



Acting on social determinants of health: An important issue that requires social work

Marie-Lyne Roc, S.W. M.Sc.

Alain Hébert, S.W. M.Sc.

Ordre des travailleurs sociaux et des thérapeutes conjugaux et familiaux du Québec

Context

People who are socially and materially disadvantaged suffer from a high level of physiological and psychological stress.

Mental health is a field that greatly interests social workers. Actually, in 2001, the largest study on social work in Canada placed mental health among the top social issues requiring social workers' attention¹. In Quebec alone, nearly one in four people are likely to have a mental health problem during their lifetime, clearly demonstrating that anyone can be affected².

Although mental health does not discriminate, current knowledge reveals that we are not all equal when it comes to disease. The World Health Organization (WHO) recognizes that where we are born, grow, live, work and age, as well as the health care systems in place, greatly influence our individual health. In turn, conditions in which people live and die depend on political, social and economic forces³.

Since its very beginnings, social work has connected social structures and policies with the specific circumstances of individuals, families, groups and communities. In light of recommendations made by the WHO's Commission on Social Determinants of Health regarding the importance of acting on social determinants to improve the health of individuals and communities, we must make use of social workers' expertise.

The importance of social determinants

People with mental disorders often experience poor living conditions and, in recent years, much research has been conducted to study this phenomenon. Do mental health problems result in low socio-economic status (selection theory) or, on the contrary, do difficult socio-economic conditions lead to the development of mental health problems (theory of causation)?

In this respect, most researchers today seem to support the theory of causation despite the fact that, for each individual case, multiple complex interactions are involved in the etiology of mental disorders. Several explanatory models tend to illustrate how various social and environmental factors interact to increase substantially, and for prolonged periods, a state of stress that acts as a mediator⁴, which can result in mental health problems when combined with certain personal factors. However, additional research is needed to explain this process in greater detail.

Mikkonen and Raphaël's work⁵ confirms that people who are socially and materially disadvantaged suffer from a high level of physiological and psychological stress. This is caused by low income, poor housing, food insecurity, inadequate working conditions, job insecurity and various forms of discrimination based on Aboriginal status, a disability, gender or race. The lack of a support network, social isolation and distrust from others increase stress even further.



Despite existing scientific and empirical proof of how social determinants influence the emergence and persistence of mental health problems, they are rarely considered when it comes to direct interventions involving affected individuals. How then is it possible to imagine recovery from a mental health problem for a person who, for example, lives in unhealthy conditions and works in an unsafe environment, using a care model focused solely on pharmacotherapy and psychotherapy, when we now know the harmful effects these conditions have on mental health?

Implications and challenges for social work

The complexity of the interactions involved and their specific impact on each individual make it challenging to take social determinants into account in direct interventions.

Hudson highlights the importance of taking simultaneous actions at the macro and micro social levels in order to strengthen both the community (community building) and the individuals who live in it (competency building)⁶. Specifically, the researcher stresses the need for integrated approaches to mental health, which include strategies to assist people at the individual level (improving self-esteem, developing problem-solving skills, fostering resilience) and at the community level (facilitating mutual aid and citizen engagement).

Hudson supports the relevance, legitimacy and even responsibility of social workers to act on social inequalities in health through their professional practice, as he considers human rights, the promotion of social justice and the development of individual and community empowerment to be at the heart of social work. Indeed, this means taking action at the structural, social policy and community development levels through collective social intervention, as well as supporting individuals in developing their skills and personal resources through social intervention.

The complexity of the interactions involved and their specific impact on each individual make it challenging to take social determinants into account in direct interventions. To date, there is virtually no evidence-based data on the effects of social intervention on quality of life of people with mental health problems. However, current knowledge on social determinants suggests the importance of taking them into account within various strategies, including mental health services.

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