Presented by Fatima Mussa & Kate Atkinson
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Precarious work and impacts on health outcomes

Exploring community health and advocacy interventions that health providers can use to reduce the impacts of precarious work on health
Presenter Disclosure

Presenter: Fatima Mussa

Relationships to commercial interests:

Grants/Research Support: None
Speakers Bureau/Honoraria: None
Consulting Fees: None
Other: None
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Agenda

1. Discuss the growing movement to address social determinants of health
2. What is meant by precarious work?
3. Impacts of precarious work on health and healthcare access
4. How health providers can address precarious work in their role
5. Examine advocacy as a social determinant of health intervention
6. Discuss opportunities for action and change
Social determinants of health: An overview
WHAT MAKES CANADIANS SICK?

50%
YOUR LIFE
- INCOME
- EARLY CHILDHOOD DEVELOPMENT
- DISABILITY
- EDUCATION
- SOCIAL EXCLUSION
- SOCIAL SAFETY NET
- GENDER
- EMPLOYMENT/WORKING CONDITIONS
- RACE
- ABORIGINAL STATUS
- SAFE AND NUTRITIOUS FOOD
- HOUSING/HOMELESSNESS
- COMMUNITY BELONGING

25%
YOUR HEALTH CARE
- ACCESS TO HEALTH CARE
- HEALTH CARE SYSTEM WAIT TIMES

15%
YOUR BIOLOGY
- BIOLOGY
- GENETICS

10%
YOUR ENVIRONMENT
- AIR QUALITY
- CIVIC INFRASTRUCTURE

Canadian Medical Association, 2013
http://healthcaretransformation.ca/infographic-social-determinants-of-health/
Social Determinants of Health at Three Levels:

- **Micro**: Immediate, individual context; client-provider environment
- **Meso**: Organizational level, Local community
- **Macro**: Population level; including healthy public policy


*Photo Source*: BC First Nations Health Authority; Sam Bradd
Precarious Work Part 2
What is meant by *precarious work*?

- Temp-agency, part-time, contract, irregular hours, on-call, self-employment, seasonal work
- Multiple jobs
- Scheduling uncertainty
- Income uncertainty
- Lack of control over work – how and when
- Lack of protections – difficult to voice concerns about employment standards and health and safety at work
- Minimal or no access to statutory employee benefits:
  - Pensions – often have to rely on their own savings or continue working
  - Extended health and dental benefits
  - Life insurance
- Lack of union coverage

Increase in various forms of employment, 15-64 years old, Canada and Quebec, 1976-2003

Ontario’s Context

- 26.6% of Ontario’s workforce in 2015 was made up of non-standard, precarious workers
- 1.7 million Ontarians (30% of all workers) are low-wage (<$15/hr)
- 66% of minimum wage earners are 20+ years old, not teenagers
- Less than half of workers in Greater Toronto & Hamilton Area (48.1%) had “permanent full-time jobs with some benefits beyond a wage”
- Women, racialized groups, and newcomers overrepresented

Block S. “A higher standard”. CCPA 2015. Based on Statistics Canada data.
Discussion

- What does decent work mean to you?
Decent Work

- Productive
- Income that provides social protection
- Security in workplace
- Personal development + social integration
- Express their concerns
- Organize + participate in decision-making
- Equality of opportunity across gender, race/ethnicity, age, sexual orientation, etc.

Health Impacts of Precarious Employment

Part 3
Health Impacts of Precarious Employment

- Occupational Injuries
- Mental Health
- Health Strain
- Chronic Illnesses
- Impacts on Family Health

“I think the ultimate answer is all the tension. When I was facing the problem with two shifts, three shifts, and that’s when it started. . . one lives with this horrible stressful state, the same with tumors or cancer, it comes from stress, unfortunately.” - Carmen
Precarious Employment and Impacts on Healthcare Access

- Lack of:
  - Paid Sick Days & Personal Emergency Leave
  - Extended health benefits (vision, dental, physiotherapy, massage therapy)
  - Access to occupational health benefits and protections (Occupational Health and Safety, WSIB, ODSP)
  - Lack of time to seek healthcare services
  - No time or mental state to take care of oneself (dismpowerment)

Addressing precarious work in community health centres

Part 4
Tools and Opportunities for Action

- **Screening/Assessment and Intervention Tools**
  - Poverty Screening Tool: A clinical tool for primary care in Ontario
  - How to Assist Injured Workers: A Guide for Physicians in Ontario
  - LAMP CHC’s Occupational Health Services (416-252-6471)
  - Employment Precarity Assessment Tool (currently being developed)
  - Guide to Assist Uninsured/Under-insured Clients (currently being developed)

- **Sector-Level Initiatives**
  - Decent Work Charter championed by Ontario Non-profit Network
  - Promoting Good Jobs in CHCs Project
  - Atkinson Foundation’s Decent Work Fund

- **Policy/Advocacy Opportunities**
  - Changing Workplaces Review – Ontario Ministry of Labour
  - $15 and Fairness Campaign and Paid Sick Days campaign
  - Decent Work and Health Network
  - Good Jobs for All Coalition
Opportunity for Action
$15 and Fairness video
Workers’ Action Centre

- Fairness means Paid Sick Days
Examples of CHC Advocacy from Service Providers
Putting Advocacy into Action
Closing: Head Heart Hands

“First made into language, then into idea, then into more tangible action.” – Audre Lorde

“Freedom is a possibility that is not just mentally generated, it is a particular set of actions and it is felt.” – Eve Tuck
Get involved!

Project: Promoting Good Jobs in CHC

- Community Level
- Organizational Level
- Institutional/Policy Level

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Get involved!
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