of concern for vulnerable populations within the City and the role that determinants of health play in influencing the distribution of health in Toronto. In its current Strategic Plan 2005-2009, approved at its meeting of July 11, 2005, the Board of Health made explicit in its mission the reduction of health inequalities. The Board of Health has received and discussed many reports about the importance of determinants of health in various public health programs

and received deputations from front-line staff as well as community groups and academics.

## **ISSUE BACKGROUND**

Recent reports on health inequalities include international (just released report from the World Health Organization Commission on Social Determinants of Health), national (Canada Health Council, Canadian Population Health Initiative of the Canadian Institute for Health Information and the recently released Chief Public Health Officer Report) as well as local reports (Toronto Public Health, United Way, Toronto Community Profiles and Toronto Community Foundation). These reports all have similar conclusions and recommendations: that significant health inequalities associated with social determinants exist, that these inequalities are unacceptable, and that concerted inter-sectoral action and monitoring will be required to address them.

## **COMMENTS**

This report builds on local, national and international work to describe health inequalities in Toronto using city-level data to present information comparing people within census tracts grouped by low income, as well as directly reported income for selected health indicators.

The health indicators included in this report were chosen based on their importance to population health and the availability of reliable data. These indicators are intended to provide a high-level view of health inequalities and a baseline for future monitoring.

The report documents significant health inequalities in Toronto, not just between rich and poor but across all categories of income. People living in areas with the lowest income in Toronto have the poorest health and those living in middle income areas have poorer health than those living in areas with the highest incomes.

When compared to residents of high income areas:

- lung cancer incidence was 1.5 times higher for males in the lowest income areas;
- the gonorrhoea rate among female youth was 3.5 time higher in the lowest income; and
- the percent of female adults whose last visit to the dentist was more than 3 years ago was over 4 times greater in the lowest income areas.

In addition, males in the highest income areas were expected to live 4.5 year longer than males in the lowest income areas. The difference for females was 2.0 years.

One way of illustrating the impact of health inequalities on the overall health of Toronto's population is to calculate the effect if everyone was as healthy as those with the highest income and best health. Based on the methods used, this would result in:

- nearly 1,100 (18%) fewer premature deaths;
- about 1,300 (20%) fewer low birth weight babies;
- about 1,600 (30%) more children ready to learn at school entry;

- nearly 1,000 (46%) fewer teen pregnancies; and
- more than 30,000 (about 13%) fewer male smokers.

Evidence from other recent studies indicate significant trends in income polarization and these should be taken as a warning that health inequalities in Toronto are likely to increase in the future.

The findings in this report are of concern to Toronto Public Health and will be of interest to stakeholders within the City government, local leaders and beyond. The report should be the basis for consultation with partners in the community, to better understand the implications of the findings, to identify additional methods to describe, and analyze health inequalities and to develop responses to address them.

## **CONTACT**

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## **SIGNATURE**

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Dr. David McKeown  
Medical Officer of Health

## **ATTACHMENT**

The Unequal City: Income and Health Inequalities in Toronto 2008