



HEALTH OFFICERS' COUNCIL OF BRITISH COLUMBIA

Attn: Dr. Paul Martiquet, 494 South Fletcher Gibsons, BC V0N 1V0

Barbara Reynolds
Clerk of the Senate Subcommittee on Population Health

June 2, 2008

To: Senate Subcommittee on Population Health

I am writing on behalf of the Health Officers' Council of British Columbia (HOC). The HOC is comprised of public health physicians practicing in British Columbia. For more than fifty years, members of the Health Officers' Council have, individually and collectively, played key roles in every major public health achievement in British Columbia. HOC recently initiated the development of a policy and advocacy initiative to promote awareness of the health impacts of child and family poverty.

HOC is pleased to see the work of the Senate Subcommittee on Population Health and would like to submit our feedback on the request for feedback on the federal government's role in the development and implementation of population health policy for Canada. In particular, we want to offer our support for the recommendations outlined in the Fourth Report of the Subcommittee on Population Health of the Standing Senate Committee on Social Affairs, Science and Technology. These recommendations align closely with those put forward in a position paper on child poverty by HOC. One key area of alignment is the need for poverty reduction goals. Your report notes:

Tangible, measureable health goals, objectives and targets are essential components of a population health strategy. They support identification of the areas on which to focus attention, determine the data to collect and indicators to monitor, establish benchmarks, and enable progress to be measured and reported.

HOC has recommended that provinces develop a comprehensive provincial child poverty reduction strategy that is driven by an intergovernmental/interministerial approach and includes specific and meaningful targets for child poverty reduction. Although these recommendations are directed at the province, we recognize the strong role that the federal government can play in helping provinces adopt and meet population health targets. Along with these targets, we would also recommend that a federal Minister be made responsible for working with provinces to achieve these goals.

HOC also encourages the federal government to set national targets for federal investment in early childhood programs (such as affordable, quality, accessible child care) which is at a level similar to that of OECD countries that lead the way in investments in early child development.

The Senate's report also recommends the need to build public awareness noting 'the general public does not easily relate to the theoretical concept referred to as "population health". HOC recognizes the challenges in communicating messaging around the social determinants of health. As medical health officers, we have a legislated role to advise and advocate in an independent manner for public policies and programs directed to improving the health of populations. HOC believes that inequity and poverty, particularly among our families, are a population health concern of significant magnitude in Canada and British Columbia. Poverty not only leads to immediate health concerns for poor children, but also leads to long lasting and indelible effects on the health of these children for the rest of their lives. Communicating the impact of inequity and poverty on the health of our communities is a necessary strategy to begin to address these important societal issues.

We would be very interested in sharing our experiences, expertise and voice with the Senate on these and other population health issues. We are pleased to include our discussion paper on child poverty which was shared with (among others) the BC Provincial *Conversation on Health* and the *federal advisor on Healthy Children and Youth (Dr. Kellie Leitch)*.

Sincerely,

Paul Martiquet MD, Chair, Health Officers' Council of BC